

Fax Services

### **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	is Report Covers Calendar Year: 2013			
	not would require me to file a T	Tier 3 Personal Financial Disclosure Statement.			
As such, I have completed SCF	EDULE E.	Her 5 Personal Financial Disclosure Statement			
Name of Filer (print full nam	William Raymond Manning	g			
Mailing Address					
City, State, Zip	tate, Zip New Orleans, Louisiana 70130				
Name of Board/Commi	ssion (no abbreviations); Board	d of Liquidation, City Debt of New Orleans			
Date of Appointmen	it; January 20, 2011				
Date Appointment I	Expires: December 31, 2021	originario .			
Name of Spouse (print full	name) N/A				
Spouse's Occupation					
Principal Business A	ddress				
City, State, Zip					
contract, or business, or a which would affect the im	personal or financial relations partial performance of my dut	re a personal or financial interest in any entity, iship, that in any way poses a conflict of interest, ities as a member of the board or commission. ons I am taking to resolve or avoid the conflicts.			
Check all that apply:		And a series comments on a process of a state of the series of the serie			
	e tax return for the previous ye	ear.			
	of my state income tax return				
	me tax return for the previous				
🔞 I have filed for an extension	of my federal income tax retu	urn for the previous year.			
NOTE: La. R.S. 42:1124 personal financial disc	.2.1 does not provide you the op losure statement.	opportunity to request an extension in filing your			
	<u>Certification of</u>	of Accuracy			
		this personal financial disclosure statement is true			
and correct to the best of my l	nowledge and belief.	Manual Signature of Filer			
Revised June 2011	Fari	Signature of Filer rm 417 www.ethics.state.ja.us			

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# Schedule A: Employment Information

Check if not applica	ible	
⊠Filer □Spouse	<b>∑Full-</b> Time	Part-Time
Name of Employer:	Manning Architects, A Profes	sional Architectural Corporation
Job Title:	Dwner	
Job Descripti	on: Owner of a professional	architectural firm.
Filer Spouse	Full-Time	□Part-Time
Name of Employer:		
Job Description	on;	
Filer Spouse	Full-Time	□Part-Time
Name of Employer:	SERVICION DE LA CONTRACTOR DE LA CONTRAC	
Job Title:		
Filer Spouse	☐Full-Time	☐Part-Time
Name of Employer:		
	on:	

- « 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

X Check if not applicable	Subdivisions, an	id/or Ga	ming Interests	
□Filer □Spouse	Business (where amoun	nt of interest	exceeds 10%)	
	Type of Income:	☐State	□Political Subdivision	☐Gaming Interest
Name of Business (if app	olicable):			
Name of Income Source	*			
Address:		***************************************		
City, State, Zip:	CONTRACTOR	Martin de la companya	HAVE A VALUE AND A	onderscription which benefit bloomer shall state state state state of the state of
	t dollar amount): \$			
□Filer □Spouse	Business (where amou	nt of interest	exceeds 10%)	
	Type of Income:	State	□Political Subdivision	☐Gaming Interest
Name of Business (if app	olicable):			
Name of Income Source				
Address:		COMMON CORRECTOR ENGINEERING NO CORRECT CONTROL TO SERVICE OF THE		
City, State, Zip:		Politica Manadania popular pop		
	t dollar amount): \$			
□Filer □Spouse	☐Business (where amour	nt of interest	exceeds 10%)	
	Type of Income:	State	Political Subdivision	□Gaming Interest
Name of Business (if app	olicable):			
Name of Income Source	₩ • • • • • • • • • • • • • • • • • • •			
Address:	Market McColor	M representation of the second		
	t dollar amount): \$			

<sup>\*</sup> 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.

<sup>\*&</sup>quot;Income" (for a business) means gross income less costs of goods sold, and operating expenses.

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

<sup>\*</sup> 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 www.ethics.state.la.us

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### **Schedule C:** Positions - Business

☐ Check if not applicable						
	□Both	·		NATE - 150-11-11-11-11-11-11-11-11-11-11-11-11-11	y programment in the international collection of the efference of	ng reverbules umeneren veneren nem um die es
Amount of Interest (where in	iterest exceeds 10%):	100	_%			
Name of Business: Mar	ning Architects, A F	Professional A	rchitectural C	Corporation		PPT-VOTOV TO BATH AND RESERVATIONS IN BREADS BEEN
Address: 650	Poydras Street, Sui	te 1250		THE STITUTE OF THE ST		**************************************
City, State, Zip:	New Orleans, Louis	iana 70130				
Business Description:	Architecture, Interio	r Design, and	Urban Desig	n & Planning	A STATE OF THE STA	ELING BOTTELENCHISKER VERMENTEN EN EN EN EN EN EN EN EN EN
Nature of Association:	Owner		((()))		VIIII	<del>селето в селопосна</del> изменявляваруу
Filer Spouse			ecces server extension traction and annual	uninelisteel	AMERICAN AND AND AND AND AND AND AND AND AND A	<del>wiseland kasalis der die een liede oorde k</del> ereland die de
Amount of Interest (where in	nterest exceeds 10%):	FIRE THE BUT HE AMERICAN CONTRACT AND CONTRACT AND A STREET	_%			
Name of Business:		#*************************************			masaanan oo caaraa ahaa ahaa ahaa ahaa ahaa ahaa ah	
A will all an are are an	AA Vii Miliania					
City, State, Zip:					777777777788484841111MIN	wuzhizi wie inen inertari hirizio.
Business Description:	TEMPONENT PROTESTION STREET, CALLED SALES AND		NEW TRIBUTA			
Nature of Association:	lar personal ( PP P P P P P P P P P P P P P P P P P	Name of the second seco		TOURISTIANUS NATURALISMAN AND AND AND AND AND AND AND AND AND A	· · · · · · · · · · · · · · · · · · ·	
□Filer □Spouse	□Both	7-7-7-15 MEST by grades in presence communication and authorisation and the communication and the communicatio	idddiodddioddioddol o gaellan y gaellan g		**************************************	
Amount of Interest (where in	nterest exceeds 10%):		%			
Name of Business:			MELEO FERRO SEMINOS SEMINOS ANTO A POSTO A PORTO A POR	**************************************		
					COTHELITORIUM ROBERTHANIA ARRAMA	MARKANI KANDALINISINI JAMBANISINI MARKANI
City, State, Zip:						
Business Description:		······································	Equippigalis qua automatou noble in a benedus Julius de Cours est est	nakakanan kaban sasara sasaran na amang mengendukan sayan mengapan sahi sayanya kaban sa	net francisco estima processi gine (incompresso par esta del colo colo colo colo colo colo colo co	alekment talan talan talan ta
Nature of Association:	THE RESIDENCE OF THE PROPERTY	MAAHAAAAA.		·		eniyab incingen piya kataya na taya kan nazi iyo cataya.
and the state of t			•			

<sup>\*</sup> 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%.

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

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### Schedule D: Positions - Nonprofit

☐ Check if not applicable	
Filer	
Name of Organization:	The Sewerage and Water Board of New Orleans
	aint Joseph Street
City, State, Zip: _	New Orleans, Louisiana 70165
Nature of Association:	President Pro-Tem
	The Sewerage & Water Board has been serving citizens and protecting the environment since 1899.  Originally formed to combat disease by providing safe drinking water and eliminating the health hazards of open sewer ditches, today the S&WB continues its mission using 21st century technology.
⊠Filer □Spouse	
Name of Organization	Board of Liquidation, City Debt
Address: 1300 l	Perdido Street, Room SE17
City, State, Zip:	New Orleans, Louisiana 70112
Nature of Association:  Description of Organia	Member  The Board of Liquidation "the Board" has exclusive control and direction of all matters related to the issuance and repayment of the City's general obligation bonds. Because the Board exists, the repayment cation: of New Orleans general obligation bonds is separated and excluded from the City's operating budget, and a dedicated source and security for the payment of the City's general obligation bonds is maintained
Name of Organization	American Institute of Architects, New Orleans Chapter
	St. Charles Avenue
City, State, Zip:	New Orleans, Louisiana 70130
Nature of Association  Description of Organi	A component of the American Institute of Architects, AIA New Orleans was founded in 1911 to represent educate and serve the architecture profession and entire community as it concerns the built

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### **Schedule F: Contributions**

Check if not applicable (made within one year of appoint	ment - in excess of \$1,000)	
Date of Appointment: August 13, 2013	CONTRACTOR OF THE PROPERTY OF	THE PROPERTY OF THE PROPERTY O
Compensation: \$		
Candidate Name: Congressman Cedric Richmond		
Amount of Contribution or Loan: \$ 1,000		
Date of Appointment: July 13, 2013	THE PRODUCTION OF THE PRODUCTI	V-7-7-7-7-7-7-7-7-7-7-7-7-7-7-7-7-7-7-7
Compensation: \$		
Candidate Name: Re-Elect Mayor Mitch Landrieu		
Amount of Contribution or Loan: \$ 1,500		
Date of Appointment:	A CALL TO THE RESIDENCE OF THE PROPERTY OF THE	
Compensation: \$		
Candidate Name:		
Amount of Contribution or Loan: \$	AND PROPERTY OF A PROPERTY OF THE PROPERTY OF	
Date of Appointment:		WOOD PROPERTY OF PROPERTY AND AN ARTIST THE STATE OF THE
Compensation: \$		
Candidate Name:		
Amount of Contribution or Loan: \$	AND THE RESIDENCE AND A SECOND AS A SECOND	
Date of Appointment:	A A A A A A A A A A A A A A A A A A A	AND MAJORITHM PROPERTY PROPERTY AND
Compensation: \$		
Candidate Name:		
Amount of Contribution or Loan: \$		

<sup>\*</sup> 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.

<sup>\*</sup> You are only required to disclose contributions or loans made within one year of appointment.

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

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

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

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## Schedule E: Other Offices/Positions Held

<sup>\*</sup>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.