

STATEMENT OF ORGANIZATION

(See reverse side for instructions)

SECRETARY OF THE SENATE

99 NOV 19 PM 3:50

1. (a) NAME OF COMMITTEE IN FULL Louisiana 1999	☐ (Check if name is changed)	2. DATE H.O. November 1, 1999
(b) Number and Street Address 430 S. Capitol Street, SE	☐ (Check if address is changed)	3. FEC IDENTIFICATION NUMBER
(c) City, State and ZIP Code Washington, DC 20003		4. IS THIS STATEMENT AN AMENDMENT? ☐ YES ☒ NO

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 | State/District |
| | | | |
- ☐ (c) This committee supports/opposes only one candidate _____ and is NOT an authorized committee
(name of candidate)
- ☐ (d) This committee is a _____ committee of the _____ Party.
(National, State or subordinate) (Democratic, Republican, etc.)
- ☐ (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 a party committee.

Name of Any Connected Organization or Affiliated Committee	Mailing Address and ZIP Code	Relationship
Democratic Senatorial Campaign Committee	430 S. Capitol St., SE Washington, DC 20003	Participants affiliated for Joint Fundraising purposes pursuant to 11C.F.R. 102.17
Friends of Mary Landrieu	503 Capitol Ct., NE Ste. 100 Washington, DC 20002	
Louisiana Democratic Party	P.O. Box 4385 Baton Rouge, LA 70821-4385	

Type of Connected Organization
☐ Corporation ☐ Corporation w/o Capital Stock ☐ Labor Organization ☐ Membership Organization ☐ Trade Association ☐ Cooperative

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	Mailing Address	Title or Position
Andrew Grossman	430 S. Capitol Street, SE Washington, DC 20003	Treasurer

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	Mailing Address	Title or Position
Andrew Grossman	430 S. Capitol Street, SE Washington, DC 20003	Treasurer

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 and ZIP Code
Bank of America	730 15 St., NW Washington, DC 20005

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 Andrew Grossman	SIGNATURE OF TREASURER 	DATE November 1, 1999
---	--	---------------------------------

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.

For further information contact:
Federal Election Commission
Toll-free 800-424-9530
Local 202-376-3120

FEC FORM 1
(revised 4/87)

Federal Election Commission

**ENVELOPE REPLACEMENT PAGE
FOR INCOMING DOCUMENTS**

The Commission has added this page to the end of this filing to indicate how it was received.

☒ Hand Delivered	Date of Receipt <i>11-19-99</i>
☐ First Class Mail	POSTMARKED
☐ Registered/Certified Mail	POSTMARKED
☐ No Postmark	
☐ Postmark Illegible	
☐ Received from the House office of Records and Registration	Date of Receipt
☒ Received from the Senate Office of Public Records	Date of Receipt <i>11-22-99</i>
☐ Other (Specify):	Postmarked and/or Date of Receipt
☐ Electronic Filing	

SL
PREPARER*11-22-99*
DATE PREPARED