

TIER 1 PERSONAL FINANCIAL DISCLOSURE STATEMENT (ANNUAL)

I currently hold an office that would require me to file a Tier 2, Tier 2.1, or Tier 3 Personal Financial Disclosure Statement. As such, I have completed SCHEDULE D.

This Report Covers Calendar Year: 2014

- ORIGINAL REPORT
 AMENDED REPORT
 FINAL REPORT WHERE TERM ENDS IN JANUARY (COVERING JANUARY 1 THROUGH JANUARY)
 A final report must be filed on or before May 15 of the year in which your service to that office ends.
 Refer to the "GENERAL INFORMATION" sheet of this form to determine eligibility.

Office/Position Held: LA Commissioner of A&B Forestry

Name of Filer (print full name): Michael G "Mike" Strain Dum

Address (residence): 19607 Hwy 36

City, State, Zip: Covington LA 70433

Name of Spouse(if applicable) (print full name): Susan J Strain Dum

Spouse's Occupation: VETERINARIAN

Principal Business Address: 19607 Hwy 36

City, State, Zip: Covington LA 70433

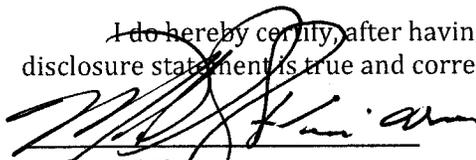
Check all that apply:

- I have filed my state income tax return for the previous year.
 I have filed for an extension of my state income tax return for the previous year.
 I have filed my federal income tax return for the previous year.
 I have filed for an extension of my federal income tax return for the previous year.

NOTE: La. R.S. 42:1124.1 DOES NOT provide you the opportunity to request an extension in filing your personal financial disclosure statement.

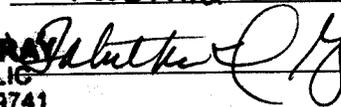
Certification of Accuracy

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


 Signature of Filer

Sworn to and subscribed before me this 11 day of May, 2015

Tabitha I. Gray
 Notary Public (print name)


 Notary Public (signature)



TABITHA I. GRAY
 NOTARY PUBLIC
 NOTARY ID # 59741
 STATE OF LOUISIANA
 Permanent Commission ID# _____

HAND DELIVERED

Date Commission Expires _____

LOUISIANA BOARD OF ETHICS

Post Office Box 4368
Baton Rouge, Louisiana 70821

Schedule A: Employment Information

Check if not applicable

Filer Spouse Full-Time Part-Time

Name of Employer: STATE of LOUISIANA

Job Title: Commissioner of LA Dept of Ag. Forestry

Job Description: Chief Executive

Filer Spouse Full-Time Part-Time

Name of Employer: Clairborne Hill VETERINARY Hospital

Job Title: VETERINARIAN

Job Description: Practitioner/OWNER

Filer Spouse Full-Time Part-Time

Name of Employer: Clairborne Hill Veterinary Hospital

Job Title: Veterinarian

Job Description: Practitioner/owner

Filer Spouse Full-Time Part-Time

Name of Employer: _____

Job Title: _____

Job Description: _____

- You are required to complete SCHEDULE A to disclose employment information related to both you and your spouse(if applicable).
- 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 full-time or part-time.

LOUISIANA BOARD OF ETHICS

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Schedule B: Positions - Business

Check if not applicable

Filer Spouse Both

Amount of Interest (where interest exceeds 10%): 100 %

Name of Business: Chalson's Hill Veterinary Hospital

Address: 19607 Hwy 36

City, State, Zip: Covington LA 70433

Business Description: Veterinary Hospital

Nature of Association: Partnership Proprietorship

Filer Spouse Both

Amount of Interest (where interest exceeds 10%): 50 %

Name of Business: Fontainebleau LLC

Address: 19607 Hwy 36

City, State, Zip: Covington LA 70433

Business Description: Real Estate

Nature of Association: LLC

Filer Spouse Both

Amount of Interest (where interest exceeds 10%): _____ %

Name of Business: _____

Address: _____

City, State, Zip: _____

Business Description: _____

Nature of Association: _____

* You are required to complete SCHEDULE B if you or your spouse is a director, officer, owner, partner, member, or trustee of a business OR if you or your spouse (either individually or collectively) owns an interest in a business which exceeds 10%.
* "Business" means any corporation, partnership, limited liability company, sole proprietorship, firm, enterprise, franchise, association, business, organization, self-employed individual, holding company, trust, or any other legal entity or person.

LOUISIANA BOARD OF ETHICS

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Schedule C: Positions - Nonprofit

Check if not applicable

Filer Spouse

Name of Organization: NASDA
National Association of STATE Depts of AG

Address: 4350 Fairway Drive Ste 910

City, State, Zip: Arlington VA 22003

Nature of Association: Member / Second V-P

Description of Organization: - national Policy Organization

Filer Spouse

Name of Organization: SASDA
Southern Association of STATE Depts of AG

Address: P.O. Box 631

City, State, Zip: Baton Rouge LA 70821

Nature of Association: Member

Description of Organization: Development & promotion of Southern Ag+Forestry

Filer Spouse

Name of Organization: SUSTA
Southern United States Trade Association

Address: 701 Poydras ST Ste 3725

City, State, Zip: New Orleans LA 70139

Nature of Association: member

Description of Organization: AG Export Trade Development Assoc.

*You are required to complete SCHEDULE C if you or your spouse is a director or officer of a nonprofit organization.

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Schedule C: Positions - Nonprofit

Check if not applicable

Filer Spouse

Name of Organization: Keep Louisiana Beautiful

Address: 17170 Perkins Rd

City, State, Zip: Baton Rouge LA 70810

Nature of Association: Treasurer

Description of Organization: Anti-Litter

Filer Spouse

Name of Organization: Republican Professional Women of 55 Territory

Address: 19607 Hwy 36

City, State, Zip: Covington LA 70433

Nature of Association: Immediate Past President

Description of Organization: Political organization

Filer Spouse

Name of Organization: Republican As Commission Committee

Address: 1015 15th St N.W. Ste 1000

City, State, Zip: Washington D.C. 20005

Nature of Association: Chairman

Description of Organization: Political organization/PAC

*You are required to complete SCHEDULE C if you or your spouse is a director or officer of a nonprofit organization.

LOUISIANA BOARD OF ETHICS

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Schedule D: Other Offices/Positions Held

Check if not applicable (Positions that would require the filing of a Tier 2, Tier 2.1, or Tier 3
Personal Financial Disclosure Statement)

Name of Office/Position:	<i>NASDA National Assoc of STATE Depts of AG Research Foundation Member</i>
Name of Office/Position:	<i>Louisiana Emergency Response Commission Member</i>
Name of Office/Position:	<i>Agricultural Chemistry and Seed Commission Member</i>
Name of Office/Position:	<i>Boll weevil Eradication Commission Member</i>
Name of Office/Position:	<i>Dairy Industry Promotion Board Member</i>
Name of Office/Position:	<i>Horticulture Commission of Louisiana Member</i>
Name of Office/Position:	<i>Livestock Brand Commission Member</i>
Name of Office/Position:	<i>Louisiana Agriculture Committee Commission Member</i>
Name of Office/Position:	<i>Louisiana Agriculture Finance Authority Chairman</i>
Name of Office/Position:	<i>Louisiana Aquatic Chlorophyll Research and Promotion Board (Member)</i>

* You are required to complete SCHEDULE D if you hold any other office or position which would require you to file a personal financial disclosure statement under La. R.S. 42:1124.2, 42:1124.2.1, or 42:1124.3.

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Schedule D: Other Offices/Positions Held

Check if not applicable (Positions that would require the filing of a Tier 2, Tier 2.1, or Tier 3
Personal Financial Disclosure Statement)

Name of Office/Position:	Louisiana Board of Animal Health Member
Name of Office/Position:	Louisiana Dept of Ag & Forestry Commissioner
Name of Office/Position:	Louisiana Egg Commission Member
Name of Office/Position:	LA Rice Promotion Board Member
Name of Office/Position:	LA Rice Research Board Member
Name of Office/Position:	LA Soybean and Grain Research Promotion Board Member
Name of Office/Position:	LA Beef Industry Council ex-officio
Name of Office/Position:	LA State Cotton Museum Council Board Member
Name of Office/Position:	LA Sweet Potato Industry and Development Commission member
Name of Office/Position:	LA Strawberry Marketing Board Member

* You are required to complete SCHEDULE D if you hold any other office or position which would require you to file a personal financial disclosure statement under La. R.S. 42:1124.2, 42:1124.2.1, or 42:1124.3.

Schedule D: Other Offices/Positions Held

Check if not applicable (Positions that would require the filing of a Tier 2, Tier 2.1, or Tier 3
 Personal Financial Disclosure Statement)

Name of Office/Position:	<u>Structural Pest Control Commission</u> <u>Member</u>
Name of Office/Position:	<u>The Water Resources Commission</u> <u>member</u>
Name of Office/Position:	<u>Southern United State Trade Association</u> <u>Member</u>
Name of Office/Position:	<u>Fertilizer, Liming and Seed Commission</u> <u>Member</u>
Name of Office/Position:	<u>Shrimp Task Force</u> <u>member</u>
Name of Office/Position:	<u>Southern Association of State Depts of PG</u> <u>Members</u>
Name of Office/Position:	<u>Stephenson Disaster Management Institute</u> <u>Board Member</u>
Name of Office/Position:	<u>Governor's Office of Homeland Security and</u> <u>Emergency Preparedness</u> <u>Member</u>
Name of Office/Position:	_____
Name of Office/Position:	_____

LOUISIANA BOARD OF ETHICS

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Schedule E: Immovable Property

Check if not applicable (where the value of the interest in the parcel exceeds \$2,000)

Address or Location of Property:

Filer Spouse Both

State: LA Parish/County: E. Baton Rouge

Address: 627 North 9th St Baton Rouge LA 70802

Description of Property:

Residence

Value of the Interest in the Parcel by Category:

Category I (less than \$5,000) Category II (\$5,000-\$24,999) Category III (\$25,000-\$49,999)
 Category IV (\$50,000-\$99,999) Category V (\$100,000-\$199,999) Category VI (\$200,000 or more)

Address or Location of Property:

Filer Spouse Both

State: LA Parish/County: St Tammany

Address: 19607 Hwy 36 Covington LA 70433

Description of Property:

Veterinary Hospital & Residence

Value of the Interest in the Parcel by Category:

Category I (less than \$5,000) Category II (\$5,000-\$24,999) Category III (\$25,000-\$49,999)
 Category IV (\$50,000-\$99,999) Category V (\$100,000-\$199,999) Category VI (\$200,000 or more)

Address or Location of Property:

Filer Spouse Both

State: LA Parish/County: St Tammany

Address: 19589 Hwy 36 Covington LA 70433

Description of Property:

Rental House

Value of the Interest in the Parcel by Category:

Category I (less than \$5,000) Category II (\$5,000-\$24,999) Category III (\$25,000-\$49,999)
 Category IV (\$50,000-\$99,999) Category V (\$100,000-\$199,999) Category VI (\$200,000 or more)

* You are required to disclose the address, if any, and if no address, the location by state, and parish/county.

* Fair market value and use value are determined by the assessor for purposes of ad valorem taxes.

LOUISIANA BOARD OF ETHICS

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Schedule E: Immovable Property

Check if not applicable (where the value of the interest in the parcel exceeds \$2,000)

Address or Location of Property: [] Filer [] Spouse [x] Both
State: LA Parish/County: ST TAMMANY
Address: 59 9 Abito Springs Avenue Abito Springs LA
Description of Property: - rural property -
Value of the Interest in the Parcel by Category: [] Category I [] Category II [x] Category III [] Category IV [] Category V [] Category VI

Address or Location of Property: [] Filer [] Spouse [x] Both
State: LA Parish/County: ST TAMMANY
Address: 72067 Cypress ST Abito Springs LA 70426
Description of Property: Rental House
Value of the Interest in the Parcel by Category: [] Category I [] Category II [] Category III [x] Category IV [] Category V [] Category VI

Address or Location of Property: [] Filer [] Spouse [x] Both
State: LA Parish/County: ST TAMMANY
Address: 59 41 New Abito, Abito Springs LA
Description of Property: Rural Land
Value of the Interest in the Parcel by Category: [] Category I [] Category II [x] Category III [] Category IV [] Category V [] Category VI

* You are required to disclose the address, if any, and if no address, the location by state, and parish/county.
* Fair market value and use value are determined by the assessor for purposes of ad valorem taxes.

LOUISIANA BOARD OF ETHICS

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Schedule F: Income from the State, Political

Check if 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): STATE OF LA - OSUP

Name of Income Source: STATE OF LA - OSUP La Dept of Agric Forestry

Address: P.O. Box 94095

City, State, Zip: Baton Rouge LA 70804

Amount of Income (exact dollar amount): \$ 100,626.44

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: St Tammany Fire Dist # 12

Address: 19375 Hwy 36

City, State, Zip: Covington LA 70433

Amount of Income (exact dollar amount): \$ 900.00

Filer Spouse Business (where amount of interest exceeds 10%)

Type of Income: State Political Subdivision Gaming Interest

Name of Business (if applicable): Charbon Hill Veterinary Hospital

Name of Income Source: St Tammany Parish Sheriff's Office

Address: P.O. Box 1229

City, State, Zip: Slidell LA 70459

Amount of Income (exact dollar amount): \$ 873.86

* You are required to complete SCHEDULE F if you or your spouse received income (includes any income from public source such as employment income, retirement, etc.) 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.
*"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.

Schedule G: Income

Check if not applicable (income that exceeds \$1,000 from each source)

Filer Spouse

Name of Source of Income: Capital ONE N A

Address: PO Box 30249

City, State, Zip: Salt Lake City, UT 84130

Nature of Services Rendered: - Credit card Rebates - Credit Card

Type of Income: Rebates

Amount of Income: Category I (less than \$5,000) Category II (\$5,000-\$24,999) Category III (\$25,000-\$49,999)
 Category IV (\$50,000-\$99,999) Category V (\$100,000-\$199,999) Category VI (\$200,000 or more)

Filer Spouse

Name of Source of Income: Chisown Hill Veterinary Hospital

Address: 17607 Hwy 36

City, State, Zip: Covington LA 70433

Nature of Services Rendered: VETERINARY Hospital

Type of Income: Business / Professional

Amount of Income: Category I (less than \$5,000) Category II (\$5,000-\$24,999) Category III (\$25,000-\$49,999)
 Category IV (\$50,000-\$99,999) Category V (\$100,000-\$199,999) Category VI (\$200,000 or more)

Filer Spouse

Name of Source of Income: Wells Fargo Advisors

Address: 2 SANCTUARY BLVD

City, State, Zip: Mandeville LA 70471

Nature of Services Rendered: - Dividends / Interest / Investment

Type of Income: _____

Amount of Income: Category I (less than \$5,000) Category II (\$5,000-\$24,999) Category III (\$25,000-\$49,999)
 Category IV (\$50,000-\$99,999) Category V (\$100,000-\$199,999) Category VI (\$200,000 or more)

* You are required to complete SCHEDULE G if you or your spouse received income in excess of \$1,000 from each source of income.
 * "Income" (for an individual) means taxable income and shall not include any income received pursuant to a life insurance policy.
 * You are not required to disclose income derived from disability payments from any source; or child support or alimony payments contained in a court order.
 * Income that is reported on Schedule F does not have to be restated on SCHEDULE G.
 * If the income is derived from professional or consulting services and the disclosure of the source's name or address is prohibited by law or professional code, such income should be disclosed on SCHEDULE H.

Schedule G: Income

Check if not applicable (income that exceeds \$1,000 from each source)

Filer Spouse

Name of Source of Income: 72067 Cypress ST Rankin

Address: 72067 Cypress ST

City, State, Zip: Abbeville LA 70420

Nature of Services Rendered: Rent

Type of Income: Rent

Amount of Income: Category I (less than \$5,000) Category II (\$5,000-\$24,999) Category III (\$25,000-\$49,999)
 Category IV (\$50,000-\$99,999) Category V (\$100,000-\$199,999) Category VI (\$200,000 or more)

Filer Spouse

Name of Source of Income: _____

Address: _____

City, State, Zip: _____

Nature of Services Rendered: _____

Type of Income: _____

Amount of Income: Category I (less than \$5,000) Category II (\$5,000-\$24,999) Category III (\$25,000-\$49,999)
 Category IV (\$50,000-\$99,999) Category V (\$100,000-\$199,999) Category VI (\$200,000 or more)

Filer Spouse

Name of Source of Income: _____

Address: _____

City, State, Zip: _____

Nature of Services Rendered: _____

Type of Income: _____

Amount of Income: Category I (less than \$5,000) Category II (\$5,000-\$24,999) Category III (\$25,000-\$49,999)
 Category IV (\$50,000-\$99,999) Category V (\$100,000-\$199,999) Category VI (\$200,000 or more)

* You are required to complete SCHEDULE G if you or your spouse received income in excess of \$1,000 from each source of income.
 * "Income" (for an individual) means taxable income and shall not include any income received pursuant to a life insurance policy.
 * You are not required to disclose income derived from disability payments from any source; or child support or alimony payments contained in a court order.
 * Income that is reported on Schedule F does not have to be restated on SCHEDULE G.
 * If the income is derived from professional or consulting services and the disclosure of the source's name or address is prohibited by law or professional code, such income should be disclosed on SCHEDULE H.

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Schedule H: Income from Certain Professional or Consulting Services

CHECK if no income was received from professional or consulting services (including mental health, medical health, or legal services) when the disclosure of the name or address of the source of income would be prohibited by law or by a professional code.

UTILITIES	INDUSTRY TYPE	# OF CLIENTS	AMOUNT OF INCOME BY CATEGORY	INCOME RECIPIENT
	Electric		<input type="checkbox"/> I <input type="checkbox"/> II <input type="checkbox"/> III <input type="checkbox"/> IV <input type="checkbox"/> V <input type="checkbox"/> VI	<input type="checkbox"/> Filer <input type="checkbox"/> Spouse <input type="checkbox"/> Both
	Gas		<input type="checkbox"/> I <input type="checkbox"/> II <input type="checkbox"/> III <input type="checkbox"/> IV <input type="checkbox"/> V <input type="checkbox"/> VI	<input type="checkbox"/> Filer <input type="checkbox"/> Spouse <input type="checkbox"/> Both
	Telephone		<input type="checkbox"/> I <input type="checkbox"/> II <input type="checkbox"/> III <input type="checkbox"/> IV <input type="checkbox"/> V <input type="checkbox"/> VI	<input type="checkbox"/> Filer <input type="checkbox"/> Spouse <input type="checkbox"/> Both
	Water		<input type="checkbox"/> I <input type="checkbox"/> II <input type="checkbox"/> III <input type="checkbox"/> IV <input type="checkbox"/> V <input type="checkbox"/> VI	<input type="checkbox"/> Filer <input type="checkbox"/> Spouse <input type="checkbox"/> Both
	Cable Television Companies		<input type="checkbox"/> I <input type="checkbox"/> II <input type="checkbox"/> III <input type="checkbox"/> IV <input type="checkbox"/> V <input type="checkbox"/> VI	<input type="checkbox"/> Filer <input type="checkbox"/> Spouse <input type="checkbox"/> Both

TRANSPORTATION	INDUSTRY TYPE	# OF CLIENTS	AMOUNT OF INCOME BY CATEGORY	INCOME RECIPIENT
	Intrastate Companies		<input type="checkbox"/> I <input type="checkbox"/> II <input type="checkbox"/> III <input type="checkbox"/> IV <input type="checkbox"/> V <input type="checkbox"/> VI	<input type="checkbox"/> Filer <input type="checkbox"/> Spouse <input type="checkbox"/> Both
	Pipeline Companies		<input type="checkbox"/> I <input type="checkbox"/> II <input type="checkbox"/> III <input type="checkbox"/> IV <input type="checkbox"/> V <input type="checkbox"/> VI	<input type="checkbox"/> Filer <input type="checkbox"/> Spouse <input type="checkbox"/> Both
	Oil & Gas Exploration		<input type="checkbox"/> I <input type="checkbox"/> II <input type="checkbox"/> III <input type="checkbox"/> IV <input type="checkbox"/> V <input type="checkbox"/> VI	<input type="checkbox"/> Filer <input type="checkbox"/> Spouse <input type="checkbox"/> Both
	Oil & Gas Production		<input type="checkbox"/> I <input type="checkbox"/> II <input type="checkbox"/> III <input type="checkbox"/> IV <input type="checkbox"/> V <input type="checkbox"/> VI	<input type="checkbox"/> Filer <input type="checkbox"/> Spouse <input type="checkbox"/> Both
	Oil & Gas Retailers		<input type="checkbox"/> I <input type="checkbox"/> II <input type="checkbox"/> III <input type="checkbox"/> IV <input type="checkbox"/> V <input type="checkbox"/> VI	<input type="checkbox"/> Filer <input type="checkbox"/> Spouse <input type="checkbox"/> Both

FINANCE & INSURANCE	INDUSTRY TYPE	# OF CLIENTS	AMOUNT OF INCOME BY CATEGORY	INCOME RECIPIENT
	Banks		<input type="checkbox"/> I <input type="checkbox"/> II <input type="checkbox"/> III <input type="checkbox"/> IV <input type="checkbox"/> V <input type="checkbox"/> VI	<input type="checkbox"/> Filer <input type="checkbox"/> Spouse <input type="checkbox"/> Both
	Savings & Loan Assoc.		<input type="checkbox"/> I <input type="checkbox"/> II <input type="checkbox"/> III <input type="checkbox"/> IV <input type="checkbox"/> V <input type="checkbox"/> VI	<input type="checkbox"/> Filer <input type="checkbox"/> Spouse <input type="checkbox"/> Both
	Loan and/or Finance		<input type="checkbox"/> I <input type="checkbox"/> II <input type="checkbox"/> III <input type="checkbox"/> IV <input type="checkbox"/> V <input type="checkbox"/> VI	<input type="checkbox"/> Filer <input type="checkbox"/> Spouse <input type="checkbox"/> Both
	Manufacturing Firms		<input type="checkbox"/> I <input type="checkbox"/> II <input type="checkbox"/> III <input type="checkbox"/> IV <input type="checkbox"/> V <input type="checkbox"/> VI	<input type="checkbox"/> Filer <input type="checkbox"/> Spouse <input type="checkbox"/> Both
	Mining Companies		<input type="checkbox"/> I <input type="checkbox"/> II <input type="checkbox"/> III <input type="checkbox"/> IV <input type="checkbox"/> V <input type="checkbox"/> VI	<input type="checkbox"/> Filer <input type="checkbox"/> Spouse <input type="checkbox"/> Both
	Life Insurance Companies		<input type="checkbox"/> I <input type="checkbox"/> II <input type="checkbox"/> III <input type="checkbox"/> IV <input type="checkbox"/> V <input type="checkbox"/> VI	<input type="checkbox"/> Filer <input type="checkbox"/> Spouse <input type="checkbox"/> Both
	Casualty Insurance Comp.		<input type="checkbox"/> I <input type="checkbox"/> II <input type="checkbox"/> III <input type="checkbox"/> IV <input type="checkbox"/> V <input type="checkbox"/> VI	<input type="checkbox"/> Filer <input type="checkbox"/> Spouse <input type="checkbox"/> Both
Other Insurance Companies		<input type="checkbox"/> I <input type="checkbox"/> II <input type="checkbox"/> III <input type="checkbox"/> IV <input type="checkbox"/> V <input type="checkbox"/> VI	<input type="checkbox"/> Filer <input type="checkbox"/> Spouse <input type="checkbox"/> Both	

Schedule I: Investment Holdings
 (a holding that exceeds \$1,000 in value)

Check if not applicable

Filer Spouse Both

Name of Security: Bank of America Inc

Description of Security: Common Stock

Value by category: Category I (less than \$5,000) Category II (\$5,000-\$24,999) Category III (\$25,000-\$49,999)
 Category IV (\$50,000-\$99,999) Category V (\$100,000-\$199,999) Category VI (\$200,000 or more)

Filer Spouse Both

Name of Security: Merck & Co Inc.

Description of Security: Common Stock

Value by category: Category I (less than \$5,000) Category II (\$5,000-\$24,999) Category III (\$25,000-\$49,999)
 Category IV (\$50,000-\$99,999) Category V (\$100,000-\$199,999) Category VI (\$200,000 or more)

Filer Spouse Both

Name of Security: Pfizer Corp.

Description of Security: Common Stock

Value by category: Category I (less than \$5,000) Category II (\$5,000-\$24,999) Category III (\$25,000-\$49,999)
 Category IV (\$50,000-\$99,999) Category V (\$100,000-\$199,999) Category VI (\$200,000 or more)

* You are required to complete SCHEDULE I if you or your spouse holds investment securities that have a value that exceeds \$1,000 each.
 * You are not required to disclose variable annuities, variable life insurance, variable universal life insurance, whole life insurance, any other life insurance product, mutual funds, education investment accounts, retirement investment accounts, government bonds, and cash/cash equivalent investments.
 * You are not required to disclose information concerning any property held and administered for any person other than you or your spouse under a trust, tutorship, curatorship, or other custodial instrument.

LOUISIANA BOARD OF ETHICS

Post Office Box 4368
Baton Rouge, Louisiana 70821

Schedule I: Investment Holdings

(a holding that exceeds \$1,000 in value)

Check if not applicable

<input type="checkbox"/> Filer <input type="checkbox"/> Spouse <input checked="" type="checkbox"/> Both
Name of Security: <i>Chevron Corporation</i>
Description of Security: <i>Common Stock</i>
Value by category: <input type="checkbox"/> Category I (less than \$5,000) <input type="checkbox"/> Category II (\$5,000-\$24,999) <input type="checkbox"/> Category III (\$25,000-\$49,999) <input type="checkbox"/> Category IV (\$50,000-\$99,999) <input checked="" type="checkbox"/> Category V (\$100,000-\$199,999) <input type="checkbox"/> Category VI (\$200,000 or more)
<input type="checkbox"/> Filer <input type="checkbox"/> Spouse <input checked="" type="checkbox"/> Both
Name of Security: <i>Eli Lilly & Co Inc</i>
Description of Security: <i>Common Stock</i>
Value by category: <input type="checkbox"/> Category I (less than \$5,000) <input type="checkbox"/> Category II (\$5,000-\$24,999) <input type="checkbox"/> Category III (\$25,000-\$49,999) <input type="checkbox"/> Category IV (\$50,000-\$99,999) <input type="checkbox"/> Category V (\$100,000-\$199,999) <input checked="" type="checkbox"/> Category VI (\$200,000 or more)
<input type="checkbox"/> Filer <input type="checkbox"/> Spouse <input checked="" type="checkbox"/> Both
Name of Security: <i>Express Scripts HLDG Co.</i>
Description of Security: <i>Common Stock</i>
Value by category: <input type="checkbox"/> Category I (less than \$5,000) <input type="checkbox"/> Category II (\$5,000-\$24,999) <input checked="" type="checkbox"/> Category III (\$25,000-\$49,999) <input type="checkbox"/> Category IV (\$50,000-\$99,999) <input type="checkbox"/> Category V (\$100,000-\$199,999) <input type="checkbox"/> Category VI (\$200,000 or more)

* You are required to complete SCHEDULE I if you or your spouse holds investment securities that have a value that exceeds \$1,000 each.
* You are not required to disclose variable annuities, variable life insurance, variable universal life insurance, whole life insurance, any other life insurance product, mutual funds, education investment accounts, retirement investment accounts, government bonds, and cash/cash equivalent investments.
* You are not required to disclose information concerning any property held and administered for any person other than you or your spouse under a trust, tutorship, curatorship, or other custodial instrument.

LOUISIANA BOARD OF ETHICS

Post Office Box 4368
Baton Rouge, Louisiana 70821

Schedule I: Investment Holdings

(a holding that exceeds \$1,000 in value)

Check if not applicable

<input type="checkbox"/> Filer <input type="checkbox"/> Spouse <input checked="" type="checkbox"/> Both
Name of Security: <i>Financial Select Sector SPDR</i>
Description of Security: <i>Common Stock</i>
Value by category: <input type="checkbox"/> Category I (less than \$5,000) <input checked="" type="checkbox"/> Category II (\$5,000-\$24,999) <input type="checkbox"/> Category III (\$25,000-\$49,999) <input type="checkbox"/> Category IV (\$50,000-\$99,999) <input type="checkbox"/> Category V (\$100,000-\$199,999) <input type="checkbox"/> Category VI (\$200,000 or more)
<input type="checkbox"/> Filer <input type="checkbox"/> Spouse <input checked="" type="checkbox"/> Both
Name of Security: <i>Intel Corp</i>
Description of Security: <i>Common Stock</i>
Value by category: <input type="checkbox"/> Category I (less than \$5,000) <input type="checkbox"/> Category II (\$5,000-\$24,999) <input type="checkbox"/> Category III (\$25,000-\$49,999) <input type="checkbox"/> Category IV (\$50,000-\$99,999) <input checked="" type="checkbox"/> Category V (\$100,000-\$199,999) <input type="checkbox"/> Category VI (\$200,000 or more)
<input type="checkbox"/> Filer <input type="checkbox"/> Spouse <input checked="" type="checkbox"/> Both
Name of Security: <i>Marathon Oil Corp</i>
Description of Security: <i>Common Stock</i>
Value by category: <input type="checkbox"/> Category I (less than \$5,000) <input checked="" type="checkbox"/> Category II (\$5,000-\$24,999) <input type="checkbox"/> Category III (\$25,000-\$49,999) <input type="checkbox"/> Category IV (\$50,000-\$99,999) <input type="checkbox"/> Category V (\$100,000-\$199,999) <input type="checkbox"/> Category VI (\$200,000 or more)

* You are required to complete SCHEDULE I if you or your spouse holds investment securities that have a value that exceeds \$1,000 each.
* You are not required to disclose variable annuities, variable life insurance, variable universal life insurance, whole life insurance, any other life insurance product, mutual funds, education investment accounts, retirement investment accounts, government bonds, and cash/cash equivalent investments.
* You are not required to disclose information concerning any property held and administered for any person other than you or your spouse under a trust, tutorship, curatorship, or other custodial instrument.

Schedule I: Investment Holdings
 (a holding that exceeds \$1,000 in value)

Check if not applicable

<input type="checkbox"/> Filer <input type="checkbox"/> Spouse <input checked="" type="checkbox"/> Both Name of Security: <div style="text-align: center; font-size: 1.2em; margin-top: 10px;"><i>Schlumberger LTD</i></div>
Description of Security: <div style="text-align: center; font-size: 1.2em; margin-top: 10px;"><i>Common Stock</i></div>
Value by category: <input type="checkbox"/> Category I (less than \$5,000) <input type="checkbox"/> Category II (\$5,000-\$24,999) <input type="checkbox"/> Category III (\$25,000-\$49,999) <input checked="" type="checkbox"/> Category IV (\$50,000-\$99,999) <input type="checkbox"/> Category V (\$100,000-\$199,999) <input type="checkbox"/> Category VI (\$200,000 or more)
<input type="checkbox"/> Filer <input type="checkbox"/> Spouse <input checked="" type="checkbox"/> Both Name of Security: <div style="text-align: center; font-size: 1.2em; margin-top: 10px;"><i>AT&T</i></div>
Description of Security: <div style="text-align: center; font-size: 1.2em; margin-top: 10px;"><i>Common Stock</i></div>
Value by category: <input type="checkbox"/> Category I (less than \$5,000) <input type="checkbox"/> Category II (\$5,000-\$24,999) <input type="checkbox"/> Category III (\$25,000-\$49,999) <input checked="" type="checkbox"/> Category IV (\$50,000-\$99,999) <input type="checkbox"/> Category V (\$100,000-\$199,999) <input type="checkbox"/> Category VI (\$200,000 or more)
<input type="checkbox"/> Filer <input type="checkbox"/> Spouse <input checked="" type="checkbox"/> Both Name of Security: <div style="text-align: center; font-size: 1.2em; margin-top: 10px;"><i>Phillips 66</i></div>
Description of Security: <div style="text-align: center; font-size: 1.2em; margin-top: 10px;"><i>Common Stock</i></div>
Value by category: <input type="checkbox"/> Category I (less than \$5,000) <input type="checkbox"/> Category II (\$5,000-\$24,999) <input type="checkbox"/> Category III (\$25,000-\$49,999) <input checked="" type="checkbox"/> Category IV (\$50,000-\$99,999) <input type="checkbox"/> Category V (\$100,000-\$199,999) <input type="checkbox"/> Category VI (\$200,000 or more)

* You are required to complete SCHEDULE I if you or your spouse holds investment securities that have a value that exceeds \$1,000 each.
 * You are not required to disclose variable annuities, variable life insurance, variable universal life insurance, whole life insurance, any other life insurance product, mutual funds, education investment accounts, retirement investment accounts, government bonds, and cash/cash equivalent investments.
 * You are not required to disclose information concerning any property held and administered for any person other than you or your spouse under a trust, tutorship, curatorship, or other custodial instrument.

LOUISIANA BOARD OF ETHICS

Post Office Box 4368
Baton Rouge, Louisiana 70821

Schedule I: Investment Holdings

(a holding that exceeds \$1,000 in value)

Check if not applicable

<input type="checkbox"/> Filer <input type="checkbox"/> Spouse <input checked="" type="checkbox"/> Both
Name of Security: <i>Time Warner Cable</i>
Description of Security: <i>Common Stock</i>
Value by category: <input type="checkbox"/> Category I (less than \$5,000) <input checked="" type="checkbox"/> Category II (\$5,000-\$24,999) <input type="checkbox"/> Category III (\$25,000-\$49,999) <input type="checkbox"/> Category IV (\$50,000-\$99,999) <input type="checkbox"/> Category V (\$100,000-\$199,999) <input type="checkbox"/> Category VI (\$200,000 or more)
<input type="checkbox"/> Filer <input type="checkbox"/> Spouse <input checked="" type="checkbox"/> Both
Name of Security: <i>Time Warner Inc NEW</i>
Description of Security: <i>Common Stock</i>
Value by category: <input type="checkbox"/> Category I (less than \$5,000) <input checked="" type="checkbox"/> Category II (\$5,000-\$24,999) <input type="checkbox"/> Category III (\$25,000-\$49,999) <input type="checkbox"/> Category IV (\$50,000-\$99,999) <input type="checkbox"/> Category V (\$100,000-\$199,999) <input type="checkbox"/> Category VI (\$200,000 or more)
<input type="checkbox"/> Filer <input type="checkbox"/> Spouse <input type="checkbox"/> Both
Name of Security:
Description of Security:
Value by category: <input type="checkbox"/> Category I (less than \$5,000) <input type="checkbox"/> Category II (\$5,000-\$24,999) <input type="checkbox"/> Category III (\$25,000-\$49,999) <input type="checkbox"/> Category IV (\$50,000-\$99,999) <input type="checkbox"/> Category V (\$100,000-\$199,999) <input type="checkbox"/> Category VI (\$200,000 or more)

* You are required to complete SCHEDULE I if you or your spouse holds investment securities that have a value that exceeds \$1,000 each.
* You are not required to disclose variable annuities, variable life insurance, variable universal life insurance, whole life insurance, any other life insurance product, mutual funds, education investment accounts, retirement investment accounts, government bonds, and cash/cash equivalent investments.
* You are not required to disclose information concerning any property held and administered for any person other than you or your spouse under a trust, tutorship, curatorship, or other custodial instrument.

LOUISIANA BOARD OF ETHICS

Post Office Box 4368
Baton Rouge, Louisiana 70821

Schedule J: Transactions

Check if not applicable

(a transaction that exceeds \$1,000)

Filer Spouse Both

Transaction Date: 3/20/15

Description of Transaction:

Purchase Bank of America Stock

Amount of Transaction:

Category I (less than \$5,000) Category II (\$5,000-\$24,999) Category III (\$25,000-\$49,999)
 Category IV (\$50,000-\$99,999) Category V (\$100,000-\$199,999) Category VI (\$200,000 or more)

Filer Spouse Both

Transaction Date: _____

Description of Transaction:

Amount of Transaction:

Category I (less than \$5,000) Category II (\$5,000-\$24,999) Category III (\$25,000-\$49,999)
 Category IV (\$50,000-\$99,999) Category V (\$100,000-\$199,999) Category VI (\$200,000 or more)

Filer Spouse Both

Transaction Date: _____

Description of Transaction:

Amount of Transaction:

Category I (less than \$5,000) Category II (\$5,000-\$24,999) Category III (\$25,000-\$49,999)
 Category IV (\$50,000-\$99,999) Category V (\$100,000-\$199,999) Category VI (\$200,000 or more)

* You are required to complete SCHEDULE J if you or your spouse purchased or sold any immovable property, personally owned tax credit certificates, stocks, bonds, or commodities futures THAT EXCEED \$1,000 EACH, including any option to acquire or dispose of any immovable property or of any personally owned tax credit certificates, stocks, bonds, or commodities futures.

* You ARE NOT REQUIRED to report information concerning variable annuities, variable life insurance, or variable universal life insurance.

Schedule K: Liabilities

Check if not applicable

(a liability that exceeds \$10,000)

Filer Spouse

Name of Creditor: Wells Fargo Advisors

Address: 2 Sanctuary Blvd

City, State, Zip: Monroe LA 70001

Name of Guarantor (if applicable): Michael G. Strain DVM

Nature of Liability: Margin Account Securities

Amount of liability: Category I (less than \$5,000) Category II (\$5,000-\$24,999) Category III (\$25,000-\$49,999)

Category IV (\$50,000-\$99,999) Category V (\$100,000-\$199,999) Category VI (\$200,000 or more)

Filer Spouse

Name of Creditor: _____

Address: _____

City, State, Zip: _____

Name of Guarantor (if applicable): _____

Nature of Liability: _____

Amount of liability: Category I (less than \$5,000) Category II (\$5,000-\$24,999) Category III (\$25,000-\$49,999)

Category IV (\$50,000-\$99,999) Category V (\$100,000-\$199,999) Category VI (\$200,000 or more)

Filer Spouse

Name of Creditor: _____

Address: _____

City, State, Zip: _____

Name of Guarantor (if applicable): _____

Nature of Liability: _____

Amount of liability: Category I (less than \$5,000) Category II (\$5,000-\$24,999) Category III (\$25,000-\$49,999)

Category IV (\$50,000-\$99,999) Category V (\$100,000-\$199,999) Category VI (\$200,000 or more)

* You are required to complete SCHEDULE K if you or your spouse (either individually or collectively) owes a liability that exceeds \$10,000 each.

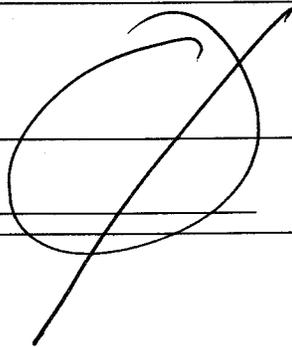
* You are not required to disclose any loan secured by movable property, if such loan does not exceed the purchase price of the movable property which secures the loan.

* You are not required to disclose any liability, secured or unsecured, which is guaranteed by you or your spouse for a business in which you or your spouse owns any interest, provided that the liability is in the name of the business and, if the liability is a loan, that you or your spouse does not use proceeds from the loan for personal use unrelated to business.

* You are not required to disclose any loan from an immediate family member, unless such family member is a registered lobbyist, or his principal or employer is a registered lobbyist, or he employs or is a principal of a registered lobbyist, or unless such family member has a contract with the State.

Schedule L: Contributions

Check if not applicable (made within one year of employment- in excess of \$1,000)

Date of Employment: _____	Salary: \$ _____
Candidate's Name: _____	
Amount of Contribution or Loan: \$ _____	
	
Date of Employment: _____	Salary: \$ _____
Candidate's Name: _____	
Amount of Contribution or Loan: \$ _____	
Date of Employment: _____	Salary: \$ _____
Candidate's Name: _____	
Amount of Contribution or Loan: \$ _____	
Date of Employment: _____	Salary: \$ _____
Candidate's Name: _____	
Amount of Contribution or Loan: \$ _____	
Date of Employment: _____	Salary: \$ _____
Candidate's Name: _____	
Amount of Contribution or Loan: \$ _____	

* You are required to complete SCHEDULE L if you are 1) directly employed by a *statewide elected official* to serve as an agency head AND you made a contribution or loan in excess of \$1,000 to the campaign of the official who employed you; and/or, 2) appointed to a state board or commission AND you made a contribution or loan in excess of \$1,000 to a campaign of the official who appointed you.
 * You are only required to disclose contributions or loans made within one year of employment or appointment.
 * "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.
 * "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.
 * "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.