**FEC** 

Only

## STATEMENT OF

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**ORGANIZATION** FORM 1 Office Use Only NAME OF Example: If typing, type (Check if name 12FE4M5 COMMITTEE (in full) is changed) over the lines. Charles Ballay for President 2024 2201 Barataria Boulevard ADDRESS (number and street) 239 North (Check if address is changed) Marrero 70072 CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS (Check if address peopleoverpolitics2024@gmail.com is changed) Optional Second E-Mail Address Ballay2024@gmail.com COMMITTEE'S WEB PAGE ADDRESS (URL) www.Ballay2024.com (Check if address is changed) DATE 2023 C00848903 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. Type or Print Name of Treasurer Ballay, Charles, , Dr., Ballay, Charles, , Dr., 12 14 2023 Signature of Treasurer Date 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. Office For further information contact: FEC FORM 1 Federal Election Commission Use (Revised 06/2012) Toll Free 800-424-9530

Local 202-694-1100

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TYPE OF COMMITTEE:					
Candidate Committee:					
(a) X 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 Ballay, Charles, , Dr.,					
Candidate Party Affiliation  Candidate Sought:  Can	State District				
(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.	District				
Name of Candidate					
Party Committee:					
(d) This committee is a (National, State (Democratic, or subordinate) committee of the Republican,					
Political Action Committee (PAC):					
(e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected	d organization is a:				
Corporation Corporation w/o Capital Stock Labor Or	ganization				
Membership Organization Trade Association Cooperat	-				
In addition, this committee is a Lobbyist/Registrant PAC.					
(f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee. (i.e., nonconnected committee)					
In addition, this committee is a Lobbyist/Registrant PAC.					
In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)					
(g) This committee is an independent expenditure-only political committee (Super PAC).					
In addition, this committee is a Lobbyist/Registrant PAC.					
(h) This committee is a political committee with both contribution and non-contribution accounts (Hybrid PA	C).				
In addition, this committee is a Lobbyist/Registrant PAC.					
Joint Fundraising Representative:					
(i) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.					
This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.					
Committees Participating in Joint Fundraiser					
1C					
C					

ı	FEC Form 1 (Revised 0	2/2009)		Page <b>3</b>
٧	Vrite or Type Committee Name Charles Ballay for	or President 2024		
6.		rganization, Affiliated Committee, Jo	 pint Fundraising Representa	tive, or Leadership PAC Sponsor
	NONE			
	Mailing Address			
			<u> </u>	
		1		
		CITY ▲	STATE	ZIP CODE ▲
	Relationship: Connected	Organization Affiliated Organization	Joint Fundraising Repre	
7.	Custodian of Records: Idention books and records.	fy by name, address (phone number	optional) and position of the p	erson in possession of committee
	Ballay, Cha	urles, , Dr.,		
	Full Name	547 Baronne Street		
	Mailing Address			
		503B		
		New Orleans	LA	
		CITY ▲	STATE	E ▲ ZIP CODE ▲
	Title or Position ▼			
	Custodian of Records		Telephone number	713 - 301 - 3475
8.	any designated agent (e.g., a	,	of the treasurer of the comm	nittee; and the name and address of
	Full Name Ballay, Cha of Treasurer	ırles, , Dr.,		
	Mailing Address	547 Baronne Street		
	-	503B		
		New Orleans		70113
	Title or Position ▼	CITY ▲	STATE	E ▲ ZIP CODE ▲
			Telephone number	713 - 301 - 3475

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Full Name of Designated Agent	Ballay, Lisa, , ,		
Mailing Address	547 Baronne Street		
	503B		
	New Orleans	LA L	70113
Title or Decition	CITY A	STATE ▲	ZIP CODE ▲
Title or Position		ı	
	Telephone	number	
Banks or Other safety deposit bo	Depositories: List all banks or other depositories in which the commes or maintains funds.	nittee deposits fu	unds, holds accounts, rents
Name of Bank, D	epository, etc.		
	Hancock Whitney Bank		
Mailing Address	8300 Hwy 23		
	Belle Chasse	LA	70037
	CITY ▲	STATE ▲	ZIP CODE ▲
Name of Bank, D	epository, etc.		•
Mailing Address			
	CITY ▲	STATE ▲	ZIP CODE ▲