

Post Office Box 4368 Baton Rouge, Louisiana 70821

TIER 2.1 PERSONAL FINANCIAL DISCLOSURE STATEMENT

✓ORIGINAL REPORT ☐AMENDED REPORT		This Report	Covers Calendar Ye	ar: 2010
currently hold an office that would	require me to	file a Tier 3 Pers	onal Financial Disclosure	Statement.
As such, I have completed Schedule E.				
Name of Filer (print full name)	yan Michael	DARtez		
Address (residence)3				
City, State, Zip	oungsville,	Louisiana,	70592	
Name of Board/Commission (N	D ABBREVIATIONS)	Louisiana	Board of Pha	RMACY
Date of Appointment:	ust 25,201	0		
Date of Appointment:	August 25	5,2016		
Name of Spouse (print full name)	Tiffa	ny LeBlanc	DARtez	
Spouse's Occupation	TREA.	SURER		
Principal Business Address	509	lefferson	S4.	
City, State, Zip	Letai	yette, Lou	LISI ANA , 70 501	
CHECK ONE: Neither I, nor any member of my imm business, or a personal or financial relimpartial performance of my duties. I have attached a statement describing	ationship, that ir	n any way poses a	conflict of interest, which w	ould affect the
Check all that apply:				
have filed my state income tax retu	ırn for the prev	ious year.		
☐ I have filed for an extension of my st	ate income tax	return for the p	revious year.	
have filed my federal income tax re	eturn for the pr	evious year.		
☐ I have filed for an extension of my fe NOTE: La. R.S. 42:1124.2.1 does personal financial disclosure st	not provide yo			n filing your
	<u>Certificat</u>	ion of Accura	cy	
I do hereby certify that the info	rmation contai	ined in this perso	onal financial disclosure st	atement is true
and correct to the best of my knowledg	ge and belief.		Ryan M D	inter
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Schedule A: Employment Information

Chec	k if not applicable	
Filer	Spouse	Full-Time Part-Time
Name o	f Employer:	Teche Drugs, INC.
J	ob Title:	PRESIDENT/Owner
J	ob Description:	Pharemacy Owner
Filer	Spouse	Full-Time Part-Time
Name o	f Employer:	Teche Deugs, INC.
]	ob Title:	Treasurer Book Keeper
J	ob Description:	Writes checks, pays bills, payrdl, merchandising
Filer	Spouse	☐ Full-Time
Name o	f Employer:	PhARMACY Business Consulting, L.C.
- - -	Job Title: Busines	s Consultant / Owner
]	Job Description:	Occasional Business Consulting for businessess
Filer	☐ Spouse	Full-Time Part-Time
Name o	f Employer:	
	Job Title:	
	Job Description:	

- You are required to disclose on SCHEDULE A employment information related to both you and your spouse.
- List the name of the employer; the title of the position; a brief description of the job; and disclosure as to whether the position is fulltime or part-time.

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Schedule B: Income from the State, Political

Check it not applicable Subdivisions, and/ or Gaming interests
Filer Spouse Business (where amount of interest exceeds 10%)
Type of Income: State Political Subdivision Gaming Interest
Name of Business (if applicable):
Name of Income Source: Board of Pharmacy - State of Louisiana
Address: 5615 Corporate Bluck. Stc. 8E
Name of Income Source: Board of Pharmacy - State of Louisiana Address: 5615 Corporate Blvol. Ste. 8 E City, State, Zip: Baton Rouge, 1A 70808
Amount of Income (exact dollar amount): \$ 75.00
Filer Spouse Business (where amount of interest exceeds 10%)
Type of Income: State Political Subdivision Gaming Interest
Name of Business (if applicable):
Name of Income Source:
Address:
City, State, Zip:
Amount of Income (exact dollar amount): \$
Filer Spouse Business (where amount of interest exceeds 10%)
Type of Income: State Political Subdivision Gaming Interest
Name of Business (if applicable):
Name of Income Source:
Address:
City, State, Zip:
Amount of Income (exact dollar amount): \$

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^{*} You are required to complete SCHEDULE B if you or your spouse received income from the State, any political subdivision, and/or a gaming interest OR if a business in which you or your spouse owns an interest which exceeds 10% (either individually or collectively) received income from the aforementioned sources.

^{*&}quot;Income" (for a business) means gross income less costs of goods sold, and operating expenses.

^{*} Income" (for an individual) means taxable income and shall not include any income received pursuant to a life insurance policy.

^{*} The definitions for (and examples of) political subdivision, gaming Interest, and business are found in the Instructions Section of this form.

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Schedule C: Positions - Business

☐ Check if not applicable
Filer Spouse Both
Amount of Interest (where interest exceeds 10%): 50 %
Name of Business: Teche Drugs, Inc.
Address: 509 Jefferson St.
City, State, Zip: La fayette, La 10501
Business Description: Pharmacy
Nature of Association:
□Filer ☑Spouse □Both
Amount of Interest (where interest exceeds 10%):%
Name of Business: Teche Drus, Inc.
Address: 509 Jefferson St.
City, State, Zip: Lafayette, LA 70501
Business Description: Pharmacy
Nature of Association:
Filer Spouse Both
Amount of Interest (where interest exceeds 10%):%
Name of Business: Pharmacy Business Consulting, LLC
Address: 332 Mill Fond Dr
City, State, Zip: Vourgoville, LA 70592
Business Description: Business Consulting
Nature of Association: Ocone

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^{*} You are required to complete SCHEDULE C if you or your spouse is a director, officer, owner, partner, member, or trustee of a business <u>and</u> if you or your spouse (either individually or collectively) owns an interest in a business which exceeds 10%.

^{* &}quot;Business" means any corporation, partnership, sole proprietorship, firm, enterprise, franchise, association, business, organization, self-employed individual, holding company, trust, or any other legal entity or person.

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Schedule C: Positions - Business

Filer Spouse Both
Amount of Interest (where interest exceeds 10%): 50 %
Name of Business: RTE Gulf South Sales, LLC
Address: 509 Jefferson St.
City, State, Zip: Lafayette, LA 70501
Business Description: Buying and Selling of Fire Arms, Ammo, Etc.
Nature of Association: Owner
□Filer ■Spouse □Both
Amount of Interest (where interest exceeds 10%):%
Name of Business: RTE Gulf South Sales, LLC
Address: 509 Jefferson St.
City, State, Zip: Lafayette, LA 7050
Business Description: Buying and Selling of Fire Arms, Amno, Etc.
Nature of Association:
Filer Spouse Both
Amount of Interest (where interest exceeds 10%):%
Name of Business:
Address:
City, State, Zip:
Business Description:
Nature of Association:

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Check if not applicable

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^{*} You are required to complete SCHEDULE C if you or your spouse is a director, officer, owner, partner, member, or trustee of a business <u>and</u> if you or your spouse (either individually or collectively) owns an interest in a business which exceeds 10%.

^{* &}quot;Business" means any corporation, partnership, sole proprietorship, firm, enterprise, franchise, association, business, organization, self-employed individual, holding company, trust, or any other legal entity or person.

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Schedule D: Positions - Nonprofit

Filer Spouse	
Name of Organization:	
Address:	
City, State, Zip:	
Nature of Association:	
Description of Organization:	
Filer Spouse	
Name of Organization:	
Address:	
City, State, Zip:	
Nature of Association:	
Description of Organization:	
□Filer □Spouse	
Name of Organization:	
Address:	
City, State, Zip:	
Nature of Association:	
Description of Organization:	

*You are required to complete SCHEDULE D if you or your spouse Is a director or officer of a nonprofit agency.

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Schedule E: Other Offices/Positions Held

Name of Office/Position:	Louisiana Pharmacists Association (LPA)- BOARD DF DIRECTORS
Name of Office/Position:	
Name of Office/Position:	
Name of Office/Position:	

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^{*}You are required to complete SCHEDULE E if you hold any other office or position which would require you to file a personal financial disclosure statement under Section 1124.3.

^{* &}quot;Public Office" means any state, parish, municipal, ward, district, or other office or position that is filled by election of the voters.

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Schedule F: Contributions (Made within one year of appointment - in excess of \$1,000)

Date of Appointment: August 25 Compensation: \$	5, <u>20</u> 10	9/20/2010
	Candidate Name: <u>Carrence Bobby Jin</u> Amount of Contribution and/or Loan: \$ 500	
Date of Appointment: August 2 Compensation: \$	5,2010	10/6/2010
	Candidate Name: Governor Booky Ju Amount of Contribution and/or Loan: \$ 100	
Date of Appointment: August 21 Compensation: \$	5,2010 	2/8/2011
	Candidate Name: <u>Courner Bobby Ju</u> Amount of Contribution and/or Loan: \$ 1,00	ndal 10.00
Date of Appointment: August &	<u>15,2010</u>	2/8/11
	Candidate Name: Governor Bobby To Amount of Contribution and/or Loan: \$ 1,000	
Date of Appointment: Compensation: \$		
	Candidate Name: Amount of Contribution and/or Loan: \$	

* You are only required to disclose contributions or loans made within one year of appointment.

* "Loan" means a transfer of money, property, or anything of value in exchange for obligation to repay in whole or in part, made for the purpose of supporting, opposing, or otherwise influencing the nomination for election, or election, of any person to public office.

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Check if not applicable

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^{*} You are required to complete SCHEDULE F if you are appointed to a state board or commission and subject to annual financial statements as required by 42:1124.2.1 and you made a contribution in excess of \$ 1,000 to campaign of the official who appointed you.

^{* &}quot;Candidate" means a person who seeks nomination or election to public office, except the office of president or vice president of the United States, presidential elector, delegate to a political party convention, United States senator, United States congressman, or political party office.

^{*&}quot;Public Office" means any state, parish, municipal, ward, district, or other office or position that is filled by election of the voters, except the president or vice president of the United States, presidential elector, delegate to the political party convention, U.S. Senator, U.S. Congressman, or a political party office.

^{* &}quot;Contribution" means a gift, conveyance, payment, or deposit of money or anything of value, or the forgiveness of a loan or of a debt, made for the purpose of supporting, opposing, or otherwise influencing the nomination or election of a person to public office, whether made before or after the election.