

STATEMENT OF ORGANIZATION		OFFICE USE ONLY										
1. Name and Address of Committee LOUISIANA CITIZENS FOR JOB CREATORS INC. 143 RIDGEWAY ST. SUITE 214 LAFAYETTE, LA 70503 Check If: New Committee _____	2. Date of this Statement <div style="text-align: center;">1/27/2022</div>	Report Number: 101284 Date Filed: 1/27/2022 										
	3. Estimated Membership <div style="text-align: center;">100</div>											
	4. Amended Statement? <div style="text-align: center;"> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No </div>											
5. All Committee Officers and Directors (including Chairperson, Treasurer, if any, and any other committee officers and directors) <table style="width: 100%; border: none;"> <tr> <td style="width: 33%;"><u>a. Name</u></td> <td style="width: 33%;"><u>b. Position</u></td> <td style="width: 34%;"><u>c. Address</u></td> </tr> <tr> <td style="text-align: center;">WARREN S ORLANDO</td> <td style="text-align: center;">Chairperson</td> <td style="text-align: center;">143 Ridgeway St. Suite 214 Lafayette, LA 70503</td> </tr> <tr> <td></td> <td style="text-align: center;">Treasurer</td> <td></td> </tr> </table>				<u>a. Name</u>	<u>b. Position</u>	<u>c. Address</u>	WARREN S ORLANDO	Chairperson	143 Ridgeway St. Suite 214 Lafayette, LA 70503		Treasurer	
<u>a. Name</u>	<u>b. Position</u>	<u>c. Address</u>										
WARREN S ORLANDO	Chairperson	143 Ridgeway St. Suite 214 Lafayette, LA 70503										
	Treasurer											
6. Affiliated Organizations (Any organization, other than a political committee, which directly or indirectly established, administers, or financially supports this committee.) <table style="width: 100%; border: none;"> <tr> <td style="width: 33%;"><u>a. Name</u></td> <td style="width: 33%;"><u>b. Address</u></td> <td style="width: 34%;"><u>c. Relationship to Committee</u></td> </tr> </table>				<u>a. Name</u>	<u>b. Address</u>	<u>c. Relationship to Committee</u>						
<u>a. Name</u>	<u>b. Address</u>	<u>c. Relationship to Committee</u>										
7. All Depositories for Committee Funds (committee funds must be deposited in one or more banks or savings and loan institutions or money market mutual funds.) <table style="width: 100%; border: none;"> <tr> <td style="width: 33%;"><u>a. Name</u></td> <td style="width: 33%;"><u>b. Address</u></td> </tr> </table> <p style="text-align: center;">On attached sheet</p>				<u>a. Name</u>	<u>b. Address</u>							
<u>a. Name</u>	<u>b. Address</u>											
8. IF THIS COMMITTEE SUPPORTS A SINGLE CANDIDATE: a. Check one: <input type="checkbox"/> Principal Campaign Committee <input type="checkbox"/> Subsidiary Committee												
b. Name of Candidate		c. Office Sought by the Candidate										
9. a. Name of Person Preparing Report WILLIAM VANDERBROOK CPA b. Daytime Telephone 504-455-0762												
10. WE HEREBY CERTIFY that the information contained in this STATEMENT OF ORGANIZATION is true and correct to the best of our knowledge , information and belief. This 27th day of January , 2022 . <table style="width: 100%; border: none;"> <tr> <td style="width: 60%; text-align: center;"> <u>Warren S Orlando</u> Signature of Committee/Chairperson </td> <td style="width: 40%; text-align: center;"> ____ Daytime Telephone </td> </tr> <tr> <td style="text-align: center;"> ____ Signature of Committee Treasurer, if any </td> <td style="text-align: center;"> ____ Daytime Telephone </td> </tr> </table>				<u>Warren S Orlando</u> Signature of Committee/Chairperson	____ Daytime Telephone	____ Signature of Committee Treasurer, if any	____ Daytime Telephone					
<u>Warren S Orlando</u> Signature of Committee/Chairperson	____ Daytime Telephone											
____ Signature of Committee Treasurer, if any	____ Daytime Telephone											

7. All Depositories for Committee Funds (committee funds must be deposited in one or more banks or savings and loan institutions or money market mutual funds.)

a. Name

JP MORGAN CHASE BANK, N.A.

b. Address

451 Florida Blvd.
Suite B100
Baton Rouge, LA 70801