

<b>STATEMENT OF ORGANIZATION</b>		<b>OFFICE USE ONLY</b>									
<b>1. Name and Address of Committee</b>  SCHRODER LEADERSHIP PAC 70117 HWY 59. STE. G ABITA SPRINGS, LA 70420  Check If: New Committee _____	<b>2. Date of this Statement</b>  <div style="text-align: center;">1/20/2022</div>	<b>Report Number:</b> 101067  <b>Date Filed:</b> 1/20/2022  									
	<b>3. Estimated Membership</b>  <div style="text-align: center;">50</div>										
	<b>4. Amended Statement?</b>  <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>											
<table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left; width: 33%;"><u>a. Name</u></th> <th style="text-align: left; width: 33%;"><u>b. Position</u></th> <th style="text-align: left; width: 34%;"><u>c. Address</u></th> </tr> </thead> <tbody> <tr> <td>JOHN SCHRODER</td> <td>Chairperson</td> <td>70117 HWY 59. STE. G ABITA SPRINGS, LA 70420</td> </tr> <tr> <td>BONNIE EADES</td> <td>Treasurer</td> <td>921 BEAUREARD PKWY  COVINGTON, LA 70433</td> </tr> </tbody> </table>			<u>a. Name</u>	<u>b. Position</u>	<u>c. Address</u>	JOHN SCHRODER	Chairperson	70117 HWY 59. STE. G ABITA SPRINGS, LA 70420	BONNIE EADES	Treasurer	921 BEAUREARD PKWY  COVINGTON, LA 70433
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BONNIE EADES	Treasurer	921 BEAUREARD PKWY  COVINGTON, LA 70433									
<b>6. Affiliated Organizations</b> (Any organization, other than a political committee, which directly or indirectly established, administers, or financially supports this committee.)											
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<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>											
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<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>									
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 33%;"><b>9. a. Name of Person Preparing Report</b></td> <td>AMANDA GUIDRY MALOY</td> </tr> <tr> <td><b>b. Daytime Telephone</b></td> <td>225-767-7163</td> </tr> </table>			<b>9. a. Name of Person Preparing Report</b>	AMANDA GUIDRY MALOY	<b>b. Daytime Telephone</b>	225-767-7163					
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<b>b. Daytime Telephone</b>	225-767-7163										
<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.											
This <u>20th</u> day of <u>January</u> , <u>2022</u> .											
<u>JOHN SCHRODER</u> Signature of Committee/Chairperson		<u>985-373-4873</u> Daytime Telephone									
<u>BONNIE EADES</u> Signature of Committee Treasurer , if any		<u>985-707-8277</u> 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