STATEMENT OF

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FEC FORM 1		ORGANI	ZATION		Office Use Only
1. NAME OF COMMITTEE (in	ı full)	(Check if name is changed)	Example: If typing, type over the lines.	12FE4M	
LOUISIANA	SHEF	RIFFS AND DE	EPUTIES POLITI	CAL ACTI	ON COMMITTEE
ADDRESS (number a	nd street)	1175 NICHOLSON DR			
☐ ◀ (Check if a is changed		BATON ROUGE CITY		LA STATE A	70802 ZIP CODE ▲
COMMITTEE'S E-MA	AIL ADDRES	S			
X ◀ (Check if a is changed		cindy@lsa.org Optional Second E-Mail jimmy@burland.or	Address [9		
COMMITTEE'S WEB (Check if a is changed	address	RESS (URL) www.lsa.org			
2. DATE 1	M / D 1	2012			
3. FEC IDENTIFIC	CATION NU	MBER ▶ C	C00357905		
4. IS THIS STATEM	MENT	NEW (N) OR	× AMENDED (A	Λ)	
I certify that I have e	examined thi	s Statement and to the b	est of my knowledge and beli	ef it is true, correc	ct and complete.
Type or Print Name of	of Treasurer	Mike Cazes			
Signature of Treasure	er <i>Mike C</i>	azes	[Electronically Filed]	Date 1	M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
NOTE: Submission of			on may subject the person signi	-	to the penalties of 2 U.S.C. §437g.
Office Use Only			For further information Federal Election Communication Toll Free 800-424-9531 Local 202-694-1100	mission	FEC FORM 1 (Revised 06/2012)

	EEC Fa	rm 1 (Pavisad 02/2000)	Page 2
		rm 1 (Revised 02/2009) OMMITTEE	rage Z
		e Committee:	
(a)		This committee is a principal campaign committee. (Complete the candidate information below.)
(b)		This committee is an authorized committee, and is NOT a principal campaign committee. (Cominformation below.)	nplete the candidate
Nam Can	e of didate		
	didate y Affiliati	on Office Sought: House Senate President	State
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Nam Cand	e of didate		
Par	ty Con	nmittee:	
(d)		This committee is a (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party.
Poli	itical A	ction Committee (PAC):	
(e)	\times	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its con-	nnected organization is a
		Corporation Corporation w/o Capital Stock	Labor Organization
		Membership Organization Trade Association	Cooperative
		In addition, this committee is a Lobbyist/Registrant PAC.	
(f)		This committee supports/opposes more than one Federal candidate, and is NOT a separate so committee. (i.e., nonconnected committee)	egregated fund or party
		In addition, this committee is a Lobbyist/Registrant PAC.	
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Join	t Func	Iraising Representative:	
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for to committees/organizations, at least one of which is an authorized committee of a federal candidate.	•
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, none of which is an authorized committee of a federal candidate.	vo or more political
	Com	mittees Participating in Joint Fundraiser	
	1.	FEC ID number	
	2.	FEC ID number	
	3.	FEC ID number	
	4.		

	age# 12340703173		
	_		_
•	FEC Form 1 (Revised 0	2/2009)	Page 3
\	Write or Type Committee Name		
	LOUISIANA SHEI	RIFFS AND DEPUTIES POLITICAL ACTION CO	MMITTEE
6.	Name of Any Connected O	rganization, Affiliated Committee, Joint Fundraising Representative, or Leadership	PAC Sponsor
L	ouisiana Sheriffs Asso	ociation	
Ī			
	Mailing Address	1175 Nicholson Drive	
	3		
		Baton Rouge LA 70802	. _
		CITY STATE ZII	P CODE
7.	Custodian of Records: Ident books and records. Mike Cazes	ify by name, address (phone number optional) and position of the person in posse	ssion of committee
	Full Name		
	Mailing Address	1175 Nicholson Drive	
		Baton Rouge LA 70802	
	Title or Position	CITY STATE ZIF	P CODE
	Treasurer		3 - 8402
8.	Treasurer: List the name and any designated agent (e.g., as	address (phone number optional) of the treasurer of the committee; and the name ssistant treasurer).	and address of
	Full Name Mike Cazes of Treasurer		
	Mailing Address	1175 Nicholson Drive	

70802

225

ZIP CODE

8402

343

LA STATE

Telephone number

Baton Rouge

Title or Position Treasurer CITY

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Full Name of Designated Agent Wa	ayne Morein	
Mailing Address	302 U.S. 167 N.	
	Ville Platte CITY STATE	0586
Title or Position	37/12	Zii OOBL
	Telephone number	
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