

| <b>STATEMENT OF ORGANIZATION</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                                                                                              | <b>OFFICE USE ONLY</b>                                                  |                                                                    |                                          |                                                                      |                                          |             |                                            |                             |           |                                            |                                              |  |  |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------|--------------------------------------------------------------------|------------------------------------------|----------------------------------------------------------------------|------------------------------------------|-------------|--------------------------------------------|-----------------------------|-----------|--------------------------------------------|----------------------------------------------|--|--|
| <b>1. Name and Address of Committee</b><br><br>STAND FOR CHILDREN LOUISIANA IEC<br>601 Laurel St<br>Baton Rouge, LA 70802<br><br>Check If:<br>New Committee <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | <b>2. Date of this Statement</b><br><br><div style="text-align: center;">1/17/2019</div>                                                                     | <b>Report Number:</b> 73830<br><br><b>Date Filed:</b> 1/17/2019<br><br> |                                                                    |                                          |                                                                      |                                          |             |                                            |                             |           |                                            |                                              |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | <b>3. Estimated Membership</b><br><br><div style="text-align: center;">0</div>                                                                               |                                                                         |                                                                    |                                          |                                                                      |                                          |             |                                            |                             |           |                                            |                                              |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | <b>4. Amended Statement?</b><br><br><div style="text-align: center;"> <input type="checkbox"/> Yes     <input checked="" type="checkbox"/> No         </div> |                                                                         |                                                                    |                                          |                                                                      |                                          |             |                                            |                             |           |                                            |                                              |  |  |
| <b>5. All Committee Officers and Directors (including Chairperson, Treasurer, if any, and any other committee officers and directors)</b><br><table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left; width: 30%;"><u>a. Name</u></th> <th style="text-align: left; width: 30%;"><u>b. Position</u></th> <th style="text-align: left; width: 40%;"><u>c. Address</u></th> </tr> </thead> <tbody> <tr> <td>CARRIE GRIFFIN MONICA</td> <td>Chairperson</td> <td>601 Laurel St<br/><br/>Baton Rouge, LA 70802</td> </tr> <tr> <td>TREASURER NIKKI DANGERFIELD</td> <td>Treasurer</td> <td>601 Laurel St<br/><br/>Baton Rouge, LA 70802</td> </tr> <tr> <td colspan="3">Additional officers listed on attached sheet</td> </tr> </tbody> </table>                                                                                                                                      |                                                                                                                                                              |                                                                         | <u>a. Name</u>                                                     | <u>b. Position</u>                       | <u>c. Address</u>                                                    | CARRIE GRIFFIN MONICA                    | Chairperson | 601 Laurel St<br><br>Baton Rouge, LA 70802 | TREASURER NIKKI DANGERFIELD | Treasurer | 601 Laurel St<br><br>Baton Rouge, LA 70802 | Additional officers listed on attached sheet |  |  |
| <u>a. Name</u>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | <u>b. Position</u>                                                                                                                                           | <u>c. Address</u>                                                       |                                                                    |                                          |                                                                      |                                          |             |                                            |                             |           |                                            |                                              |  |  |
| CARRIE GRIFFIN MONICA                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | Chairperson                                                                                                                                                  | 601 Laurel St<br><br>Baton Rouge, LA 70802                              |                                                                    |                                          |                                                                      |                                          |             |                                            |                             |           |                                            |                                              |  |  |
| TREASURER NIKKI DANGERFIELD                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | Treasurer                                                                                                                                                    | 601 Laurel St<br><br>Baton Rouge, LA 70802                              |                                                                    |                                          |                                                                      |                                          |             |                                            |                             |           |                                            |                                              |  |  |
| Additional officers listed on attached sheet                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                              |                                                                         |                                                                    |                                          |                                                                      |                                          |             |                                            |                             |           |                                            |                                              |  |  |
| <b>6. Affiliated Organizations</b><br>(Any organization, other than a political committee, which directly or indirectly established, administers, or financially supports this committee.)<br><table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left; width: 30%;"><u>a. Name</u></th> <th style="text-align: left; width: 30%;"><u>b. Address</u></th> <th style="text-align: left; width: 40%;"><u>c. Relationship to Committee</u></th> </tr> </thead> <tbody> <tr> <td colspan="3">On attached sheet</td> </tr> </tbody> </table>                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                              |                                                                         | <u>a. Name</u>                                                     | <u>b. Address</u>                        | <u>c. Relationship to Committee</u>                                  | On attached sheet                        |             |                                            |                             |           |                                            |                                              |  |  |
| <u>a. Name</u>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | <u>b. Address</u>                                                                                                                                            | <u>c. Relationship to Committee</u>                                     |                                                                    |                                          |                                                                      |                                          |             |                                            |                             |           |                                            |                                              |  |  |
| On attached sheet                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                                                                                                              |                                                                         |                                                                    |                                          |                                                                      |                                          |             |                                            |                             |           |                                            |                                              |  |  |
| <b>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.)</b><br><table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left; width: 30%;"><u>a. Name</u></th> <th style="text-align: left; width: 40%;"><u>b. Address</u></th> </tr> </thead> <tbody> <tr> <td colspan="2">On attached sheet</td> </tr> </tbody> </table>                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                                                                              |                                                                         | <u>a. Name</u>                                                     | <u>b. Address</u>                        | On attached sheet                                                    |                                          |             |                                            |                             |           |                                            |                                              |  |  |
| <u>a. Name</u>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | <u>b. Address</u>                                                                                                                                            |                                                                         |                                                                    |                                          |                                                                      |                                          |             |                                            |                             |           |                                            |                                              |  |  |
| On attached sheet                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                                                                                                              |                                                                         |                                                                    |                                          |                                                                      |                                          |             |                                            |                             |           |                                            |                                              |  |  |
| <b>8. IF THIS COMMITTEE SUPPORTS A SINGLE CANDIDATE:</b> a. Check one: <input type="checkbox"/> Principal Campaign Committee <input type="checkbox"/> Subsidiary Committee                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                              |                                                                         |                                                                    |                                          |                                                                      |                                          |             |                                            |                             |           |                                            |                                              |  |  |
| <b>b. Name of Candidate</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | <b>c. Office Sought by the Candidate</b>                                                                                                                     |                                                                         |                                                                    |                                          |                                                                      |                                          |             |                                            |                             |           |                                            |                                              |  |  |
| <b>9. a. Name of Person Preparing Report</b> RYAN BROWN<br><br><b>b. Daytime Telephone</b> 800-663-4032                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                                                                              |                                                                         |                                                                    |                                          |                                                                      |                                          |             |                                            |                             |           |                                            |                                              |  |  |
| <b>10. WE HEREBY CERTIFY</b> that the information contained in this STATEMENT OF ORGANIZATION is true and correct to the best of our knowledge , information and belief.<br><br>This    17th    day of    January    ,    2019    .<br><br><table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; vertical-align: bottom; padding-top: 20px;"> <u>Carrie Griffin Monica</u><br/>           Signature of Committee/Chairperson         </td> <td style="width: 50%; vertical-align: bottom; padding-top: 20px;"> <u>504-247-6225</u><br/>           Daytime Telephone         </td> </tr> <tr> <td style="vertical-align: bottom; padding-top: 20px;"> <u>Nikki Dangerfield</u><br/>           Signature of Committee Treasurer, if any         </td> <td style="vertical-align: bottom; padding-top: 20px;"> <u>504-648-1682</u><br/>           Daytime Telephone         </td> </tr> </table> |                                                                                                                                                              |                                                                         | <u>Carrie Griffin Monica</u><br>Signature of Committee/Chairperson | <u>504-247-6225</u><br>Daytime Telephone | <u>Nikki Dangerfield</u><br>Signature of Committee Treasurer, if any | <u>504-648-1682</u><br>Daytime Telephone |             |                                            |                             |           |                                            |                                              |  |  |
| <u>Carrie Griffin Monica</u><br>Signature of Committee/Chairperson                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | <u>504-247-6225</u><br>Daytime Telephone                                                                                                                     |                                                                         |                                                                    |                                          |                                                                      |                                          |             |                                            |                             |           |                                            |                                              |  |  |
| <u>Nikki Dangerfield</u><br>Signature of Committee Treasurer, if any                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | <u>504-648-1682</u><br>Daytime Telephone                                                                                                                     |                                                                         |                                                                    |                                          |                                                                      |                                          |             |                                            |                             |           |                                            |                                              |  |  |

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

a. Name

b. Position

c. Address

PAMELA WELCH

Officer

2121 SW Broadway, Suite 111  
Portland, OR 97201

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

STAND FOR CHILDREN, INC.

2121 SW Broadway, Suite 111  
Portland, OR 97201

Connected

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

US BANK

PO Box 1800  
Saint Paul, MN 55101