2007-678

PERSONAL FINANCIAL DISCLOSURE FORM

2070809

1. FULL NAME FOSTER CAMPBELL FOSTER CAMPBELL	2. SPOUSE'S FULL NAME
3. RESIDENCE ADDRESS 12807 U.S. Hwy. 71, Elm Grove LA 71051	
4. SPOUSE'S OCCUPATION (if any)	
5. PRINCIPAL BUSINESS ADDRESS 1800 Jimmie Davis Hwy., Bossier City LA 71112	

6. THIS REPORT COVERS ~~CALENDAR YEAR~~ 1/1/06 - 9/4/07 7. CHECK IF AMENDED REPORT ✓

NOTE: Where amounts are required herein, indicate such amounts by use of one of the following categories:

I - less than $5,000;
II - $5,000 to $24,999;
III - $25,000 to $49,999;
IV - $50,000 to $99,999;
V - $100,000 to $199,999;
VI - $200,000 or more.

2007 SEP -4 PM 4:38

Use as many pages of each section of the form as are required. Machine copies of the form's pages may be used. Complete all sections (if not applicable, so indicate). Please type or print.

8. AFFIDAVIT

I do hereby certify, after having been first duly sworn, that the information contained in this personal financial disclosure form is true and correct to the best of my knowledge, information, and belief.

Foster Campbell
PERSON FILING REPORT

Sworn to and subscribed before me this 4th day of September 2007

W. Allen Miller
NOTARY PUBLIC
Wm. Allen Miller LA Bar Roll 25459

Form 400 Rev. 3/98 Page 3/98

PERSONAL FINANCIAL DISCLOSURE FORM

1. FULL NAME	2. SPOUSE'S FULL NAME
Foster L. Campbell	
3. RESIDENCE ADDRESS 12807 Highway 71, Elm Grove LA 71051	
4. SPOUSE'S OCCUPATION (if any)	
5. PRINCIPAL BUSINESS ADDRESS 1800 Jimmie Davis Hwy., Bossier City LA 71112	

6. THIS REPORT COVERS CALENDAR YEAR 2006 7. CHECK IF AMENDED REPORT _____

NOTE: Where amounts are required herein, indicate such amounts by use of one of the following categories:

I - less than $5,000;
II - $5,000 to $24,999;
III - $25,000 to $49,999;
IV - $50,000 to $99,999;
V - $100,000 to $199,999;
VI - $200,000 or more.

Use as many pages of each section of the form as are required. Machine copies of the form's pages may be used. Complete all sections (if not applicable, so indicate). Please type or print.

8. AFFIDAVIT

I do hereby certify, after having been first duly sworn, that the information contained in this personal financial disclosure form is true and correct to the best of my knowledge, information, and belief

Foster L. Campbell
PERSON FILING REPORT

Sworn to and subscribed before me this 4th day of September, 2007

Wm. Alan Miller
NOTARY PUBLIC

Form 400 Rev. 3/98, Page 3/98

Wm. ALAN MILLER
NOTARY PUBLIC
LA BAR ROLL NO. 25459
EAST BATON ROUGE PARISH, LA
MY COMMISSION EXPIRES AT DEATH

A. POSITIONS

The name, address of, position in, and amount of interest in each business in which you or your spouse (either individually or collectively) were a **director, officer, partner, member, or trustee** during the calendar year. (NOTE: For purposes of this section "business" is defined as any corporation, partnership, sole proprietorship, firm, enterprise, franchise, association, business, organization, self-employed individual, holding company, trust, or any other legal entity or person.)

1. INDIVIDUAL, SPOUSE OR BOTH	2. FULL NAME AND ADDRESS OF BUSINESS	3. POSITION	4. AMOUNT
xx INDIVIDUAL ___ SPOUSE ___ BOTH	Campbell Insurance Agency 1800 Jimmie Davis Hwy., Bossier City LA 71112	President	VI
xx INDIVIDUAL ___ SPOUSE ___ BOTH	Premier Insurance Agency 1800 Jimmie Davis Hwy., Bossier City LA 71112	President	IV
xx INDIVIDUAL ___ SPOUSE ___ BOTH	Campbell Farm 12807 Hwy 71 Elm Grove LA 71051	Owner	VI
XX INDIVIDUAL ___ SPOUSE ___ BOTH	Zach 1800 Jimmie Davis Hwy., Bossier City LA 71112	Partner	VI
___ INDIVIDUAL ___ SPOUSE ___ BOTH			
___ INDIVIDUAL ___ SPOUSE ___ BOTH			
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AMENDMENT

2007 SEP -5 PM 4:11

SEP-05-2007 10:34 PM ROBERTS,CHERRY & CO. 318 226 7150 P.02

A. POSITIONS

The name, address of position in, and amount of interest in each business in which you or your spouse (either individually or collectively) were a **director, officer, partner, member, or trustee** during the calendar year. (NOTE: For purposes of this section "business" is defined as any corporation, partnership, sole proprietorship, firm, enterprise, franchise, association, business, organization, self-employed individual, holding company, trust, or any other legal entity or person.)

1. INDIVIDUAL, SPOUSE OR BOTH	2. FULL NAME AND ADDRESS OF BUSINESS	3. POSITION	4. AMOUNT
xx INDIVIDUAL ___ SPOUSE ___ BOTH	Campbell Insurance Agency 1800 Jimmie Davis Hwy., Bossier City LA 71112	President	100 %
xx INDIVIDUAL ___ SPOUSE ___ BOTH	Premier Insurance Agency 1800 Jimmie Davis Hwy., Bossier City LA 71112	President	100 %
xx INDIVIDUAL ___ SPOUSE ___ BOTH	Campbell Farm 12807 Hwy 71 Elm Grove LA 71051	Owner	100 %
___ INDIVIDUAL ___ SPOUSE ___ BOTH	Zach 1800 Jimmie Davis Hwy., Bossier City LA 71112	Partner	33 %
___ INDIVIDUAL ___ SPOUSE ___ BOTH			
___ INDIVIDUAL ___ SPOUSE ___ BOTH			
___ INDIVIDUAL ___ SPOUSE ___ BOTH			
___ INDIVIDUAL ___ SPOUSE ___ BOTH			
___ INDIVIDUAL ___ SPOUSE ___ BOTH			
___ INDIVIDUAL ___ SPOUSE ___ BOTH			
___ INDIVIDUAL ___ SPOUSE ___ BOTH			

Form 400 Rev. 3/98 Page 3-99

B. BUSINESS INTERESTS

The name, address and amount of interest in each business with which your sole relationship during the calendar year was as an owner of an interest in excess of 10% held by you or your spouse (either individually or collectively). (NOTE: For purposes of this section "business" is defined as any corporation, partnership, sole proprietorship, firm, enterprise, franchise, association, business, organization, self-employed individual, holding company, trust, or any other legal entity or person.)

1. INDIVIDUAL, SPOUSE OR BOTH	2. FULL NAME AND ADDRESS OF BUSINESS	3. AMOUNT
xx INDIVIDUAL ___ SPOUSE ___ BOTH	Campbell Insurance Agency 1800 Jimmie Davis Hwy Bossier City LA 71112	VI
xx INDIVIDUAL ___ SPOUSE ___ BOTH	Premier Insurance Agency 1800 Jimmie Davis Hwy Bossier City LA 71112	IV
xx INDIVIDUAL ___ SPOUSE ___ BOTH	Campbell Farm 12807 Hwy 71 Elm Grove LA 71051	VI
xx INDIVIDUAL ___ SPOUSE ___ BOTH	Zach 1800 Jimmie Davis Hwy Bossier City LA 71112	VI
___ INDIVIDUAL ___ SPOUSE ___ BOTH		
___ INDIVIDUAL ___ SPOUSE ___ BOTH		
___ INDIVIDUAL ___ SPOUSE ___ BOTH		
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Form 400 Rev. 3/96 . Page 3/9B

AMENDMENT

SEP-05-2007 10:35 PM ROBERTS,CHERRY & CO. 318 226 1170 P.02

B. BUSINESS INTERESTS

The name, address and amount of interest in each business with which your sole relationship during the calendar year was as an owner of an interest in excess of 10% held by you or your spouse (either individually or collectively). (NOTE: For purposes of this section "business" is defined as any corporation, partnership, sole proprietorship, firm, enterprise, franchise, association, business, organization, self-employed individual, holding company, trust, or any other legal entity or person.)

1. INDIVIDUAL, SPOUSE OR BOTH	2. FULL NAME AND ADDRESS OF BUSINESS	3. AMOUNT
xx INDIVIDUAL ___ SPOUSE ___ BOTH	Campbell Insurance Agency 1800 Jimmie Davis Hwy Bossier City LA 71112	100%
xx INDIVIDUAL ___ SPOUSE ___ BOTH	Premier Insurance Agency 1800 Jimmie Davis Hwy Bossier City LA 71112	100%
xx INDIVIDUAL ___ SPOUSE ___ BOTH	Campbell Farm 12807 Hwy 71 Elm Grove LA 71051	100%
xx INDIVIDUAL ___ SPOUSE ___ BOTH	Zach 1800 Jimmie Davis Hwy Bossier City LA 71112	33%
___ INDIVIDUAL ___ SPOUSE ___ BOTH		
___ INDIVIDUAL ___ SPOUSE ___ BOTH		
___ INDIVIDUAL ___ SPOUSE ___ BOTH		
___ INDIVIDUAL ___ SPOUSE ___ BOTH		
___ INDIVIDUAL ___ SPOUSE ___ BOTH		
___ INDIVIDUAL ___ SPOUSE ___ BOTH		
___ INDIVIDUAL ___ SPOUSE ___ BOTH		

C. INCOME

The name, address, type and amount of each source of income in excess of $1,000 received by you or your spouse (either individually or collectively) during the calendar year. "Income" means any income from whatever source derived, including but not limited to the following types: compensation for services, including fees, salaries, commissions, and similar items; income derived from business; gains derived from dealings in property; interest, rents; royalties; dividends; annuities; income from life insurance and endowment contracts; pensions; income from discharge of indebtedness; distributive share of partnership income; and income from interest in an estate or trust. For income from compensation, give a very brief description of the services rendered. For income from mental health, medical health, or legal services, if the disclosure of the source of the income would reveal the identity of a patient or client, then either mental health, medical health or legal services should be given as the source.

1. INDIVIDUAL, SPOUSE OR BOTH	2. NAME AND ADDRESS OF SOURCE OF INCOME	3. TYPE	4. AMOUNT	5. DESCRIPTION OF SERVICES
xx INDIVIDUAL ____ SPOUSE ____ BOTH	State of Louisiana P.O. Box 94095 Baton Rouge LA 70804	Salary	III	Public Service Commission
xx INDIVIDUAL ____ SPOUSE ____ BOTH	Premier Insurance Agency 1800 Jimmie Davis Hwy Bossier City LA 71112	Salary	II	President of Agency
xx INDIVIDUAL ____ SPOUSE ____ BOTH	Campbell Insurance Agency 1800 Jimmie Davis Hwy Bossier City LA 71112	Salary	IV	President of Agency
xx INDIVIDUAL ____ SPOUSE ____ BOTH	Morgan Keegan 50 North Front Street Memphis TN 38103	Dividends	I	
xx INDIVIDUAL ____ SPOUSE ____ BOTH	Louisiana Health Services P.O. Box 98029 Baton Rouge LA 70898	Commis-sion	II	Commission on insurance written
xx INDIVIDUAL ____ SPOUSE ____ BOTH	American General 2727 Allen Parkway Houston TX 77019	Commis-sion	I	Commission on insurance written
xx INDIVIDUAL ____ SPOUSE ____ BOTH	Benefit Consulting Srvcs. 550 Boardwalk Bossier City LA 71111	Commis-sions	I	Commissions on insurance written
xx INDIVIDUAL ____ SPOUSE ____ BOTH	American Abstract Title 750 Southfield Road Shreveport LA 71105	Sale of land	IV	
xx INDIVIDUAL ____ SPOUSE ____ BOTH	French Engineering 1800 Jimmie Davis Hwy Bossier City LA 71112	Rent	II	
xx INDIVIDUAL ____ SPOUSE ____ BOTH	McBride Builders 1800 Jimmie Davis Hwy Bossier City LA 71112	Rent	II	

C. INCOME

The name, address, type and amount of each source of income in excess of $1,000 received by you or your spouse (either individually or collectively) during the calendar year. "Income" means any income from whatever source derived, including but not limited to the following types: compensation for services, including fees, salaries, commissions, and similar items; income derived from business; gains derived from dealings in property interest; rents; royalties, dividends; annuities, income from life insurance and endowment contracts; pensions; income from discharge of indebtedness; distributive share of partnership income; and income from interest in an estate or trust. For income from compensation, give a very brief description of the services rendered. For income from mental health, medical health, or legal services, if the disclosure of the source of the income would reveal the identity of a patient or client, then either mental health, medical health, or legal services should be given as the source.

1. INDIVIDUAL, SPOUSE OR BOTH	2. NAME AND ADDRESS OF SOURCE OF INCOME	3. TYPE	4. AMOUNT	5. DESCRIPTION OF SERVICES
xx INDIVIDUAL ____ SPOUSE ____ BOTH	Campbell Insurance Agency 1800 Jimmie Davis Hwy Bossier City LA 71112	Rent	II	
xx INDIVIDUAL ____ SPOUSE ____ BOTH	Angela Howell 304 Thompson Bossier City LA 71111	Rent	I	
xx INDIVIDUAL ____ SPOUSE ____ BOTH	W.J. Johnson Keithville LA	Sale of Hay	IV	
xx INDIVIDUAL ____ SPOUSE ____ BOTH	Red River Livestock Hwy 1 Coushatta LA	Sale of Cattle	IV	
xx INDIVIDUAL ____ SPOUSE ____ BOTH	First Commerce	Sale of Land	I	
xx INDIVIDUAL ____ SPOUSE ____ BOTH	Petro Chemical 416 Travis St. Shreveport LA 71101	Royalties	II	
xx INDIVIDUAL ____ SPOUSE ____ BOTH	Devon Energy 20 No. Broadway Oklahoma City OK	Lease Bonus	III	
xx INDIVIDUAL ____ SPOUSE ____ BOTH	KCS Resources 6100 So. Yale Tulsa OK 74136	Royalty	III	
xx INDIVIDUAL ____ SPOUSE ____ BOTH	U.S. Dept. of Agriculture P.O. Box 217 Benton LA 71006	Ag Program	II	
xx INDIVIDUAL ____ SPOUSE ____ BOTH	Agriculture & Forestry P.O. Box 3481 Baton Rouge LA	Timber Program	II	

Form 400 Rev. 3-98, Page 3/98

C. INCOME

The name, address, type and amount of each source of income in excess of $1,000 received by you or your spouse (either individually or collectively) during the calendar year. "Income" means any income from whatever source derived, including but not limited to the following types: compensation for services, including fees, salaries, commissions, and similar items; income derived from business; gains derived from dealings in property; interest; rents; royalties; dividends; annuities; income from life insurance and endowment; contracts; pensions; income from discharge of indebtedness; distributive share of partnership income; and income from interest in an estate or trust. For income from compensation, give a very brief description of the services rendered. For income from mental health, medical health, or legal services, if the disclosure of the source of the income would reveal the identity of a patient or client, then either mental health, medical health, or legal services should be given as the source.

1. INDIVIDUAL, SPOUSE OR BOTH	2. NAME AND ADDRESS OF SOURCE OF INCOME	3. TYPE	4. AMOUNT	5. DESCRIPTION OF SERVICES
_xx_ INDIVIDUAL ____ SPOUSE ____ BOTH	Louisiana FLBA FLCA P.O. Box 4806 Monroe LA 71211	Ag Program	II	
_xx_ INDIVIDUAL ____ SPOUSE ____ BOTH	Louisiana Ag Credit P.O. Box 478 Arcadia LA 71001	Ag Program	II	
____ INDIVIDUAL ____ SPOUSE ____ BOTH				
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____ INDIVIDUAL ____ SPOUSE ____ BOTH				
____ INDIVIDUAL ____ SPOUSE ____ BOTH				

D. REAL ESTATE HOLDINGS

The address and a short description (i.e., size, use of land) of each parcel of real property having a fair market value in excess of $2,000 in which you or your spouse (either individually or collectively) had an interest during the calendar year

1. INDIVIDUAL, SPOUSE OR BOTH	2. ADDRESS OF REAL PROPERTY	3. DESCRIPTION
xx INDIVIDUAL ____ SPOUSE ____ BOTH	1800 Jimmie Davis Hwy Bossier City LA 71112	Office Bldg. and 1.75 acres
xx INDIVIDUAL ____ SPOUSE ____ BOTH	Jimmie Davis Highway Bossier City LA	36 acres raw land - 1/3 interest
xx INDIVIDUAL ____ SPOUSE ____ BOTH	Lucky Road / Highway 4 Castor LA	133 acres of Timber land
xx INDIVIDUAL ____ SPOUSE ____ BOTH	12807 Hwy 71 Elm Grove LA	660 acres of farm land and home
xx INDIVIDUAL ____ SPOUSE ____ BOTH	Cottage Grove LA	60 acres of timber land - 1/2 interest
xx INDIVIDUAL ____ SPOUSE ____ BOTH	Fryburg LA	33 acres of timber land - 1/2 interest
xx INDIVIDUAL ____ SPOUSE ____ BOTH	Cypress Lake Benton LA	40 acres of timber land - 1/2 interest
xx INDIVIDUAL ____ SPOUSE ____ BOTH	304 Thompson Bossier City LA	Rent Property
xx INDIVIDUAL ____ SPOUSE ____ BOTH	2605 Rosedale BossierCity LA	Rent Property
____ INDIVIDUAL ____ SPOUSE ____ BOTH		
____ INDIVIDUAL ____ SPOUSE ____ BOTH		

Form 460 Rev. 3/98, Page 2 of 5

E. TRANSACTIONS

A brief description, the date, and amount of each purchase, sale, exchange, donation, or gift, other acquisition or disposition, in excess of $1,000 by you or your spouse (either individually or collectively) during the calendar year in any real property, and of any stocks, bonds, commodities futures, or other forms of securities, including but not limited to, any option to acquire and/or dispose of any stocks, bonds, commodities futures, other forms of securities, negotiable instruments, movable or immovable property, or any other interest.

1. INDIVIDUAL, SPOUSE OR BOTH	2. DESCRIPTION	3. DATE	4. AMOUNT
xx INDIVIDUAL ____ SPOUSE ____ BOTH	Purchase of 2605 Rosedale, Bossier City LA	2-15-06	III
xx INDIVIDUAL ____ SPOUSE ____ BOTH	Sale of Penn West	8-17-06	II
xx INDIVIDUAL ____ SPOUSE ____ BOTH	Sale of Penn West	10-6-06	II
xx INDIVIDUAL ____ SPOUSE ____ BOTH	Sale of Provident Energy	10-6-06	II
xx INDIVIDUAL ____ SPOUSE ____ BOTH	Purchase of Enterprise Production	8-17-06	II
xx INDIVIDUAL ____ SPOUSE ____ BOTH	Purchase of Federal Strat Value	10-06-06	II
xx INDIVIDUAL ____ SPOUSE ____ BOTH	Purchase of Provident Energy	5-4-06 5-31-06 6-9-06 6-30-06	II II I I
xx INDIVIDUAL ____ SPOUSE ____ BOTH	Sale30.76 acres Bienville Parish	10-13-06	IV
____ INDIVIDUAL ____ SPOUSE ____ BOTH			
____ INDIVIDUAL ____ SPOUSE ____ BOTH			
____ INDIVIDUAL ____ SPOUSE ____ BOTH			

Form 400 Rev. 3/08 , Page 3/8

F. LIABILITIES

The name, address, and amount of each liability in excess of $10,000 owed to any creditor by you or your spouse (either individually or collectively) during the calendar year. (NOTE: Exclude any loan secured by a personal motor vehicle, household furniture, or appliances if such loan does not exceed the purchase price of the item that secures it.)

1. INDIVIDUAL, SPOUSE OR BOTH	2. FULL NAME AND ADDRESS OF CREDITOR	3. AMOUNT
xx INDIVIDUAL ____ SPOUSE ____ BOTH	Louisiana Federal Land Bank P.O. Box 4806 Monroe LA 71211	IV
xx INDIVIDUAL ____ SPOUSE ____ BOTH	Louisiana Ag Credit PCA P.O.Box 478 Arcadia LA 71001	III
xx INDIVIDUAL ____ SPOUSE ____ BOTH	Community Bank & Trust 118 Jefferson St. Mansfield LA	IV
____ INDIVIDUAL ____ SPOUSE ____ BOTH		
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