

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

TIER 2.1 PERSONAL FINANCIAL DISCLOSURE STATEMENT
(ANNUAL)

ORIGINAL REPORT
 AMENDED REPORT
This Report Covers Calendar Year: 2013

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

Name of Filer (print full name) SAM N. GREGORIO
Mailing Address 7600 FERN AVENUE, BLDG. 700
City, State, Zip SHREVEPORT, LA 71105

Name of Board/Commission (no abbreviations): CADDO BOSSIER PORT COMMISSION
Date of Appointment: 1-25-11
Date Appointment Expires: 11-14

Name of Spouse (print full name) JENNIFER LAWES GREGORIO
Spouse's Occupation UNEMPLOYED
Principal Business Address 8702 GLENHAVEN DRIVE
City, State, Zip SHREVEPORT, LA 71106

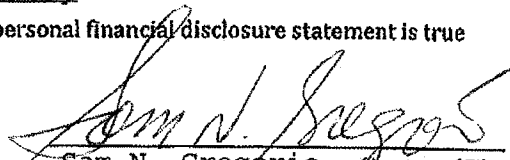
CHECK ONE:
 Neither I, nor any member of my immediate family, have a personal or financial interest in any entity, contract, or business, or a personal or financial relationship, that in any way poses a conflict of interest, which would affect the impartial performance of my duties as a member of the board or commission.
 I have attached a statement describing any conflicts, and actions I am taking to resolve or avoid the conflicts. *See Attached

Check all that apply:
 I have filed my state income tax return for the previous year. 2012
 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. 2012
 I have filed for an extension of my federal income tax return for the previous year.

NOTE: La. R.S. 42:1124.2.1 does not provide you the opportunity to request an extension in filing your personal financial disclosure statement.

Certification of Accuracy

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


Sam N. Gregorio Signature of Filer
www.ethics.state.la.us

4/17/2014

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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>Gregorio, Gregory, Chafin & Johnson</u> Job Title: <u>Attorney</u> Job Description: <u>Attorney</u> |
| <input type="checkbox"/> Filer <input checked="" type="checkbox"/> Spouse <input type="checkbox"/> Full-Time <input type="checkbox"/> Part-Time Name of Employer: <u>None</u> 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 on SCHEDULE A employment information related to both you and your spouse.
- List the name of the employer; the title of the position; a brief description of the job; and disclosure as to whether the position is full-time or part-time.

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Schedule B: Income from the State, Political

Check if not applicable **Subdivisions, and/or Gaming Interests**

| |
|--|
| <input checked="" type="checkbox"/> Filer <input checked="" 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): <u>NONE</u> Name of Income Source: _____ Address: _____ City, State, Zip: _____ Amount of Income (exact dollar amount): \$ <u>-0-</u> |
| <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 B if you or your spouse received income from the State, any political subdivision, and/or a gaming interest OR if a business in which you or your spouse owns an interest which exceeds 10% (either individually or collectively) received income from the aforementioned sources.

* "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.

Revised June 2011

Form 417

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LOUISIANA BOARD OF ETHICS
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Schedule C: Positions - Business

Check if not applicable

P 1 of 3

| |
|---|
| <input checked="" type="checkbox"/> Filer <input type="checkbox"/> Spouse <input type="checkbox"/> Both |
| Amount of Interest (where interest exceeds 10%): <u>50</u> % |
| Name of Business: <u>G&M Resorts, LLC</u> |
| Address: <u>12812 Coursey Blvd.</u> |
| City, State, Zip: <u>Baton Rouge, LA 70816</u> |
| Business Description: <u>Owns & rents 2 real estate properties</u> |
| Nature of Association: <u>LLC</u> |
| <input checked="" type="checkbox"/> Filer <input type="checkbox"/> Spouse <input type="checkbox"/> Both |
| Amount of Interest (where interest exceeds 10%): <u>33.33</u> % |
| Name of Business: <u>3 Palms Trust</u> |
| Address: <u>12812 Coursey Boulevard</u> |
| City, State, Zip: <u>Baton Rouge, LA 70816</u> |
| Business Description: <u>Owns & Rents 1 real estate property</u> |
| Nature of Association: <u>Trust</u> |
| <input checked="" type="checkbox"/> Filer <input type="checkbox"/> Spouse <input type="checkbox"/> Both |
| Amount of Interest (where interest exceeds 10%): <u>24.86</u> % |
| Name of Business: <u>Gregorio Family Investment Co., LLC</u> |
| Address: <u>4750 Modica-Lott Road</u> |
| City, State, Zip: <u>Bossier City, LA 71111</u> |
| Business Description: <u>Investments</u> |
| Nature of Association: <u>LLC</u> |

CONTINUED

* You are required to complete SCHEDULE C if you or your spouse is a director, officer, 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 10%.

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

LOUISIANA BOARD OF ETHICS

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Schedule C: Positions - Business

Check if not applicable

Page 2 of 3 Pages

| |
|---|
| <input checked="" type="checkbox"/> Filer <input checked="" type="checkbox"/> Spouse <input type="checkbox"/> Both Amount of Interest (where interest exceeds 10%): <u>33.33</u> % Name of Business: <u>Gregorio Realty Co., LLC</u> Address: <u>4750 Modica-Lott Road</u> City, State, Zip: <u>Bossier City, LA 71111</u> Business Description: <u>Real Estate</u> Nature of Association: <u>LLC</u> |
| <input checked="" type="checkbox"/> Filer <input type="checkbox"/> Spouse <input type="checkbox"/> Both Amount of Interest (where interest exceeds 10%): <u>33.33</u> % Name of Business: <u>Gregorio Development Co., LLC</u> Address: <u>4750 Modica Lott Road</u> City, State, Zip: <u>Bossier City, LA 71111</u> Business Description: <u>Real Estate</u> Nature of Association: <u>LLC</u> |
| <input checked="" type="checkbox"/> Filer <input type="checkbox"/> Spouse <input type="checkbox"/> Both Amount of Interest (where interest exceeds 10%): <u>100</u> % Name of Business: <u>Fern Building, LLC</u> Address: <u>7600 Fern Avenue, Bldg. 700</u> City, State, Zip: <u>Shreveport, LA 71105</u> Business Description: <u>Law Office Building</u> Nature of Association: <u>LLC</u> |

CONTINUED

* You are required to complete SCHEDULE C if you or your spouse is a director, officer, 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 10%.

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

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Schedule C: Positions - Business

Check if not applicable

Page 3 of 3 pages

| |
|---|
| <input checked="" type="checkbox"/> Filer <input type="checkbox"/> Spouse <input type="checkbox"/> Both |
| Amount of Interest (where interest exceeds 10%): <u>12.5</u> % |
| Name of Business: <u>Sterling 8 Trust</u> |
| Address: <u>12812 Coursey Boulevard</u> |
| City, State, Zip: <u>Baton Rouge, LA 70816</u> |
| Business Description: <u>Not a business, holds a condominium for personal use</u> by |
| Nature of Association: <u>owners</u> <u>Trust</u> |
| <input type="checkbox"/> Filer <input type="checkbox"/> Spouse <input type="checkbox"/> Both |
| Amount of Interest (where interest exceeds 10%): _____ % |
| 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 (where interest exceeds 10%): _____ % |
| Name of Business: _____ |
| Address: _____ |
| City, State, Zip: _____ |
| Business Description: _____ |
| Nature of Association: _____ |

* You are required to complete SCHEDULE C if you or your spouse is a director, officer, 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 10%.

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

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Schedule D: Positions - Nonprofit

Check if not applicable

| |
|---|
| <input checked="" type="checkbox"/> Filer <input type="checkbox"/> Spouse |
| Name of Organization: <u>LSUS Foundation Board of Directors</u> |
| Address: <u>One University Place</u> |
| City, State, Zip: <u>Shreveport, LA 71115</u> <u>Resigned 6/4/2013</u> |
| 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 D if you or your spouse is a director or officer of a nonprofit agency.

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Schedule E: Other Offices/Positions Held

Check if not applicable

| |
|--------------------------------------|
| Name of Office/Position: <u>NONE</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: _____ |
| Name of Office/Position: _____ |
| Name of Office/Position: _____ |
| Name of Office/Position: _____ |

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

Revised June 2011

Form 417

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Schedule F: Contributions

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

| | |
|--|--------------------|
| Date of Appointment: <u>1/25/11</u> | 4/20/10-\$1,000.00 |
| Compensation: \$ _____ | 6/29/10-\$2,500.00 |
| Candidate Name: <u>Cedric Glover</u> | 10/6/10-\$2,500.00 |
| Amount of Contribution or Loan: \$ <u>6,000.00</u> | |
| Date of Appointment: _____ | |
| Compensation: \$ _____ | |
| Candidate Name: _____ | |
| Amount of Contribution or Loan: \$ _____ | |
| Date of Appointment: _____ | |
| Compensation: \$ _____ | |
| Candidate Name: _____ | |
| Amount of Contribution or Loan: \$ _____ | |
| Date of Appointment: _____ | |
| Compensation: \$ _____ | |
| Candidate Name: _____ | |
| Amount of Contribution or Loan: \$ _____ | |

* You are required to complete SCHEDULE F if you are appointed to a state board or commission and subject to annual financial statements as required by 42:1124.2.1 and you made a contribution or loan in excess of \$1,000 to the campaign of the official who appointed you.
* You are only required to disclose contributions or loans made within one year of 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.