


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;">1/29/2019</div> 3. Estimated Membership <div style="text-align: center;">0</div> 4. Amended Statement? <div style="text-align: center;"> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No </div>	<div style="text-align: right;"> Report Number: 74175 Date Filed: 1/29/2019 </div> <div style="text-align: right;">  </div>												
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: 34%;"><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;">15635 AIRLINE HIGHWAY</td> </tr> <tr> <td></td> <td></td> <td style="text-align: center;">BATON ROUGE, LA 70817</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	15635 AIRLINE HIGHWAY			BATON ROUGE, LA 70817		Treasurer	
<u>a. Name</u>	<u>b. Position</u>	<u>c. Address</u>												
LANE GRIGSBY	Chairperson	15635 AIRLINE HIGHWAY												
		BATON ROUGE, LA 70817												
	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: 34%;"><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> <p style="text-align: center;">On attached sheet</p>			<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 29th day of January , 2019 . <table style="width: 100%; border: none;"> <tr> <td style="width: 50%; text-align: center;"> <u>LANE GRIGSBY</u> Signature of Committee/Chairperson </td> <td style="width: 50%; text-align: center;"> <u>225-753-5857</u> Daytime Telephone </td> </tr> <tr> <td style="text-align: center;"> _____ Signature of Committee Treasurer , if any </td> <td style="text-align: center;"> _____ Daytime Telephone </td> </tr> </table>			<u>LANE GRIGSBY</u> Signature of Committee/Chairperson	<u>225-753-5857</u> Daytime Telephone	_____ Signature of Committee Treasurer , if any	_____ Daytime Telephone								
<u>LANE GRIGSBY</u> Signature of Committee/Chairperson	<u>225-753-5857</u> Daytime Telephone													
_____ Signature of Committee Treasurer , if any	_____ 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

HANCOCK WHITNEY BANK

b. Address

445 NORTH BLVD.
BATON ROUGE, LA 70802