

STATEMENT OF ORGANIZATION

OFFICE USE ONLY

Report Number: 61759

Date Filed: 1/18/2017



1. Name and Address of Committee

SCHRODER LEADERSHIP PAC
601 BOCAGE CT.
COVINGTON, LA 70433

2. Date of this Statement

1/18/2017

3. Estimated Membership

100

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

JOHN SCHRODER

Chairperson

601 BOCAGE CT.

COVINGTON, LA 70433

BONNIE EADES

Treasurer

921 BEAUREARD PKWY

COVINGTON, LA 70433

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. IF THIS COMMITTEE SUPPORTS A SINGLE CANDIDATE:

a. Check one:

Principal Campaign Committee

Subsidiary Committee

b. Name of Candidate

c. Office Sought by the Candidate

9. a. Name of Person Preparing Report

AMANDA G MALOY

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 18th day of January, 2017.

JOHN SCHRODER

Signature of Committee/Chairperson

985-373-4873

Daytime Telephone

BONNIE EADES

Signature of Committee Treasurer, if any

985-707-8277

Daytime Telephone

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

STATE BANK

b. Address

107 TERRA BELLA BLVD.
COVINGTON, LA 70433