

STATEMENT OF ORGANIZATION		OFFICE USE ONLY										
1. Name and Address of Committee BISHOP PAC 111 Southwark Dr Lafayette, LA 70508	2. Date of this Statement <div style="text-align: right;">2/1/2024</div>	Report Number: 118741 Date Filed: 2/1/2024 <div style="text-align: right;"> </div>										
Check If: <u> </u> New Committee <u> </u>	3. Estimated Membership <div style="text-align: right;">75</div>											
	4. Amended Statement? <div style="text-align: center;"> <u> </u> Yes <u> X </u> 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>DR. BRAD BROUSSARD</td> <td>Chairperson</td> <td>155 Hospital Dr , , Lafayette, LA 70503</td> </tr> <tr> <td>STUART J BISHOP</td> <td>Treasurer</td> <td>111 Southwark Dr , , Lafayette, LA 70508</td> </tr> </table>				<u>a. Name</u>	<u>b. Position</u>	<u>c. Address</u>	DR. BRAD BROUSSARD	Chairperson	155 Hospital Dr , , Lafayette, LA 70503	STUART J BISHOP	Treasurer	111 Southwark Dr , , Lafayette, LA 70508
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DR. BRAD BROUSSARD	Chairperson	155 Hospital Dr , , Lafayette, LA 70503										
STUART J BISHOP	Treasurer	111 Southwark Dr , , Lafayette, LA 70508										
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>						
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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.) <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%;"></td> </tr> </table>				<u>a. Name</u>	<u>b. Address</u>							
<u>a. Name</u>	<u>b. Address</u>											
8. Type of Committee IF THE POLITICAL COMMITTEE SUPPORTS ONLY ONE CANDIDATE, check <u>all</u> that apply AND complete 8a and 8b below: <div style="margin-bottom: 10px;"> <u> </u> By my signature below, I hereby certify that this committee is the principal campaign committee of the candidate referenced in 8a. </div> <div style="margin-bottom: 10px;"> <u> </u> By my signature below, I hereby certify that this committee is the subsidiary of _____ , which is a committee of the candidate referenced in 8a. </div> <div style="margin-bottom: 10px;"> <u> </u> 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. </div> <div style="margin-bottom: 10px;"> <u> </u> 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 . </div> IF THE POLITICAL COMMITTEE SUPPORTS MULTIPLE CANDIDATES, CHECK <u>ONLY IF THE following</u> applies: <div style="margin-bottom: 10px;"> <u> </u> 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 . </div>												
8a. Name of Candidate		8b. Office Sought by the Candidate										
9. a. Name of Person Preparing Report: JAMES BURLAND		b. Daytime Telephone: 225-767-7163										
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 <u> 1st </u> day of <u> February </u> , <u> 2024 </u> .												
<u>Brad Broussard</u> Signature of Committee/Chairperson	<u>337-314-3162</u> Daytime Telephone	<u>Stuart J Bishop</u> Signature of Committee Treasurer, if any	<u>337-319-3162</u> Daytime Telephone									