STATEMENT OF ORGANIZA	OFFICE USE	OFFICE USE ONLY	
		Report Number: 120	703
1. Name and Address of Committee	2. Date of this Statement 3/7/20	Date Filed: 3/7/2024	0/03
LOUISIANA CITIZENS FOR JOB CREATORS INC. 143 RIDGEWAY ST.	3. Estimated Membership		
SUITE 214 LAFAYETTE, LA 70503	·	100	
	4. Amended Statement?		
Check If: New Committee	YesX	No	
5. All Committee Officers and Directors (including Chairperson, Treasurer, if any, and any other committee officers and directors) a. Name			
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.)			
a. Name b. Address c. Relationship to Committee			
 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. <u>Name</u> b. <u>Address</u>			
On attached sheet			
8. Type of Committee			
IF THE POLITICAL COMMITTEE SUPPORTS ONLY ONE CANDIDATE, check <u>all</u> 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: VANDERBROOK & C	CO. CPAS	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 7th day of March , 202	<u>24 </u>		
Warran S Orlanda			
Warren S Orlando Signature of Committee/Chairperson Daytime Tele	phone Signature o	f Committee Treasurer, if any	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 b. Address

JP MORGAN CHASE BANK, N.A. 451 Florida Blvd. Suite B100

Baton Rouge, LA 70801

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