LOUISIANA BOARD OF ETHICS
Mail: P.O. Box 4368, Baton Rouge, LA 70821
Fax: 225-381-7271
Upload: https://eap.ethics.la.gov/FileUpload

(ANNUAL) TIER 3 PERSONAL FINANCIAL DISCLOSURE STATEMENT

This Report Covers Calendar Year: 2024

☒ ORIGINAL REPORT

☐ AMENDED REPORT

☐ FINAL REPORT WHERE TERM ENDS IN JANUARY (COVERING JANUARY 1 THROUGH JANUARY ☐, 20☐)

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.

Elected Office Position or Charter School Name: Council Memeber Dist #1, City of Scott

Date of Appointment/Term: Jan 1 2023

Date Appointment Expires/Term Ends: Dec 31 2026

Name (print full name): Doyle James Boudreaux

Mailing Address: 200 Rue Bon Secours

City, State, Zip : Scott, La 70583

Name of Spouse(if applicable) (print full name):

Spouse's Occupation

Principal Business Address:

City, State, Zip :

Check all that apply:

☐ I have filed my federal income tax return for the year listed above.

☒ I have filed for an extension of my federal income tax return for the year listed above.

☐ I have filed my state income tax return for the year listed above.

☒ I have filed for an extension of my state income tax return for the year listed above.

NOTE: La. R.S. 42:1124.3 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

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Schedule A: Employment Information

☐ Check if not applicable

☒Filer ☐Spouse ☒Full-Time ☐Part-Time

Name of Employer: Louisiana Firefighters Retirement System

Job Title: Retired

Job Description: Retired

☒Filer ☐Spouse ☐Full-Time ☐Part-Time

Name of Employer: City of Scott

Job Title: Council Member Dist #1

Job Description:

☐Filer ☐Spouse ☐Full-Time ☐Part-Time

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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Schedule B: Filer/Spouse Income from the State, Political Subdivisions, and/or Gaming Interests

☐ Check if not applicable **(income which exceeded $250 from each source)**

☒ Filer ☐ Spouse

Type of Income: ☒ State ☐ Political Subdivision ☐ Gaming Interest

Name of Income Source: Louisiana Firefighters Reitrement System

Address: 3100 Brentwood

City, State, Zip: Baton Rouge, la 70809

Amount of Income (exact dollar amount): $ 51,408.12

☒ Filer ☐ Spouse

Type of Income: ☐ State ☒ Political Subdivision ☐ Gaming Interest

Name of Income Source: City of Scott

Address: 125 Lions Club Rd

City, State, Zip: Scott, La 70583

Amount of Income (exact dollar amount): $ 12,581.57

☐ Filer ☐ Spouse

Type 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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