

PART I: BACKGROUND INFORMATION

The information in italics is not subject to public disclosure pursuant to the Municipal Code of [Municipality] and Article 18 of the General Municipal Law. Intentional and willful unlawful disclosure of such information by anyone with access to this report is a violation of law.

Last Name	First Name	Initial	
City Affiliated Entity	Desirion	T:41.	
City-Affiliated Entity	Position	Title	
Office Address		Office Phone No.	
Home Address		Home Phone No.	
[Municipal] Employment Identification Number (If a [Municipal] Officer or Employee)		Email	
Name of Spouse or Registered Domestic	c Partner ("DP") (if any)		

PART II: PROFILE QUESTIONS

A. Positions with the [Municipality]. Do you currently have a paid or unpaid position with any agency of the [Municipality]? Yes \square No \square		
IF THE ANSWER IS YES, ANSWER QUESTION AA.		
B. Real Estate. Do you currently own or rent, in your personal name, any residential, commercial, retail, or industrial [Municipality] or within 1/4 mile of the [Municipal] line? Do not include any real property that is owned or rented through a partner include residences in which you or your spouse, DP, children, parents, stepparents, grandparents, siblings, cousins, aunts, and uncless relatives lives.	ership or corporati	ion. Do not
Does your spouse, DP, or any unemancipated child own or rent, in their personal name only, any such real property? IF EITHER ANSWER IS YES, ANSWER QUESTION BB.	Yes □	No □
C. Outside Employers and Businesses. During 20, did you work for a person or entity (other than the [Municipality]) or ow dealings at any time from January 1, 20, to the date of this report with the [Municipality]-affiliated entity that you currently serve? businesses from which you have made less than \$1,000 during 20 Do not include businesses in which you were only an investo Question D).	? Do not include e	employers or
Did your spouse, DP, or any unemancipated child work for any such person/entity or own any such business during 20? IF EITHER ANSWER IS YES, ANSWER QUESTION CC.	Yes □	No □
D. Investments. Do you currently have an interest of more than 5% or \$10,000, whichever is less, in an entity that had busing January 1, 20, to the date of this report with the [Municipality]-affiliated entity that you currently serve?	ness dealings at an Yes □	ny time from No □
Does your spouse, DP, or any unemancipated child have any such investment interest? IF EITHER ANSWER IS YES, ANSWER QUESTION DD.	Yes □	No □
E. Gifts. During 20, did you receive any gifts worth totaling \$50 or more from a person or entity that had business dealing 20, to the date of this report with the [Municipality]-affiliated entity that you currently serve? A gift includes anything of value re its fair market value. Do not include any gifts received from your spouse, DP, children, parents, stepparents, grandparents, siblings, of the spouse or DP of such relatives.	eceived for free or	for less than
Did your spouse, DP, or any unemancipated child receive any such gifts? IF EITHER ANSWER IS YES, ANSWER QUESTION EE.	Yes □	No 🗆

IF YOU ANSWERED "YES" TO <u>ANY</u> OF THESE QUESTIONS, GO TO PART III. IF YOU ANSWER "NO" TO <u>ALL</u> OF THESE QUESTIONS, GO TO PART IV.

PART III: FOLLOW-UP QUESTIONS

ANSWER QUESTIONS IN THIS PART ONLY IF YOU ANSWERED YES TO ONE OF MORE OF THE QUESTIONS IN PART II. Attach additional pages if necessary.

If you answered YES to Question A above, answer Question AA below. If you answered YES to Question B above, answer Question BB below. If you answered YES to Question C above, answer Question CC below. If you answered YES to Question D above, answer Question DD below. If you answered YES to Question E above, answer Question EE below.

AA. Positions with the [Municipality]. List every [Municipality] agency with which you have a position, whether paid or unpaid, and identify your position and title.

City Agency	Position	Title
[E.g., Dept. of Buildings	Attorney	Assistant Counsel]
BB. Real Estate . List the address ar unemancipated children. For residential pro-		at is owned or rented personally by your spouse, DP, or here the property is located.
Name of	Address of	Type of
Family member/Owner/Renter	Real Estate	Real Estate
[E.g., John Smith	2 Main St., Yonkers	Office Bldg.]

CC. Outside Employers and Businesses. List the name and address of each employer or business that had business dealings with your [Municipality]-affiliated entity. Identify the nature of the business and list the relationship you or your spouse, DP, or child or stepchild has with the employer or business (*i.e.*, owner, partner, officer, director, employee, and/or shareholder). Do not list individual customers, clients, or patients of the business.

Name of Family Member	Name and Address of Employer or Business	Nature of Business	Relationship to Business
[E.g., John Smith	Monument Realty, 2 Main St., Brooklyn	Real Estate	Employee]
[E.g., Rose Smith	Alpha Computers, 77 Sunset Strip, Bronx	Computers	Pres./Shareholder]

DD. Investments. List the name of each entity that had business dealings with your [Municipality]-affiliated entity <u>and</u> in which you or your spouse, DP, child, or stepchild had a 5% or \$10,000 interest, whichever is less. Do not list any entity listed in response to Question CC above. Identify the nature of the business.

Name of Family Member	Name of Entity	Nature of Business
[E.g., John Smith	Verizon	Communications]

EE. Gifts. List each gift(s) totaling \$50 or more that you, your spouse or DP, or children received from any business or entity doing business with your City-affiliated entity, the donor and recipient of the gift, the relationship between the donor and the recipient, and the nature of the gift. To calculate the \$50 threshold, add together all gifts from the same donor or affiliated donors (e.g., a husband and wife or two employees of the same company or a parent and subsidiary company).

Recipient of Gift	Donor of Gift	Recipient's Relationship to Donor	Nature of Gift	
[E.g., John Smith	Acme Corp.	My former employer	Free trip to Las Vegas]	

PART IV: CERTIFICATION AND SIGNATURE

REQUEST FOR PRIVACY

reason(s) for your request(s). A statement the name and identity of any of your relative [Municipality] employee), your home addrest elephone number, is not released as a matter.	nat your financial affairs are private will not, with es listed on this form, as well as your [Municipal ss and personal or cellular telephone number(s), er of course if requested by the public, and a p	eld from public inspection and specify the specific nout more information, sustain a claim of privacy. [ity] Employee Identification Number (if you are a and your private address(es), email address, and privacy request need not be made concerning that ic inspection information in a financial disclosure
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	CERTIFICATION	
Under New York State and [Municipality] may result in the imposition of civil or crimin		report that contains incomplete or false information
I,(Print name) the best of my knowledge.	, certify that all of the information contained	in this statement is true, accurate, and complete to
, ,		
		(Signature)
		(Date signed)