Post Office Box 4368 Baton Rouge, Louisiana 70821

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TIER 2 PERSONAL FINANCIAL DISCLOSURE STATEMENT (ANNUAL)

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.

This Report Covers Calendar Year: 2017

ORIGINAL REPORT

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FINAL REPORT (WHERE TERM ENDS IN JANUARY [COVERING JANUARY 1 THROUGH JANUARY

A final reports must be filed on or before May 15 of the year in which your service to that office ends. Refer to the "GENERAL INFORMATION" sheet of this form to determine eligibility.

OFFICE/POSITION HELD: Public Servic Commissioner

NAME OF FILER (print full name): Foster Campbell II

Mailing Address : 1800 A Jimmy Davis Highway

City, State, Zip: Bossier City, LA 71112

NAME OF SPOUSE(if applicable)(print full name): ______

Spouse's Occupation: Real Estate Agent

Spouse's Principal Business Address: 2120 Cypress Street

City, State, Zip: West Monroe, LA 71291

CHECK ALL THAT APPLY

I have filed my state income tax return for the previous year.

 $\overline{\boxtimes}$ I have filed for an extension of my state income tax return for the previous year.

K 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.

☑ I have filed for an extension of my federal income tax return for the previous year AND I am requesting an extension in filing my Tier 2 Personal Financial Disclosure.

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.

of Filer Signatur

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Schedule A: Employment Information

Check if not applicable

⊠Filer □Spouse	□Full-Time ⊠Part-Time
Name of Employer: State of	ouisiana
Job Title: Public Servic	e Commissioner
To ens Job Description: <u>are fair</u>	ure regulatory balance that enables utilities to provide customers safe, adequate, reliable service, at rates that and reasonable, and allow utilities to ear a fair return
⊠Filer □Spouse	⊠Full-Time □Part-Time
Name of Employer: Campbe	I Insurance Agency, Inc.
Job Title: President	
Job Description: Man	age the business and sell insurance to customers.
□Filer □Spouse	Full-Time Part-Time
Name of Employer:	
•	
Filer Spouse	□Full-Time □Part-Time
Name of Employer:	
☐Filer □Spouse	□Full-Time □Part-Time
Name of Employer:	
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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Schedu	e B:	Positions	-	Business

Check if not applicable

⊠Filer □Spouse □Both			
Amount of Interest: 100	%		
Name of Business: Campbell Insurance Agency	·		
Address: 1800 A Jimmy Davis Highway			
City, State, Zip: Bossier City, LA 71112	· · · · · · · · · · · · · · · · · · ·		
Business Description: Insurance Sales			
Nature of Association: President, Owner			
⊠Filer □Spouse □Both			
Amount of Interest: 100	%		
Name of Business: Premier Insurance Agency, LLC	· · · · · · · · · · · · · · · · · · ·		
Address: 1800 A Jimmy Davis Highway			
City, State, Zip: Bossier City, LA 71112			
Business Description: Insurance Sales			
Nature of Association: Manager, Owner			
⊠Filer □Spouse □Both			
Amount of Interest: 100	%		
Name of Business: Campbell Farm			
Address: 1800 A Jimmy Davis Highway			
City, State, Zip: Bossier City, LA 71112			
Business Description: Cattle Farm			
Nature of Association: Owner			

* "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.

^{*} 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 10%.

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Check if not applicable	
⊠Filer □Spouse □Both	
Amount of Interest: 51	_%
Name of Business: Campbell Farm Properties	
Address: 1800 A Jimmy Davis Highway	
City, State, Zip: Bossier City, LA 71112	
Business Description: Farm Rental & Royalties	
Nature of Association: Manager, Owner	
□Filer ⊠Spouse □Both	
Amount of Interest: 100	_%
Name of Business: Gwen Wilhite Campbell Real Estate Agent	
Address: 2120 Cypress Street	
City, State, Zip: West Monroe, LA 71291	
Business Description: Real Estate Agent	
Nature of Association: Owner	
Filer Spouse Both	· .
Amount of Interest:	_%
Name of Business:	
Address:	·
City, State, Zip:	
Business Description:	· · · · · · · · · · · · · · · · · · ·
Nature of Association:	·

Schedule B: Positions - Business

* 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 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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Baton Rouge, Louisiana 70821

Schedule C: Positions - Nonprofit

Check if not applicable
Filer Spouse
Name of Organization:
Address:
City, State, Zip:
Nature of Association:
Description of Organization:
Filer Spouse
Name of Organization:
Address:
City, State, Zip:
Nature of Association:
Description of Organization:
Filer 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.

Baton Rouge, Louisiana 70821

Schedule D: Other Offices/Positions Held

Check if not applicable

Name of Office/Position:		 <u> </u>	
Name of Office/Position:			
Name of Office/Position:			
Name of Office/Position:			
Name of Office/Position:			
· · · · · · · · · · · · · · · · · · ·			
Name of Office/Position:		 	· · · · · · · · · · · · · · · · · · ·
	- <u> </u>		
Name of Office/Position:		 	
Name of Office/Position:			
	· · · · · · · · · · · · · · · · · · ·		
Name of Office/Position:		 	and a start of the

* 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

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Check if	not applicable (where the value of th	e interest in the parcel exceeds \$2,000)	
⊠Filer	□Spouse □Both		· ·
Location	of Property:		
State:	Louisiana	Parish/County: Bossier	
Descri	otion of Property: <u>10 Acres farm lan</u>	d and home	
Value of t	he Interest in the Parcel:		
	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 □Both		
Location	of Property:		
State:	Louisiana	Parish/County: Bossier	
Descri	ption of Property: Office building ar	nd 1.75 acres of land	
Value of t	he Interest in the Parcel:		
	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 Both		
Location	of Property:		
State:	Louisiana	Parish/County: Bienville	
Descri	ption of Property: 133 acres of Time	per Land	
Value of t	he Interest in the Parcel:		
	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 □Both		
Location	of Property:		· · ·
State:	Louisiana	Parish/County: Bossier	
Descri	ption of Property: 60 acres of timbe	er land 1/2 interest	
Value of	the Interest in the Parcel:		
	Category I (less than \$5,000)	🔀 Category II (\$5,000-\$24,999)	
	Category III (\$25,000-\$100,000)	Category IV (more than \$100,000)	eve
* You are re	equised is a second to be a second t	e immovable property and its fair market value or use	
Revi sed Pe ce		Parish/CBthtty:	www.ethics.la.go
Descr	iption of Property:		

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Schedule	E: Immovable	Property
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Check if not applicable (where the value of	he interest in the parcel exceeds \$2,000)
⊠Filer □Spouse □Both	
Location of Property:	
State: Louisiana	Parish/County: Bienville
Description of Property: 30 acres of timbe	er land 1/2 interest
Value of the Interest in the Parcel:	
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 □Both	
Location of Property:	
State: Louisiana	Parish/County: Bossier
Description of Property: 40 acres of timbe	er land 1/2 interest
Value of the Interest in the Parcel:	
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 □Both	
Location of Property:	
State: Louisiana	Parish/County: Natchitoches
Description of Property: Timber Land	
Value of the Interest in the Parcel:	
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 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 E: Immovable Property

Check if	not applicable (where the value of the	ne interest in the parcel exceeds \$2,000)
□Filer	⊠Spouse □Both	
Location o	of Property:	
State:	Louisiana	Parish/County: Lincoln
Descrip	tion of Property: 40 acres timber a	nd pasture land
-	ne Interest in the Parcel:	
	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 □Both	
Location o	of Property:	
State:	Louisiana	Parish/County: Lincoln
Descrip	tion of Property: 23 acres timber a	nd pasture land
Value of th	ne Interest in the Parcel:	
	\Box 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 □Both	
Location o	f Property:	
State:	Louisiana	Parish/County: Jackson
Descrip	tion of Property: Camp house on L	ake
Value of th	ne Interest in the Parcel:	
	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 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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☐ Check if			E: IMMOVABLE Property he interest in the parcel exceeds \$2,000)	
⊠Filer		□Both	•	·
Location (of Property:			
State:	Kansas		Parish/County: Wabaunsee	
Descri	otion of Property:	77.5 acres farm la	nd with detached home and barns	
-	he Interest in the P	arcel:		
	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	□Both		
Location	of Property:			
State:	Louisiana		Parish/County: Bienville	
Descri	otion of Property:	160 acres timber		
Value of t	he Interest in the P	arcel:		
	Category I (less than \$5,000)	🔀 Category II (\$5,000-\$24,999)	
	Category II	l (\$25,000-\$100,000)	Category IV (more than \$100,000)	
⊠Filer	□Spouse	□Both		
Location	of Property:			
State:	Louisiana		Parish/County: Natchitoches	
Descri	ption of Property:	Home & Land		
Value of t	he Interest in the P	arcel:		
	Category I	(less than \$5,000)	Category II (\$5,000-\$24,999)	
	Category II	I (\$25,000-\$100,000)	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

Filer Spouse Business(where amount of interest exceeds 10%)
Type of Income: 🗌 State 🔲 Political Subdivision 🔲 Gaming Interest
Name of Business(if applicable): ^{State of Louisiana}
Name of Income Source: Salary
Address: Post Office Box 94095
City, State, Zip: Baton Rouge, LA 70804
Amount of Income (exact dollar amount): \$ 45,991.00
☐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 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.

Revised December 2016

LOUISIANA BOARD OF ETHICS Post Office Box 4368

Baton Rouge, Louisiana 70821

Schedule G: Income Received from Employment

Check if not applicable

⊠Filer □Spouse □Full-time □Part-time				
Name of Employer: Campbell Insurance Agency Inc.				
Address: 1800 A Jimmy Davis Highway				
City, State, Zip: Bossier City, LA 71112				
Nature of services (pursuant to such employment): Manage Business and Insurance Sales				
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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 Check if not applicable AGGREGATE AMOUNT OF INCOME RECEIVED FROM BUSIN Category I (less than \$5,000) Category III (\$25,000-\$100,000) Category IV (more than \$100,000) 	ESS:
Category I (less than \$5,000) Category II (\$5,000-\$24,999)	ESS:
Category III (\$25,000-\$100,000) Category IV (more than \$100,000)	
□Filer □Spouse	
Name of Business: Premier Insurance Agency	
Address: 1800 A Jimmy Davis Highway	•
City, State, Zip: Bossier City, LA 71112	
Nature of services rendered or reason income was received:	Manage Company & Insurance Sales
⊠Filer □Spouse	
Name of Business: Campbell Insurance - Commissions	
Address: 1800 A Jimmy Davis Highway	
City, State, Zip: Bossier City, LA 71112	
Nature of services rendered or reason income was received:	Insurance Commissions on Sale of Insurance
⊠Filer □Spouse	
Name of Business: Campbell Farm Properties	
Address: 1800 A Jimmy Davis Highway	
City, State, Zip: Bossier City, LA 71112	
Nature of services rendered or reason income was received:	Partner
⊠Filer □Spouse	
Name of Business: Campbell Farm	
Address: 1800 A Jimmy Davis Highway	
City, State, Zip: Bossier City, LA 71112	
Nature of services rendered or reason income was received:	Buying Selling & Raising Cattle

- * "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 H: Income Received F	From Business
Check if not applicable	
AGGREGATE AMOUNT OF INCOME RECEIVED FROM BUSIN	IESS:
Category I (less than \$5,000) Category II (\$5,000-\$24,999)	
Category III (\$25,000-\$100,000)	
□Filer ⊠Spouse	
Name of Business: Gwendolyn Campbell Real Estate Agent	
Address: 2120 Cypress Street	
City, State, Zip: West Monroe, LA 71291	
Nature of services rendered or reason income was received:	Sale of Real Estate
□Filer ⊠Spouse	
Name of Business: Gwen Campbell Farms	
Address: Post Office Box 178	
City, State, Zip: Elm Grove, LA 71051	
Nature of services rendered or reason income was received:	Sale of Cattle

□Filer □Spouse

Name of Business:

Address: _____

City, State, Zip:

Nature of services rendered or reason income was received:

□Filer □Spouse	
Name of Business:	-
Address:	
City, State, Zip:	
Nature of services rendered or reason income was received:	

* 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.

Revised December 2016

LOUISIANA BOARD OF ETHICS Post Office Box 4368

Baton Rouge, Louisiana 70821

Schedule I: Other Income

(any other income that exceeds \$1,000)

⊠Filer □Spouse					
Description of Income:					
Royalty Income					
• •.	•				
Nature of services render	red or reason income was rec	eived:			
Royalty Owner					
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					
Description of Income:					
Rental of Farmland					
Nature of services render	red or reason income was rec	eived:			
Rental of Land					
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					
Description of Income:					
Office Building Rental Income					
Nature of services render	red or reason income was rec	eived:			
Providing Office Space					
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 I if you or your spouse received any other type of income (includes any income from private source such as rental income, federal retirement, etc.) that exceeded \$1,000.
- * "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 report income that is derived from child support and alimony payments contained in a court order, or from disability payments from any source.
- * Income that is reported on SCHEDULE F, G, or H does not have to be restated on SCHEDULE I.
- * Income from retirement accounts not reported on Schedule F should be included on Schedule I.

Check if not applicable

Post Office Box 4368

Baton Rouge, Louisiana 70821

Schedule I: Other Income

(any other income that exceeds \$1,000)

⊠Filer □Spouse Description of Income:			
Interest Income			
Nature of services render	ed or reason income was rec	eived:	
Investments Interest			
Amount of Income:	Category I (less than \$5,000)	Category II (\$5,000-\$24,999)	
⊠Filer □Spouse			
Description of Income:			
Dividend Income			
Nature of services render	red or reason income was rec	ceived:	
Stockholder of Record	-		
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			
Description of Income:			
IRA Distribution			
Nature of services rende	red or reason income was red	ceived:	
Retirement Income			
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)	, <u></u>

- * You are required to complete SCHEDULE I if you or your spouse received any other type of income (includes any income from private source such as rental income, federal retirement, etc.) that exceeded \$1,000.
- * "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 report income that is derived from child support and alimony payments contained in a court order, or from disability payments from any source.
- * Income that is reported on SCHEDULE F, G, or H does not have to be restated on SCHEDULE I.

* Income from retirement accounts not reported on Schedule F should be included on Schedule I.

Revised December 2016

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Check if not applicable

Post Office Box 4368 Baton Rouge, Louisiana 70821

Schedule I: Of	ther Income
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Check if not applicable	(any other income that (exceeds \$1,000)
☐Filer ⊠Spouse Description of Income: Pension and Annuity Dist	ribution	
· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·
Nature of services render	red or reason income was rec	eived:
Retirement Income		
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		
Description of Income:		
Royalty Income		
Nature of services rende	red or reason income was rec	ceived:
Royalty of Land Owned		
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		
Description of Income:	X	
Social Security		
Nature of services rende	red or reason income was red	ceived:
Social Security Income		
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 I if you or your spouse received any other type of income (includes any income from private source such as rental income, federal retirement, etc.) that exceeded \$1,000.
- * "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 report income that is derived from child support and alimony payments contained in a court order, or from disability payments from any source.
- * Income that is reported on SCHEDULE F, G, or H does not have to be restated on SCHEDULE I.
- * Income from retirement accounts not reported on Schedule F should be included on Schedule I.

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Schedule I: Other Income

Check if not applicable	(any other income that o	exceeds \$1,000)	
⊠Filer □Spouse Description of Income:			
Social Security			
Nature of services render	red or reason income was rec	ceived:	
Social Security Income			
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			
Description of Income:			
Annuity Income			
Nature of services render	red or reason income was rec	ceived:	
Retirement Income			
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			
Description of Income:			
Nature of services rende	red or reason income was red	ceived:	
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 I if you or your spouse received any other type of income (includes any income from private source such as rental income, federal retirement, etc.) that exceeded \$1,000.
- * "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 report income that is derived from child support and alimony payments contained in a court order, or from disability payments from any source.
- * Income that is reported on SCHEDULE F, G, or H does not have to be restated on SCHEDULE I.
- * Income from retirement accounts not reported on Schedule F should be included on Schedule I.

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Schedule J: Investment Holdings

Check if not applicable	(an investment holding that exceeds \$5,000)
⊠Filer □Spouse [Name of Security:	Both
Enterprise Production Part	ners
Description of Security:	
Partnership Interest	
⊠Filer □Spouse	Both
Name of Security:	
Enlink Midstream Partners	, LP
Description of Security:	
Partnership Interest	
⊠Filer □Spouse	Both
Name of Security:	
Mcdonalds Corporation	
Description of Security:	
Common Stock	

- * 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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Schedu	ile J:	Investment Holdings
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Check if not applicable	(an	investment ho	olding that e	exceeds \$5,0	00)		
⊠Filer □Spouse Name of Security:	Both						
Raytheon Corporation			•			,	
Description of Security:							
Common Stock							
⊠Filer □Spouse Name of Security:	Both						
Verizon Communication	S						
Description of Security: Common Stock							
⊠Filer □Spouse Name of Security:	Both					<u></u>	
Vodafone Group							
Description of Security:				,			 -
Common Stock			· .				

* 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 J	•	Investment	Holdings
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Check if not applicable	(an investment holding that exceeds \$5,000)
⊠Filer □Spouse Name of Security:	Both
Weyerhaeuser Company	
Description of Security:	
Common Stock	
⊠Filer □Spouse Name of Security:	□Both
Huntington Ingalls Indus	tries Incorporated
Description of Security: Common Stock	
⊠Filer □Spouse Name of Security:	□Both
Campbell Insurance Ager	ıcy
Description of Security:	
Common Stock	

- * 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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Sc	hed	lule	J:	Investment	Holdings
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Check if not applicable	(an investment holding that exceeds \$5,000)
⊠Filer □Spouse	☐Both
Name of Security:	
Campbell Farm Propertie	25
Description of Security:	
Partnership Interest	
⊠Filer □Spouse	Both
Name of Security:	
Conoco Phillips	
Description of Security:	
Common Stock	
☐Filer ☐Spouse Name of Security:	Both
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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Check if not applicable	(a transaction that	t exceeds \$5,000)	
□Filer □Spouse □F	Both		
Transaction Date:			
Description of Transaction	on:		
Amount of Transaction:	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 ☐E	Both		
Transaction Date:	· · · · · · · · · · · · · · · · · · ·		
Description of Transactio	on:		
Amount of Transaction: [. 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 □B	Both		
Transaction Date:	·		
Description of Transactio	n:		
۰ ۱			
Amount of Transaction: [Category I (less than \$5,000)	Category II (\$5,000-\$24,999)	,
]	Category III (\$25,000-\$100,000)	Category IV (more than \$100,000)	

Schedule K: Transactions

* 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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Check if not applicable	a liability that exceeds \$10,000)
⊠Filer □Spouse	
Name of Creditor: Community Bank	
Address: P.O. Box 1308	
City, State, Zip: Mansfield, LA 7105	2
Name of Guarantor (If applicable):	
⊠Filer □Spouse	
Name of Creditor: Campbell Farm Propert	es
Address: 1800 A Jimmy Davis Hi	ghway
City, State, Zip: Bossier City, LA 71	112
Name of Guarantor (If applicable):	
⊠Filer □Spouse	
Name of Creditor: Campbell Insurance Ag	ency
Address: 1800 A Jimmy Davis Hi	ghway
City, State, Zip: Bossier City, LA 71	12
Name of Guarantor (If applicable):	
□Filer □Spouse	
Name of Creditor:	
Address:	
City, State, Zip:	
Name of Guarantor (If applicable):	

Schedule L: Liabilities

*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.

Revised December 2016

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Schedule M: Positions - Business

	(to be completed by m	embers of the Ethi	cs Adjudicatory Bo	ard and	
Check if not applicable	Ethics Board, and the	administrator of t	ne Ethics Administ	ration)	
□Filer □Spouse	Both	· ·			•
Name of Business:					
Address:					
City, State, Zip: _		·····		- -	
Business Description:					
Nature of Association:					
Amount of Interest:	%				
☐Filer ☐Spouse	Both				
Name of Business:				·	
Addross					
City, State, Zip: _					
Business Description:					
Nature of Association: _					
Amount of Interest:					
Filer Spouse	Both			-	
Name of Business:					
Address					
Business Description:					
Nature of Association:					
Amount of Interest:	%				

- * You are required to complete SCHEDULE M if you are a member of the Ethics Adjudicatory Board; a member of the Board of Ethics; or if you serve as administrator of the Ethics Administration.
- * You are required to disclose information related to ownership interest in a business regardless of the percentage of ownership.
- * "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.
- * Information disclosed on SCHEDULE B does not have to be restated on SCHEDULE M.

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Schedule N: Income from the State and/or Political Subdivisions

Check if not applicable

(to be completed by members of the Ethics Adjudicatory Board and Ethics Board, and the administrator of the Ethics Administration)

□Filer □Spouse □Business
Type of Income: State Political Subdivision
Name of Business (if applicable):
Name of Income Source:
Address:
City, State, Zip:
Amount of Income (exact dollar amount): \$
□Filer □Spouse □Business
Type of Income: State Political Subdivision
Name of Business (if applicable):
Name of Income Source:
Address:
City, State, Zip:
Amount of Income (exact dollar amount): \$
Filer Spouse Business
Type of Income: State Political Subdivision
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 N if you are a member of the Ethics Adjudicatory Board a member of the Board of

Tou are required to complete SCHEDULE N if you are a member of the Ethics Adjudicatory Board; a member of the Board of Ethics; or if you serve as administrator of the Ethics Administration.

* You are required to disclose all income received by a business in which you or your spouse received *regardless of the percentage of ownership in the business*.

* "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.

* Information disclosed on SCHEDULE F does not have to be restated on SCHEDULE N.

Revised December 2016

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Schedule O: Income from a Governmental Entity

(to be completed by members of the Ethics Adjudicatory Board and
Check if not applicable Ethics Board, and the administrator of the Ethics Administration)
Filer Spouse
Name of Governmental Entity:
Nature of Contract/Sub-Contract:
Value (of thing of economic value) Derived:
Filer Spouse
Name of Governmental Entity:
Nature of Contract/Sub-Contract:
Value (of thing of economic value) Derived:
Filer Spouse
Name of Governmental Entity:
Nature of Contract/Sub-Contract:
Value (of thing of economic value) Derived:
Filer Spouse
Name of Governmental Entity:
Nature of Contract/Sub-Contract:
Value (of thing of economic value) Derived:

^{*} You are required to complete SCHEDULE O if you are a member of the Ethics Adjudicatory Board; a member of the Board of Ethics; or if you serve as administrator of the Ethics Administration.

^{*} You are required to disclose the name of each governmental entity from which you or your spouse derives a "thing of economic value" through a contract or subcontract involving a governmental entity, including the Louisiana Insurance Guaranty Association, the Louisiana Health Insurance Guaranty Association, Louisiana Citizens Property Insurance Corporation, the Property Insurance Association of Louisiana, and any other quasi-public entity.

^{*} You are required to disclose the nature of the contract or subcontract, and the value of the "thing of economic value" derived.

^{*&}quot;Thing of Economic Value" means money or any other thing having economic value. The complete definition of "thing of economic value" can be found at La. R.S. 42:1102(22).