


STATEMENT OF ORGANIZATION		OFFICE USE ONLY
1. Name and Address of Committee THE JOHN KENNEDY CAMPAIGN COMMITTEE INC. PO Box 80794 Baton Rouge, LA 70898 Check If: New Committee _____	2. Date of this Statement <div style="text-align: center;">1/13/2014</div> 3. Estimated Membership <div style="text-align: center;">1000</div> 4. Amended Statement? <div style="text-align: center;"> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No </div>	Report Number: 38174 Date Filed: 1/13/2014 <div style="text-align: right;">  </div>
5. All Committee Officers and Directors (including Chairperson, Treasurer, if any, and any other committee officers and directors) <div style="display: flex; justify-content: space-between;"> a. <u>Name</u> b. <u>Position</u> c. <u>Address</u> </div> <div style="text-align: center; margin-top: 10px;">Chairperson</div> <div style="text-align: center; margin-top: 10px;">Treasurer</div>		
6. Affiliated Organizations (Any organization, other than a political committee, which directly or indirectly established, administers, or financially supports this committee.) <div style="display: flex; justify-content: space-between;"> a. <u>Name</u> b. <u>Address</u> c. Relationship to Committee </div>		
7. All Depositories for Committee Funds (committee funds must be deposited in one or more banks or savings and loan institutions or money market mutual funds.) <div style="display: flex; justify-content: space-between;"> a. <u>Name</u> b. <u>Address</u> </div> <div style="text-align: center; margin-top: 10px;">On attached sheet</div>		
8. IF THIS COMMITTEE SUPPORTS A SINGLE CANDIDATE: a. Check one: <input checked="" type="checkbox"/> Principal Campaign Committee <input type="checkbox"/> Subsidiary Committee		
b. Name of Candidate JOHN NEELY KENNEDY	c. Office Sought by the Candidate Treasurer State of Louisiana State of Louisiana	
9. a. Name of Person Preparing Report BURLAND & ASSOCIATES b. Daytime Telephone		
10. WE HEREBY CERTIFY that the information contained in this STATEMENT OF ORGANIZATION is true and correct to the best of our knowledge , information and belief. This <u>13th</u> day of <u>January</u> , <u>2014</u> . <div style="display: flex; justify-content: space-between; margin-top: 20px;"> <div style="width: 45%;"> _____ Signature of Committee/Chairperson <u>John Neely Kennedy</u> Signature of Committee Treasurer, if any </div> <div style="width: 45%;"> _____ Daytime Telephone <u>225-930-9033</u> Daytime Telephone </div> </div>		

7. All Depositories for Committee Funds (committee funds must be deposited in one or more banks or savings and loan institutions or money market mutual funds.)

a. Name

CAPITAL ONE

b. Address

440 Third Street
Baton Rouge, LA 70802

COMMITTEES WITH OVER 250 MEMBERS

The following certification is OPTIONAL and should be completed ONLY if it is applicable to your committee . Completion of this certification doubles the normal limitations on the amounts of contributions to candidates that are otherwise applicable to political committees.

11. WE HEREBY CERTIFY that the membership of this political committee exceeded two hundred fifty (250) members **as of December 31 of the calendar year immediately preceding the date of this STATEMENT OF ORGANIZATION**. We further certify that at least two hundred fifty (250) of the members of this political committee contributed at least fifty dollars (\$50.00) to this committee **during the calendar year immediately preceding the date of this STATEMENT OF ORGANIZATION**.

This 13th day of January, 2014 .

Signature of Committee/Chairperson

Daytime Telephone

John Neely Kennedy

Signature of Committee Treasurer, if any

225-930-9033

Daytime Telephone

Form 200, Rev. 3/98. Page Rev.10/02, Page Rev. 6/2008