

CITY OF NEW ORLEANS

FINANCIAL DISCLOSURE FORM (2007)

Reference: Ordinance Number 8967 M.C.S.
City Code: Chapter 2, Section 2-691 to 2-692
(See the Ordinance for definitions and for who should file)

SECTION 2-692 CONTENTS OF FINANCIAL STATEMENT

A. (1) The financial statement required by this Section shall be filed on a form prescribed by the Clerk of the Council of the City of New Orleans and shall include the following information for the preceding calendar year:

(a.) The full name and residence address of the individual who is required to file:

Your Name and Title: C. Ray Nagin (Mayor, 2008)
Name of Office Held: Mayor
Home Address: 28 Park Island Dr. NO, La. 70122
(City) (State) (Zip Code)

(b.) The full name of the individual's spouse, if any, and the spouse's occupation and principal business address:

Spouse's Name: Seletha Nagin
Occupation/Employer: Homemaker
Principal Business Address: 28 Park Island Dr. NO, LA 70122
(City) (State) (Zip Code)

\* \* \*

Note: For the following when an amount is required to be disclosed, it shall be sufficient to report the amount by category of value. The categories shall be (a) Category I, less than five thousand dollars; (b) Category II, \$5,000-\$24,999; (c) Category III, \$25,000-\$49,999; (d) Category IV, \$50,000-\$99,999; (e) Category V, \$100,000-\$199,999; (f) Category VI, \$200,000 or more. Amounts required to be disclosed shall be valued at actual or fair market value, whichever is greater.

\* \* \*

(c.) The name, address and nature of association with and the amount of interest in each business in which the individual or spouse is a director, officer, owner, partner, member, or trustee, or in which the individual or spouse, either individually or collectively, holds an interest worth in excess of ten percent:

Use additional pages if necessary.

Table with 3 columns: BUSINESS NAME & ADDRESS, NATURE OF ASSOCIATION, AMOUNT OF INTEREST. Row 1: Stone Age LLC, Passive Investor, Casued... 1/09

\* "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.


(d.) The name, address, type and amount of each source of income\*\*, in excess of one thousand dollars, received by the individual or spouse, and the nature of the services rendered therefore, if any. For income derived from mental health, medical health, or legal services rendered, the individual need only show the amount of the income and not the identity of any individual patient or client; use additional pages if necessary.

**1. YOURSELF:**

Salary: Category II

Paid By: City of New Orleans

For: Salary as Mayor

BONUS AND COMMISSIONS N/A:

Paid BY: \_\_\_\_\_

For: \_\_\_\_\_

RENTS AND ROYALTIES: N/A

Paid By: \_\_\_\_\_

For: \_\_\_\_\_

OTHER INCOME: Category I

Description: Passive real estate investments

Paid By: MBS Investments

For: Investment Income

\*\* "Income" means any income from whatever source derived, including but not limited to the following items: compensation for services, including fees, salaries, commission, and similar items, income derived from business, gains derived from dealings in property; interest, rents; royalties; dividends; annuities; income from life insurance and endowment contracts; pensions; income from discharge of indebtedness; distributive share of partnership income; and income from interest in an estate in an estate or trust.

**2. SPOUSE:**

Salary: N/A

Paid By: \_\_\_\_\_

For: \_\_\_\_\_

BONUS AND COMMISSIONS: N/A

Paid By: \_\_\_\_\_

For: \_\_\_\_\_

RENTS AND ROYALTIES: N/A

Paid By: \_\_\_\_\_

For: \_\_\_\_\_

OTHER INCOME: N/A

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

Paid By: \_\_\_\_\_

For: \_\_\_\_\_

- (e) A brief description, location and address of each parcel of real property, the fair market value of which exceeds two thousand dollars, in which the individual or spouse, either individually or collectively, has an interest; use additional pages if necessary.

DESCRIPTION	LOCATION	ADDRESS
<u>Residence: CA VI</u>	<u>New Orleans</u>	<u>28 Park Island Dr.</u>
<u>Trampoline CA VI</u>	<u>Dallas TX</u>	
_____	_____	_____
_____	_____	_____
_____	_____	_____

- (f) A brief description, amount, and date of any purchase, sale, exchange, donation, gift, or other acquisition or disposition, in excess of one thousand dollars, of any real property, and of any stocks, bonds, commodities futures, or other forms of securities, including but not limited to, any option to acquire and/or dispose of any stocks, bonds, commodities futures, other forms of securities, negotiable instruments, movable or immovable property, or any other interest.

DESCRIPTION	DATE	AMOUNT
<u>Stock Sale - CA VI</u>	<u>New Orleans</u>	<u>Charles Schwab</u>


(g) The name, address, and amount of liability owed to any creditor by the individual or spouse which exceeds ten thousand dollars, excluding any loan secured by a personal motor vehicle, household furniture, or appliances, if such loans do not exceed the purchase of the item which secures it.

NAME	ADDRESS	AMOUNT
Whitney Nat'l Bank	New Orleans, LA	Cat VII
Even Hope Mortgage	Dallas, TX	Cat IV

CITY OF NEW ORLEANS  
FINANCIAL DISCLOSURE FORM

AFFIDAVIT

STATE OF LOUISIANA

PARISH OF ORLEANS

BEFORE ME, Victoria Hines the undersigned authority, duly commissioned and qualified in the aforementioned Parish and State, therein residing, personally came and appeared:

C. P. Hays

who is to me known to be the person represented, and who, after being duly sworn, acknowledged to me that the information contained within the Financial Disclosure Form, attached hereto, has been prepared by him/her, and is true and correct to the best of his/her knowledge, information and belief.

Sworn to and Subscribed before me,

this 30 day of March, 2009.

Victoria Hines

NOTARY PUBLIC

Louisiana Bar Roll # 29569  
My commission is for life.