

Southeastern
SA# _____

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

**COMPLIMENTARY ADMISSION, LODGING AND/OR TRANSPORTATION
DISCLOSURE STATEMENT**

Pursuant to La. R.S. 42:1115.2, any public servant who accepts complimentary admission, lodging, or transportation, or reimbursement for such expenses shall file a certification with the Board of Ethics **WITHIN 60 DAYS AFTER SUCH ACCEPTANCE.**

Agency Head Certification (to be completed prior to event attendance):

By my signature below, I, _____, (agency head printed name)

- Certify that the Public Servant's acceptance of the complimentary admission, lodging and transportation, or reimbursement of such expense (check applicable box)
 - is of direct benefit to the agency or
 - will enhance the knowledge or skill of the Public Servant as it relates to the performance of his public service.
- Certify that I approved the Public Servant's acceptance of the complimentary admission, lodging and transportation, or reimbursement of such expense prior to such acceptance.

AGENCY HEAD'S SIGNATURE: _____

PUBLIC SERVANT'S FULL NAME: _____

ADDRESS: _____

CITY, STATE, ZIP: _____

POSITION TITLE: _____

EMPLOYING AGENCY: _____

DATE OF EVENT: _____

LOCATION: _____

DESCRIPTION OF PURPOSE OF PUBLIC SERVANT'S ACCEPTANCE OF COMPLIMENTARY ADMISSION, LODGING AND/OR REASONABLE TRANSPORTATION:

**PERSON/ORGANIZATION PROVIDING
ADMISSION, LODGING, AND/OR TRANSPORTATION:** _____

AMOUNT EXPENDED/REIMBURSED ON PUBLIC SERVANT

ADMISSION: \$ _____ LODGING: \$ _____ TRANSPORTATION: \$ _____

Public Servant Attestation:

By my signature below, the above provided information is true and correct to the best of my knowledge, information, and belief.

PUBLIC SERVANT'S SIGNATURE: _____

DATE: _____