## ANNUAL STATEMENT OF FINANCIAL DISCLOSURE FOR [COUNTY, CITY, TOWN, VILLAGE] OF \_\_\_\_\_ FOR 20\_\_\_\_

1.	N	٩M	$\mathbf{E}$ A	١N	$\mathbf{D}$	٩D	D	RE	SS.
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Last Name	Middle	Initial	First Name
Title			
Department or Agency			
Department or Agency Add	ress		Telephone No.
Residence Address			Telephone No.
2. SPOUSE AND CHILDE	REN.		
Provide the name of	your spouse (if mar	rried) and the names of	any dependent children:
Spouse			Child/Age
Child/Age			Child/Age
NOTE: FOR QUESTIONS REPORT CATEGORIES O			LAR AMOUNTS. INSTEAD, G:
CATEGORY A: UNDER \$ CATEGORY B: \$5,001 TC CATEGORY C: \$10,001 T	UNDER \$10,000	CATEGORY E:	\$25,001 TO UNDER \$50,000 \$50,001 TO UNDER \$100,000 OVER \$100,000
3. FINANCIAL INTERES	TS.		
any business, associ	ation, proprietary, or ren, if any, and indic	r not-for-profit organize cate whether these busi	partnership, or other position in tation held by you and your spouse inesses are involved with the y manner.
Name of Family Member	Position	Organization	Town Department or Agency and Nature of Involvement

b. *Outside Employment*. Describe any outside occupation, employment, trade, business, or profession providing more than \$1,000 per year for you and your spouse and dependent children, if any, and indicate whether such activities are regulated by any state or local agency.

Name of Family Member	Position	Name, Address, and Description of Organization	State or Local Agency	Category of Amount
	ith respect to your e		e, or other agreement be	
from any prior	employer, includin aring plan, severanc	g deferred income, c		on or retirement
value in any b pledged collate List the location	usiness, corporation eral, and other inves on of all real estate v	, partnership, or other stments, for you and within the [County, Coe, or dependent child dress of	excess of \$5,000 or fiver assets, including stocyour spouse and dependity, Town, Village] or ren, if any, have an interpretable Description of Investment	cks, bonds, loans, ident children, if any, within five miles

f. *Trusts*. Identify each interest in a trust or estate or similar beneficial interest in any assets in excess of \$2,000, except for IRS eligible retirement plans or interests in an estate or trust of a relative, for you and your spouse and dependent children.

Name of Family Member	Trustee/Executor	Description of Trust/Estate	Category of Amount
from any source not desc	Identify the source and nature cribed above, including teaching of any nature, for you and your	income, lecture fees, consulta	int fees, contractual
Name of Family Member	Name and Address of Income Source	Nature of Income	Category of Amount
4. GIFTS AND HONOI	RARIUMS.		
your spouse or dependen property, personal items,	f all gifts aggregating in excess t child, excluding gifts from a re payments to third parties on your are not reportable as income.	elative. The term "gifts" includ	les gifts of cash,
Name of Family Member	r Name and Ad	Name and Address of Donor	

## 5. THIRD-PARTY REIMBURSEMENTS.

Identify and describe the source of any third-party reimbursement for travel-related expenditures in excess of \$250 for any matter that relates to your official duties. The term "reimbursement" includes any travel-related expenses provided by anyone other than the [County, City, Town, Village] for speaking engagements, conferences, or fact-finding events that relate to your official duties.

Source	Description	Category of Amount	
6. DEBTS.  Describe all debts of you  Name of Family Member	, your spouse, and dependent children in excess of \$5,000  Name and Address of Creditor	). Category of Amount	
	You, your spouse, or your dependent children in any control or any municipality located within the [County, City, To Contract Description		
8. POLITICAL PARTIES.			
committee, or political organizati	d within the last five years as an officer of any political party.  on. The term "political organization" includes any indepert with or a subsidiary of a political party.		
Signature	Date		