

STATEMENT OF ORGANIZATION		OFFICE USE ONLY										
1. Name and Address of Committee HELENA MORENO FOR OUR FUTURE Po Box 15155 New Orleans, LA 70175	2. Date of this Statement <div style="text-align: right;">8/27/2024</div>	Report Number: 122475 Date Filed: 8/27/2024 <div style="text-align: right; border-left: 1px solid black; padding-left: 5px;"> </div>										
Check If: New Committee <input checked="" type="checkbox"/>	3. Estimated Membership <div style="text-align: right;">0</div>	4. Amended Statement? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No										
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;"> <thead> <tr> <th style="width: 30%; text-align: left; border-bottom: 1px solid black;">a. Name</th> <th style="width: 20%; text-align: left; border-bottom: 1px solid black;">b. Position</th> <th style="width: 50%; text-align: left; border-bottom: 1px solid black;">c. Address</th> </tr> </thead> <tbody> <tr> <td>DONNA GLAPION</td> <td>Chairperson</td> <td>7641 Fieldston Road, , New Orleans, LA 70126</td> </tr> <tr> <td>LYNDA WOOLARD</td> <td>Treasurer</td> <td>1233 FERN ST., , NEW ORLEANS, LA 70118</td> </tr> </tbody> </table>				a. Name	b. Position	c. Address	DONNA GLAPION	Chairperson	7641 Fieldston Road, , New Orleans, LA 70126	LYNDA WOOLARD	Treasurer	1233 FERN ST., , NEW ORLEANS, LA 70118
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LYNDA WOOLARD	Treasurer	1233 FERN ST., , NEW ORLEANS, LA 70118										
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 ONE CANDIDATE, check all that apply AND complete 8a and 8b below: <input checked="" 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 MULTIPLE CANDIDATES, CHECK ONLY IF THE following applies: <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.												
8a. Name of Candidate HELENA MORENO		8b. Office Sought by the Candidate MAYOR CITY OF NEW ORLEANS										
9. a. Name of Person Preparing Report: VANDERBROOK & CO., LLC CPAS		b. Daytime Telephone: 504-455-0762										
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>27th</u> day of <u>August</u> , <u>2024</u> .												
<u>Donna Glapion</u> Signature of Committee/Chairperson	<u>504-621-1676</u> Daytime Telephone	<u>LYNDA WOOLARD</u> Signature of Committee Treasurer, if any	<u>504-864-9207</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

BANKPLUS

b. Address

385A HIGHLAND COLONY PKWY
RIDGELAND, MS 39157