

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**

Pursuant to *La. R.S. 18:1495.7*, any person who becomes a candidate for an office for which the holder of the office is required to file financial disclosure statements shall file a financial disclosure statement for the office for which he is a candidate.

GENERAL INFORMATION

- ❖ **You are required to file a Tier 3 Personal Financial Disclosure Statement (for candidates) if you are a candidate seeking election to a public office that represents a voting district having a population of fewer than 5,000.**
- ❖ If you are the incumbent seeking **re-election** and have previously filed an annual financial disclosure statement timely with the Board of Ethics (in the same calendar year and of the same Tier Level), such filing shall satisfy the requirements of this Section.
- ❖ If you are not the incumbent but filed an annual disclosure for a different office/position and you have previously filed an annual personal financial disclosure statement timely with the Board of Ethics (in the same calendar year and of the same Tier Level), such filing shall satisfy the requirements of this Section.
- ❖ You are required to report financial information on the previous calendar year.
- ❖ You may not request an extension to file your personal financial disclosure statement.
- ❖ If additional copies of the schedules are needed, copies are available at www.ethics.la.gov.
- ❖ You must file your personal financial disclosure statement with the Board of Ethics **WITHIN THREE (3) BUSINESS DAYS after the close of the qualifying period during which you filed your Notice of Candidacy for the office.**

- ❖ For additional information, call our office at 225-219-5600 or visit our website, www.ethics.la.gov, and view the *Disclosure—Frequently Asked Questions* section or the information sheets provided under *General Information—Publications*.
- ❖ Acceptable methods for filing a personal financial disclosure statement:
 - **Electronic Filing:** go to www.ethics.la.gov > Disclosure & select PFD E-File (requires login)
 - **Upload:** Go to www.ethics.la.gov > Disclosure & select File Upload (pdf format only)
 - **Fax:** 225-381-7271
 - **Mail:** Board of Ethics, P.O. Box 4368, Baton Rouge, Louisiana 70821
 - **Commercial or Hand-delivery:** 617 North Third St., LaSalle Bldg., Suite 1036, Baton Rouge, LA 70802

INSTRUCTIONS

Cover Sheet

- You are required to disclose financial information related to the **previous calendar year**.
- You are required to disclose whether you have filed your federal and state income tax returns for the previous year, or requested an extension in filing your returns. If you are a candidate in an election to be held prior to April 15th and you have not filed your taxes for the prior year, you need to check the appropriate box.
- You are required to sign the cover sheet certifying that the information provided is true and correct to the best of your knowledge and belief.

Schedule A: Employment Information

- 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.

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

- You are required to complete Schedule B if you or your spouse (if applicable) received income (which exceeded \$250 from each source) from the State, a political subdivision, and/or a gaming interest.
- Income received must be reported as an exact dollar figure.
- **“Income” (for an individual) means** taxable income and shall not include any income received pursuant to a life insurance policy.
- **“Political Subdivision” means** a parish, municipality, or any other unit of local government, including a school board or a special district authorized by law to perform governmental functions, e.g., hospital service districts, school boards (and schools under its authority), police juries, parish councils, boards of aldermen, cities, towns, villages, etc.
- **“Gaming Interest” means** [as defined in La. R.S. 18:1505.2L(3)(a)] (i) Any person who holds a license or permit as a distributor of gaming devices, who holds a license or permit as a manufacturer of gaming devices, who holds a license or permit as a device service entity, and any person who owns a truck stop or a licensed pari-mutuel or off-track wagering facility which is a licensed device establishment, all pursuant to the Video Draw Poker Devices Control Law; (ii) Any person who holds a license to conduct gaming activities on a riverboat, who holds a license or permit as a distributor or supplier of gaming devices or gaming equipment including slot machines, or who holds a license or permit as a manufacturer of gaming devices or gaming equipment including slot machines issued pursuant to the Louisiana Riverboat Economic Development and Gaming Control Act, and any person who owns a riverboat upon which gaming activities are licensed to be conducted; or (iii) Any person who holds a license or entered into a contract for the conduct of casino gaming operations, who holds a license or permit as a distributor of gaming devices or gaming equipment including slot machines, or who holds a license or permit as a manufacturer of gaming devices or gaming equipment including slot machines issued pursuant to the Louisiana Economic Development and Gaming Corporation Act, and any person who owns a casino where such gaming operations are licensed.

SCHEDULE C: Income from Gaming Interests to Business

- 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.
- **“Business” means** any corporation, limited liability company, partnership, sole proprietorship, firm, enterprise, franchise, association, business, organization, self-employed individual, holding company, trust, or any other legal entity or person.
- **“Income”** (for a business) means gross income less costs of goods sold, and operating expenses.

SCHEDULE D: CONTRACT BETWEEN BUSINESS AND STATE/POLITICAL SUBDIVISION

- 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.
- **“Business” means** any corporation, limited liability company, partnership, sole proprietorship, firm, enterprise, franchise, association, business, organization, self-employed individual, holding company, trust, or any other legal entity or person.
- **“Political Subdivision” means** a parish, municipality, or any other unit of local government, including a school board or a special district authorized by law to perform governmental functions, e.g., hospital service districts, school boards (and schools under its authority), police juries, parish councils, boards of aldermen, cities, towns, villages, clerk of court, special districts, etc.

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: _____

ORIGINAL REPORT

AMENDED REPORT

Office Sought: _____

Incumbent: Yes No

Date of Election: _____

Name (print full name): _____

Mailing Address: _____

City, State, Zip: _____

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 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.

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.

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 year listed above.

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.

Signature of Filer

LOUISIANA BOARD OF ETHICS

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

Fax: 225-381-7271

Upload: <https://eap.ethics.la.gov/FileUpload>

Schedule A: Employment Information

Check if not applicable.

<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: _____ _____
<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 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.

LOUISIANA BOARD OF ETHICS

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

Fax: 225-381-7271

Upload: <https://eap.ethics.la.gov/FileUpload>

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

(Income which exceeded \$250 from each source)

Check if not applicable

<input type="checkbox"/> Filer <input type="checkbox"/> Spouse Type of Income: <input type="checkbox"/> State <input type="checkbox"/> Political Subdivision <input type="checkbox"/> Gaming Interest Name of Income Source: _____ Address: _____ City, State, Zip: _____ Amount of Income (exact dollar amount): \$ _____
<input type="checkbox"/> Filer <input type="checkbox"/> Spouse Type of Income: <input type="checkbox"/> State <input type="checkbox"/> Political Subdivision <input type="checkbox"/> Gaming Interest Name of Income Source: _____ Address: _____ City, State, Zip: _____ Amount of Income (exact dollar amount): \$ _____
<input type="checkbox"/> Filer <input type="checkbox"/> Spouse Type of Income: <input type="checkbox"/> State <input type="checkbox"/> Political Subdivision <input type="checkbox"/> Gaming Interest Name of Income Source: _____ Address: _____ City, State, Zip: _____ Amount of Income (exact dollar amount): \$ _____
<input type="checkbox"/> Filer <input type="checkbox"/> Spouse Type of Income: <input type="checkbox"/> State <input type="checkbox"/> Political Subdivision <input type="checkbox"/> 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.

LOUISIANA BOARD OF ETHICS

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

Fax: 225-381-7271

Upload: <https://eap.ethics.la.gov/FileUpload>

Schedule C: INCOME FROM GAMING INTERESTS TO BUSINESS

(Income which exceeded \$250 from each source)

Check if not applicable.

<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): \$ _____
<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.**

SCHEDULE D: CONTRACT BETWEEN BUSINESS AND STATE/POLITICAL SUBDIVISION

Check if not applicable.

<input type="checkbox"/> Business	Name of business: _____ Amount or Value of Contract: _____ Duration of Contract: _____ Description of goods or services provided: _____ _____ _____
<input type="checkbox"/> Business	Name of business: _____ Amount or Value of Contract: _____ Duration of Contract: _____ Description of goods or services provided: _____ _____ _____
<input type="checkbox"/> Business	Name of business: _____ Amount or Value of Contract: _____ Duration of Contract: _____ Description of goods or services provided: _____ _____ _____
<input type="checkbox"/> Business	Name of business: _____ Amount or 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.