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FEC FORM 1

STATEMENT OF ORGANIZATION

Office Use Only

1. NAME OF COMMITTEE (in full) ☐ (Check if name is changed) Example: If typing, type over the lines. 12FE4M5

LOUISIANA RIVER PILOTS ASSOCIATION FEDERAL POLITICAL ACTION COMMITTEE

ADDRESS (number and street) ▼ 8712 HWY 23

☐ (Check if address is changed)

BELLE CHASSE — CITY ▲ — LA — STATE ▲ — 70037 — ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS
cres46@crescentpilots.com

COMMITTEE'S WEB PAGE ADDRESS (URL)
www.crescentpilots.com

COMMITTEE'S FAX NUMBER
504-392-5014

2. DATE 07 01 2005

3. FEC IDENTIFICATION NUMBER ▶ C

4. 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.

Type or Print Name of Treasurer MIKE LORINO

Signature of Treasurer [signature] Date 07 06 2005

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 Use Only				

For further information contact:
Federal Election Commission
Toll Free 800-424-9530
Local 202-694-1100

FEC FORM 1
(Revised 02/2003)

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5. TYPE OF COMMITTEE (Check One)

(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. (Complete the candidate information below.)

Name of Candidate

Candidate Party Affiliation ☐ Office Sought: ☐ House ☐ Senate ☐ President State ☐ District ☐

(c) ☐ This committee supports/opposes only one candidate, and is NOT an authorized committee.

Name of Candidate

(d) ☐ This committee is a ☐ (National, State or subordinate) committee of the ☐ (Democratic, Republican, etc.) Party.

(e) ☑ This committee is a separate segregated fund.

(f) ☐ This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee.

6. Name of Any Connected Organization or Affiliated Committee

LOUISIANA RIVER PILOTS ASSOCIATION

Mailing Address 4432 WABASH ST
SUITE 200
METAIRIE LA 70001 -

CITY ▲ STATE ▲ ZIP CODE ▲

Relationship CONNECTED

Type of Connected Organization:

☐ Corporation ☐ Corporation w/o Capital Stock ☐ Labor Organization
☐ Membership Organization ☑ Trade Association ☐ Cooperative

Write or Type Committee Name

7. **Custodian of Records:** Identify by name, address (phone number – optional) and position of the person in possession of committee books and records.

Full Name: ALLEN J GIBBS

Mailing Address: 8712 Hwy 23

BELLE CHASSE | LA | 70037

Title or Position ▼: CHAIRMAN

Telephone number: 504-392-5017

8. **Treasurer:** List the name and address (phone number – optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

Full Name of Treasurer: MIKE LORINO

Mailing Address: 8712 Hwy 23

BELLE CHASSE | LA | 70037

Title or Position ▼: TREASURER

Telephone number: 504-831-6608

Full Name of Designated Agent: JAMES SAMUEL BURLAND

Mailing Address: 1740 HOOD AVE

BATON ROUGE | LA | 70808-2928

Title or Position ▼: ASST TREASURER

Telephone number: 225-344-1659

9. **Banks or Other Depositories:** List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.

METAIRIE BANK & TRUST

Mailing Address 3344 METAIRIE RD

METAIRIE LA 70001 -

CITY ▲ STATE ▲ ZIP CODE ▲

Name of Bank, Depository, etc.

Mailing Address

CITY ▲ STATE ▲ ZIP CODE ▲

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Federal Election Commission

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PREPARER	DATE PREPARED 7/16/05

(3/2005)