

STATEMENT OF ORGANIZATION

OFFICE USE ONLY

Report Number: 118559

Date Filed: 1/29/2024



1. Name and Address of Committee

CITIZENS FOR A BETTER CADD0, INC.
333 Texas Street, Suite 1525
Shreveport, LA 71101

2. Date of this Statement

1/24/2024

3. Estimated Membership

15

4. Amended Statement?

Check If: New Committee _____

Yes No

5. All Committee Officers and Directors (including Chairperson, Treasurer, if any, and any other committee officers and directors)

a. Name	b. Position	c. Address
EDWARD J CRAWFORD, III	Chairperson	333 Texas Street, Suite 2300, , Shreveport, LA 71101
ROBERT L DEAN	Treasurer	333 Texas Street, Suite 1525, , Shreveport, LA 71101

6. Affiliated Organizations

(Any organization, other than a political committee, which directly or indirectly established, administers, or financially supports this committee.)

a. Name	b. Address	c. Relationship to Committee

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	b. Address
On attached sheet	

8. Type of Committee

IF THE POLITICAL COMMITTEE SUPPORTS ONLY **ONE** CANDIDATE, check **all** that apply AND complete 8a and 8b below:

- By my signature below, I hereby certify that this committee is the principal campaign committee of the candidate referenced in 8a.
- By my signature below, I hereby certify that this committee is the subsidiary of _____ which is a committee of the candidate referenced in 8a.
- By my signature below, I hereby certify that this committee is not the principal or subsidiary committee the candidate referenced in 8a and that the committee is not working, and will not work, in coordination, consultation, or cooperation with the candidate referenced in 8a.
- By my signature below, I hereby certify that this committee is organized solely to make independent expenditures and is not, and will not, make contributions (direct or in-kind as defined in R.S. 18:1483(6), in contravention of the Campaign Finance Disclosure Act.

IF THE POLITICAL COMMITTEE SUPPORTS **MULTIPLE** CANDIDATES, CHECK **ONLY IF THE following** applies:

- By my signature below, I hereby certify that this committee is organized solely to make independent expenditures and is not, and will not, make contributions (direct or in-kind as defined in R.S. 18:1483(6), in contravention of the Campaign Finance Disclosure Act.

8a. Name of Candidate

8b. Office Sought by the Candidate

9. a. Name of Person Preparing Report: **ROBERT L DEAN**

b. Daytime Telephone: **318-429-2023**

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 29th day of January, 2024.

<u>Edward J Crawford, III</u> Signature of Committee/Chairperson	<u>318-222-2161</u> Daytime Telephone	<u>Robert L Dean</u> Signature of Committee Treasurer, if any	<u>318-429-2023</u> Daytime Telephone
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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

REGIONS BANK

b. Address

333 Texas Street
Shreveport, LA 71101