

2015

TIER 1 PERSONAL FINANCIAL DISCLOSURE STATEMENT

(FOR CANDIDATES)

This Report Covers Calendar Year: 2015

- ORIGINAL REPORT
- AMENDED REPORT

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.

Office/Position Sought: Commissioner of Agric. For Incumbent: Yes No

Date of Election: October 24, 2015

Name of Filer (print full name): Adrian Stephen Juttner

Address (residence): 72256 KUSTENMACHER Rd

City, State, Zip: Abita Sprngs, LA - 70420

Name of Spouse (if applicable) (print full name): Adrienne Cox Juttner

Spouse's Occupation: Retired teacher

Principal Business Address: Same

City, State, Zip: _____

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. 18:1495.7 and R.S. 42:1124.1 does not provide you the opportunity to request an extension in filing your personal financial disclosure statement.

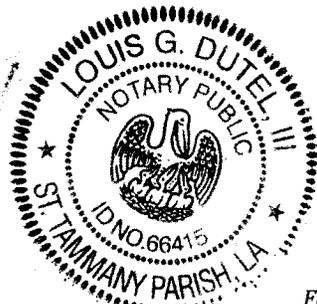
I am a candidate in an election to be held prior to April 15 and I have not filed my tax return for the previous year.

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]
Signature of Filer

Sworn to and subscribed before me this 11th day of Sept., 2015.



Louis G Dutelle
Notary Public (print name)

[Signature]
Notary Public (signature)

ID# 66415

Date Commission Expires AT DEATH

Schedule A: Employment Information

Check if not applicable

Filer Spouse Full-Time Part-Time

Name of Employer: Adrian's Tree Service, Inc

Job Title: President

Job Description: Tree service, horticultural pest control
bee keeper, consultant

Filer Spouse Full-Time Part-Time

Name of Employer: retired

Job Title: _____

Job Description: _____

Filer Spouse Full-Time Part-Time

Name of Employer: _____

Job Title: _____

Job Description: _____

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.

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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: Adrian's Tree Service
Address: P.O. Box 306
City, State, Zip: Abita Springs, LA 70420
Business Description: _____
Nature of Association: _____

Filer Spouse Both
Amount of Interest (where interest exceeds 10%): _____ %
Name of Business: _____
Address: _____
City, State, Zip: NA
Business Description: _____
Nature of Association: _____

Filer Spouse Both
Amount of Interest (where interest exceeds 10%): _____ %
Name of Business: _____
Address: _____
City, State, Zip: NA
Business Description: _____
Nature of Association: _____

Filer Spouse Both
Amount of Interest (where interest exceeds 10%): _____ %
Name of Business: _____
Address: _____
City, State, Zip: NA
Business Description: _____
Nature of Association: _____

* You are required to complete SCHEDULE B if you or your spouse is a director, officer, stockholder, 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.

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SCHEDULE C: POSITIONS – NONPROFIT

Check if not applicable

<input type="checkbox"/> Filer <input type="checkbox"/> Spouse Name of Organization: _____ Address: _____ City, State, Zip: _____ Nature of Association: _____ Description of Organization: _____ _____
<input type="checkbox"/> Filer <input type="checkbox"/> Spouse Name of Organization: _____ Address: _____ City, State, Zip: _____ Nature of Association: _____ Description of Organization: _____ _____
<input type="checkbox"/> Filer <input type="checkbox"/> Spouse Name of Organization: _____ Address: _____ City, State, Zip: _____ Nature of Association: _____ Description of Organization: _____ _____
<input type="checkbox"/> Filer <input type="checkbox"/> Spouse Name of Organization: _____ Address: _____ City, State, Zip: _____ Nature of Association: _____ Description of Organization: _____ _____

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

Schedule D: Other Offices/Positions Held

(Positions that would require the filing of a Tier 2, Tier 2.1, or Tier 3 Personal Financial Disclosure Statement)

Check if not applicable

Name of Office/Position: _____

* 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 E: Immovable Property

(where the value of the interest in the parcel exceeds \$2,000)

Check if not applicable

Address or Location of Property:		<input type="checkbox"/> Filer	<input type="checkbox"/> Spouse	<input checked="" type="checkbox"/> Both
State: <u>LA</u>	Parish/County: <u>St. Tammany</u>			
Address: <u>72256 Kustenmaech Rd Abita 70420</u>				
Description of Property: <u>House, principal residence on 2 1/2 acres</u>				
Value of the Interest in the Parcel 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)		
Address or Location of Property:		<input type="checkbox"/> Filer	<input type="checkbox"/> Spouse	<input checked="" type="checkbox"/> Both
State: <u>LA</u>	Parish/County: <u>Orleans</u>			
Address: <u>1400 SAUZ LAKE, N.O. LA 70118</u>				
Description of Property: <u>Vacant lot - citrus orchard and beer yard</u>				
Value of the Interest in the Parcel 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)		
Address or Location of Property:		<input type="checkbox"/> Filer	<input type="checkbox"/> Spouse	<input type="checkbox"/> Both
State: _____	Parish/County: _____			
Address: _____				
Description of Property: _____				
Value of the Interest in the Parcel 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)		
Address or Location of Property:		<input type="checkbox"/> Filer	<input type="checkbox"/> Spouse	<input type="checkbox"/> Both
State: _____	Parish/County: _____			
Address: _____				
Description of Property: _____				
Value of the Interest in the Parcel 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 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.

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Schedule F: Income from the State, Political Subdivisions, and/or Gaming Interests

Check if not applicable

<input type="checkbox"/> Filer <input type="checkbox"/> Spouse <input type="checkbox"/> Business (where amount of interest exceeds 10%) Type of Income: <input type="checkbox"/> State <input type="checkbox"/> Political Subdivision <input type="checkbox"/> Gaming Interest Name of Business (if applicable): _____ Name of Income Source: _____ Address: _____ City, State, Zip: _____ Amount of Income (exact dollar amount): \$ _____
<input type="checkbox"/> Filer <input type="checkbox"/> Spouse <input type="checkbox"/> Business (where amount of interest exceeds 10%) Type of Income: <input type="checkbox"/> State <input type="checkbox"/> Political Subdivision <input type="checkbox"/> Gaming Interest Name of Business (if applicable): _____ Name of Income Source: _____ Address: _____ City, State, Zip: _____ Amount of Income (exact dollar amount): \$ _____
<input type="checkbox"/> Filer <input type="checkbox"/> Spouse <input type="checkbox"/> Business (where amount of interest exceeds 10%) Type of Income: <input type="checkbox"/> State <input type="checkbox"/> Political Subdivision <input type="checkbox"/> Gaming Interest Name of Business (if applicable): _____ Name of Income Source: _____ Address: _____ City, State, Zip: _____ Amount of Income (exact dollar amount): \$ _____
<input type="checkbox"/> Filer <input type="checkbox"/> Spouse <input type="checkbox"/> Business (where amount of interest exceeds 10%) Type of Income: <input type="checkbox"/> State <input type="checkbox"/> Political Subdivision <input type="checkbox"/> Gaming Interest Name of Business (if applicable): _____ Name of Income Source: _____ Address: _____ City, State, Zip: _____ Amount of Income (exact dollar amount): \$ _____

* 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.

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Schedule G: Income (income that exceeds \$1,000 from each source)

Check if not applicable

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)

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.

Check if not applicable

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	

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Schedule H: Income From Certain Professional or Consulting Services (continued)

Check if not applicable

RETAIL COMPANIES	INDUSTRY TYPE	# OF CLIENTS	AMOUNT OF INCOME BY CATEGORY	INCOME RECIPIENT
	Beer 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
Wine 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
Liquor 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
Beverage Distributors			<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
ASSOCIATIONS	INDUSTRY TYPE	# OF CLIENTS	AMOUNT OF INCOME BY CATEGORY	INCOME RECIPIENT
	Trade		<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
Professional			<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	INDUSTRY TYPE	# OF CLIENTS	AMOUNT OF INCOME BY CATEGORY	INCOME RECIPIENT
			<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
			<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

* You are required to complete SCHEDULE H if you or your spouse received income from a professional or consulting service (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.

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

CATEGORY RANGES:

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)

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

Check if not applicable

<input checked="" type="checkbox"/> Filer <input type="checkbox"/> Spouse <input type="checkbox"/> Both Name of Security: <u>Diageo PLC</u> Description of Security: <u>Common stock ADR</u> 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 checked="" type="checkbox"/> Filer <input type="checkbox"/> Spouse <input type="checkbox"/> Both Name of Security: <u>Gen Electric</u> Description of Security: <u>Stock</u> Value by Category: <input checked="" 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)
<input type="checkbox"/> Filer <input type="checkbox"/> Spouse <input type="checkbox"/> Both Name of Security: <u>Halyal Health + Kimberly Clark</u> Description of Security: <u>Stock</u> 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 checked="" type="checkbox"/> Filer <input type="checkbox"/> Spouse <input type="checkbox"/> Both Name of Security: <u>SPDR</u> Description of Security: <u>Index fund.</u> 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.

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Schedule J: Transactions (a transaction that exceeds \$1,000)

Check if not applicable

<input checked="" type="checkbox"/> Filer <input type="checkbox"/> Spouse <input type="checkbox"/> Both Transaction Date: <u>June 2015</u> Description of Transaction: <u>Bought Diago</u> Amount of Transaction: <input checked="" 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 checked="" type="checkbox"/> Filer <input type="checkbox"/> Spouse <input type="checkbox"/> Both Transaction Date: <u>July 2015</u> Description of Transaction: <u>Sold \$8K in PSRP funds</u> Amount of Transaction: <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 Transaction Date: _____ Description of Transaction: _____ Amount of Transaction: <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)
<input type="checkbox"/> Filer <input type="checkbox"/> Spouse <input type="checkbox"/> Both Transaction Date: _____ Description of Transaction: _____ Amount of Transaction: <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 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, 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.

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Schedule K: Liabilities (a liability that exceeds \$10,000)

Check if not applicable

<input type="checkbox"/> Filer <input type="checkbox"/> Spouse Name of Creditor: _____ Address: _____ City, State, Zip: _____ Name of Guarantor (if applicable): _____ Nature of Liability: _____ Amount of liability: <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)
<input type="checkbox"/> Filer <input type="checkbox"/> Spouse Name of Creditor: _____ Address: _____ City, State, Zip: _____ Name of Guarantor (if applicable): _____ Nature of Liability: _____ Amount of liability: <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)
<input type="checkbox"/> Filer <input type="checkbox"/> Spouse Name of Creditor: _____ Address: _____ City, State, Zip: _____ Name of Guarantor (if applicable): _____ Nature of Liability: _____ Amount of liability: <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)
<input type="checkbox"/> Filer <input type="checkbox"/> Spouse Name of Creditor: _____ Address: _____ City, State, Zip: _____ Name of Guarantor (if applicable): _____ Nature of Liability: _____ Amount of liability: <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 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.

LOUISIANA BOARD OF ETHICS

Post Office Box 4368
Baton Rouge, Louisiana 70821

Schedule L: Contributions (made within one year of employment - in excess of \$1,000)

Check if not applicable

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.