

LOUISIANA  
ETHICS ADMINISTRATION  
CAMPAIGN FINANCE  
RECEIVED

**LOUISIANA BOARD OF ETHICS**

Post Office Box 4368  
Baton Rouge, Louisiana 70821

2011 SEP 28 AM 9:46

**TIER 2 PERSONAL FINANCIAL DISCLOSURE STATEMENT (FOR CANDIDATES)**

This Report Covers Calendar Year: 2011

- ORIGINAL REPORT
- AMENDED REPORT

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

Office Sought: JEFFERSON Parish Councilman, District 4

Incumbent:  Yes  No

Date of Election: 10/22/11

Date Qualified: 09/06/12

Name of Filer (print full name): WALTER A. "WALT" BENNETTI

Mailing Address: 3009 Illinois Ave

City, State, Zip: Kenner, LA 70065

Name of Spouse (print full name): N/A

Spouse's Occupation: \_\_\_\_\_

Spouse's 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. 18:1495.7 and 42:1124.2 does not provide candidates the opportunity to request an extension in filing their personal financial disclosure statements.

**Certificate 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.

Walter A. Bennett  
Signature of Filer

Sworn to and subscribed before me on this 22<sup>nd</sup> day of September, 2011.

T. ROBERT LACOUR  
Notary Public (print name)

[Signature]  
Notary Public (signature)

ID# \_\_\_\_\_  
Attorney & Notary Public #8077  
3220 Williams Boulevard, Kenner  
Date Commission Expires \_\_\_\_\_  
Jefferson Parish, Louisiana  
My Commission is issued for life

**LOUISIANA BOARD OF ETHICS**

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**Schedule A: Employment Information**

Filer    Spouse                       Full-Time    Part-Time

Job Title: PRESIDENT

Name of Employer: VERTEX MEDIA, LLC

Address: PO BOX 641362

City, State, Zip: Kenner, LA 70064

Job Description: SELF-EMPLOYED BUSINESS OWNER OF ClickJEFFERSON.COM AND OTHER WEB SITES.

Filer    Spouse                       Full-Time    Part-Time

Job Title: OWNER / PUBLISHER

Name of Employer: INSIDE JEFFERSON PARISH MAGAZINE

Address: 2817 HARVARD AVE Ste 102

City, State, Zip: Metairie, LA 70006

Job Description: OWNER / PUBLISHER OF MAGAZINE

Filer    Spouse                       Full-Time    Part-Time

Job Title: \_\_\_\_\_

Name of Employer: \_\_\_\_\_

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

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

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

Filer    Spouse                       Full-Time    Part-Time

Job Title: \_\_\_\_\_

Name of Employer: \_\_\_\_\_

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

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

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

- You are required 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.

**LOUISIANA BOARD OF ETHICS**

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**SCHEDULE B: POSITIONS - BUSINESS**

Filer    Spouse    Both

Amount of Interest (amount exceeds 10%): 100 %

Name of Business: VERTEX MEDIA LLC

Address: PO BOX 641362

City, State, Zip: KENNER, LA 70065

Business Description: OWNER OF WEBSITES

Nature of Association: PRESIDENT

Filer    Spouse    Both

Amount of Interest (amount exceeds 10%): 100 %

Name of Business: INSIDE JEFFERSON PARISH MAGAZINE

Address: 2817 HARVARD AVE, Ste 102

City, State, Zip: Metairie, LA 70006

Business Description: MAGAZINE

Nature of Association: OWNER / PUBLISHER

Filer    Spouse    Both

Amount of Interest (amount exceeds 10%): \_\_\_\_\_ %

Name of Business: \_\_\_\_\_

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

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

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

Nature of Association: \_\_\_\_\_

Filer    Spouse    Both

Amount of Interest (amount exceeds 10%): \_\_\_\_\_ %

Name of Business: \_\_\_\_\_

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

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

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

Nature of Association: \_\_\_\_\_

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

**LOUISIANA BOARD OF ETHICS**

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**Schedule C: Positions – Nonprofit**

Filer     Spouse

Name of Organization: PELICAN STATE Pachyderm Club

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

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

Nature of Association: CHAIRMAN (on Leave or Absence)

Description of Organization: Republican Political Club

Filer     Spouse

Name of Organization: CITIZENS FOR A BETTER KENNER

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

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

Nature of Association: PRESIDENT

Description of Organization: CITIZENS Group that seeks to improve the quality of life in Kenner.

Filer     Spouse

Name of Organization: \_\_\_\_\_

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

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

Nature of Association: \_\_\_\_\_

Description of Organization: \_\_\_\_\_

Filer     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 agency.

**LOUISIANA BOARD OF ETHICS**

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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): \_\_\_\_\_ *N/A* \_\_\_\_\_  
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): \$ \_\_\_\_\_

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.

\* "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.

**LOUISIANA BOARD OF ETHICS**

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**Schedule E: Income Received from Employment**

Filer    Spouse    Full-time    Part-time

Name of Employer: VERTEX MEDIA, LLC

Address: PO BOX 641362

City, State, Zip: Kenner, LA 70064

Nature of Services (pursuant to such employment): BUSINESS OWNER

Amount of Income:  Category I (less than \$5,000)    Category II (\$5,000-\$24,999)  
 Category III (\$25,000-\$100,000)    Category IV (more than \$100,000)

Filer    Spouse    Full-time    Part-time

Name of Employer: INSIDE JEFFERSON PARISH MAGAZINE

Address: 2817 HARVARD AVE, Ste 102

City, State, Zip: Metairie, LA 70006

Nature of Services (pursuant to such employment): Business Owner / Publisher

Amount of Income:  Category I (less than \$5,000)    Category II (\$5,000-\$24,999)  
 Category III (\$25,000-\$100,000)    Category IV (more than \$100,000)

Filer    Spouse    Full-time    Part-time

Name of Employer: \_\_\_\_\_

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

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

Nature of Services (pursuant to such employment): \_\_\_\_\_

Amount of Income:  Category I (less than \$5,000)    Category II (\$5,000-\$24,999)  
 Category III (\$25,000-\$100,000)    Category IV (more than \$100,000)

Filer    Spouse    Full-time    Part-time

Name of Employer: \_\_\_\_\_

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

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

Nature of Services (pursuant to such employment): \_\_\_\_\_

Amount of Income:  Category I (less than \$5,000)    Category II (\$5,000-\$24,999)  
 Category III (\$25,000-\$100,000)    Category IV (more than \$100,000)

- \* You are required to complete SCHEDULE E to disclose the income received by you or your spouse for each full-time or part-time employment position held.
- \* "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.
- \* Income that is reported on SCHEDULE D does not have to be restated on SCHEDULE E.
- \* Income received through self-employment is reported on SCHEDULE F.

## Schedule F: Income Received From Business Interests

### AGGREGATE AMOUNT OF INCOME RECEIVED FROM BUSINESS INTERESTS:

- Category I (less than \$5,000)       Category II (\$5,000-\$24,999)  
 Category III (\$25,000-\$100,000)       Category IV (more than \$100,000)

Filer     Spouse  
Name of Business: \_\_\_\_\_  
Address: \_\_\_\_\_  
City, State, Zip: \_\_\_\_\_  
Nature of services rendered or reason income was received: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Filer     Spouse  
Name of Business: \_\_\_\_\_  
Address: \_\_\_\_\_  
City, State, Zip: \_\_\_\_\_  
Nature of services rendered or reason income was received: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Filer     Spouse  
Name of Business: \_\_\_\_\_  
Address: \_\_\_\_\_  
City, State, Zip: \_\_\_\_\_  
Nature of services rendered or reason income was received: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Filer     Spouse  
Name of Business: \_\_\_\_\_  
Address: \_\_\_\_\_  
City, State, Zip: \_\_\_\_\_  
Nature of services rendered or reason income was received: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\*You are required to complete SCHEDULE F if you or your spouse received income from a business interest.

\* "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.

\*Income reported on SCHEDULE D or E does not have to be restated on SCHEDULE F.

**LOUISIANA BOARD OF ETHICS**

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Baton Rouge, Louisiana 70821

**Schedule G: Other Income** (Any other income that exceeds \$1,000 from each source)

Filer     Spouse

Description of Income: \_\_\_\_\_

Nature of services rendered or reason income was received: \_\_\_\_\_

Amount of Income:     Category I (less than \$5,000)     Category II (\$5,000-\$24,999)  
                                  Category III (\$25,000-\$100,000)     Category IV (more than \$100,000)

Filer     Spouse

Description of Income: \_\_\_\_\_

Nature of services rendered or reason income was received: \_\_\_\_\_

Amount of Income:     Category I (less than \$5,000)     Category II (\$5,000-\$24,999)  
                                  Category III (\$25,000-\$100,000)     Category IV (more than \$100,000)

Filer     Spouse

Description of Income: \_\_\_\_\_

Nature of services rendered or reason income was received: \_\_\_\_\_

Amount of Income:     Category I (less than \$5,000)     Category II (\$5,000-\$24,999)  
                                  Category III (\$25,000-\$100,000)     Category IV (more than \$100,000)

Filer     Spouse

Description of Income: \_\_\_\_\_

Nature of services rendered or reason income was received: \_\_\_\_\_

Amount of Income:     Category I (less than \$5,000)     Category II (\$5,000-\$24,999)  
                                  Category III (\$25,000-\$100,000)     Category IV (more than \$100,000)

\*You are required to complete SCHEDULE G if you or your spouse received any other type of income that exceeded \$1,000 from any one source.

\* "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.

\*You are not required to report income that is derived from child support and alimony payments contained in a court order, or from disability payments from any source.

\*Income that is reported on SCHEDULE D, E, or F does not have to be restated on SCHEDULE G.



**LOUISIANA BOARD OF ETHICS**

Post Office Box 4368  
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**Schedule H: Immovable Property** (A property that exceeds \$2,000 in value)

Filer    Spouse    Both

Location of Property *NONE*

Country: \_\_\_\_\_ State: \_\_\_\_\_ Parish/County: \_\_\_\_\_

Description of Property: \_\_\_\_\_

Value of Property:    Category I (less than \$5,000)    Category II (\$5,000-\$24,999)  
                                  Category III (\$25,000-\$100,000)    Category IV (more than \$100,000)

Filer    Spouse    Both

Location of Property

Country: \_\_\_\_\_ State: \_\_\_\_\_ Parish/County: \_\_\_\_\_

Description of Property: \_\_\_\_\_

Value of Property:    Category I (less than \$5,000)    Category II (\$5,000-\$24,999)  
                                  Category III (\$25,000-\$100,000)    Category IV (more than \$100,000)

Filer    Spouse    Both

Location of Property

Country: \_\_\_\_\_ State: \_\_\_\_\_ Parish/County: \_\_\_\_\_

Description of Property: \_\_\_\_\_

Value of Property:    Category I (less than \$5,000)    Category II (\$5,000-\$24,999)  
                                  Category III (\$25,000-\$100,000)    Category IV (more than \$100,000)

Filer    Spouse    Both

Location of Property

Country: \_\_\_\_\_ State: \_\_\_\_\_ Parish/County: \_\_\_\_\_

Description of Property: \_\_\_\_\_

Value of Property:    Category I (less than \$5,000)    Category II (\$5,000-\$24,999)  
                                  Category III (\$25,000-\$100,000)    Category IV (more than \$100,000)

\*If the immovable property does not have an address, disclose the location by state and parish or county.

\* You are required to provide a brief description of the immovable property and its fair market value or use value (determined by the assessor for purposes of ad valorem taxes.)

**LOUISIANA BOARD OF ETHICS**

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**Schedule I: Investment Holdings** (An investment holding that exceeds \$5,000)

Filer    Spouse    Both

Name of Security: Common Stock: TIME WARNER INC (TWX)

Description of Security: TIME WARNER OWNS publications, web sites AND other media.

Filer    Spouse    Both

Name of Security: Common Stock: TIME WARNER Cable INC (TWC)

Description of Security: TIME WARNER Cable is a spin-off of TIME WARNER INC'S cable television Assets.

Filer    Spouse    Both

Name of Security: Common Stock: Google (GOOG)

Description of Security: Google is a web-based advertising AND marketing company.

Filer    Spouse    Both

Name of Security: Common Stock: Netgear (NTGR)

Description of Security: Netgear is an international manufacturer of networking products.

\* You are required to complete SCHEDULE I if you or your spouse (either individually or collectively) holds investment securities where each investment security has a value that exceeds \$5,000.

\*You are not required to disclose variable annuities, variable life insurance, variable universal life insurance, whole life insurance, any other life insurance product, mutual funds, education investment accounts, retirement investment accounts, government bonds, or cash/cash equivalent investments.

\*You are not required to disclose information concerning any property held and administered for any person other than you or your spouse under a trust, tutorship, curatorship, or other custodial instrument.





**LOUISIANA BOARD OF ETHICS**

Post Office Box 4368  
Baton Rouge, Louisiana 70821

**Schedule L: Other Offices/Positions Held**

Name of Office/Position: N/A

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 L if you hold any other office or position which would require you to file a personal financial disclosure statement under Section 1124.2.1 or 1124.3.