

STATEMENT OF ORGANIZATION		OFFICE USE ONLY												
1. Name and Address of Committee EMPOWER LOUISIANA, INC. 15635 Airline Highway Baton Rouge, LA 70817 Check If: New Committee _____	2. Date of this Statement <div style="text-align: center;">1/31/2018</div> 3. Estimated Membership <div style="text-align: center;">5</div> 4. Amended Statement? <div style="text-align: center;"> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No </div>	Report Number: 68037 Date Filed: 1/31/2018 												
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: 33%;"><u>c. Address</u></td> </tr> <tr> <td style="text-align: center;">LANE GRIGSBY</td> <td style="text-align: center;">Chairperson</td> <td style="text-align: center;">P.O. BOX 104</td> </tr> <tr> <td></td> <td></td> <td style="text-align: center;">BATON ROUGE, LA 70821</td> </tr> <tr> <td></td> <td style="text-align: center;">Treasurer</td> <td></td> </tr> </table>			<u>a. Name</u>	<u>b. Position</u>	<u>c. Address</u>	LANE GRIGSBY	Chairperson	P.O. BOX 104			BATON ROUGE, LA 70821		Treasurer	
<u>a. Name</u>	<u>b. Position</u>	<u>c. Address</u>												
LANE GRIGSBY	Chairperson	P.O. BOX 104												
		BATON ROUGE, LA 70821												
	Treasurer													
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: 33%;"><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></td> </tr> </table>			<u>a. Name</u>	<u>b. Address</u>										
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8. IF THIS COMMITTEE SUPPORTS A SINGLE CANDIDATE: a. Check one: <input type="checkbox"/> Principal Campaign Committee <input type="checkbox"/> Subsidiary Committee														
b. Name of Candidate		c. Office Sought by the Candidate												
9. a. Name of Person Preparing Report JAMES C DONOHUE b. Daytime Telephone 225-214-1908														
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>31st</u> day of <u>January</u> , <u>2018</u> . <table style="width: 100%; border: none;"> <tr> <td style="width: 60%;"> <u>LANE GRIGSBY</u> Signature of Committee/Chairperson </td> <td style="width: 40%;"> _____ Daytime Telephone </td> </tr> <tr> <td> _____ Signature of Committee Treasurer, if any </td> <td> _____ Daytime Telephone </td> </tr> </table>			<u>LANE GRIGSBY</u> Signature of Committee/Chairperson	_____ Daytime Telephone	_____ Signature of Committee Treasurer, if any	_____ Daytime Telephone								
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