

LOUISIANA BOARD OF ETHICS

Post Office Box 4368
Baton Rouge, Louisiana 70821

TIER 1 PERSONAL FINANCIAL DISCLOSURE STATEMENT

This Report Covers Calendar Year: 2010

- ORIGINAL REPORT
- AMENDED REPORT

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 K.

Office/Position Held: Board of Regents/Commissioner of Higher Education

Name of Filer (print full name): James Edward Purcell

Address (residence): P. O. Box 3677

City, State, Zip Baton Rouge, LA 70821-3677

Name of Spouse (print full name) Sandra Dee Purcell

Spouse's Occupation Counselor/Vice Principal, Lisa Academy

Principal Business Address 21 Corporate Hill Drive

City, State, Zip: Little Rock, AR 72205

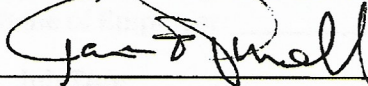
Check all that apply:

- 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, after having been duly sworn, 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

Sworn to and subscribed before me this 3rd day of May, 2011.

Constance A. Koury

Notary Public (print name)

Constance A. Koury

Notary Public (signature)

ID# Bar Roll # 07908

Date Commission Expires At Death

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Schedule A: Employment Information

Filer Spouse Full-Time Part-Time

Name of Employer: Board of Regents

Job Title: Commissioner of Higher Education

Job Description: See attached.

Filer Spouse Full-Time Part-Time

Name of Employer: Lisa Academy

Job Title: Counselor/Vice Principal

Job Description: See attached

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 complete SCHEDULE A to disclose employment information related to both you and your spouse.
- 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 D: Income from the State, Political Subdivisions, and/or Gaming Interests

Filer Spouse Business (where amount of interest exceeds 10%)
Type of Income: State Political Subdivision Gaming Interest
Name of Business (if applicable): Arkansas Department of Higher Education
Name of Income Source: _____
Address: 114 East Capitol Avenue
City, State, Zip: Little Rock, AR 72201
Amount of Income (exact dollar amount): \$ 185,000

Filer Spouse Business (where amount of interest exceeds 10%)
Type of Income: State Political Subdivision Gaming Interest
Name of Business (if applicable): Lisa Academy
Name of Income Source: _____
Address: 21 Corporate Hill Drive
City, State, Zip: Little Rock, AR 72205-4537
Amount of Income (exact dollar amount): \$ 49,700

Filer Spouse Business (where amount of interest exceeds 10%)
Type of Income: State Political Subdivision Gaming Interest
Name of Business (if applicable): _____
Name of Income Source: _____
Address: _____
City, State, Zip: _____
Amount of Income (exact dollar amount): \$ _____

Filer Spouse Business (where amount of interest exceeds 10%)
Type of Income: State Political Subdivision 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 D if you or your spouse received income 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.
* 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 E: Income (Income that exceeds \$1,000 from each source)

Filer Spouse
Name of Source of Income: Western Interstate Commission on Higher Education
Address: 3035 Center Green Drive, Suite 200
City, State, Zip: Boulder, Co 80301-2204
Nature of Services Rendered: Consulting / Speaker / Research
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)

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 E 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 reported on Schedule D does not have to be restated on SCHEDULE E.
- * 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 F.