

FEC FORM 1

STATEMENT OF ORGANIZATION

RECEIVED FEC MAIL CENTER

2022 FEB -3 AM 10:00

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

COMMITTEE TO ELECT FRANK MIALLS SCURLOCK FOR PRESIDENT

ADDRESS (number and street) 7816 BREAKWATER DRIVE (Check if address is changed) NEW ORLEANS LA 70124 CITY STATE ZIP CODE

COMMITTEE'S E-MAIL ADDRESS (Check if address is changed) D.T.H.O.M.P.S.5.7.8@A.I.M..C.O.M. Optional Second E-Mail Address

COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed)

2. DATE 01 25 2021

3. FEC IDENTIFICATION NUMBER C 00748152

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 DWIGHT THOMPSON

Signature of Treasurer [Handwritten Signature] Date 01 25 2021

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 52 U.S.C. §30109. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.

NONPROFIT ORGANIZATION

Write or Type Committee Name

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

[Empty dotted line for organization name]

[Empty dotted line for organization name]

Mailing Address

[Empty dotted line for mailing address]

[Empty dotted line for mailing address]

[Empty dotted line for mailing address]

CITY

STATE

ZIP CODE

Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor

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

[Empty dotted line for full name]

Mailing Address

7 8 1 6 B R E A K W A T E R D R I V E

[Empty dotted line for mailing address]

[Empty dotted line for mailing address]

Title or Position

CITY

STATE

ZIP CODE

C A M P N G

Telephone number

[Empty dotted line for telephone number]

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

D W I G H T T H O M P S O N

Mailing Address

2 5 3 6 D U M A I N E S T R E E T

[Empty dotted line for mailing address]

N E W O R L E A N S L A 7 0 1 1 9

CITY

STATE

ZIP CODE

Title or Position

T R E A S U R E R

Telephone number

5 0 4 9 4 2 6 7 8 8

NONDISCRIMINATION

Full Name of Designated Agent

SONYA DEDAIS

Mailing Address

7816 BREAKWATER DRIVE

ORLEANS

CITY

LA

STATE

70124

ZIP CODE

Title or Position

CAMPAINGN MANAGER

Telephone number

504-575-9017

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.

GULF COAST BANK

Mailing Address

200 ST CHARLES AVENUE

NEW ORLEANS

CITY

LA

STATE

70130

ZIP CODE

Name of Bank, Depository, etc.

Mailing Address

CITY

STATE

ZIP CODE

NONDISCRIMINATION NOTICE

5(g) or (h). **Joint Fundraising Participant:**

1. _____
 2. _____
 3. _____
 4. _____

FEC ID number
 FEC ID number
 FEC ID number
 FEC ID number

C
 C
 C
 C

6. **Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor**

Mailing Address

Relationship:

CITY ▲

STATE ▲

ZIP CODE ▲

Connected Organization

Affiliated Committee

Joint Fundraising Representative

Leadership PAC Sponsor

8. **Designated Agent: Identify by name, address (phone number – optional)**

Full Name

Mailing Address

TITLE OR POSITION ▼

CITY ▲

STATE ▲

ZIP CODE ▲

Telephone Number

_____-_____-_____

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.

Mailing Address

CITY ▲

STATE ▲

ZIP CODE ▲

NONDISCRIMINATION

3 FIRMLY TO SEAL

PRIORITY MAIL

 DATE OF DELIVERY SPECIFIED*

 USPS TRACKING™ INCLUDED*

 INSURANCE INCLUDED*

 PICKUP AVAILABLE

* Domestic only

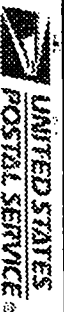
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A CUSTOMS DECLARATION
LABEL MAY BE REQUIRED.

2022 FEB 13



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01/27/2022

Mailed from 70119 10001000

PRIORITY MAIL 2-DAY™

Expected Delivery Date: 01/31/22

DWIGHT A THOMPSON
2536 DUMAINE ST
NEW ORLEANS LA 70119-3418

0006

C062

SHIP

TO: FEDERAL ELECTION COMMISSION

1050 1ST ST NE
REPORTING ANALYSIS DIVISION
WASHINGTON DC 20002-5859

USPS TRACKING #



9405 5036 9930 0148 8713 94

Electronic Rate Approved #038555749

NON-PROFIT ORGANIZATION



PRIORITY
SIZE PO

Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
 The FEC added this page to the end of this filing to indicate how it was received.

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<input type="checkbox"/> No Postmark	
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<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
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<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked

SPM
 PREPARER
 (3/2015)

2/7/22
 DATE PREPARED

NONN:ON:00:0M:00NONN:NN4