

LOUISIANA
ETHICS ADMINISTRATION
CAMPAIGN FINANCE
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LOUISIANA BOARD OF ETHICS
Post Office Box 4368
Baton Rouge, Louisiana 70821

TIER 2 PERSONAL FINANCIAL DISCLOSURE STATEMENT (FOR CANDIDATES)

This Report Covers Calendar Year: 2016

ORIGINAL REPORT

AMENDED REPORT

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

Office Sought: Public Service Commissioner Dutant? Incumbent: Yes No

Date of Election: Oct. 14, 2017

Name of Filer (print full name): Damon Joseph Baldone

Mailing Address: 4107 Bayou Black Drive

City, State, Zip: Houma, LA 70360

Name of Spouse (if applicable) (print full name): N/A

Spouse's Occupation: _____

Spouse's Principal Business Address: _____

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 42:1124.2 does not provide candidates the opportunity to request an extension in filing their personal financial disclosure statements.

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.

Certificate of Accuracy

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

Damon J. Baldone
Signature of Filer

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Schedule A: Employment Information

Check if not applicable

| |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <input checked="" type="checkbox"/> Filer <input type="checkbox"/> Spouse <input checked="" type="checkbox"/> Full-Time <input type="checkbox"/> Part-Time Name of Employer: <u>Damon J. Baldone, A Professional Law Corporation</u> Job Title: <u>Attorney</u> Job Description: <u>Legal work</u> |
| <input type="checkbox"/> Filer <input type="checkbox"/> Spouse <input type="checkbox"/> Full-Time <input type="checkbox"/> Part-Time Name of Employer: _____ Job Title: _____ Job Description: _____ |
| <input type="checkbox"/> Filer <input type="checkbox"/> Spouse <input type="checkbox"/> Full-Time <input type="checkbox"/> Part-Time Name of Employer: _____ Job Title: _____ Job Description: _____ |
| <input type="checkbox"/> Filer <input type="checkbox"/> Spouse <input type="checkbox"/> Full-Time <input type="checkbox"/> Part-Time Name of Employer: _____ Job Title: _____ Job Description: _____ |

- You are required 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.
- Self-employment information is reported on Schedule B.

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SCHEDULE B: POSITIONS – BUSINESS

Check if not applicable

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| <input checked="" type="checkbox"/> Filer <input type="checkbox"/> Spouse <input type="checkbox"/> Both Amount of Interest: <u>100</u> % Name of Business: <u>Damon J. Baldove, APC</u> Address: <u>162 New Orleans Blvd.</u> City, State, Zip: <u>Houma, LA 70364</u> Business Description: <u>Law Firm</u> Nature of Association: <u>Legal work</u> |
| <input checked="" type="checkbox"/> Filer <input type="checkbox"/> Spouse <input type="checkbox"/> Both Amount of Interest: <u>100</u> % Name of Business: <u>Damon J. Baldove LLC</u> Address: <u>162 New Orleans Blvd.</u> City, State, Zip: <u>Houma, LA 70364</u> Business Description: <u>Rentd Real Estate</u> Nature of Association: <u>Owner</u> |
| <input checked="" type="checkbox"/> Filer <input type="checkbox"/> Spouse <input type="checkbox"/> Both Amount of Interest: <u>100</u> % Name of Business: <u>Chateau Creole Apartments, LLC</u> Address: <u>162 New Orleans Blvd.</u> City, State, Zip: <u>Houma, LA 70364</u> Business Description: <u>Apartments</u> Nature of Association: <u>Owner</u> |
| <input checked="" type="checkbox"/> Filer <input type="checkbox"/> Spouse <input type="checkbox"/> Both Amount of Interest: <u>100</u> % Name of Business: <u>Colonial Village Apartments, LLC</u> Address: <u>162 New Orleans Blvd.</u> City, State, Zip: <u>Houma, LA 70364</u> Business Description: <u>Apartments</u> Nature of Association: <u>Owner</u> |

* 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 AND if you or your spouse (either individually or collectively) owns an interest in a business which exceeds ten percent.

* "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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Check if not applicable

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| <input checked="" type="checkbox"/> Filer <input type="checkbox"/> Spouse <input type="checkbox"/> Both Amount of Interest: <u>45 %</u> Name of Business: <u>LOUISIANA Connection Network, LLC</u> Address: <u>162 New Orleans Blvd.</u> City, State, Zip: <u>Houma, LA 70364</u> Business Description: <u>Television Station</u> Nature of Association: <u>Co-owner</u> |
| <input checked="" type="checkbox"/> Filer <input type="checkbox"/> Spouse <input type="checkbox"/> Both Amount of Interest: <u>100 %</u> Name of Business: <u>Baldone Oil & Gas, LLC</u> Address: <u>162 New Orleans Blvd.</u> City, State, Zip: <u>Houma, LA 70364</u> Business Description: <u>Oil & Gas properties</u> Nature of Association: <u>Owner</u> |
| <input checked="" type="checkbox"/> Filer <input type="checkbox"/> Spouse <input type="checkbox"/> Both Amount of Interest: <u>39 %</u> Name of Business: <u>Bacara Bridge Gaming, LLC</u> Address: <u>162 New Orleans Blvd.</u> City, State, Zip: <u>Houma, LA 70364</u> Business Description: <u>Tenck stop</u> Nature of Association: <u>Co-owner</u> |
| <input checked="" type="checkbox"/> Filer <input type="checkbox"/> Spouse <input type="checkbox"/> Both Amount of Interest: <u>39 %</u> Name of Business: <u>Bacara Bridge Land Investment, LLC</u> Address: <u>162 New Orleans Blvd.</u> City, State, Zip: <u>Houma, LA 70364</u> Business Description: <u>land owner</u> Nature of Association: <u>Co-owner</u> |

* 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 AND if you or your spouse (either individually or collectively) owns an interest in a business which exceeds ten percent.

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Check if not applicable

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| <input checked="" type="checkbox"/> Filer <input type="checkbox"/> Spouse <input type="checkbox"/> Both Amount of Interest: <u>100 %</u> Name of Business: <u>Baldone Real Estate, LLC</u> Address: <u>162 New Orleans Blvd.</u> City, State, Zip: <u>Houma, LA 70364</u> Business Description: <u>Real Estate Broker</u> Nature of Association: <u>Managing/ Buying + Selling Real estate for clients</u> |
| <input checked="" type="checkbox"/> Filer <input type="checkbox"/> Spouse <input type="checkbox"/> Both Amount of Interest: <u>100 %</u> Name of Business: <u>Baldone Offshore, LLC</u> Address: <u>162 New Orleans Blvd.</u> City, State, Zip: <u>Houma, LA 70364</u> Business Description: <u>Offshore Trust Support Vessel</u> Nature of Association: <u>Owner</u> |
| <input checked="" type="checkbox"/> Filer <input type="checkbox"/> Spouse <input type="checkbox"/> Both Amount of Interest: <u>100 %</u> Name of Business: <u>Bayou Farm, LLC</u> Address: <u>162 New Orleans Blvd.</u> City, State, Zip: <u>Houma, LA 70364</u> Business Description: <u>Apartment</u> Nature of Association: <u>Owner</u> |
| <input checked="" type="checkbox"/> Filer <input type="checkbox"/> Spouse <input type="checkbox"/> Both Amount of Interest: <u>100 %</u> Name of Business: <u>Baldone Investment Group, LLC</u> Address: <u>162 New Orleans Blvd.</u> City, State, Zip: <u>Houma, LA 70364</u> Business Description: <u>Investment holding + management</u> Nature of Association: <u>Owner</u> |

* 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 AND if you or your spouse (either individually or collectively) owns an interest in a business which exceeds ten percent.

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Check if not applicable

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| <input checked="" type="checkbox"/> Filer <input type="checkbox"/> Spouse <input type="checkbox"/> Both Amount of Interest: <u>100 %</u> Name of Business: <u>Plushious Trace Apartments, LLC</u> Address: <u>162 New Orleans Blvd.</u> City, State, Zip: <u>Houma, LA 70364</u> Business Description: <u>Apartments</u> Nature of Association: <u>Owner</u> |
| <input type="checkbox"/> Filer <input type="checkbox"/> Spouse <input type="checkbox"/> Both Amount of Interest: <u>55 %</u> Name of Business: <u>Baltech, Inc.</u> Address: <u>162 New Orleans Blvd.</u> City, State, Zip: <u>Houma, LA 70364</u> Business Description: <u>Pharmaceutical</u> Nature of Association: <u>President</u> |
| <input type="checkbox"/> Filer <input type="checkbox"/> Spouse <input type="checkbox"/> Both Amount of Interest: <u>33 1/2 %</u> Name of Business: <u>Tenaburne Aviation, Inc.</u> Address: <u>162 New Orleans Blvd.</u> City, State, Zip: <u>Houma, LA 70364</u> Business Description: <u>Airplane</u> Nature of Association: <u>President</u> |
| <input checked="" type="checkbox"/> Filer <input type="checkbox"/> Spouse <input type="checkbox"/> Both Amount of Interest: <u>50 %</u> Name of Business: <u>Louisiana Consulting & Business Services, LLC</u> Address: <u>162 New Orleans Blvd.</u> City, State, Zip: <u>Houma, LA 70364</u> Business Description: <u>Software Royalty Collection</u> Nature of Association: <u>CO-owner</u> |

* 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 AND if you or your spouse (either individually or collectively) owns an interest in a business which exceeds ten percent.

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Check if not applicable

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| <input checked="" type="checkbox"/> Filer <input type="checkbox"/> Spouse <input type="checkbox"/> Both Amount of Interest: <u>39</u> % Name of Business: <u>Vermillion View, LLC</u> Address: <u>162 New Orleans Blvd.</u> City, State, Zip: <u>Houma, LA 70364</u> Business Description: <u>Tank stop operations</u> Nature of Association: <u>Co-owner</u> |
| <input checked="" type="checkbox"/> Filer <input type="checkbox"/> Spouse <input type="checkbox"/> Both Amount of Interest: <u>50</u> % Name of Business: <u>Xtreme Pump & Supply, LLC</u> Address: <u>162 New Orleans Blvd.</u> City, State, Zip: <u>Houma, LA 70364</u> Business Description: <u>Pump sales & rental</u> Nature of Association: <u>Co-owner</u> |
| <input type="checkbox"/> Filer <input type="checkbox"/> Spouse <input type="checkbox"/> Both Amount of Interest: _____ % Name of Business: _____ Address: _____ City, State, Zip: _____ Business Description: _____ Nature of Association: _____ |
| <input type="checkbox"/> Filer <input type="checkbox"/> Spouse <input type="checkbox"/> Both Amount of Interest: _____ % 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, stockholder, owner, partner, member, or trustee of a business AND if you or your spouse (either individually or collectively) owns an interest in a business which exceeds ten percent.

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Schedule C: Positions – Nonprofit

Check if not applicable

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| <input checked="" type="checkbox"/> Filer <input type="checkbox"/> Spouse Name of Organization: <u>Friends of the South Louisiana Wetlands Discovery Center</u> Address: _____ City, State, Zip: _____ Nature of Association: <u>K.P. + Director</u> Description of Organization: <u>Support Education at Wetlands</u> |
| <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.**

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Schedule D: Other Offices/Positions Held

Check if not applicable

| |
|------------------------------------------------------------------------|
| Name of Office/Position: <u>Public Service Commission/Commissioner</u> |
| Name of Office/Position: _____ |
| Name of Office/Position: _____ |
| Name of Office/Position: _____ |
| Name of Office/Position: _____ |
| Name of Office/Position: _____ |
| Name of Office/Position: _____ |
| 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. 42:1124.2.1 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

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| <input checked="" type="checkbox"/> Filer <input type="checkbox"/> Spouse <input type="checkbox"/> Both Location of Property: State: <u>LA</u> Parish/County: <u>Terrebonne</u> Description of Property: <u>4107 Bayou Black Dr, Houma, LA Personal Residence</u> Value of the Interest in the Parcel: <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-\$100,000) <input checked="" type="checkbox"/> Category IV (more than \$100,000) |
| <input checked="" type="checkbox"/> Filer <input type="checkbox"/> Spouse <input type="checkbox"/> Both Location of Property: State: <u>LA</u> Parish/County: <u>Terrebonne</u> Description of Property: <u>Fishing Camp</u> Value of the Interest in the Parcel: <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-\$100,000) <input checked="" type="checkbox"/> Category IV (more than \$100,000) |
| <input checked="" type="checkbox"/> Filer <input type="checkbox"/> Spouse <input type="checkbox"/> Both Location of Property: State: <u>LA</u> Parish/County: <u>Orleans</u> Description of Property: <u>Condo</u> Value of the Interest in the Parcel: <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-\$100,000) <input checked="" type="checkbox"/> Category IV (more than \$100,000) |
| <input checked="" type="checkbox"/> Filer <input type="checkbox"/> Spouse <input type="checkbox"/> Both Location of Property: State: <u>LA</u> Parish/County: <u>Walton</u> Description of Property: <u>Beach Home</u> Value of the Interest in the Parcel: <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-\$100,000) <input checked="" type="checkbox"/> Category IV (more than \$100,000) |

*You are required to disclose the location by state and parish/county.

* You are required to provide a brief description of the immovable property and its fair market value or use value (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

Filer Spouse Business (where amount of interest exceeds 10%)
 Type of Income: State Political Subdivision Gaming Interest
 Name of Business (if applicable): Redman Gaming of Louisiana, LLC
 Name of Income Source: Redman Gaming of Louisiana, LLC
 Address: 2424 MARIETTA ST.
 City, State, Zip: Kenner, LA 70062
 Amount of Income (exact dollar amount): \$ 208,197.27

Filer Spouse Business (where amount of interest exceeds 10%)
 Type of Income: State Political Subdivision Gaming Interest
 Name of Business (if applicable): Tall Timbers Truckstop & Casino, LLC
 Name of Income Source: Tall Timbers Truckstop & Casino, LLC
 Address: 2424 MARIETTA ST.
 City, State, Zip: Kenner, LA 70062
 Amount of Income (exact dollar amount): \$ 69,432

Filer Spouse Business (where amount of interest exceeds 10%)
 Type of Income: State Political Subdivision Gaming Interest
 Name of Business (if applicable): 2417 Xpress Associates, LLC
 Name of Income Source: 2417 Xpress Associates, LLC
 Address: 26 Verde St.
 City, State, Zip: Kenner, LA 70065
 Amount of Income (exact dollar amount): \$ 9,082.73

Filer Spouse Business (where amount of interest exceeds 10%)
 Type of Income: State Political Subdivision Gaming Interest
 Name of Business (if applicable): Louisiana Consulting & Business Services, LLC
 Name of Income Source: Louisiana Consulting & Business Services, LLC
 Address: 162 New Orleans Blvd.
 City, State, Zip: Houma, LA 70364
 Amount of Income (exact dollar amount): \$ 146,256

* 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 Received from Employment

Check if not applicable

Filer Spouse Full-time Part-time

Name of Employer: Damon J. Baldone

Address: 1102 New Orleans Blvd.

City, State, Zip: Houma, LA 70364

Nature of Services (pursuant to such employment): Attorney

Amount of Income: Category I (less than \$5,000) Category II(\$5,000-\$24,999)
 Category III(\$25,000-\$100,000) Category IV(more than \$100,000)

Filer Spouse Full-time Part-time

Name of Employer: _____

Address: _____

City, State, Zip: _____

Nature of Services (pursuant to such employment): _____

Amount of Income: Category I (less than \$5,000) Category II(\$5,000-\$24,999)
 Category III(\$25,000-\$100,000) Category IV(more than \$100,000)

Filer Spouse Full-time Part-time

Name of Employer: _____

Address: _____

City, State, Zip: _____

Nature of Services (pursuant to such employment): _____

Amount of Income: Category I (less than \$5,000) Category II(\$5,000-\$24,999)
 Category III(\$25,000-\$100,000) Category IV(more than \$100,000)

Filer Spouse Full-time Part-time

Name of Employer: _____

Address: _____

City, State, Zip: _____

Nature of Services (pursuant to such employment): _____

Amount of Income: Category I (less than \$5,000) Category II(\$5,000-\$24,999)
 Category III(\$25,000-\$100,000) Category IV(more than \$100,000)

- * You are required to complete SCHEDULE G to disclose the income received by you or your spouse for each full-time or part-time employment position held.
- * "Income" (for an individual) means taxable income and shall not include any income received pursuant to a life insurance policy.
- * Income that is reported on SCHEDULE F does not have to be restated on SCHEDULE G.
- * Income received through self-employment is reported on SCHEDULE H, unless it is reported on Schedule F.

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Schedule H: Income Received From Business

Check if not applicable

AGGREGATE AMOUNT OF INCOME RECEIVED FROM BUSINESS:

- Category I (less than \$5,000) Category II (\$5,000-\$24,999)
 Category III (\$25,000-\$100,000) Category IV (more than \$100,000)

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| <input checked="" type="checkbox"/> Filer <input type="checkbox"/> Spouse Name of Business: <u>Baldone Tool Estate, LLC</u> Address: <u>162 New Orleans Blvd</u> City, State, Zip: <u>Houma, LA 70364</u> Nature of services rendered or reason income was received: <u>Property sales & rentals</u> |
| <input checked="" type="checkbox"/> Filer <input type="checkbox"/> Spouse Name of Business: <u>Baldone Offshore, LLC</u> Address: <u>162 New Orleans Blvd</u> City, State, Zip: <u>Houma, LA 70364</u> Nature of services rendered or reason income was received: <u>Dive support offshore vessel</u> |
| <input checked="" type="checkbox"/> Filer <input type="checkbox"/> Spouse Name of Business: <u>Tenochonic Aviation Inc.</u> Address: <u>162 New Orleans Blvd</u> City, State, Zip: <u>Houma, LA 70364</u> Nature of services rendered or reason income was received: <u>Airplane Rental</u> |

- *You are required to complete SCHEDULE H if you or your spouse received income from a business.
- *"Income" (for an individual) means taxable income and shall not include any income received pursuant to a life insurance policy.
- *Income reported on SCHEDULE F or G does not have to be restated on SCHEDULE H.
- *Income received through self-employment is reported on SCHEDULE H.
- *"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 J: Investment Holdings (an investment holding that exceeds \$5,000)

Check if not applicable

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| <input type="checkbox"/> Filer <input type="checkbox"/> Spouse <input type="checkbox"/> Both Name of Security: _____ _____ Description of Security: _____ _____ |
| <input type="checkbox"/> Filer <input type="checkbox"/> Spouse <input type="checkbox"/> Both Name of Security: _____ _____ Description of Security: _____ _____ |
| <input type="checkbox"/> Filer <input type="checkbox"/> Spouse <input type="checkbox"/> Both Name of Security: _____ _____ Description of Security: _____ _____ |
| <input type="checkbox"/> Filer <input type="checkbox"/> Spouse <input type="checkbox"/> Both Name of Security: _____ _____ Description of Security: _____ _____ |

* You are required to complete SCHEDULE J if you or your spouse holds investment securities where each investment security has a value that exceeds \$5,000.

*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 K: Transactions (a transaction that exceeds \$5,000)

Check if not applicable

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| <input checked="" type="checkbox"/> Filer <input type="checkbox"/> Spouse <input type="checkbox"/> Both Transaction Date: <u>2016, no exact date</u> Description of Transaction: <u>Acquired property by paying taxes for 3 consecutive years 1. 5814 Hwy 56, Chauvin LA 70353</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-\$100,000) <input type="checkbox"/> Category IV (more than \$100,000) |
| <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-\$100,000) <input type="checkbox"/> Category IV (more than \$100,000) |
| <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-\$100,000) <input type="checkbox"/> Category IV (more than \$100,000) |
| <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-\$100,000) <input type="checkbox"/> Category IV (more than \$100,000) |

* You are required to complete SCHEDULE K if you or your spouse purchased or sold any immovable property, personally owned tax credit certificates, stocks, bonds, or commodities futures including any option to acquire or dispose of any immovable property or of any personally owned tax credit certificates, stocks, bonds, or commodities futures (when the value of the transaction exceeded \$5,000 in the previous calendar year).

* You are not required to report 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, cash or cash equivalent investments.

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

Check if not applicable

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

***You are required to complete SCHEDULE L if you or your spouse owes any liability which exceeds \$10,000 on the last day of the reporting period.**

***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 by a licensed financial institution which loans money in the ordinary course of business.**

*** You are not required to disclose any liability resulting from a consumer credit transaction as defined in R.S. 9:3516(13).**

***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.**

****"Consumer Credit Transaction" in R.S. 9:3516(13) means a consumer loan or a consumer credit sale but does not include a motor vehicle credit transaction made pursuant to R.S. 6:969.1 et seq.**