Only

ORGANIZATION

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STATEMENT OF **FEC** FORM 1 Office Use Only NAME OF Example: If typing, type (Check if name 12FE4M5 COMMITTEE (in full) over the lines. is changed) CAJUN POLITICAL ACTION COMMITTEE (CAJUNPAC) 720 ST NAZAIRE ROAD ADDRESS (number and street) (Check if address is changed) BROUSSARD 70518 LA CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS paula@bllandry.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2019 C00491985 FEC IDENTIFICATION NUMBER > 3. X IS THIS STATEMENT NEW (N) OR AMENDED (A) I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete. LANDRY, Benjamin, , , Type or Print Name of Treasurer LANDRY, Benjamin, , , [Electronically Filed] 02 19 2019 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS. Office For further information contact: FEC FORM 1 Federal Election Commission Use (Revised 06/2012) Toll Free 800-424-9530

Local 202-694-1100

FI	FC Fo	rm 1 (Revised 02/2009)	Page 2
TYPE	OF C	OMMITTEE	1 4go 2
Cano	didate	Committee:	
(a)	Ш	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.)	plete the candidate
Name Candi			
Candid Party	date Affiliati	Office Sought: House Senate President	State
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name Candid			
Party	y Con	nmittee:	
(d)		· · · · · · · · · · · · · · · · · · ·	(Democratic, Republican, etc.) Party.
Politi	ical A	ction Committee (PAC):	
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its con	nected 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)	x	This committee supports/opposes more than one Federal candidate, and is NOT a separate se committee. (i.e., nonconnected committee)	gregated 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.)	
Joint	Fund	raising Representative:	
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, at least one of which is an authorized committee of a federal candidate.	o or more political
(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.	o or more political
	Com	mittees Participating in Joint Fundraiser	
	1.	FEC ID number	
	2.	FEC ID number	
	3.	FEC ID number	
	4.		

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Write or Type Committee Nar		. 490 -
	TICAL ACTION COMMITTEE (CAJ	IUNPAC)
	Organization, Affiliated Committee, Joint Fundraising Represen	•
NONE		
Mailing Address		
	CITY STA	ATE ZIP CODE
Relationship: Connect	ted Organization Affiliated Committee Joint Fundraising Repr	resentative Leadership PAC Sponsor
 Custodian of Records: Id books and records. 	entify by name, address (phone number optional) and position of	the person in possession of committee
Full Name		
Mailing Address		
Title or Position	CITY STAT	TE ZIP CODE
	Telephone number	
8. Treasurer: List the name a any designated agent (e.g.	and address (phone number optional) of the treasurer of the com , assistant treasurer).	mittee; and the name and address of
Full Name LANDRY of Treasurer	/, Benjamin, , ,	
Mailing Address	720 ST. NAZAIRE RD	
	BROUSSARD	A 70518
Title or Position	CITY STAT	E ZIP CODE
	Telephone number	337 - 839 - 1700
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Full Name of Designated		
Agent		
Mailing Address		
	CITY STATE	ZIP CODE
Title or Position		
	Telephone number	
Banks or Other De safety deposit boxes Name of Bank, Depo	epositories: List all banks or other depositories in which the committee deposits funds, he sor maintains funds. pository, etc.	
safety deposit boxes Name of Bank, Depo	community first Albertson Parkway BROUSSARD LA 7051	
safety deposit boxes Name of Bank, Depo	Albertson Parkway BROUSSARD LA 7051	8
safety deposit boxes Name of Bank, Depo	community first Albertson Parkway BROUSSARD LA 7051	
safety deposit boxes Name of Bank, Depo	Sor maintains funds. Community first Albertson Parkway BROUSSARD LA 7051 CITY STATE	8
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Safety deposit boxes Name of Bank, Deposit boxes Mailing Address Name of Bank, Deposit boxes Name of Bank, Deposit boxes	Sor maintains funds. Community first Albertson Parkway BROUSSARD LA 7051 CITY STATE	8
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