



STATE OF LOUISIANA  
DEPARTMENT OF STATE CIVIL SERVICE  
**LOUISIANA BOARD OF ETHICS**

P. O. BOX 4368  
BATON ROUGE, LA 70821  
(225) 219-5600  
FAX: (225) 381-7271  
1-800-842-6630  
[www.ethics.state.la.us](http://www.ethics.state.la.us)

**CERTIFIED MAIL**

**NO. 70122210000164590075**

**RETURN RECEIPT REQUESTED**

October 30, 2012

Mark Christopher Cockerham  
1019 Kaliste Saloom Road Apt 815  
Lafayette, LA 70508

**RE: NOTICE OF DELINQUENCY**  
**PFD11007009**

Dear Mr. Cockerham:

Pursuant to La. R.S. 42:1124.4, if a person fails to file a Personal Financial Disclosure Statement as required by 42:1124, 1124.2, 1124.2.1, or 1124.3; omits information; or files inaccurately, a Notice of Delinquency shall be issued. A review of your Tier 2 Personal Financial Disclosure Statement covering 2010 that was filed with this office on August 17, 2011 indicates the following error(s) or omission(s):

**Income reported on incorrect schedule. Please review your records and amend the report accordingly. You are required to disclose your 2010 annual income from the Lafayette Parish School Board on Schedule D: Income from the State, Political Subdivisions, and/or Gaming Interests.**

You have **14 business days from the date of receipt of this Notice** to file an amendment to your Statement, or to submit a written Answer contesting the allegations. **Failure to file** within the 14 days will subject you to an automatic late fee of \$100 per day up to a maximum of \$2,500. Proof of timely filing is determined by the U.S. Postal Service postmark; receipt from the U.S. Postal Service; or receipt from a commercial delivery service.

For your convenience, a blank copy of the form is enclosed. If you would like to view the report that was initially filed to further explain the omission and/or correction needed, you may visit our website at [www.ethics.state.la.us](http://www.ethics.state.la.us). If you have any questions, you may contact me at 225/219-5600 or 800/842-6630.

Sincerely,

Y'kethia Robert  
Compliance Investigator

**SENDER COMPLETE THIS SECTION**

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
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1. Article Addressed to:

Mark Christopher Cockerham  
 1019 Kaliste Saloom Road Apt 815  
 Lafayette, LA 70508

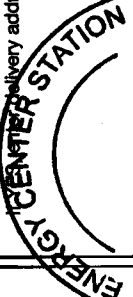


**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  Agent  
*X P D S*  Addressee

B. Received by (Printed Name) C. Date of Delivery  
*Mark Cockerham* *11/8/12*

D. Is delivery address different from item 1?  Yes  
 No  
 If delivery address below:



Certified Mail  Express Mail  
 Registered  Return Receipt for Merchandise  
 Insured Mail  P.O.D.

Restricted Delivery (Extra Fee)  Yes

2. Article Number (Transfer from service label) **7012 2210 0001 6459 0075**

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-15-40

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

### Schedule D: Income from the State, Political

Check if not applicable

### 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): Lafayette Parish School Board

Name of Income Source: Lafayette Parish School Board

Address: 113 Chaplix Drive

City, State, Zip: Lafayette, LA 70508

Amount of Income (exact dollar amount): \$ 9,600

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): \$ \_\_\_\_\_

2013 JUN 19 PM 2:01  
CAMPAIGN FINANCE  
REGISTRATION  
RECEIVED

\* 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.

Mark Cokerham 2010 Amendment



STATE OF LOUISIANA  
DEPARTMENT OF STATE CIVIL SERVICE  
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**CERTIFIED MAIL**

**NO. 70130600000200267385**

**RETURN RECEIPT REQUESTED**

July 23, 2013

Mark Christopher Cockerham  
220 Heymann Boulevard  
Lafayette, LA 70503

RE: Tier 2 Annual Personal Financial Disclosure Statement for 2010 - Amendment  
Lafayette Parish School Board  
c/o Attorney Jonathan Villion  
**Late Fee Assessment - Report: PFD11007009**

Dear Mr. Cockerham:

Enclosed is an assessment of a late fee pursuant to La. R.S. 42:1124.4. Please submit a check or money order in the amount of \$2,500 payable to the Louisiana State Treasurer, Post Office Box 4368, Baton Rouge, Louisiana 70821.

You have 20 days from the receipt of this letter to submit payment or dispute this assessment. To dispute this assessment, you may elect to do either or both of the following:

1. You may **request a waiver** of the late fee to the *Board of Ethics*.  
If you choose to request a waiver, your request should include specific details, along with documentation to support, as to why, in your opinion, you have good cause for not timely filing the report and why the late fee should be waived. Also, if you would like to appear before the Board of Ethics in connection with your request, you should state that in your letter. If you request an appearance, you will be notified of the place and time prior to the meeting. The request should be submitted to the attention of: Louisiana Board of Ethics, Post Office Box 4368, Baton Rouge, Louisiana 70821. You may also fax the request to 225/381-7271.

If the Board declines to waive your late fee, you have the right to appeal the assessment thereafter to the Ethics Adjudicatory Board.

2. You may **request an appeal** of the late fee to the *Ethics Adjudicatory Board*.  
If you choose to request an appeal, your request should be submitted to: Louisiana Board of Ethics at Post Office Box 4368, Baton Rouge, Louisiana 70821. You may also fax the request to 225/381-7271.

If you do not pay or dispute the assessment of the late fee, a lawsuit will be filed in the 19th Judicial District Court to pursue the collection of the late fees. Late fees not paid by the due date will be posted on the agency website. If you timely submit a waiver request or appeal, your name will not be posted on the agency website pending the result of your appeal. If a lawsuit is filed to collect the amount owed, you may be responsible for all additional costs incurred.

Sincerely,

Jennifer Deglandon

**STATE OF LOUISIANA  
BOARD OF ETHICS**

**In Re: Tier 2 Annual Personal Financial Disclosure Statement 2010 -  
Amendment  
Late Fee Assessment – Report: PFD11007009**

**ORDER**

MARK CHRISTOPHER COCKERHAM was required to file a Tier 2 Annual Personal Financial Disclosure Statement for calendar year 2010 pursuant to La. R.S. 42:1124 et seq.

On November 8, 2012, MARK CHRISTOPHER COCKERHAM received a Notice of Delinquency requiring that an amendment be filed by December 3, 2012 (pursuant to La. R. S. 42:1124.4). The amendment was filed on June 19, 2013. It was filed 198 days late.

La. R.S. 42:1124.4 authorizes the assessment of a \$100 late fee per day (not to exceed \$2,500) against MARK CHRISTOPHER COCKERHAM for this late filing.

Accordingly, **IT IS ORDERED** that a late fee of \$2,500 be assessed against MARK CHRISTOPHER COCKERHAM for failing to timely file the Tier 2 Annual Personal Financial Disclosure Statement for calendar year 2010.


**ORDER** signed on the 23rd day of July 2013 at Baton Rouge, Louisiana.

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Robin Gremillion, Director  
Disclosure Division

**SENDER: COMPLETE THIS SECTION**

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1. Article Addressed to: 

Mark Christopher Cockerham  
c/o Attorney Jonathan Villion  
220 Heymann Boulevard  
Lafayette, LA 70503



2. Article Number  
(Transfer from service label)  
7013 0600 0002 0026 7385

PS Form 3811, February 2004 Domestic Return Receipt

102595-02

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  Agent  
*Emera Roberts*  Addressee

B. Received by (Printed Name) C. Date of Delivery  
*Emera Roberts* *7/11/13*

D. Is delivery address different from item 1?  Yes  No

3. Service Type  
 Certified Mail  Express Mail  
 Registered  Return Receipt for Merchandise  
 Insured Mail  C.O.D.

4. Restricted Delivery? (Extra Fee)  Yes