

2014 JUN -3 PM 4: 34
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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

This Report Covers Calendar Year: 2013

AMENDED REPORT

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) William Raymond Manning
Mailing Address 650 Poydras Street, Suite 1250
City, State, Zip New Orleans, Louisiana 70130

Name of Board/Commission (no abbreviations): Board of Liquidation, City Debt of New Orleans
Date of Appointment: January 20, 2011
Date Appointment Expires: December 31, 2021

Name of Spouse (print full name) N / A
Spouse's Occupation _____
Principal Business Address _____
City, State, Zip _____

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.

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. 42:1124.2.1 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.


Signature of Filer
www.ethics.state.la.us

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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>Manning Architects, A Professional Architectural Corporation</u>
Job Title: <u>Owner</u>
Job Description: <u>Owner of a professional architectural firm.</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 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
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): _____

Name of Income Source: _____

Address: _____

City, State, Zip: _____

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

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: _____

Address: _____

City, State, Zip: _____

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

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: _____

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.

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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>The Sewerage and Water Board of New Orleans</u>
Address: <u>625 Saint Joseph Street</u>
City, State, Zip: <u>New Orleans, Louisiana 70165</u>
Nature of Association: <u>President Pro-Tem</u>
Description of Organization: <u>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.</u>
<input checked="" type="checkbox"/> Filer <input type="checkbox"/> Spouse
Name of Organization: <u>Board of Liquidation, City Debt</u>
Address: <u>1300 Perdido Street, Room SE17</u>
City, State, Zip: <u>New Orleans, Louisiana 70112</u>
Nature of Association: <u>Member</u>
Description of Organization: <u>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 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.</u>
<input checked="" type="checkbox"/> Filer <input type="checkbox"/> Spouse
Name of Organization: <u>American Institute of Architects, New Orleans Chapter</u>
Address: <u>1000 St. Charles Avenue</u>
City, State, Zip: <u>New Orleans, Louisiana 70130</u>
Nature of Association: <u>Past President</u>
Description of Organization: <u>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 environment.</u>

*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 F: Contributions

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

Date of Appointment: <u>August 13, 2013</u> Compensation: \$ _____ Candidate Name: <u>Congressman Cedric Richmond</u> Amount of Contribution or Loan: \$ <u>1,000</u>
Date of Appointment: <u>July 13, 2013</u> Compensation: \$ _____ Candidate Name: <u>Re-Elect Mayor Mitch Landrieu</u> Amount of Contribution or Loan: \$ <u>1,500</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.

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Schedule E: Other Offices/Positions Held

Check if not applicable

Name of Office/Position:	_____
Name of Office/Position:	_____
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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.