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**LOUISIANA BOARD OF ETHICS**  
Post Office Box 4368  
Baton Rouge, Louisiana 70821

**TIER 1 PERSONAL FINANCIAL DISCLOSURE STATEMENT (ANNUAL)**

I currently hold an office that would require me to file a Tier 2, Tier 2.1, or Tier 3 Personal Financial Disclosure Statement. As such, I have completed SCHEDULE D.

This Report Covers Calendar Year: 2016

ORIGINAL REPORT

AMENDED REPORT

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

A final report 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: Attorney General

Name of Filer (print full name): Jeffrey Martin Landry

Address (residence): 203 Silver Oak Lane

City, State, Zip: Broussard LA 70518

Name of Spouse(if applicable) (print full name): Sharon Louise LeBlanc Landry

Spouse's Occupation: Housewife

Principal Business Address: \_\_\_\_\_

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

**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.

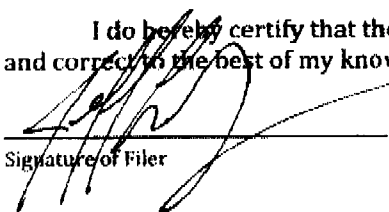
I have filed my federal income tax return for the previous year.

I have filed for an extension of my federal income tax return for the previous year.

**NOTE: La. R.S. 42:1124.1 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, information, and belief.

  
\_\_\_\_\_  
Signature of Filer

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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>Dept. of Justice</u>
Job Title: <u>Attorney General</u>
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 complete SCHEDULE A 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: Positions - Business

Check if not applicable

Filer     Spouse     Both

Amount of Interest : 100 %

Name of Business: J. M. Landry + Assoc.

Address: P O Box 990

City, State, Zip: Broussard, LA 70518

Business Description: Consulting

Nature of Association: Owner

Filer     Spouse     Both

Amount of Interest : 20 %

Name of Business: Regal Developers

Address: P O Box 12240

City, State, Zip: New Iberia, LA 70562

Business Description: Real Estate Holdings

Nature of Association: member

Filer     Spouse     Both

Amount of Interest : 35 %

Name of Business: The File Depot

Address: P O Box 990

City, State, Zip: Broussard, LA 70518

Business Description: Business file storage

Nature of Association: member

\* You are required to complete SCHEDULE B if you or your spouse is a director, officer, owner, partner, member, or trustee of a business **OR** 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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### Schedule B: Positions - Business

Check if not applicable

<input checked="" type="checkbox"/> Filer <input type="checkbox"/> Spouse <input type="checkbox"/> Both Amount of Interest: <u>  P  </u> <u>  50  </u> % Name of Business: <u>Backwater Advisory Group</u> Address: <u>720 St. Nazaire</u> City, State, Zip: <u>Broussard, LA 70518</u> Business Description: <u>Consulting</u> Nature of Association: <u>partnership</u>
<input checked="" type="checkbox"/> Filer <input type="checkbox"/> Spouse <input type="checkbox"/> Both Amount of Interest: <u>                  </u> <u>  100  </u> % Name of Business: <u>Evergreen Contractors</u> Address: <u>P O Box 990</u> City, State, Zip: <u>Broussard, LA 70518</u> Business Description: <u>Service Co</u> Nature of Association: <u>member</u>
<input checked="" type="checkbox"/> Filer <input type="checkbox"/> Spouse <input type="checkbox"/> Both Amount of Interest: <u>                  </u> <u>  100  </u> % Name of Business: <u>Pume Environmental Resources, LLC</u> Address: <u>720 St. Nazaire</u> City, State, Zip: <u>Broussard, LA 70518</u> Business Description: <u>Service Co</u> Nature of Association: <u>member</u>

\* You are required to complete SCHEDULE B if you or your spouse is a director, officer, owner, partner, member, or trustee of a business OR 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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### Schedule B: Positions - Business

Check if not applicable

Filer     Spouse     Both

Amount of Interest : 100 %

Name of Business: Prime Response, LLC

Address: 720 St. Nazaire

City, State, Zip: Broussard, LA 70518

Business Description: service Co

Nature of Association: member

Filer     Spouse     Both

Amount of Interest : 50 %

Name of Business: WJ + Assoc

Address: P O Box 990

City, State, Zip: Broussard, LA 70518

Business Description: Real Estate Holding

Nature of Association: member

Filer     Spouse     Both

Amount of Interest : 25 %

Name of Business: JD Productions

Address: 1019 Albertson Prkwy

City, State, Zip: Broussard, LA 70518

Business Description: Service Co

Nature of Association: member

\* You are required to complete SCHEDULE B if you or your spouse is a director, officer, owner, partner, member, or trustee of a business OR if you or your spouse (either individually or collectively) owns an interest in a business which exceeds 10%.

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### Schedule B: Positions - Business

Check if not applicable

Filer     Spouse     Both

Amount of Interest : 700 %

Name of Business: Prime Strategic Service

Address: P O Box 990

City, State, Zip: Broussard, LA 70518

Business Description: Service Co.

Nature of Association: member

Filer     Spouse     Both

Amount of Interest : 100 %

Name of Business: UST Environmental Service

Address: P O Box 990

City, State, Zip: Broussard, LA 70518

Business Description: Service Co

Nature of Association: Member

Filer     Spouse     Both

Amount of Interest : 25 %

Name of Business: Bucks & Ducks

Address: P O Box 990

City, State, Zip: Broussard, LA 70518

Business Description: \_\_\_\_\_

Nature of Association: Member

\* You are required to complete SCHEDULE B if you or your spouse is a director, officer, owner, partner, member, or trustee of a business OR 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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### Schedule C: Positions - Nonprofit

Check if not applicable

<input checked="" type="checkbox"/> Filer <input type="checkbox"/> Spouse Name of Organization: _____ Address: _____ City, State, Zip: _____ Nature of Association: _____ Description of Organization: _____
<input type="checkbox"/> Filer <input type="checkbox"/> Spouse Name of Organization: _____ Address: _____ City, State, Zip: _____ Nature of Association: _____ Description of Organization: _____
<input type="checkbox"/> Filer <input type="checkbox"/> 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.

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### Schedule D: Other Offices/Positions Held

Check if not applicable (Positions that would require the filing of a Tier 2, Tier 2.1, or Tier 3  
Personal Financial Disclosure Statement)

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

\* 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, 42:1124.2.1, or 42:1124.3.



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### Schedule E: Immovable Property

Check if not applicable (where the value of the interest in the parcel exceeds \$2,000)

Address or Location of Property:  Filer  Spouse  Both  
 State: LA Parish/County: Lafayette  
 Address: 203 Silver Oak Lane Broussard, LA 70518  
 Description of Property: Residence

Value of the Interest in the Parcel by Category:  
 Category I (less than \$5,000)     Category II (\$5,000-\$24,999)     Category III (\$25,000-\$49,999)  
 Category IV (\$50,000-\$99,999)     Category V (\$100,000-\$199,999)     Category VI (\$200,000 or more)

Address or Location of Property:  Filer  Spouse  Both  
 State: \_\_\_\_\_ Parish/County: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Description of Property: \_\_\_\_\_

Value of the Interest in the Parcel by Category:  
 Category I (less than \$5,000)     Category II (\$5,000-\$24,999)     Category III (\$25,000-\$49,999)  
 Category IV (\$50,000-\$99,999)     Category V (\$100,000-\$199,999)     Category VI (\$200,000 or more)

Address or Location of Property:  Filer  Spouse  Both  
 State: \_\_\_\_\_ Parish/County: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Description of Property: \_\_\_\_\_

Value of the Interest in the Parcel by Category:  
 Category I (less than \$5,000)     Category II (\$5,000-\$24,999)     Category III (\$25,000-\$49,999)  
 Category IV (\$50,000-\$99,999)     Category V (\$100,000-\$199,999)     Category VI (\$200,000 or more)

\* You are required to disclose the address, if any, and if no address, the location by state, and parish/county.  
\* Fair market value and use value are determined by the assessor for purposes of ad valorem taxes.

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### Schedule F: Income from the State, Political Subdivisions, and/or Gaming Interests

Check if not applicable

<input type="checkbox"/> Filer <input type="checkbox"/> Spouse <input type="checkbox"/> Business (where amount of interest exceeds 10%) Type of Income: <input type="checkbox"/> State <input type="checkbox"/> Political Subdivision <input type="checkbox"/> Gaming Interest Name of Business (if applicable): _____ Name of Income Source: _____ Address: _____ City, State, Zip: _____ Amount of Income (exact dollar amount): \$ _____
<input type="checkbox"/> Filer <input type="checkbox"/> Spouse <input type="checkbox"/> Business (where amount of interest exceeds 10%) Type of Income: <input type="checkbox"/> State <input type="checkbox"/> Political Subdivision <input type="checkbox"/> Gaming Interest Name of Business (if applicable): _____ Name of Income Source: _____ Address: _____ City, State, Zip: _____ Amount of Income (exact dollar amount): \$ _____
<input type="checkbox"/> Filer <input type="checkbox"/> Spouse <input type="checkbox"/> Business (where amount of interest exceeds 10%) Type of Income: <input type="checkbox"/> State <input type="checkbox"/> Political Subdivision <input type="checkbox"/> 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.

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### Schedule G: Income

Check if not applicable (income that exceeds \$1,000 from each source)

Filer  Spouse

Name of Source of Income: UST Environmental Service Co

Address: P O Box 990

City, State, Zip: Broussard, LA 70518

Nature of Services Rendered: Service Co

Type of Income: Dividends

Amount of Income:  Category I (less than \$5,000)  Category II (\$5,000-\$24,999)  Category III (\$25,000-\$49,999)  
 Category IV (\$50,000-\$99,999)  Category V (\$100,000-\$199,999)  Category VI (\$200,000 or more)

Filer  Spouse

Name of Source of Income: The Law Firm of JM Landry

Address: P O Box 990

City, State, Zip: Broussard, LA 70518

Nature of Services Rendered: Law Firm

Type of Income: Dividends

Amount of Income:  Category I (less than \$5,000)  Category II (\$5,000-\$24,999)  Category III (\$25,000-\$49,999)  
 Category IV (\$50,000-\$99,999)  Category V (\$100,000-\$199,999)  Category VI (\$200,000 or more)

Filer  Spouse

Name of Source of Income: Backwater Advisory Group

Address: 720 St. Nazaire

City, State, Zip: Broussard, LA 70518

Nature of Services Rendered: Consulting

Type of Income: Dividends

Amount of Income:  Category I (less than \$5,000)  Category II (\$5,000-\$24,999)  Category III (\$25,000-\$49,999)  
 Category IV (\$50,000-\$99,999)  Category V (\$100,000-\$199,999)  Category VI (\$200,000 or more)

- \* You are required to complete SCHEDULE G if you or your spouse received income in excess of \$1,000 from each source of income.
- \* "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 disclose income derived from disability payments from any source; or child support or alimony payments contained in a court order.
- \* Income that is reported on Schedule F does not have to be restated on SCHEDULE G.
- \* If the income is derived from professional or consulting services and the disclosure of the source's name or address is prohibited by law or professional code, such income should be disclosed on SCHEDULE H.

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### Schedule G: Income

Check if not applicable (income that exceeds \$1,000 from each source)

Filer  Spouse

Name of Source of Income: J M Landry & Assoc

Address: P O Box 990

City, State, Zip: Broussard, LA 70518

Nature of Services Rendered: Consulting

Type of Income: Dividends

Amount of Income:  Category I (less than \$5,000)  Category II (\$5,000-\$24,999)  Category III (\$25,000-\$49,999)  
 Category IV (\$50,000-\$99,999)  Category V (\$100,000-\$199,999)  Category VI (\$200,000 or more)

Filer  Spouse

Name of Source of Income: Evergreen Contractors, LLC

Address: 720 St. Nazaire

City, State, Zip: Broussard, LA 70518

Nature of Services Rendered: Service Co

Type of Income: Dividends

Amount of Income:  Category I (less than \$5,000)  Category II (\$5,000-\$24,999)  Category III (\$25,000-\$49,999)  
 Category IV (\$50,000-\$99,999)  Category V (\$100,000-\$199,999)  Category VI (\$200,000 or more)

Filer  Spouse

Name of Source of Income: Prime Environmental Resources LLC

Address: P O Box 13816

City, State, Zip: New Iberia, LA 70562

Nature of Services Rendered: Service Co

Type of Income: Dividends

Amount of Income:  Category I (less than \$5,000)  Category II (\$5,000-\$24,999)  Category III (\$25,000-\$49,999)  
 Category IV (\$50,000-\$99,999)  Category V (\$100,000-\$199,999)  Category VI (\$200,000 or more)

\* You are required to complete SCHEDULE G if you or your spouse received income in excess of \$1,000 from each source of income.  
 \* "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 disclose income derived from disability payments from any source; or child support or alimony payments contained in a court order.  
 \* Income that is reported on Schedule F does not have to be restated on SCHEDULE G.  
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### Schedule G: Income

Check if not applicable (income that exceeds \$1,000 from each source)

<input type="checkbox"/> Filer	<input checked="" type="checkbox"/> Spouse		
Name of Source of Income: <u>Service Tool Co</u>			
Address: <u>P O Box 12240</u>			
City, State, Zip: <u>New Iberia LA 70562</u>			
Nature of Services Rendered: <u>Tool Co</u>			
Type of Income: <u>Dividends</u>			
Amount of Income: <input type="checkbox"/> Category I (less than \$5,000) <input type="checkbox"/> Category II (\$5,000-\$24,999) <input type="checkbox"/> Category III (\$25,000-\$49,999)			
<input type="checkbox"/> Category IV (\$50,000-\$99,999) <input type="checkbox"/> Category V (\$100,000-\$199,999) <input checked="" type="checkbox"/> Category VI (\$200,000 or more)			
<input type="checkbox"/> Filer	<input checked="" type="checkbox"/> Spouse		
Name of Source of Income: <u>Regal Developers</u>			
Address: <u>P O Box 12240</u>			
City, State, Zip: <u>New Iberia LA 70562</u>			
Nature of Services Rendered: <u>Real Estate Holding</u>			
Type of Income: <u>Dividends</u>			
Amount of Income: <input type="checkbox"/> Category I (less than \$5,000) <input type="checkbox"/> Category II (\$5,000-\$24,999) <input checked="" type="checkbox"/> Category III (\$25,000-\$49,999)			
<input type="checkbox"/> Category IV (\$50,000-\$99,999) <input type="checkbox"/> Category V (\$100,000-\$199,999) <input type="checkbox"/> Category VI (\$200,000 or more)			
<input checked="" type="checkbox"/> Filer	<input type="checkbox"/> Spouse		
Name of Source of Income: <u>Prime Environmental</u>			
Address: <u>P O Box 990</u>			
City, State, Zip: <u>Broussard, LA 70518</u>			
Nature of Services Rendered: <u>Service Co</u>			
Type of Income: <u>Dividends</u>			
Amount of Income: <input type="checkbox"/> Category I (less than \$5,000) <input checked="" type="checkbox"/> Category II (\$5,000-\$24,999) <input type="checkbox"/> Category III (\$25,000-\$49,999)			
<input type="checkbox"/> Category IV (\$50,000-\$99,999) <input type="checkbox"/> Category V (\$100,000-\$199,999) <input type="checkbox"/> Category VI (\$200,000 or more)			

\* You are required to complete SCHEDULE G if you or your spouse received income in excess of \$1,000 from each source of income.  
 \* "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 disclose income derived from disability payments from any source; or child support or alimony payments contained in a court order.  
 \* Income that is reported on Schedule F does not have to be restated on SCHEDULE G.  
 \* If the income is derived from professional or consulting services and the disclosure of the source's name or address is prohibited by law or professional code, such income should be disclosed on SCHEDULE H.

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### Schedule G: Income

Check if not applicable (income that exceeds \$1,000 from each source)

<input checked="" type="checkbox"/> Filer <input type="checkbox"/> Spouse		
Name of Source of Income: <u>File Depot</u>		
Address: <u>P O Box 990</u>		
City, State, Zip: <u>Broussard, LA 70518</u>		
Nature of Services Rendered: <u>Business File Storage</u>		
Type of Income: <u>Dividends</u>		
Amount of Income: <input checked="" type="checkbox"/> Category I (less than \$5,000) <input type="checkbox"/> Category II (\$5,000-\$24,999) <input type="checkbox"/> Category III (\$25,000-\$49,999) <input type="checkbox"/> Category IV (\$50,000-\$99,999) <input type="checkbox"/> Category V (\$100,000-\$199,999) <input type="checkbox"/> Category VI (\$200,000 or more)		
<input checked="" type="checkbox"/> Filer <input type="checkbox"/> Spouse		
Name of Source of Income: <u>W. J. + Assoc</u>		
Address: <u>P O Box 990</u>		
City, State, Zip: <u>Broussard, LA 70518</u>		
Nature of Services Rendered: <u>Real Estate Holding</u>		
Type of Income: <u>Dividends</u>		
Amount of Income: <input type="checkbox"/> Category I (less than \$5,000) <input type="checkbox"/> Category II (\$5,000-\$24,999) <input type="checkbox"/> Category III (\$25,000-\$49,999) <input checked="" type="checkbox"/> Category IV (\$50,000-\$99,999) <input type="checkbox"/> Category V (\$100,000-\$199,999) <input type="checkbox"/> Category VI (\$200,000 or more)		
<input checked="" type="checkbox"/> Filer <input type="checkbox"/> Spouse		
Name of Source of Income: <u>Bucks + Ducks</u>		
Address: <u>P O Box 990</u>		
City, State, Zip: <u>Broussard, LA 70518</u>		
Nature of Services Rendered: <u>Lease</u>		
Type of Income: <u>Dividends</u>		
Amount of Income: <input checked="" type="checkbox"/> Category I (less than \$5,000) <input type="checkbox"/> Category II (\$5,000-\$24,999) <input type="checkbox"/> Category III (\$25,000-\$49,999) <input type="checkbox"/> Category IV (\$50,000-\$99,999) <input type="checkbox"/> Category V (\$100,000-\$199,999) <input type="checkbox"/> Category VI (\$200,000 or more)		

\* You are required to complete SCHEDULE G if you or your spouse received income in excess of \$1,000 from each source of income.  
 \* "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 disclose income derived from disability payments from any source; or child support or alimony payments contained in a court order.  
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 \* If the income is derived from professional or consulting services and the disclosure of the source's name or address is prohibited by law or professional code, such income should be disclosed on SCHEDULE H.

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### Schedule G: Income

Check if not applicable (income that exceeds \$1,000 from each source)

Filer  Spouse

Name of Source of Income: Prime Strategic

Address: P O Box 990

City, State, Zip: Broussard, LA 70518

Nature of Services Rendered: Service Co

Type of Income: Dividends

Amount of Income:  Category I (less than \$5,000)  Category II (\$5,000-\$24,999)  Category III (\$25,000-\$49,999)  
 Category IV (\$50,000-\$99,999)  Category V (\$100,000-\$199,999)  Category VI (\$200,000 or more)

Filer  Spouse

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

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

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

Nature of Services Rendered: \_\_\_\_\_

Type of Income: \_\_\_\_\_

Amount of Income:  Category I (less than \$5,000)  Category II (\$5,000-\$24,999)  Category III (\$25,000-\$49,999)  
 Category IV (\$50,000-\$99,999)  Category V (\$100,000-\$199,999)  Category VI (\$200,000 or more)

Filer  Spouse

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

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

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

Nature of Services Rendered: \_\_\_\_\_

Type of Income: \_\_\_\_\_

Amount of Income:  Category I (less than \$5,000)  Category II (\$5,000-\$24,999)  Category III (\$25,000-\$49,999)  
 Category IV (\$50,000-\$99,999)  Category V (\$100,000-\$199,999)  Category VI (\$200,000 or more)

\* You are required to complete SCHEDULE G if you or your spouse received income in excess of \$1,000 from each source of income.  
 \* "Income" (for an individual) means taxable income and shall not include any income received pursuant to a life insurance policy.  
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 \* Income that is reported on Schedule F does not have to be restated on SCHEDULE G.  
 \* If the income is derived from professional or consulting services and the disclosure of the source's name or address is prohibited by law or professional code, such income should be disclosed on SCHEDULE H.

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## Schedule H: Income from Certain Professional or Consulting Services

CHECK if no income was received from professional or consulting services (including mental health, medical health, or legal services) when the disclosure of the name or address of the source of income would be prohibited by law or by a professional code.

UTILITIES	INDUSTRY TYPE	# OF CLIENTS	AMOUNT OF INCOME BY CATEGORY	INCOME RECIPIENT
	Electric		<input type="checkbox"/> I <input type="checkbox"/> II <input type="checkbox"/> III <input type="checkbox"/> IV <input type="checkbox"/> V <input type="checkbox"/> VI	<input type="checkbox"/> Filer <input type="checkbox"/> Spouse <input type="checkbox"/> Both
	Gas		<input type="checkbox"/> I <input type="checkbox"/> II <input type="checkbox"/> III <input type="checkbox"/> IV <input type="checkbox"/> V <input type="checkbox"/> VI	<input type="checkbox"/> Filer <input type="checkbox"/> Spouse <input type="checkbox"/> Both
	Telephone		<input type="checkbox"/> I <input type="checkbox"/> II <input type="checkbox"/> III <input type="checkbox"/> IV <input type="checkbox"/> V <input type="checkbox"/> VI	<input type="checkbox"/> Filer <input type="checkbox"/> Spouse <input type="checkbox"/> Both
	Water		<input type="checkbox"/> I <input type="checkbox"/> II <input type="checkbox"/> III <input type="checkbox"/> IV <input type="checkbox"/> V <input type="checkbox"/> VI	<input type="checkbox"/> Filer <input type="checkbox"/> Spouse <input type="checkbox"/> Both
	Cable Television Companies		<input type="checkbox"/> I <input type="checkbox"/> II <input type="checkbox"/> III <input type="checkbox"/> IV <input type="checkbox"/> V <input type="checkbox"/> VI	<input type="checkbox"/> Filer <input type="checkbox"/> Spouse <input type="checkbox"/> Both

TRANSPORTATION	INDUSTRY TYPE	# OF CLIENTS	AMOUNT OF INCOME BY CATEGORY	INCOME RECIPIENT
	Intrastate Companies		<input type="checkbox"/> I <input type="checkbox"/> II <input type="checkbox"/> III <input type="checkbox"/> IV <input type="checkbox"/> V <input type="checkbox"/> VI	<input type="checkbox"/> Filer <input type="checkbox"/> Spouse <input type="checkbox"/> Both
	Pipeline Companies		<input type="checkbox"/> I <input type="checkbox"/> II <input type="checkbox"/> III <input type="checkbox"/> IV <input type="checkbox"/> V <input type="checkbox"/> VI	<input type="checkbox"/> Filer <input type="checkbox"/> Spouse <input type="checkbox"/> Both
	Oil & Gas Exploration		<input type="checkbox"/> I <input type="checkbox"/> II <input type="checkbox"/> III <input type="checkbox"/> IV <input type="checkbox"/> V <input type="checkbox"/> VI	<input type="checkbox"/> Filer <input type="checkbox"/> Spouse <input type="checkbox"/> Both
	Oil & Gas Production		<input type="checkbox"/> I <input type="checkbox"/> II <input type="checkbox"/> III <input type="checkbox"/> IV <input type="checkbox"/> V <input type="checkbox"/> VI	<input type="checkbox"/> Filer <input type="checkbox"/> Spouse <input type="checkbox"/> Both
	Oil & Gas Retailers		<input type="checkbox"/> I <input type="checkbox"/> II <input type="checkbox"/> III <input type="checkbox"/> IV <input type="checkbox"/> V <input type="checkbox"/> VI	<input type="checkbox"/> Filer <input type="checkbox"/> Spouse <input type="checkbox"/> Both

FINANCE & INSURANCE	INDUSTRY TYPE	# OF CLIENTS	AMOUNT OF INCOME BY CATEGORY	INCOME RECIPIENT
	Banks		<input type="checkbox"/> I <input type="checkbox"/> II <input type="checkbox"/> III <input type="checkbox"/> IV <input type="checkbox"/> V <input type="checkbox"/> VI	<input type="checkbox"/> Filer <input type="checkbox"/> Spouse <input type="checkbox"/> Both
	Savings & Loan Assoc.		<input type="checkbox"/> I <input type="checkbox"/> II <input type="checkbox"/> III <input type="checkbox"/> IV <input type="checkbox"/> V <input type="checkbox"/> VI	<input type="checkbox"/> Filer <input type="checkbox"/> Spouse <input type="checkbox"/> Both
	Loan and/or Finance		<input type="checkbox"/> I <input type="checkbox"/> II <input type="checkbox"/> III <input type="checkbox"/> IV <input type="checkbox"/> V <input type="checkbox"/> VI	<input type="checkbox"/> Filer <input type="checkbox"/> Spouse <input type="checkbox"/> Both
	Manufacturing Firms		<input type="checkbox"/> I <input type="checkbox"/> II <input type="checkbox"/> III <input type="checkbox"/> IV <input type="checkbox"/> V <input type="checkbox"/> VI	<input type="checkbox"/> Filer <input type="checkbox"/> Spouse <input type="checkbox"/> Both
	Mining Companies		<input type="checkbox"/> I <input type="checkbox"/> II <input type="checkbox"/> III <input type="checkbox"/> IV <input type="checkbox"/> V <input type="checkbox"/> VI	<input type="checkbox"/> Filer <input type="checkbox"/> Spouse <input type="checkbox"/> Both
	Life Insurance Companies		<input type="checkbox"/> I <input type="checkbox"/> II <input type="checkbox"/> III <input type="checkbox"/> IV <input type="checkbox"/> V <input type="checkbox"/> VI	<input type="checkbox"/> Filer <input type="checkbox"/> Spouse <input type="checkbox"/> Both
	Casualty Insurance Comp.		<input type="checkbox"/> I <input type="checkbox"/> II <input type="checkbox"/> III <input type="checkbox"/> IV <input type="checkbox"/> V <input type="checkbox"/> VI	<input type="checkbox"/> Filer <input type="checkbox"/> Spouse <input type="checkbox"/> Both
Other Insurance Companies		<input type="checkbox"/> I <input type="checkbox"/> II <input type="checkbox"/> III <input type="checkbox"/> IV <input type="checkbox"/> V <input type="checkbox"/> VI	<input type="checkbox"/> Filer <input type="checkbox"/> Spouse <input type="checkbox"/> Both	