

INDICATE BY LETTER AND NO.
REASON(S) FOR FILING _____
(see instructions "WHO MUST FILE")

FINANCIAL DISCLOSURE REPORT
FILING FOR
CALENDAR YEAR 20 _____

A

NEW YORK CITY
CONFLICTS OF INTEREST BOARD
2 LAFAYETTE STREET
NEW YORK, NEW YORK 10007

LAST NAME		FIRST		M.I.		SOCIAL SECURITY NO.	
HOME ADDRESS (NO., STREET, APT. #)				HOME TEL. NO. (area code)		CITY COUNTY STATE ZIP CODE	
AGENCY/DEPARTMENT/OTHER				AGENCY CODE NO.		BUSINESS TEL. NO. ()	
BUSINESS ADDRESS (NO., STREET)				COUNTY		STATE ZIP CODE	
POSITION/TITLE				MARITAL STATUS: <input type="checkbox"/> SINGLE <input type="checkbox"/> MARRIED <input type="checkbox"/> DIVORCED <input type="checkbox"/> WIDOW/WIDOWER <input type="checkbox"/> DOMESTIC PARTNER <input type="checkbox"/> LEGALLY SEPARATED			
SPOUSE OR DOMESTIC PARTNER (IF APPLICABLE)							
LAST NAME		FIRST		M.I.		MAIDEN NAME (WHEN APPLICABLE)	
LIST THE NAMES OF ALL UNEMANICIPATED CHILDREN							
LAST NAME		FIRST		LAST		FIRST	
LAST NAME		FIRST		LAST		FIRST	

CHECK BOX IF THIS THE LAST FINANCIAL DISCLOSURE REPORT YOU WILL FILE DUE TO TERMINATION OF YOUR CITY EMPLOYMENT. (TERMINATION DATE: _____)

CHECK BOX IF YOU ARE FILING A FINANCIAL DISCLOSURE REPORT BECAUSE YOU CURRENTLY HOLD, OR ARE A CANDIDATE FOR ELECTION OR RE-ELECTION TO, ANY OF THE FOLLOWING OFFICES:

- CURRENTLY HOLD CANDIDATE FOR ELECTION OR RE-ELECTION
 CANDIDATE FILLING VACANCY WRITE-IN CANDIDATE

- MAYOR OF THE CITY OF NEW YORK
 PUBLIC ADVOCATE
 COMPTROLLER
 DISTRICT ATTORNEY OF _____ COUNTY
 BOROUGH PRESIDENT OF _____ COUNTY
 COUNCIL MEMBER FROM THE _____ COUNCIL DISTRICT
 LOCAL POLITICAL PARTY OFFICIAL

**FINANCIAL DISCLOSURE REPORT
FILING FOR CALENDAR YEAR 20 _____**

B

**NEW YORK CITY
CONFLICTS OF INTEREST BOARD
2 LAFAYETTE STREET
NEW YORK, NEW YORK 10007**

LAST NAME	FIRST	M.I.
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AGENCY/DEPARTMENT/OTHER	AGENCY CODE NO.
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POSITION/TITLE

BUSINESS ADDRESS (NO., STREET)	BUSINESS TELEPHONE NO. ()
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COUNTY	STATE	ZIP CODE
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CHECK BOX IF THIS THE LAST FINANCIAL DISCLOSURE REPORT YOU WILL FILE DUE TO TERMINATION OF YOUR CITY EMPLOYMENT. (TERMINATION DATE: _____)

CHECK BOX IF YOU ARE FILING A FINANCIAL DISCLOSURE REPORT BECAUSE YOU CURRENTLY HOLD, OR ARE A CANDIDATE FOR ELECTION OR RE-ELECTION TO, ANY OF THE FOLLOWING OFFICES:

- CURRENTLY HOLD CANDIDATE FOR ELECTION OR RE-ELECTION
 CANDIDATE FILLING VACANCY WRITE-IN CANDIDATE

- MAYOR OF THE CITY OF NEW YORK
- PUBLIC ADVOCATE
- COMPTROLLER
- DISTRICT ATTORNEY OF _____ COUNTY
- BOROUGH PRESIDENT OF _____ COUNTY
- COUNCIL MEMBER FROM THE _____ COUNCIL DISTRICT
- LOCAL POLITICAL PARTY OFFICIAL

WHAT IS THE FINANCIAL DISCLOSURE LAW?

NEW YORK CITY'S FINANCIAL DISCLOSURE LAW, SECTION 12-110 OF THE CITY'S ADMINISTRATIVE CODE, REQUIRES THAT SOME 8,000 NEW YORK CITY EMPLOYEES AND ELECTED OFFICIALS FILE ANNUAL REPORTS OF THEIR FINANCIAL AFFAIRS, AS WELL AS THE FINANCIAL AFFAIRS OF THEIR SPOUSES OR DOMESTIC PARTNERS AND DEPENDENT CHILDREN.

THE PURPOSE OF THE FINANCIAL DISCLOSURE LAW IS TO PROVIDE ACCOUNTABILITY ON THE PART OF THE PUBLIC SERVANTS, AND TO HELP ENSURE THAT THERE ARE NO PROHIBITED CONFLICTS OF INTEREST BETWEEN CITY EMPLOYEES' OFFICIAL RESPONSIBILITIES AND PRIVATE INTERESTS.

THE LAW IS ADMINISTERED AND ENFORCED BY THE NEW YORK CITY CONFLICTS OF INTEREST BOARD, AS MANDATED BY THE NEW YORK CITY CHARTER.

IMPORTANT NOTICE

DISCLOSURE OF YOUR ASSETS AND LIABILITIES ON THIS FORM IS REQUIRED FOR COMPLIANCE WITH SECTION 12-110 OF THE ADMINISTRATIVE CODE BUT DOES NOT NECESSARILY SATISFY THE REQUIREMENTS OF THE CONFLICTS OF INTEREST PROVISIONS OF CHAPTER 68 OF THE CITY CHARTER. THUS, FOR EXAMPLE, IF YOU HAVE OR SEEK AN OWNERSHIP INTEREST IN OR POSITION WITH A FIRM WHICH DOES BUSINESS WITH THE CITY, YOU MUST SEND A SEPARATE LETTER TO THE CONFLICTS OF INTEREST BOARD REQUESTING AN OPINION AS TO WHETHER SUCH INTEREST IS OR WOULD BE PROHIBITED BY CHAPTER 68. YOU MAY NEED PERMISSION FROM THE HEAD OF YOUR AGENCY AND A WAIVER FROM THE BOARD, OR AN ORDER OF THE BOARD.

PART I

Question 2 - Identification of Your Non-City Employer or Business

Report any non-City employment and any business you engaged in during the reporting year. Also report if your non-City employment or business: (i) was licensed or regulated by any State or local agency; or (ii) had business dealings with, or non-ministerial matters before, a State or local agency.

If your response to this question is "None", check this box.

See instructions on pages xii and xiii

Position	Name and Address of Employer or Business	Nature of Business or Employment	Name of State or Local Agency Where Applicable

Whenever a Question requires a "value" or "amount", report it as being within one of the following categories:
A=\$1,000 to under \$5,000; B=\$5,000 to under \$35,000; C=\$35,000 to under \$60,000; D=\$60,000 to under \$100,000; E=\$100,000 to under \$250,000; F=\$250,000 to under \$500,000; G=\$500,000 or over.

PART I

Question 6 – Your Non-City Income

Report the nature and amount of any income of \$1,000 or more, excluding City salary reported in Part I, Question 1, received from each source during the reporting year. Under source, list the name of the firm, organization, financial institution, individual or other entity from which the income was received.

If your response to this question is "None", check this box.

***See** instructions on pages xiv, xv, and xvi*

Source	Nature	Category of Amount

**Whenever a Question requires a "value" or "amount", report it as being within one of the following categories:
A=\$1,000 to under \$5,000; B=\$5,000 to under \$35,000; C=\$35,000 to under \$60,000; D=\$60,000 to under \$100,000; E=\$100,000 to under \$250,000; F=\$250,000 to under \$500,000; G=\$500,000 or over.**

PART I

Question 8 – Payments for City-Related Travel

Report if a non-governmental entity or person either paid directly or reimbursed you for travel-related expenses in an amount of \$1,000 or more for activities related to your official duties with the City.

If your response to this question is "None", check this box.

See instructions on pages xvi and xvii

Source	Description Of Expenses Reimbursed	Category of Value of Reimbursement

**Whenever a Question requires a "value" or "amount", report it as being within one of the following categories:
A=\$1,000 to under \$5,000; B=\$5,000 to under \$35,000; C=\$35,000 to under \$60,000; D=\$60,000 to under \$100,000; E=\$100,000 to under \$250,000; F=\$250,000 to under \$500,000; G=\$500,000 or over.**

PART I

Question 13 – Your Interest in Government Contracts

Report any interest of \$1,000 or more, excluding bonds and notes, in any contract made or executed by a State or local agency.

If your response to this question is "None", check this box.

See instructions on pages xix and xx

Entity Which Held Interest In Contract	Your Relationship to Contracting Entity and Your Interest in Contract	Name of Contracting State or Local Agency	Category of Value of Interest In Contract
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**Whenever a Question requires a "value" or "amount", report it as being within one of the following categories:
 A=\$1,000 to under \$5,000; B=\$5,000 to under \$35,000; C=\$35,000 to under \$60,000; D=\$60,000 to under \$100,000; E=\$100,000 to under \$250,000; F=\$250,000 to under \$500,000; G=\$500,000 or over.**

PART I

Question 14 – Your Interests in Trusts, Estates, and Other Beneficial Interests

Report any interest of \$1,000 or more in a trust or estate or other beneficial interest.

If your response to this question is "None", check this box.

See instructions on pages xx and xxi

Identity of Interest	Nature of Interest	Category of Value

**Whenever a Question requires a "value" or "amount", report it as being within one of the following categories:
A=\$1,000 to under \$5,000; B=\$5,000 to under \$35,000; C=\$35,000 to under \$60,000; D=\$60,000 to under \$100,000; E=\$100,000 to under \$250,000; F=\$250,000 to under \$500,000; G=\$500,000 or over.**

PART I

Question 19 – Money You Owe

Report each creditor (other than a relative):

- (1) to whom you owed \$5,000 or more for a period of 90 consecutive days during the reporting year; or
- (2) to whom you owe \$5,000 or more on the date you file this report.

If your response to this question is "None", check this box.

See instructions on pages xxv

Name of Creditor	Type of Liability and Collateral, If Any	Name of Guarantor Where Applicable	Category of Amount

**Whenever a Question requires a "value" or "amount", report it as being within one of the following categories:
 A=\$1,000 to under \$5,000; B=\$5,000 to under \$35,000; C=\$35,000 to under \$60,000; D=\$60,000 to under \$100,000; E=\$100,000 to under \$250,000;
 F=\$250,000 to under \$500,000; G=\$500,000 or over.**

PART II

QUESTIONS 20 THROUGH 31 ARE TO BE COMPLETED WITH RESPECT TO THE FILING INDIVIDUAL’S SPOUSE OR DOMESTIC PARTNER AND/OR UNEMANCIPATED CHILD(REN).

INFORMATION REGARDING THE FINANCIAL INTERESTS OF THE SPOUSE OR DOMESTIC PARTNER OR AN UNEMANCIPATED CHILD OF A PERSON FILING IN WHICH THE FILER HAS NO FINANCIAL INTEREST WILL BE WITHHELD FROM PUBLIC INSPECTION AS AN UNWARRANTED INVASION OF PRIVACY, UNLESS THE CONFLICTS OF INTEREST BOARD DETERMINES THAT SUCH INFORMATION INVOLVES AN ACTUAL OR POTENTIAL CONFLICT OF INTEREST ON THE PART OF THE PERSON FILING.

Question 20 – Identification of Non-City or Non-State Employer Or Business Of Your Spouse or Domestic Partner And Unemancipated Child(ren)

Report any non-City or non-State employment and any business your spouse or domestic partner or unemancipated child(ren) engaged in during the reporting year if such employment or business: (i) did business with a State or local agency or (ii) had business dealings with, or non-ministerial matters before, a State or local agency.

If your response to this question is "None", check this box.

See instructions on pages xii and xiii

Position	Name and Address of Employer or Business	Nature of Business or Employment	Name of State or Local Agency Where Applicable

PART II

**Question 24 – Interest in Government Contracts Of Your Spouse
or Domestic Partner And Unemancipated Child(ren)**

Report any interest of \$1,000 or more held by your spouse or domestic partner or unemancipated child(ren), excluding bonds and notes, in any contract made or executed by a State or local government agency.

If your response to this question is "None", check this box.

See instructions on pages *xix* and *xx*

Entity Which Held Interest In Contract	Relationship to Contracting Entity and Interest in Contract	Name of Contracting State or Local Agency	Category of Value of Interest In Contract

**Whenever a Question requires a "value" or "amount", report it as being within one of the following categories:
A=\$1,000 to under \$5,000; B=\$5,000 to under \$35,000; C=\$35,000 to under \$60,000; D=\$60,000 to under \$100,000; E=\$100,000 to under \$250,000;
F=\$250,000 to under \$500,000; G=\$500,000 or over.**

Any intentional violation of these provisions, including but not limited to, failure to file, failure to include assets or liabilities and misstatements of assets or liabilities, shall constitute a misdemeanor punishable by imprisonment for not more than one year or by a fine not to exceed \$1,000, or by both, and shall constitute grounds for imposition of disciplinary penalties, including removal from office. In addition, any intentional violation of the provisions of Section 12-110 of the Administrative Code, as amended, may subject the person reporting to assessment by the Conflicts of Interest Board of a civil penalty in an amount up to \$10,000.

CERTIFICATION

I, _____ certify that all of the
(*Print Name*)

information contained in this report is true, accurate, and complete to the best of my knowledge and that, within the past two weeks, I have read the two-page ethics guide set forth below.

(*Signature*)

(*Date*)