FEC FORM 1

STATEMENT OF ORGANIZATION

RECEIVED

FORM 1		NOANZ	AIION	20	12 AUG 28 AM 9: 47
					Office Use Only
1. NAME OF COMMITTEE (in fu	11 11	Check if name changed)	Example: If typing, type over the lines.	12FE4M5	<u> </u>
Louisiana P	rosperity F	und	<u> </u>	<u> </u>	
1	111111				
ADDRESS (number and		HNSTON ST # 54	; ;2 	1 1 1 1 1	
(Check if addr	ess L				
is changed)	Lafayette	; 		لـنـا لـ	⁷⁰⁵⁰³
			CITY	STATE	ZIP CODE
COMMITTEE'S E-MAIL	-	•	· · · · · · · · · · · · · · · · · · ·		
(Check if ad	1 1 1	electioncfo.co	om _		
(Check if addre is changed)			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	18 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	ليبينين
COMMITTEE'S WEB PA	AGE ADDRESS (UF	ere ere ere en. REY ere til skale er	e e en el composition de la marco. NOM la 12071/18 e esta marco Destro	ration in	•
	www.loui	sianaprosperityfui			ليتنين
is changed)	L		11111111		
2. DATE 08	22 / 7	2012			
3. FEC IDENTIFICAT	TION NUMBER	C			
4. IS THIS STATEME	NT 🛛 NEW	(N) OR	AMENDED (A)	
I certify that I have exa	mined this Stateme	nt and to the bes	st of my knowledge and beli	ef it is true, correc	t and complete.
	Treasurer Chris Ma	areton:			
Type or Print Name of	Treasurer Chins We	II Storr			- · · · · · · · · · · · · · · · · · · ·
Signature of Treasurer	Chris Marsty	i Ri		Date 08	22 / 2012
NOTE: Submission of fals		•	n _u may subject the person signi FION SHOULD BE REPORTE		the penalties of 2 U.S.C. §437g.
Office Use Only			For further informatic Federal Election Comm Toll Free 800-424-953 Local 202-694-1100	nission	FEC FORM 1 (Revised 02/2009)

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Same Contractions

FEC Form I (Revised U	2/2009)	Page Z					
TYPE OF COMMITTEE							
Candidate Committee:							
(a) This committee	e is a principal campaign committee. (Complete the candidate information below.)						
Name of the last o	This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)						
Name of Candidate	<u> </u>						
Candidate Party Affiliation	Office Sought: House Senate President	State District					
(c) This committee	e supports/opposes only one candidate, and is NOT an authorized committee.						
Name of Candidate							
Party Committee:							
(d) This committee		Democratic, republican, etc.) Party.					
Political Action Committee (PAC):							
(e) This committee	e is a separate segregated fund. (Identify connected organization on line 6.) Its conn	ected organization is a:					
Corpo	oration Corporation w/o Capital Stock	Labor Organization					
Memb	pership Organization Trade Association	Cooperative					
	In addition, this committee is a Lobbyist/Registrant PAC.						
	This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee. (i.e., nonconnected committee)						
In addit	ition, this committee is a Lobbyist/Registrant PAC.						
In addit	ition, this committee is a Leadership PAC. (Identify sponsor on line 6.)						
Joint Fundraising Representative:							
	e collects contributions, pays fundraising expenses and disburses net proceeds for two ganizations, at least one of which is an authorized committee of a federal candidate.	o or more political					
\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	collects contributions, pays fundraising expenses and disburses net proceeds for two panizations, none of which is an authorized committee of a federal candidate.	or more political					
Committees Partici	pating in Joint Fundraiser						
1.	FEC ID number						
2.	FEC ID number						
3.	FEC ID number						
4.	FEC ID number						

FEC FOITH I (RE	eviseu ozrzooaj		raye 3
Write or Type Committee	e Name		
Louisiana P	rosperity Fund		
	ected Organization, Affiliated Committee, Joint F	undraising Representative, or Lea	dership PAC Sponsor
•	,		
NONE			
1111111	111111111111		1 1 1 1 1 1 1
Mailing Address			
			1-1
	CITY	STATE	ZIP CODE
Relationship: Co	nnected Organization Affiliated Committee	Joint Fundraising Representative	Leadership PAC Sponso
	ls: Identify by name, address (phone number opt	ional) and position of the person in	possession of committee
books and records.			
1	ris Marston		
Full Name	Election CFO, LLC		
Mailing Address			
	PO Box 26141		
	Alexandria	VA 223	13
Title or Position	CITY	STATE	ZIP CODE
, Treasurer		, 571 ,	ı 482 _{I I} 7690
1 1 1 1 1		Telephone number	
			
	rne and address (phone number optional) of the (e.g., assistant treasurer).	treasurer of the committee; and the	e name and address of
any designated agent	(e.g., assistant deasarct).		
T dil Tallic	is Marston		
of Treasurer	IFIgetion CFO 11 C		
Mailing Address	Election CFO, LLC		
	PO Box 26141		
	Alexandria	, , VA 2231	13 , 1_1 ,
	CITY	STATE	ZIP CODE
Title or Position	5		
Treasurer		Telephone number 571	482 - 7690

CITY

STATE

ZIP CODE

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FEC Form 1 (Revised 02/2009)

Full Name of Designated

FEC MISCELLANEOUS TEXT RELATED TO A REPORT, SCHEDULE OR ITEMIZATION

Form/Schedule: F1N Transaction ID:

This committee intends to make unlimited independent expenditures, and consistent with the U.S. Court of Appeals for the District of Columbia Circuit decision in SpeechNow v. FEC, it therefore intends to raise funds in unlimited amounts. This conmittee will not use those funds to make contributions, whether direct, in-kind, or via coordinated communications, to federal candidates or committees.

Form/Schedule: Transaction ID:

Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING E The FEC added this page to the end of this filing to indicate h	
Hand Delivered	Date of Receipt
USPS First Class Mail	Postmarked 8 /24 / 12
USPS Registered/Certified	Postmarked (R/C)
USPS Priority Mail	Postmarked
Delivery Confirmation™ or Signature Confirm	ation™ Label
USPS Express Mail	Postmarked
Postmark Illegible	·
No Postmark	
Overnight Delivery Service (Specify):	Shipping Date
Next Business	Day Delivery
Received from House Records & Registration Office	Date of Receipt
Received from Senate Public Records Office	Date of Receipt
Received from Electronic Filing Office	Date of Receipt
Other (Specify):	eipt or Postmarked
P	2/24/2
PREPARER	DATE PREPARED
(3/2005)	