

<b>STATEMENT OF ORGANIZATION</b>		<b>OFFICE USE ONLY</b>										
1. Name and Address of Committee  HEWITT PAC 105 Ayshire Ct. Slidell, LA 70461	2. Date of this Statement <div style="text-align: right;">1/9/2024</div>	<b>Report Number:</b> 117938  <b>Date Filed:</b> 1/10/2024										
Check If: <u>        </u> New Committee <u>        </u>	3. Estimated Membership <div style="text-align: right;">0</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-collapse: collapse;"> <tr> <td style="width: 30%;"><u>a. Name</u></td> <td style="width: 30%;"><u>b. Position</u></td> <td style="width: 40%;"><u>c. Address</u></td> </tr> <tr> <td>SHARON HEWITT</td> <td>Chairperson</td> <td>105 AYSHIRE CT., , SLIDELL, LA 70461</td> </tr> <tr> <td>LEIGH DAVIS</td> <td>Treasurer</td> <td>2133 SILVERSIDE DR STE K, , BATON ROUGE, LA 70808</td> </tr> </table>	<u>a. Name</u>	<u>b. Position</u>	<u>c. Address</u>	SHARON HEWITT	Chairperson	105 AYSHIRE CT., , SLIDELL, LA 70461	LEIGH DAVIS	Treasurer	2133 SILVERSIDE DR STE K, , BATON ROUGE, LA 70808			
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LEIGH DAVIS	Treasurer	2133 SILVERSIDE DR STE K, , BATON ROUGE, LA 70808										
6. Affiliated Organizations (Any organization, other than a political committee, which directly or indirectly established, administers, or financially supports this committee.)												
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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.)												
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8. Type of Committee  IF THE POLITICAL COMMITTEE SUPPORTS ONLY <b>ONE</b> CANDIDATE, check <b>all</b> that apply AND complete 8a and 8b below: <input type="checkbox"/> By my signature below, I hereby certify that this committee is the principal campaign committee of the candidate referenced in 8a. <input type="checkbox"/> By my signature below, I hereby certify that this committee is the subsidiary of _____, which is a committee of the candidate referenced in 8a. <input type="checkbox"/> 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. <input type="checkbox"/> 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 <b>MULTIPLE</b> CANDIDATES, CHECK <b>ONLY IF THE following</b> applies: <input checked="" type="checkbox"/> 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:    LEIGH DAVIS		b. Daytime Telephone:    225-766-6966										
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>10th</u> day of <u>January</u> , <u>2024</u> .												
<u>SHARON HEWITT</u> Signature of Committee/Chairperson	<u>985-649-3664</u> Daytime Telephone	<u>LEIGH DAVIS</u> Signature of Committee Treasurer, if any	<u>225-766-6966</u> Daytime Telephone									