

**LOUISIANA BOARD OF ETHICS**

Mail: P.O. Box 4368, Baton Rouge, LA 70821

Fax: 225-381-7271

Upload: <https://eap.ethics.la.gov/FileUpload>**(CANDIDATE) TIER 3 PERSONAL FINANCIAL DISCLOSURE STATEMENT****This Report Covers Calendar Year:** 2022☒ ORIGINAL REPORT☐ AMENDED REPORTOffice Sought: Cameron Parish Police Jury District 6 Incumbent: ☐ Yes ☒ NoDate of Election: October 14, 2023Name (print full name): Ronald Gayle Nunez, JrMailing Address: 1580 Highway 384City, State, Zip: Lake Charles, LA 70607Name of Spouse(if applicable) (print full name): Angela Fontenot NunezSpouse's Occupation: Self-employedPrincipal Business Address: 760 Highway 384City, State, Zip: Lake Charles, LA 70607**Check all that apply:** (I have not filed yet)☐ 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 42:1124.3 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 and belief.

Ronald Gayle Nunez, Jr  
Signature of Filer

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Name of Employer: \_\_\_\_\_

Job Title: \_\_\_\_\_

Job Description: \_\_\_\_\_

☐ Filer ☐ Spouse ☐ Full-Time ☐ 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.

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

(income which exceeded \$250 from each source)

☐ Filer ☐ SpouseType of Income: ☐ State ☐ Political Subdivision ☐ Gaming Interest

Name of Income Source: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

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

☐ Filer ☐ SpouseType of Income: ☐ State ☐ Political Subdivision ☐ Gaming Interest

Name of Income Source: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

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

☐ Filer ☐ SpouseType of Income: ☐ State ☐ Political Subdivision ☐ Gaming Interest

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 (includes any income from public source such as employment income, retirement, etc.) from the State, any political subdivision, and/or a gaming interest.

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

\*The definition for (and examples of) political subdivision, gaming interest, and business are found in the *Instructions Section* of this form.

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<input type="checkbox"/> Business	Name of Business: _____
Name of Income Source: _____	
Address: _____	
City, State, Zip: _____	
Amount of Income (exact dollar amount): \$ _____	
<input type="checkbox"/> Business	Name of Business: _____
Name of Income Source: _____	
Address: _____	
City, State, Zip: _____	
Amount of Income (exact dollar amount): \$ _____	
<input type="checkbox"/> Business	Name of Business: _____
Name of Income Source: _____	
Address: _____	
City, State, Zip: _____	
Amount of Income (exact dollar amount): \$ _____	
<input type="checkbox"/> Business	Name of Business: _____
Name of Income Source: _____	
Address: _____	
City, State, Zip: _____	
Amount of Income (exact dollar amount): \$ _____	

\* You are required to complete SCHEDULE C if a business in which you or your spouse (either individually or collectively) owned at least 10% received income from a gaming interest.

\* "Income" (for a business) means gross income less costs of goods sold, and operating expenses.

\* The definition for gaming interest and business are found in the *Instructions Section* of this form.

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Description of goods or services provided:

Public Tag Office Contracted with the state to provide  
DMV Services.☐ Business Name of Business: \_\_\_\_\_

Amount of Value of Contract: \_\_\_\_\_

Duration of Contract: \_\_\_\_\_

Description of goods or services provided:

☐ Business Name of Business: \_\_\_\_\_

Amount of Value of Contract: \_\_\_\_\_

Duration of Contract: \_\_\_\_\_

Description of goods or services provided:

☐ Business Name of Business: \_\_\_\_\_

Amount of Value of Contract: \_\_\_\_\_

Duration of Contract: \_\_\_\_\_

Description of goods or services provided:

- You are required to complete Schedule D if a business, in which you or your spouse (either individually or collectively owns at least 10%, enters into a contract in the previous year with the state or political subdivision.
- The definition for business and political subdivision are found in the *Instructions Section* of this form.