

Improving Ethical
&
Financial Disclosure
For Local Government
Elected Officials

May 28, 2018

Buffalo Niagara Coalition for Open Government, Inc.

The Buffalo Niagara Coalition for Open Government, Inc. is a non-profit, nonpartisan organization comprised of journalists, activists, attorneys, educators, and other concerned citizens who value open government and freedom of information.

Mission Statement:

Through education and civic engagement, the Buffalo Niagara Coalition for Open Government advocates for open, transparent government and defends citizens' right to access information from public institutions at the city, county, and state levels.

Statement of Purpose:

We believe that, if government is of the people, by the people and for the people, then it should also be open *to* the people. Government exists to serve its citizens, so access to public information should be simple. Freedom of Information Laws and the NY Open Meetings Law make access to public records a right.

When government operates openly and honestly, we, the people, can hold our elected officials accountable, fulfilling our duties as an informed citizenry. The Buffalo Niagara Coalition for Open Government works to ensure that all people have full access to government records and proceedings on the city, county, and state levels. Such access fosters responsive, accountable government, stimulates civic involvement and builds trust in government.

Buffalo Niagara Coalition for Open Government, Inc.

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Our meetings are typically held at 5:30 p.m. the first Thursday of the month, at the Williamsville Library, 5571 Main Street. Board President Paul Wolf, Esq. can be contacted at 435-4976, or by email at paulwolf2@gmail.com. Our website is www.nyopengov.org and we have a Facebook page.

INTRODUCTION

The Buffalo Niagara Coalition for Open Government evaluated the Annual Financial Disclosure Forms utilized by ten municipalities in Erie and Niagara County. The Disclosure Forms were ranked from best to worst based on criteria we established.

The ten municipalities reviewed were: Cheektowaga, Erie County, Buffalo, Town of Hamburg, Niagara Falls, Town of Lancaster, Amherst, Town of Tonawanda, Clarence, Niagara County.

THE PURPOSE OF FINANCIAL DISCLOSURE

The public has an interest in knowing whether a public official is profiting from office; and the public has an interest in knowing those financial interests that can affect a public official's actions.

Financial disclosure provides accountability, and encourages open and honest government by allowing the public and the news media access to information which may reveal potential conflicts of interest, hopefully before they occur.

Mark Davies, a recognized expert in the field of New York government ethics stated the following:

“The purpose of annual disclosure, like that of ethics laws generally, lies in preventing conflicts of interest violations (unethical conduct) from occurring in the first place. Annual disclosure accomplishes that purpose by disclosing to supervisors, co-workers, the public, the media, and the filer himself or herself where the filer's potential conflicts of interest lie—and by doing so helps prevent those potential conflicts from becoming actual conflicts. In addition, annual disclosure should force filers to focus, at least once a year, on the requirements of the applicable ethics code.”

THE LAW REGARDING FINANCIAL DISCLOSURE

Article 18 of the New York State General Municipal Law sets forth the provisions regulating conflicts of interest for municipal officers and employees. It applies to all municipalities in the state, except New York City. "Municipality" is broadly defined to include counties, cities, towns, villages, school districts and other local government entities as well.

"Municipal officer or employee" is likewise broadly defined to include all officers and employees of the municipality, whether paid or unpaid, including board and commission members. The provisions of Article 18 fall into five areas: (1) the prohibitions on interests in contracts with the municipality; (2) miscellaneous provisions on conflicts of interest (e.g., gifts, and appearances before municipal agencies); (3) administration {local ethics laws, local ethics boards}; (4) disclosure in certain land use applications; and (5) annual financial disclosure.

New York's General Municipal Law requires "political subdivisions," such as, counties, cities, towns, and villages with a population of 50,000 or more, to establish an annual financial disclosure system. Municipalities with a population less than 50,000 may also adopt such a system but are not required to do so.

The 50,000 population threshold means very few counties, cities, towns and villages have to comply with the financial disclosure law. For example, Erie County consists of forty-five local governments, which includes the county itself, three cities, twenty-five towns and sixteen villages. Of these forty-five local governments, only six have a population over 50,000 people (Erie County, Buffalo, Amherst, Cheektowaga, Town of Tonawanda and Town of Hamburg). Niagara County consists of twenty-one local governments and the only one that has a population over 50,000 people, is the county itself. In Erie and Niagara County only seven local governments out of sixty-five are required by law to complete financial disclosure forms.

To their credit some communities with a population under 50,000, voluntarily require their elected officials to complete annual financial disclosure forms. The Town of Lancaster (population 41,600) and the Town of Clarence (population 30,600), while not required by state law have adopted the practice of financial disclosure.

North Tonawanda, Town of Lewiston, Village of Lewiston, West Seneca, City of Lockport, Town of Lockport, Orchard Park, Wheatfield, all have populations under 50,000 and do not require their elected officials to complete an annual disclosure form.

Local governments have broad discretion to design their own annual financial disclosure form and filing system. If a political subdivision fails to adopt its own form, it must utilize a form and filing system prescribed by Section 812 of the General Municipal Law.

The General Municipal Law requires the governing body of each county, city, town, village, school district to adopt a code of ethics setting forth standards of conduct reasonably expected of their officers and employees.

Knowing and intentional violations of the provisions of Article 18 are punishable by a civil penalty, which is capped at \$10,000 plus the value of any gift, compensation or benefit received. In lieu of a penalty, violations may be referred to an appropriate prosecutor. The violation is then punishable upon conviction as a class A misdemeanor.

EXAMPLES OF FINANCIAL DISCLOSURE VIOLATIONS

Mount Vernon, NY Mayor Richard Thomas was indicted just weeks ago for allegedly stealing \$12,900 from his 2015 campaign committee for his personal use. The Attorney General's Office claims Thomas also diverted more than \$45,000 from his inaugural committee for personal use. Thomas is also charged for allegedly lying on his reports to the Board of Elections and on his City of Mount Vernon financial disclosures.

Former Nassau County Executive Edward Mangano, his wife Linda and a former Oyster Bay town supervisor John Venditto, were indicted on charges that Mangano and Venditto received bribes and kickbacks to help a Long Island businessman, Harendra Singh, obtain guaranteed loans. Mangano's wife Linda, prosecutors claim, was given a \$100,000-a-year, no-show job at one of the Singh's restaurants, enabling her to make \$450,000 while doing little besides tasting food. Edward Mangano also is accused of accepting vacations and other gifts in exchange for his influence.

In 2016, Joanne Yepsen, the Mayor of Saratoga Springs NY, was cited for violating their ethics code when at the same time a local hospital had a zoning issue pending before the City Council, the mayor was looking for work as a consultant with the hospital's foundation.

In October of 2016, the Commission charged a Department of Corrections employee for violating ethics law for his involvement in hiring his nephew at the prison where he worked. The employee admitted that he supervised a subordinate during the interview process and directly took part in selecting his nephew for the job over another candidate, a violation of the State Public Officers Law, which says that no employee should take part in a decision to hire a relative for a paid position at or for any state agency.

In December of 2017, the Commission charged a Metropolitan Transportation Authority employee for not disclosing income he earned over a two-year period from an outside job that was a conflict of interest.

In 2015, The New York Public Interest Research Group in conjunction with Reinvent Albany prepared a report titled *Serving Two Masters, Outside Income and Conflict of Interest in Albany*. The report documented many cases of state legislators violating financial disclosure laws. A few examples are provided below:

Joseph L. Bruno, the former Senate Majority Leader, was convicted in part on his failure to disclose hundreds of thousands of dollars in payments from a businessman who sought help from the Legislature. Andrew T. Baxter, the acting United States attorney for the Northern District of New York, said, “We established at this trial that Bruno exploited his office by concealing the nature and source of substantial payments that he received from parties that benefited from his official actions.”

Sheldon Silver: The Assembly Speaker was indicted for allegedly being paid some \$4 million over the past decade for legal work that he failed to perform and in some instances failed to disclose.

John Sampson: Former Senate Majority Leader was indicted on charges that while a sitting New York State Senator he allegedly embezzled some \$400,000 in funds he was entrusted to oversee in his private law practice and kept secret his ownership interest in a liquor store.

Anthony Seminerio: Former Assemblymember Seminerio died in Federal Prison in January 2011 while serving a six-year sentence for his conviction on influence-peddling charges related to his operation of a private consulting business that used his legislative position to generate income.

Nicholas Spano: Former Senator Nicholas Spano pleaded guilty to Federal charges of hiding outside consulting fees he received from an insurance brokerage firm doing business with the state from 1993 to 2008, two years after he left office. Spano also failed to make required disclosures on his state ethics filings.

CRITERIA USED TO EVALUATE DISCLOSURE FORMS

After reviewing local government financial disclosure forms across New York State, the Buffalo Niagara Coalition for Open Government, Inc. created a list of the items that we believe should be included in every disclosure form.

We relied heavily on a Model Form created by Mark Davies, Esq. Mr. Davies served as the Executive Director of the New York City Conflicts of Interest Board, and is the former Executive Director of the Temporary State Commission on Local Government Ethics. Mr. Davies has published many articles on government ethics and financial disclosure and is recognized as an expert in this field.

The Davies Form addresses ten items and signers are required to certify that the information is true. **A copy of the Model Form is attached as Exhibit A, along with copies of each municipalities disclosure form.** The ten items addressed in the Davies Model Form are:

- 1) **Outside Employers & Businesses** – List the name of every employer or business other than your government employment from which you received more than \$1,000. Provide the same information for your relatives which includes your spouse, registered domestic partner, children, grandchildren, parents, sisters, brothers, and grandparents; the parents, children, sisters, and brothers of your spouse or registered domestic partner; the spouses or registered domestic partners of your parents, children, brothers and sisters.
- 2) **Investments** – List the name of any entity in which you have an investment of at least 5% of the stock or debt or \$10,000, whichever is less. Provide the same information for your spouse or registered domestic partner and any of your children under age 18.
- 3) **Real Estate** – List the address of each piece of real estate that you or your relatives listed in Question 1 above, own or rent. List only real estate that is located in the municipality and the contiguous municipalities. For residential property, list as the address only the city, town or village where the property is located.
- 4) **Gifts** – List each gift that you or your spouse or registered domestic partner or child under the age of 18 and living with you received worth \$10 or more during the year. Gifts from relatives are excluded. (The amount stated should equal the threshold for prohibited gifts under the municipalities ethics law but not more than \$75).
- 5) **Political Contributions** – List each person or entity that made to you or your campaign committee, within the previous 24 months, financial contributions, in money, goods, or services, totaling \$1,000 or more to assist in your election. (The amount stated should equal the threshold for a conflict of interest under the municipalities ethics law).

- 6) **Relatives in Service** – List each relative defined in question 1, who is an officer or employee of the municipality, whether paid or unpaid, including the relative’s name, relationship to you, title and department.
- 7) **Volunteer Positions** – List each volunteer office or position that you hold. Provide same info for your spouse or registered domestic partner.
- 8) **Money You Owe** – List each person or entity to which you or your spouse or registered domestic partner owes \$10,000 or more. Do not list money owed to relatives. Do not list credit card debt unless you have owed the money for at least 60 days. (The Coalition believes the \$10,000 figure is high and should be \$1,000).
- 9) **Money Owed to You** - List each person or entity that owes you or your spouse or registered domestic partner \$10,000 or more. Do not list money owed by relatives. (The Coalition believes the \$10,000 figure is high and should be \$1,000).
- 10) **Customers and Clients** – List the name of each customer or client from whom you or your spouse or registered domestic partner earned \$1,000 or more during the year. Do not disclose the names of medical patients, dental patients, mental health clients, or in the case of lawyers, clients in criminal, bankruptcy, or domestic relations matters.
- 11) **Certification** - The Model Form requires the signer to certify that the information provided is true and that the municipalities ethics code has been read within the past two weeks. Mr. Davies suggests that a copy of the code of ethics (not the entire ethics law, just the code itself) should be attached to the disclosure form, if the code is sufficiently short. If it is not, then a summary, of no more than two pages, should be attached.

In addition to the items contained in the Davies Model Form, the following items are important and should be included on every local government financial disclosure form:

- 12) **Interest in Contracts** – Describe any monetary interest and/or connection that you, your spouse, registered domestic partner, children, grandchildren, parents, sisters, brothers, and grandparents; the parents, children, sisters, and brothers of your spouse or registered domestic partner; the spouses or registered domestic partners of your parents, children, brothers and sisters, have with any contract involving the municipality.

- 13) **Political Parties** – List any position you, your spouse, registered domestic partner, children have held within the past five years in any political party, political committee or political organization.
- 14) **Third Party Reimbursements** – Identify and describe the source of any third-party payment or reimbursement for municipal travel related expenditures for any matter that relates to your official duties.
- 15) **Future Employment** – Describe any contract or agreement you, your registered domestic partner, spouse or children has with respect to employment after leaving your government office or position.
- 16) **Past Employment** – Identify the source and nature of any income in excess of \$1,000/ year from any prior employer, including deferred income, contributions to a pension or retirement fund, profit sharing plan, severance pay or payments under a buyout agreement.

Using the above stated sixteen items, we reviewed the Disclosure Forms from ten local governments in Erie and Niagara County.

DISCLAIMER

This is not a scientific study with precise results. The Buffalo Niagara Coalition for Open Government, Inc., consists of concerned volunteers who assisted with completing this report.

RANKING OF LOCAL GOVERNMENT DISCLOSURE FORMS FROM BEST TO WORST

- | | |
|--|--------------|
| 1) Cheektowaga & Erie County
(12 of the 16 items are addressed) | 75% |
| 2) Town of Hamburg, Buffalo & Niagara County
(11 of the 16 items are addressed) | 69% |
| 3) Niagara Falls
(10 of the 16 items are addressed) | 62.5% |

- 4) Town of Lancaster
(4 of the 16 items are addressed) **25%**
- 5) Town of Tonawanda
(3 of the 16 items are addressed) **19%**
- 6) Amherst & Clarence
(2 out of 16 items are addressed) **12.5%**

INTERESTING FINDINGS/RECOMMENDATIONS

1) Information Regarding Spouses and Other Relatives Needs to Be Required

In some municipalities disclosure forms request information regarding the elected official only and not their spouse, adult children or other relatives. Knowing what businesses are owned by a registered domestic partner, children, grandchildren, parents, sisters, brothers, and grandparents; the parents, children, sisters, and brothers of your spouse or registered domestic partner; the spouses or registered domestic partners of your parents, children, brothers and sisters is important information.

Whether these individuals are on the municipal payroll is important information for conflicts of interest and nepotism concerns as well. Of the ten municipalities reviewed, Cheektowaga is the only one that requires the disclosure of relatives working on the Town payroll.

2) The Threshold for Reporting Gifts Varies Greatly

The dollar figure required for reporting gifts are:

Cheektowaga	\$25 and up
Lancaster	\$75 and up
Buffalo	\$100 and up
Niagara County & Hamburg	\$250 and up
Erie County & Niagara Falls	\$1,000 and up

Amherst, Clarence and Tonawanda do not specifically ask about gifts. In most municipalities only gifts to the elected official and not their spouse or children need to be disclosed.

3) Large Campaign Contributors Should Be Listed on Disclosure Forms

Elected officials know who their big campaign contributors are and so should the public. While campaign reports are filed with the New York State Board of Elections and posted online, information regarding large campaign contributors should be listed on local government disclosure forms. None of the municipalities reviewed require the reporting of any campaign contributions. The threshold dollar amount for such disclosure whether it be \$100, \$500 or \$1,000, should be determined by each municipality. The Davies Form can serve as a model for this item.

4) Largest Business Customers for Elected Officials who own a Business Should be Disclosed

None of the municipalities reviewed require the disclosure of business customers of \$1,000 or more. Elected officials, their spouses and other relatives who own a business know who their largest customers are and so should the public. The Davies Form can serve as a model for this item.

5) Money Owed to an Elected Official, their Spouse and Children Should be Disclosed

Cheektowaga and Niagara Falls are the only municipalities that ask about money owed to an elected official. None of the municipalities reviewed ask about money owed to a spouse or children. The Davies form can serve as a model for this item.

6) Political Party Involvement for Elected Official, Spouse and Children Should be Disclosed

Six municipalities ask about political party involvement regarding the filer only and not their spouse (Erie County, Cheektowaga, Niagara County, Buffalo, Hamburg, Niagara Falls). Four municipalities do not request information regarding political party involvement (Lancaster, Amherst, Tonawanda, Clarence). Political party involvement should be disclosed for the government employee, their spouse and children.

7) Disclosure Forms for Elected Officials Should be Posted Online

The annual financial disclosure forms for every state elected official have been posted online for the public to see, since 2011. Disclosure forms for local elected officials are typically not posted online and they should.

Recently Hamburg Supervisor James Shaw became the first elected official in Erie and Niagara County to post his disclosure form online! Niagara Falls Mayor Paul Dyster has publicly stated that he will post his disclosure form online. The ethics law in Orange County, NY requires local elected official disclosure forms to be posted online and can serve as a model for others.

8)Niagara County’s Local Law Preventing the Public from Viewing Disclosure Forms Needs to be Changed

In 1996 the Niagara County Legislature passed a local law that prevents citizens from viewing the disclosure forms completed by elected officials. In Niagara County, disclosure forms are confidential and can only be viewed by the Sheriff, Ethics Board and District Attorney. Every other local government reviewed in Erie and Niagara County allows citizens to file a FOIL to view disclosure forms.

What is the point of having disclosure forms if no one can see them? Several NY appellate court decisions have ruled that financial disclosure forms completed by government officials are a public record. Niagara Counties local law should be changed.

9)Disclosure Forms Should be Certified/Sworn to

Only three of the ten municipalities (Erie County, Cheektowaga, Clarence) reviewed require the individual signing the disclosure form to certify, swear to or affirm that the information being provided is truthful. None of the municipalities reviewed require the signer to acknowledge that they have read the ethics code. Requiring elected officials and governmental employees to read a local government ethics code as part of the disclosure form process is an important educational piece. Government officials should acknowledge that they have read the ethics code they are obligated to follow.

10) Disclosure Forms Should be Required for all Municipalities

New York State Law currently requires municipalities with a population of 50,000 or more to have elected officials and policy making positions to complete annual financial disclosure forms. In Erie County only six out of forty-four local governments (County, City, Town, Village) are above 50,000 in population. In Niagara County only one out of twenty-one local governments are above 50,000 (Niagara County).

Governor Andrew Cuomo in 2016 proposed that all local governments regardless of population size be required to complete financial disclosure forms. The Governor’s proposal did not become law. All local governments regardless of population size should voluntarily adopt the practice of completing financial disclosure forms as a way to promote ethics and transparency.

CONCLUSION

The determining factor in what needs to be disclosed by elected officials in each municipality is the ethics code that has been adopted. In order to implement the disclosure changes recommended in this report, existing ethics codes will have to be amended.

Our goal is that the evaluated municipalities will interpret this report as constructive criticism. We are interested in assisting local governments to improve their annual financial disclosure forms so that citizens can have access to important information.

Financial disclosure provides accountability, and encourages open and honest government by allowing the public and the news media access to information which may reveal potential conflicts of interest, hopefully before they occur.

Members of the Buffalo Niagara Coalition for Open Government, Inc. welcome the opportunity to speak about this report at an upcoming meeting of any of the local governments that were studied. We are willing to work with and to assist local governments interested in improving their disclosure forms.

Evaluation of Disclosure Forms, Best to Worst

Cheektowaga	Pages 14 - 17
Erie County	17 - 20
Hamburg	20 - 23
Buffalo	23 - 26
Niagara County	26 - 29
Niagara Falls	29 - 32
Lancaster	32 - 35
Tonawanda	35 - 38
Amherst	38 - 41
Clarence	41 - 44

Cheektowaga

Outside Employers and Businesses where Elected Official, Spouse & Relatives received more than \$1,000 for services performed or goods sold during the year

Cheektowaga requests this info for elected official, spouse and adult members of household. The Davies Model Form requires this information from the elected official, spouse, registered domestic partner, children, grandchildren, parents, sisters, brothers and grandparents; the parents, children, sisters, and brothers of your spouse or registered domestic partner; the spouses or registered domestic partners of your parents, children, brothers, and sisters; and any person claimed as a dependent on your latest individual state income tax return. **(Half credit for this item)**

Investments-Name any entity in which you have an investment of at least 5% of the stock or debt of the entity or \$10,000, whichever is less. Provide the same information for your spouse or registered domestic partner and any of your children under age 18.

Cheektowaga requests information on investments that exceed \$5,000, for elected official, spouse and adult members of household. **(Full credit)**

Real Estate – List the address of each piece of real estate that you or your relatives listed in Question 1 above, own or rent. List only real estate that is located in the municipality and the contiguous municipalities. For residential property, list as the address only the city, town or village where the property is located.

Cheektowaga requests the address of real estate for the elected official, spouse and adult children, located in Cheektowaga, Sloan and Depew, but excludes listing personal residences. (Half credit)

Gifts – List each gift that you or your spouse or registered domestic partner or child under the age of 18 and living with you received worth \$10 or more during the year. Gifts from relatives are excluded. (The amount stated should equal the threshold for prohibited gifts under the municipalities ethics law but not more than \$75.

Cheektowaga requests information regarding gifts in excess of \$25. (Full credit)

Political Contributions - List each person or entity that made to you or your campaign committee, within the previous 24 months, financial contributions, in money, goods, or services, totaling \$1,000 or more to assist in your election.

(The amount stated should equal the threshold for a conflict of interest under the municipalities ethics law).

Cheektowaga does not request information regarding political contributions. (No credit)

Relatives in Service – List each relative defined in question 1, who is an officer or employee of the municipality, whether paid or unpaid, including the relative’s name, relationship to you, title and department.

Cheektowaga requests information regarding relatives on the Town payroll. (Full credit)

Volunteer Positions – List each volunteer office or position that you hold. Provide same info for your spouse or registered domestic partner.

Cheektowaga does ask for volunteer information. (Full credit)

Money You Owe – List each person or entity to which you or your spouse or registered domestic partner owes \$10,000 or more. Do not list money owed to relatives. Do not list credit card debt unless you have owed the money for at least 60 days.

Cheektowaga asks for information regarding any liability over \$5,000, other than a loan from a financial institution or business entity granted on terms made available to the general public. Credit card debt does not have to be reported. (Half credit)

Money Owed to You - List each person or entity that owes you or your spouse or registered domestic partner \$10,000 or more. Do not list money owed by relatives.

Cheektowaga asks for information owed to the elected official in excess of \$1,000, excluding relatives. (Half credit)

Customers and Clients – List the name of each customer or client from whom you or your spouse or registered domestic partner earned \$1,000 or more during the year. Do not disclose the names of medical patients, dental patients, mental health clients, or in the case of lawyers, clients in criminal, bankruptcy, or domestic relations matters.

Cheektowaga does not ask for information regarding business clients/customers. (No credit)

Is the Disclosure Form certified as to the truthfulness of the information? Are people required to acknowledge that they read their ethics code?

Filers are required to affirm under the penalty of perjury that the information is true. Individuals are not required to acknowledge that they read the ethics code. (Half credit)

Interest in Contracts – Describe any monetary interest and/or connection that you, your spouse, registered domestic partner, children, grandchildren, parents, sisters, brothers, and grandparents; the parents, children, sisters, and brothers of your spouse or registered domestic partner; the spouses or registered domestic partners of your parents, children, brothers and sisters, have with any contract involving the municipality.

Cheektowaga requests information regarding the elected official, spouse, children and adult members of household interest in contracts. (Half credit)

Political Parties – List any position you your spouse, registered domestic partner, children have held within the past five years in any political party, political committee or political organization.

Cheektowaga requests information regarding elected official political party involvement. (Half credit)

Third Party Reimbursements – Identify and describe the source of any third-party payment or reimbursement for municipal travel related expenditures for any matter that relates to your official duties.

Cheektowaga requests information regarding third party reimbursement. (Full credit)

Future Employment – Describe any contract or agreement you, your registered domestic partner, spouse or children has with respect to employment after leaving your government office or position.

Cheektowaga does not request information regarding future employment. (No credit)

Past Employment – Identify the source and nature of any income in excess of \$1,000/ year from any prior employer, including deferred income, contributions to a pension or retirement fund, profit sharing plan, severance pay or payments under a buyout agreement.

Cheektowaga does not request information regarding past employment. (No credit)

Total – Out of the 16 items in our criteria, the Cheektowaga Disclosure Form sufficiently addresses 12 out of 16 items. Seven of the twelve items, could be improved as they were not addressed as fully as our stated criteria.

Erie County

Outside Employers and Businesses where Elected Official, Spouse & Relatives received more than \$1,000 for services performed or goods sold during the year

Erie County requests this info for elected official, spouse and dependent children. The Davies Model Form requires this information from the elected official, spouse, registered domestic partner, children, grandchildren, parents, sisters, brothers and grandparents; the parents, children, sisters, and brothers of your spouse or registered domestic partner; the spouses or registered domestic partners of your parents, children, brothers, and sisters; and any person claimed as a dependent on your latest individual state income tax return. (Half credit for this item)

Investments-Name any entity in which you have an investment of at least 5% of the stock or debt of the entity or \$10,000, whichever is less. Provide the same information for your spouse or registered domestic partner and any of your children under age 18.

Erie County requests information on investments that exceed \$1,000, for elected official, spouse and dependent children. (Full credit)

Real Estate – List the address of each piece of real estate that you or your relatives listed in Question 1 above, own or rent. List only real estate that is located in the municipality and the contiguous municipalities. For residential property, list as the address only the city, town or village where the property is located.

Erie County requests the address of all real estate for the elected official, and spouse excluding a primary and secondary personal residence. (Half credit)

Gifts – List each gift that you or your spouse or registered domestic partner or child under the age of 18 and living with you received worth \$10 or more during the year. Gifts from relatives are excluded. (The amount stated should equal the threshold for prohibited gifts under the municipalities ethics law but not more than \$75.

Erie County requests information regarding gifts in excess of \$1,000. (Half credit)

Political Contributions – List each person or entity that made to you or your campaign committee, within the previous 24 months, financial contributions, in money, goods, or services, totaling \$1,000 or more to assist in your election. (The amount stated should equal the threshold for a conflict of interest under the municipalities ethics law).

Erie County does not request this information. (No credit)

Relatives in Service – List each relative defined in question 1, who is an officer or employee of the municipality, whether paid or unpaid, including the relative’s name, relationship to you, title and department.

Erie County does not request this information. (No credit)

Volunteer Positions – List each volunteer office or position that you hold. Provide same info for your spouse or registered domestic partner.

Erie County does ask for this information. (Full credit)

Money You Owe – List each person or entity to which you or your spouse or registered domestic partner owes \$10,000 or more. Do not list money owed to relatives. Do not list credit card debt unless you have owed the money for at least 60 days.

Erie County asks for information regarding any liability over \$5,000, for elected official and spouse other than a loan from a financial institution or business entity granted on terms made available to the general public. **(Full credit)**

Money Owed to You - List each person or entity that owes you or your spouse or registered domestic partner \$10,000 or more. Do not list money owed by relatives.

Erie County does ask for information owed to the elected official in excess of \$1,000. **(Full credit)**

Customers and Clients – List the name of each customer or client from whom you or your spouse or registered domestic partner earned \$1,000 or more during the year. Do not disclose the names of medical patients, dental patients, mental health clients, or in the case of lawyers, clients in criminal, bankruptcy, or domestic relations matters.

Erie County does not ask for this information. **(No credit)**

Is the Disclosure Form certified as to the truthfulness of the information? Are people required to acknowledge that they read their ethics code?

Erie County does not require signers to certify or acknowledge that they have read the ethics code. **(No credit)**

Interest in Contracts – Describe any monetary interest and/or connection that you, your spouse, registered domestic partner, children, grandchildren, parents, sisters, brothers, and grandparents; the parents, children, sisters, and brothers of your spouse or registered domestic partner; the spouses or registered domestic partners of your parents, children, brothers and sisters, have with any contract involving the municipality.

Erie County requests information regarding the elected official, spouse, and dependent children. **(Half credit)**

Political Parties – List any position you your spouse, registered domestic partner, children have held within the past five years in any political party, political committee or political organization.

Erie County requests information regarding elected official only, for the previous year. **(Half credit)**

Third Party Reimbursements – Identify and describe the source of any third-party payment or reimbursement for municipal travel related expenditures for any matter that relates to your official duties.

Erie County requests for in excess of \$1,000. (Half credit)

Future Employment – Describe any contract or agreement you, your registered domestic partner, spouse or children has with respect to employment after leaving your government office or position.

Erie County does request. (Full credit)

Past Employment – Identify the source and nature of any income in excess of \$1,000/ year from any prior employer, including deferred income, contributions to a pension or retirement fund, profit sharing plan, severance pay or payments under a buyout agreement.

Erie County does request. (Full credit)

Total – Out of the 16 items in our criteria, the Erie County Disclosure Form sufficiently addresses 12 out of 16 items. Six of the twelve items, could be improved as they were not addressed as fully as our stated criteria.

Hamburg (Town)

Outside Employers and Businesses where Elected Official, Spouse & Relatives received more than \$1,000 for services performed or goods sold during the year

Hamburg requests this info for elected official, spouse and dependent children. The Davies Model Form requires this information from the elected official, spouse, registered domestic partner, children, grandchildren, parents, sisters, brothers and grandparents; the parents, children, sisters, and brothers of your spouse or registered domestic partner; the spouses or registered domestic partners of your parents, children, brothers, and sisters; and any person claimed as a dependent on your latest individual state income tax return. (Half credit for this item)

Investments-Name any entity in which you have an investment of at least 5% of the stock or debt of the entity or \$10,000, whichever is less. Provide the same information for your spouse or registered domestic partner and any of your children under age 18.

Hamburg requests this information. (Full credit)

Real Estate – List the address of each piece of real estate that you or your relatives listed in Question 1 above, own or rent. List only real estate that is located in the municipality and the contiguous municipalities. For residential property, list as the address only the city, town or village where the property is located.

Hamburg requests this information for elected official, spouse and dependent children. (Half credit)

Gifts – List each gift that you or your spouse or registered domestic partner or child under the age of 18 and living with you received worth \$10 or more during the year. Gifts from relatives are excluded.

(The amount stated should equal the threshold for prohibited gifts under the municipalities ethics law but not more than \$75.

Hamburg requests information regarding gifts in excess of \$250. (Half credit)

Political Contributions – List each person or entity that made to you or your campaign committee, within the previous 24 months, financial contributions, in money, goods, or services, totaling \$1,000 or more to assist in your election. (The amount stated should equal the threshold for a conflict of interest under the municipalities ethics law).

Hamburg does not request information regarding campaign contributions. (No credit)

Relatives in Service – List each relative defined in question 1, who is an officer or employee of the municipality, whether paid or unpaid, including the relative's name, relationship to you, title and department.

Hamburg does not request information. (No credit)

Volunteer Positions – List each volunteer office or position that you hold. Provide same info for your spouse or registered domestic partner.

Hamburg does ask for this information. (Full credit)

Money You Owe – List each person or entity to which you or your spouse or registered domestic partner owes \$10,000 or more. Do not list money owed to relatives. Do not list credit card debt unless you have owed the money for at least 60 days.

Hamburg asks for information regarding all debts over \$5,000, for elected official spouse and dependent children. (Full credit)

Money Owed to You - List each person or entity that owes you or your spouse or registered domestic partner \$10,000 or more. Do not list money owed by relatives.

Hamburg does not ask for information owed to the elected official. (No credit)

Customers and Clients – List the name of each customer or client from whom you or your spouse or registered domestic partner earned \$1,000 or more during the year. Do not disclose the names of medical patients, dental patients, mental health clients, or in the case of lawyers, clients in criminal, bankruptcy, or domestic relations matters.

Hamburg does not ask for this information. (No credit)

Is the Disclosure Form certified as to the truthfulness of the information? Are people required to acknowledge that they read their ethics code?

Hamburg's form is not certified as to the truthfulness nor are people required to acknowledge that they have read the ethics code. (No credit)

Interest in Contracts – Describe any monetary interest and/or connection that you, your spouse, registered domestic partner, children, grandchildren, parents, sisters, brothers, and grandparents; the parents, children, sisters, and brothers of your spouse or registered domestic partner; the spouses or registered domestic partners of your parents, children, brothers and sisters, have with any contract involving the municipality.

Hamburg requests information regarding the elected official, spouse and dependent children. (Half credit)

Political Parties – List any position you your spouse, registered domestic partner, children have held within the past five years in any political party, political committee or political organization.

Hamburg requests information regarding officer positions held by elected official only. (Half credit)

Third Party Reimbursements – Identify and describe the source of any third-party payment or reimbursement for municipal travel related expenditures for any matter that relates to your official duties.

Hamburg requests. (Full credit)

Future Employment – Describe any contract or agreement you, your registered domestic partner, spouse or children has with respect to employment after leaving your government office or position.

Hamburg requests for elected official only. (Half credit)

Past Employment – Identify the source and nature of any income in excess of \$1,000/ year from any prior employer, including deferred income, contributions to a pension or retirement fund, profit sharing plan, severance pay or payments under a buyout agreement.

Hamburg does request. (Full credit)

Total – Out of the 16 items in our criteria, the Hamburg Disclosure Form sufficiently addresses 11 out of 16 items. Six of the eleven items, could be improved as they were not addressed as fully as our stated criteria.

Buffalo

Outside Employers and Businesses where Elected Official, Spouse & Relatives received more than \$1,000 for services performed or goods sold during the year

Buffalo requests this info for elected official, and spouse. The Davies Model Form requires this information from the elected official, spouse, registered domestic partner, children, grandchildren, parents, sisters, brothers and grandparents; the parents, children, sisters, and brothers of your spouse or registered domestic partner; the spouses or registered domestic partners of your parents, children, brothers, and sisters; and any person claimed as a dependent on your latest individual state income tax return. (Half credit for this item)

Investments-Name any entity in which you have an investment of at least 5% of the stock or debt of the entity or \$10,000, whichever is less. Provide the same information for your spouse or registered domestic partner and any of your children under age 18.

Buffalo requests this information. (Full credit)

Real Estate – List the address of each piece of real estate that you or your relatives listed in Question 1 above, own or rent. List only real estate that is located in the municipality and the contiguous municipalities. For residential property, list as the address only the city, town or village where the property is located.

Buffalo requests this information for elected official and some relatives. (Half credit)

Gifts – List each gift that you or your spouse or registered domestic partner or child under the age of 18 and living with you received worth \$10 or more during the year. Gifts from relatives are excluded. (The amount stated should equal the threshold for prohibited gifts under the municipalities ethics law but not more than \$75.

Buffalo requests information regarding gifts in excess of \$100. (Half credit)

Political Contributions – List each person or entity that made to you or your campaign committee, within the previous 24 months, financial contributions, in money, goods, or services, totaling \$1,000 or more to assist in your election. (The amount stated should equal the threshold for a conflict of interest under the municipalities ethics law).

Buffalo does not request information regarding campaign contributions. (No credit)

Relatives in Service – List each relative defined in question 1, who is an officer or employee of the municipality, whether paid or unpaid, including the relative’s name, relationship to you, title and department.

Buffalo does not request this information. (No credit)

Volunteer Positions – List each volunteer office or position that you hold. Provide same info for your spouse or registered domestic partner.

Buffalo does ask for this information. (Full credit)

Money You Owe – List each person or entity to which you or your spouse or registered domestic partner owes \$10,000 or more. Do not list money owed to relatives. Do not list credit card debt unless you have owed the money for at least 60 days.

Buffalo asks for information regarding any liability over \$5,000, other than a loan from a financial institution or business entity granted on terms made available to the general public. Credit card debt does not have to be reported. **(Half credit)**

Money Owed to You - List each person or entity that owes you or your spouse or registered domestic partner \$10,000 or more. Do not list money owed by relatives.

Buffalo does not ask for information owed to the elected official. **(No credit)**

Customers and Clients – List the name of each customer or client from whom you or your spouse or registered domestic partner earned \$1,000 or more during the year. Do not disclose the names of medical patients, dental patients, mental health clients, or in the case of lawyers, clients in criminal, bankruptcy, or domestic relations matters.

Buffalo does not ask for this information. **(No credit)**

Is the Disclosure Form certified as to the truthfulness of the information? Are people required to acknowledge that they read their ethics code?

Buffalo's form is not certified as to the truthfulness nor are people required to acknowledge that they have read the ethics code. **(No credit)**

Interest in Contracts – Describe any monetary interest and/or connection that you, your spouse, registered domestic partner, children, grandchildren, parents, sisters, brothers, and grandparents; the parents, children, sisters, and brothers of your spouse or registered domestic partner; the spouses or registered domestic partners of your parents, children, brothers and sisters, have with any contract involving the municipality.

Buffalo requests information regarding the elected official, spouse and some relatives. **(Half credit)**

Political Parties – List any position you your spouse, registered domestic partner, children have held within the past five years in any political party, political committee or political organization.

Buffalo requests information regarding elected official only. **(Half credit)**

Third Party Reimbursements – Identify and describe the source of any third-party payment or reimbursement for municipal travel related expenditures for any matter that relates to your official duties.

Buffalo requests. (Full credit)

Future Employment – Describe any contract or agreement you, your registered domestic partner, spouse or children has with respect to employment after leaving your government office or position.

Buffalo does request. (Full credit)

Past Employment – Identify the source and nature of any income in excess of \$1,000/ year from any prior employer, including deferred income, contributions to a pension or retirement fund, profit sharing plan, severance pay or payments under a buyout agreement.

Buffalo does request. (Full credit)

Total – Out of the 16 items in our criteria, the Buffalo Disclosure Form sufficiently addresses 11 out of 16 items. Six of the eleven items, could be improved as they were not addressed as fully as our stated criteria.

Niagara County

Outside Employers and Businesses where Elected Official, Spouse & Relatives received more than \$1,000 for services performed or goods sold during the year

Niagara County does request this information for elected official, spouse and dependent children. The Davies Model Form requires this information from the elected official, spouse, registered domestic partner, children, grandchildren, parents, sisters, brothers and grandparents; the parents, children, sisters, and brothers of your spouse or registered domestic partner; the spouses or registered domestic partners of your parents, children, brothers, and sisters; and any person claimed as a dependent on your latest individual state income tax return. (Half credit for this item)

Investments-Name any entity in which you have an investment of at least 5% of the stock or debt of the entity or \$10,000, whichever is less. Provide the same information for your spouse or registered domestic partner and any of your children under age 18.

Niagara County does request this information. (Full credit)

Real Estate – List the address of each piece of real estate that you or your relatives listed in Question 1 above, own or rent. List only real estate that is located in the municipality and the contiguous municipalities. For residential property, list as the address only the city, town or village where the property is located.

Niagara County does request this information for elected official, spouse and dependent children. (Half credit)

Gifts – List each gift that you or your spouse or registered domestic partner or child under the age of 18 and living with you received worth \$10 or more during the year. Gifts from relatives are excluded. (The amount stated should equal the threshold for prohibited gifts under the municipalities ethics law but not more than \$75.

Niagara County does request this information for gifts in excess of \$250. (Half credit)

Political Contributions – List each person or entity that made to you or your campaign committee, within the previous 24 months, financial contributions, in money, goods, or services, totaling \$1,000 or more to assist in your election. (The amount stated should equal the threshold for a conflict of interest under the municipalities ethics law).

Niagara County does not request this information. (No credit)

Relatives in Service – List each relative defined in question 1, who is an officer or employee of the municipality, whether paid or unpaid, including the relative's name, relationship to you, title and department.

Niagara County does not request this information. (No credit)

Volunteer Positions – List each volunteer office or position that you hold. Provide same info for your spouse or registered domestic partner.

Niagara County does ask for this information. (Full credit)

Money You Owe – List each person or entity to which you or your spouse or registered domestic partner owes \$10,000 or more. Do not list money owed to relatives. Do not list credit card debt unless you have owed the money for at least 60 days.

Niagara County does ask for information regarding debts. (Full credit)

Money Owed to You - List each person or entity that owes you or your spouse or registered domestic partner \$10,000 or more. Do not list money owed by relatives.

Niagara County does not ask for information regarding this. (No credit)

Customers and Clients – List the name of each customer or client from whom you or your spouse or registered domestic partner earned \$1,000 or more during the year. Do not disclose the names of medical patients, dental patients, mental health clients, or in the case of lawyers, clients in criminal, bankruptcy, or domestic relations matters.

Niagara County does not ask for this information. (No credit)

Is the Disclosure Form certified as to the truthfulness of the information? Are people required to acknowledge that they read their ethics code?

Niagara County does not do this. (No credit)

Interest in Contracts – Describe any monetary interest and/or connection that you, your spouse, registered domestic partner, children, grandchildren, parents, sisters, brothers, and grandparents; the parents, children, sisters, and brothers of your spouse or registered domestic partner; the spouses or registered domestic partners of your parents, children, brothers and sisters, have with any contract involving the municipality.

Niagara County does request this information for elected official, spouse and dependent children only. (Half credit)

Political Parties – List any position you your spouse, registered domestic partner, children have held within the past five years in any political party, political committee or political organization.

Niagara County request this information for elected official only. (Half credit)

Third Party Reimbursements – Identify and describe the source of any third-party payment or reimbursement for municipal travel related expenditures for any matter that relates to your official duties.

Niagara County does request this information. (Full credit)

Future Employment – Describe any contract or agreement you, your registered domestic partner, spouse or children has with respect to employment after leaving your government office or position.

Niagara County does request this information **(Full credit)**

Past Employment – Identify the source and nature of any income in excess of \$1,000/ year from any prior employer, including deferred income, contributions to a pension or retirement fund, profit sharing plan, severance pay or payments under a buyout agreement.

Niagara County does request. **(Full credit)**

Total – Out of the 16 items in our criteria, the Niagara County Disclosure Form sufficiently addresses 11 out of 16 items. Five out of the eleven items, could be improved as they were not addressed as fully as our stated criteria.

Niagara Falls

Outside Employers and Businesses where Elected Official, Spouse & Relatives received more than \$1,000 for services performed or goods sold during the year

Niagara Falls requests this info for elected official, spouse and dependent children. The Davies Model Form requires this information from the elected official, spouse, registered domestic partner, children, grandchildren, parents, sisters, brothers and grandparents; the parents, children, sisters, and brothers of your spouse or registered domestic partner; the spouses or registered domestic partners of your parents, children, brothers, and sisters; and any person claimed as a dependent on your latest individual state income tax return. **(Half credit for this item)**

Investments-Name any entity in which you have an investment of at least 5% of the stock or debt of the entity or \$10,000, whichever is less. Provide the same information for your spouse or registered domestic partner and any of your children under age 18.

Niagara Falls requests this information. **(Full credit)**

Real Estate – List the address of each piece of real estate that you or your relatives listed in Question 1 above, own or rent. List only real estate that is located in the municipality and the contiguous municipalities.

For residential property, list as the address only the city, town or village where the property is located.

Niagara Falls requests this information for elected official and spouse. A primary or secondary residence does not have to be disclosed. **(Half credit)**

Gifts – List each gift that you or your spouse or registered domestic partner or child under the age of 18 and living with you received worth \$10 or more during the year. Gifts from relatives are excluded. (The amount stated should equal the threshold for prohibited gifts under the municipalities ethics law but not more than \$75.

Niagara Falls requests information regarding gifts in excess of \$1,000. **(Half credit)**

Political Contributions – List each person or entity that made to you or your campaign committee, within the previous 24 months, financial contributions, in money, goods, or services, totaling \$1,000 or more to assist in your election. (The amount stated should equal the threshold for a conflict of interest under the municipalities ethics law).

Niagara Falls does not request this information. **(No credit)**

Relatives in Service – List each relative defined in question 1, who is an officer or employee of the municipality, whether paid or unpaid, including the relative's name, relationship to you, title and department.

Niagara Falls does not request information regarding relatives working for the City of Niagara Falls. **(No credit)**

Volunteer Positions – List each volunteer office or position that you hold. Provide same info for your spouse or registered domestic partner.

Niagara Falls does ask for this information. **(Full credit)**

Money You Owe – List each person or entity to which you or your spouse or registered domestic partner owes \$10,000 or more. Do not list money owed to relatives. Do not list credit card debt unless you have owed the money for at least 60 days.

Niagara Falls asks for information regarding debts over \$5,000, for elected official and spouse. Credit cards of more than \$5,000 are required to be listed. **(Full credit)**

Money Owed to You - List each person or entity that owes you or your spouse or registered domestic partner \$10,000 or more. Do not list money owed by relatives.

Niagara Falls does ask for information owed to the elected official. (Full credit)

Customers and Clients – List the name of each customer or client from whom you or your spouse or registered domestic partner earned \$1,000 or more during the year. Do not disclose the names of medical patients, dental patients, mental health clients, or in the case of lawyers, clients in criminal, bankruptcy, or domestic relations matters.

Niagara Falls does not ask for this information. (No credit)

Is the Disclosure Form certified as to the truthfulness of the information? Are people required to acknowledge that they read their ethics code?

Niagara's form is not certified as to the truthfulness nor are people required to acknowledge that they have read the ethics code. (No credit)

Interest in Contracts – Describe any monetary interest and/or connection that you, your spouse, registered domestic partner, children, grandchildren, parents, sisters, brothers, and grandparents; the parents, children, sisters, and brothers of your spouse or registered domestic partner; the spouses or registered domestic partners of your parents, children, brothers and sisters, have with any contract involving the municipality.

Niagara Falls does not request this information. (No credit)

Political Parties – List any position you your spouse, registered domestic partner, children have held within the past five years in any political party, political committee or political organization.

Niagara Falls requests information regarding position held by elected official only for the previous year. (Half credit)

Third Party Reimbursements – Identify and describe the source of any third-party payment or reimbursement for municipal travel related expenditures for any matter that relates to your official duties.

Niagara Falls requests information but only when in excess of \$1,000. (No credit)

Future Employment – Describe any contract or agreement you, your registered domestic partner, spouse or children has with respect to employment after leaving your government office or position.

Niagara Falls requests for elected official only. (Half credit)

Past Employment – Identify the source and nature of any income in excess of \$1,000/ year from any prior employer, including deferred income, contributions to a pension or retirement fund, profit sharing plan, severance pay or payments under a buyout agreement.

Niagara Falls does request. (Full credit)

Total – Out of the 16 items in our criteria, the Niagara Falls Disclosure Form sufficiently addresses 10 out of 16 items. Five of the ten items, could be improved as they were not addressed as fully as our stated criteria.

Lancaster (Town)

Outside Employers and Businesses where Elected Official, Spouse & Relatives received more than \$1,000 for services performed or goods sold during the year

Lancaster requests this info for elected official and spouse. The Davies Model Form requires this information from the elected official, spouse, registered domestic partner, children, grandchildren, parents, sisters, brothers and grandparents; the parents, children, sisters, and brothers of your spouse or registered domestic partner; the spouses or registered domestic partners of your parents, children, brothers, and sisters; and any person claimed as a dependent on your latest individual state income tax return. (Half credit for this item)

Investments-Name any entity in which you have an investment of at least 5% of the stock or debt of the entity or \$10,000, whichever is less. Provide the same information for your spouse or registered domestic partner and any of your children under age 18.

Lancaster does not request this information. (No credit)

Real Estate – List the address of each piece of real estate that you or your relatives listed in Question 1 above, own or rent. List only real estate that is located in the municipality and the contiguous municipalities. For residential property, list as the address only the city, town or village where the property is located.

Lancaster requests this information for property located in Town of Lancaster only for elected official, spouse and household members. **(Half credit)**

Gifts – List each gift that you or your spouse or registered domestic partner or child under the age of 18 and living with you received worth \$10 or more during the year. Gifts from relatives are excluded. (The amount stated should equal the threshold for prohibited gifts under the municipalities ethics law but not more than \$75.

Lancaster requests information regarding gifts in excess of \$75, for elected official only. **(Half credit)**

Political Contributions – List each person or entity that made to you or your campaign committee, within the previous 24 months, financial contributions, in money, goods, or services, totaling \$1,000 or more to assist in your election. (The amount stated should equal the threshold for a conflict of interest under the municipalities ethics law).

Lancaster does not request information regarding campaign contributions. **(No credit)**

Relatives in Service – List each relative defined in question 1, who is an officer or employee of the municipality, whether paid or unpaid, including the relative's name, relationship to you, title and department.

Lancaster does not request this information. **(No credit)**

Volunteer Positions – List each volunteer office or position that you hold. Provide same info for your spouse or registered domestic partner.

Lancaster does ask for this information for elected official and spouse. **(Full credit)**

Money You Owe – List each person or entity to which you or your spouse or registered domestic partner owes \$10,000 or more. Do not list money owed to relatives. Do not list credit card debt unless you have owed the money for at least 60 days.

Lancaster does not ask for information regarding debts. **(No credit)**

Money Owed to You - List each person or entity that owes you or your spouse or registered domestic partner \$10,000 or more. Do not list money owed by relatives.

Lancaster does not ask for information regarding this. **(No credit)**

Customers and Clients – List the name of each customer or client from whom you or your spouse or registered domestic partner earned \$1,000 or more during the year. Do not disclose the names of medical patients, dental patients, mental health clients, or in the case of lawyers, clients in criminal, bankruptcy, or domestic relations matters.

Lancaster does not ask for this information. (No credit)

Is the Disclosure Form certified as to the truthfulness of the information? Are people required to acknowledge that they read their ethics code?

Lancaster’s form is not certified as to the truthfulness nor are people required to acknowledge that they have read the ethics code. (No credit)

Interest in Contracts – Describe any monetary interest and/or connection that you, your spouse, registered domestic partner, children, grandchildren, parents, sisters, brothers, and grandparents; the parents, children, sisters, and brothers of your spouse or registered domestic partner; the spouses or registered domestic partners of your parents, children, brothers and sisters, have with any contract involving the municipality.

Lancaster does not request this information. (No credit)

Political Parties – List any position you your spouse, registered domestic partner, children have held within the past five years in any political party, political committee or political organization.

Lancaster does not request this information. (No credit)

Third Party Reimbursements – Identify and describe the source of any third-party payment or reimbursement for municipal travel related expenditures for any matter that relates to your official duties.

Lancaster does not request this information. (No credit)

Future Employment – Describe any contract or agreement you, your registered domestic partner, spouse or children has with respect to employment after leaving your government office or position.

Lancaster does not request this information. (No credit)

Past Employment – Identify the source and nature of any income in excess of \$1,000/ year from any prior employer, including deferred income, contributions to a pension or retirement fund, profit sharing plan, severance pay or payments under a buyout agreement.

Lancaster does not request. (No credit)

Total – Out of the 16 items in our criteria, the Lancaster Disclosure Form sufficiently addresses 4 out of 16 items. Three of the four items, could be improved as they were not addressed as fully as our stated criteria.

Tonawanda (Town)

Outside Employers and Businesses where Elected Official, Spouse & Relatives received more than \$1,000 for services performed or goods sold during the year

Tonawanda requests this info for elected official and spouse. The Davies Model Form requires this information from the elected official, spouse, registered domestic partner, children, grandchildren, parents, sisters, brothers and grandparents; the parents, children, sisters, and brothers of your spouse or registered domestic partner; the spouses or registered domestic partners of your parents, children, brothers, and sisters; and any person claimed as a dependent on your latest individual state income tax return. (Half credit for this item)

Investments-Name any entity in which you have an investment of at least 5% of the stock or debt of the entity or \$10,000, whichever is less. Provide the same information for your spouse or registered domestic partner and any of your children under age 18.

Tonawanda does not request this information. (No credit)

Real Estate – List the address of each piece of real estate that you or your relatives listed in Question 1 above, own or rent. List only real estate that is located in the municipality and the contiguous municipalities. For residential property, list as the address only the city, town or village where the property is located.

Tonawanda requests this information for elected official, spouse and dependent children for Tonawanda only. (Half credit)

Gifts – List each gift that you or your spouse or registered domestic partner or child under the age of 18 and living with you received worth \$10 or more during the year. Gifts from relatives are excluded. (The amount stated should equal the threshold for prohibited gifts under the municipalities ethics law but not more than \$75.

Tonawanda does not request this information. (No credit)

Political Contributions – List each person or entity that made to you or your campaign committee, within the previous 24 months, financial contributions, in money, goods, or services, totaling \$1,000 or more to assist in your election. (The amount stated should equal the threshold for a conflict of interest under the municipalities ethics law).

Tonawanda does not request information regarding campaign contributions. (No credit)

Relatives in Service – List each relative defined in question 1, who is an officer or employee of the municipality, whether paid or unpaid, including the relative’s name, relationship to you, title and department.

Tonawanda does not request this information. (No credit)

Volunteer Positions – List each volunteer office or position that you hold. Provide same info for your spouse or registered domestic partner.

Tonawanda does ask for this information. (Full credit)

Money You Owe – List each person or entity to which you or your spouse or registered domestic partner owes \$10,000 or more. Do not list money owed to relatives. Do not list credit card debt unless you have owed the money for at least 60 days.

Tonawanda does not ask for information regarding debts. (No credit)

Money Owed to You - List each person or entity that owes you or your spouse or registered domestic partner \$10,000 or more. Do not list money owed by relatives.

Tonawanda does not ask for information regarding this. (No credit)

Customers and Clients – List the name of each customer or client from whom you or your spouse or registered domestic partner earned \$1,000 or more during the year. Do not disclose the names of medical patients, dental patients, mental health clients, or in the case of lawyers, clients in criminal, bankruptcy, or domestic relations matters.

Tonawanda does not ask for this information. (No credit)

Is the Disclosure Form certified as to the truthfulness of the information? Are people required to acknowledge that they read their ethics code?

Tonawanda’s form is not certified as to the truthfulness nor are people required to acknowledge that they have read the ethics code. (No credit)

Interest in Contracts – Describe any monetary interest and/or connection that you, your spouse, registered domestic partner, children, grandchildren, parents, sisters, brothers, and grandparents; the parents, children, sisters, and brothers of your spouse or registered domestic partner; the spouses or registered domestic partners of your parents, children, brothers and sisters, have with any contract involving the municipality.

Tonawanda does not request this information. (No credit)

Political Parties – List any position you your spouse, registered domestic partner, children have held within the past five years in any political party, political committee or political organization.

Tonawanda does not request this information. (No credit)

Third Party Reimbursements – Identify and describe the source of any third-party payment or reimbursement for municipal travel related expenditures for any matter that relates to your official duties.

Tonawanda does not request this information. (No credit)

Future Employment – Describe any contract or agreement you, your registered domestic partner, spouse or children has with respect to employment after leaving your government office or position.

Tonawanda does not request this information. (No credit)

Past Employment – Identify the source and nature of any income in excess of \$1,000/ year from any prior employer, including deferred income, contributions to a pension or retirement fund, profit sharing plan, severance pay or payments under a buyout agreement.

Tonawanda does not request. (No credit)

Total – Out of the 16 items in our criteria, the Tonawanda Disclosure Form sufficiently addresses 3 out of 16 items. Two out of the three items, could be improved as they were not addressed as fully as our stated criteria.

Amherst

Outside Employers and Businesses where Elected Official, Spouse & Relatives received more than \$1,000 for services performed or goods sold during the year

Amherst requests this info for elected official and spouse. The Davies Model Form requires this information from the elected official, spouse, registered domestic partner, children, grandchildren, parents, sisters, brothers and grandparents; the parents, children, sisters, and brothers of your spouse or registered domestic partner; the spouses or registered domestic partners of your parents, children, brothers, and sisters; and any person claimed as a dependent on your latest individual state income tax return. (Half credit for this item)

Investments-Name any entity in which you have an investment of at least 5% of the stock or debt of the entity or \$10,000, whichever is less. Provide the same information for your spouse or registered domestic partner and any of your children under age 18.

Amherst does not request this information. (No credit)

Real Estate – List the address of each piece of real estate that you or your relatives listed in Question 1 above, own or rent. List only real estate that is located in the municipality and the contiguous municipalities. For residential property, list as the address only the city, town or village where the property is located.

Amherst requests this information for elected official, spouse and other members of household. (Half credit)

Gifts – List each gift that you or your spouse or registered domestic partner or child under the age of 18 and living with you received worth \$10 or more during the year. Gifts from relatives are excluded. (The amount stated should equal the threshold for prohibited gifts under the municipalities ethics law but not more than \$75.

[Amherst does not request this information.](#) (No credit)

Political Contributions – List each person or entity that made to you or your campaign committee, within the previous 24 months, financial contributions, in money, goods, or services, totaling \$1,000 or more to assist in your election. (The amount stated should equal the threshold for a conflict of interest under the municipalities ethics law).

[Amherst does not request information regarding campaign contributions.](#) (No credit)

Relatives in Service – List each relative defined in question 1, who is an officer or employee of the municipality, whether paid or unpaid, including the relative’s name, relationship to you, title and department.

[Amherst does not request information.](#) (No credit)

Volunteer Positions – List each volunteer office or position that you hold. Provide same info for your spouse or registered domestic partner.

[Amherst does not ask for this information.](#) (No credit)

Money You Owe – List each person or entity to which you or your spouse or registered domestic partner owes \$10,000 or more. Do not list money owed to relatives. Do not list credit card debt unless you have owed the money for at least 60 days.

[Amherst does not ask for information regarding debts.](#) (No credit)

Money Owed to You - List each person or entity that owes you or your spouse or registered domestic partner \$10,000 or more. Do not list money owed by relatives.

[Amherst does not ask for information regarding this.](#) (No credit)

Customers and Clients – List the name of each customer or client from whom you or your spouse or registered domestic partner earned \$1,000 or more during the year. Do not disclose the names of medical patients, dental patients, mental health clients, or in the case of lawyers, clients in criminal, bankruptcy, or domestic relations matters.

Amherst does not ask for this information. (No credit)

Is the Disclosure Form certified as to the truthfulness of the information? Are people required to acknowledge that they read their ethics code?

Amherst's form is not certified as to the truthfulness nor are people required to acknowledge that they have read the ethics code. (No credit)

Interest in Contracts – Describe any monetary interest and/or connection that you, your spouse, registered domestic partner, children, grandchildren, parents, sisters, brothers, and grandparents; the parents, children, sisters, and brothers of your spouse or registered domestic partner; the spouses or registered domestic partners of your parents, children, brothers and sisters, have with any contract involving the municipality.

Amherst does not request this information. (No credit)

Political Parties – List any position you your spouse, registered domestic partner, children have held within the past five years in any political party, political committee or political organization.

Amherst does not request this information. (No credit)

Third Party Reimbursements – Identify and describe the source of any third-party payment or reimbursement for municipal travel related expenditures for any matter that relates to your official duties.

Amherst does not request this information. (No credit)

Future Employment – Describe any contract or agreement you, your registered domestic partner, spouse or children has with respect to employment after leaving your government office or position.

Amherst does not request this information. (No credit)

Past Employment – Identify the source and nature of any income in excess of \$1,000/ year from any prior employer, including deferred income, contributions to a pension or retirement fund, profit sharing plan, severance pay or payments under a buyout agreement.

Amherst does not request. (No credit)

Total – Out of the 16 items in our criteria, the Amherst Disclosure Form sufficiently addresses 2 out of 16 items. Both items, could be improved as they were not addressed as fully as our stated criteria.

Clarence

Outside Employers and Businesses where Elected Official, Spouse & Relatives received more than \$1,000 for services performed or goods sold during the year

Clarence does not request this information. The Davies Model Form requires this information from the elected official, spouse, registered domestic partner, children, grandchildren, parents, sisters, brothers and grandparents; the parents, children, sisters, and brothers of your spouse or registered domestic partner; the spouses or registered domestic partners of your parents, children, brothers, and sisters; and any person claimed as a dependent on your latest individual state income tax return. (No credit for this item)

Investments-Name any entity in which you have an investment of at least 5% of the stock or debt of the entity or \$10,000, whichever is less. Provide the same information for your spouse or registered domestic partner and any of your children under age 18.

Clarence does not request this information. (No credit)

Real Estate – List the address of each piece of real estate that you or your relatives listed in Question 1 above, own or rent. List only real estate that is located in the municipality and the contiguous municipalities. For residential property, list as the address only the city, town or village where the property is located.

Clarence does not request this information. (No credit)

Gifts – List each gift that you or your spouse or registered domestic partner or child under the age of 18 and living with you received worth \$10 or more during the year. Gifts from relatives are excluded. (The amount stated should equal the threshold for prohibited gifts under the municipalities ethics law but not more than \$75.

Clarence does not specifically request this information. (No credit)

Political Contributions – List each person or entity that made to you or your campaign committee, within the previous 24 months, financial contributions, in money, goods, or services, totaling \$1,000 or more to assist in your election. (The amount stated should equal the threshold for a conflict of interest under the municipalities ethics law).

Clarence does not request information regarding campaign contributions. (No credit)

Relatives in Service – List each relative defined in question 1, who is an officer or employee of the municipality, whether paid or unpaid, including the relative’s name, relationship to you, title and department.

Clarence does not request this information. (No credit)

Volunteer Positions – List each volunteer office or position that you hold. Provide same info for your spouse or registered domestic partner.

Clarence does not ask for this information. (No credit)

Money You Owe – List each person or entity to which you or your spouse or registered domestic partner owes \$10,000 or more. Do not list money owed to relatives. Do not list credit card debt unless you have owed the money for at least 60 days.

Clarence does not ask for information regarding debts. (No credit)

Money Owed to You - List each person or entity that owes you or your spouse or registered domestic partner \$10,000 or more. Do not list money owed by relatives.

Clarence does not ask for information regarding this. (No credit)

Customers and Clients – List the name of each customer or client from whom you or your spouse or registered domestic partner earned \$1,000 or more during the year. Do not disclose the names of medical patients, dental patients, mental health clients, or in the case of lawyers, clients in criminal, bankruptcy, or domestic relations matters.

Clarence does not ask for this information. (No credit)

Is the Disclosure Form certified as to the truthfulness of the information? Are people required to acknowledge that they read their ethics code?

Clarence does this. (Full credit)

Interest in Contracts – Describe any monetary interest and/or connection that you, your spouse, registered domestic partner, children, grandchildren, parents, sisters, brothers, and grandparents; the parents, children, sisters, and brothers of your spouse or registered domestic partner; the spouses or registered domestic partners of your parents, children, brothers and sisters, have with any contract involving the municipality.

Clarence does request this information for elected official and spouse only. (Half credit)

Political Parties – List any position you your spouse, registered domestic partner, children have held within the past five years in any political party, political committee or political organization.

Clarence does not request this information. (No credit)

Third Party Reimbursements – Identify and describe the source of any third-party payment or reimbursement for municipal travel related expenditures for any matter that relates to your official duties.

Clarence does not request this information. (No credit)

Future Employment – Describe any contract or agreement you, your registered domestic partner, spouse or children has with respect to employment after leaving your government office or position.

Clarence does not request this information. (No credit)

Past Employment – Identify the source and nature of any income in excess of \$1,000/ year from any prior employer, including deferred income, contributions to a pension or retirement fund, profit sharing plan, severance pay or payments under a buyout agreement.

Clarence does not request. (No credit)

Total – Out of the 16 items in our criteria, the Clarence Disclosure Form sufficiently addresses 2 out of 16 items. One item, could be improved as it was not addressed as fully as our stated criteria.

ANNUAL STATEMENT OF FINANCIAL DISCLOSURE
TOWN OF TONAWANDA

For Calendar Year 2017

1. Name: _____

Address: _____

2. a. Title of Position: _____

b. Department, Agency or other Governmental Agency or Entity

NOTE: For questions 3 to 6, do not report exact dollar amounts. Instead, report Categories of amounts, using the following:

Category A: Under \$5,000	Category D: \$25,001 to \$50,000
Category B: \$5,001 to \$10,000	Category E: \$50,001 to \$100,000
Category C: \$10,001 to \$25,000	Category F: Over \$100,000

3. Address and the SBL No. of all real property within the Town of Tonawanda in which you, your spouse or your dependent has an ownership or other financial interest.

<u>Name of Interest Holder</u>	<u>Real Property Address</u>	<u>SBL Number</u>	<u>Category of Amount</u>
--------------------------------	------------------------------	-------------------	---------------------------

_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

4. List the name and address of any partnership, unincorporated association or business of which you, your spouse, or your dependent is a member, officer or employee, giving your position and/or the position of your spouse or dependent, if any, with the partnership, association or business.

<u>Name of Position Holder</u>	<u>Organization and Address</u>	<u>Title or Position</u>

5. List the name and address of any partnership, unincorporated association or business in which you, your spouse, or your dependent has a proprietary interest.

<u>Name of Interest Holder</u>	<u>Organization and Address</u>	<u>Category of Amount</u>

6. List the name and address of any corporation (including not-for-profit) or limited partnership or which you, your spouse, or your dependent is an officer, director, listing your position and/or the position of your spouse or dependent, if any, with the corporation or limited partnership.

<u>Name of Person</u>	<u>Person's Position</u>	<u>Name and Address of Corporation or Limited Partnership</u>

7. List the name and address of any corporation or limited partnership in which you, your spouse, or your dependent legally or beneficially owns or controls more than five (5) percent of the issued and outstanding stock or other ownership rights.

<u>Name of Owner</u>	<u>Corporation or Partnership</u>	<u>Category of Amount</u>
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8. State the self-employment, and the general nature thereof, from which you or your spouse has derived during the previous calendar year, gross income in excess of \$2,000.00 .

9. If you are unable, after reasonable effort, to obtain some or all of the information required herein, so state and give reasons therefore.

Month/ Day/Year

Signature of Reporting Individual

ANNUAL STATEMENT OF FINANCIAL DISCLOSURE FOR
CITY OF NIAGARA FALLS
FOR 2017

1. Name _____

2. (a) Title of Position _____
(b) Department, Agency or other Government Entity _____
(c) Address of Present Office _____
(d) Office Telephone Number _____

3. (a) Marital Status _____. If married, please give spouse's full name, including maiden name where applicable _____

(b) List the names of all unemancipated children

Answer each of the following questions completely, with respect to the calendar year 2017, unless another period or date is otherwise specified. If additional space is needed, attach additional pages.

Whenever a "value" or "amount" is required to be reported herein, such value or amount shall be reported as being within one of the following categories:

- Category A - under \$5,000;
- Category B - \$5,000 to under \$20,000;
- Category C - \$20,000 to under \$60,000;
- Category D - \$60,000 to under \$100,000;
- Category E - \$100,000 to under \$250,000; and
- Category F - \$250,000 and over.

A reporting individual shall indicate the Category by **letter only**.

For the purposes of this statement, anywhere the term "local agency" shall appear such term shall mean a local agency of the City of Niagara Falls as defined in Section 810 of the General Municipal Law.

4. (a) List any office, trusteeship, directorship, partnership, or position of any nature, including honorary positions, if known, and excluding membership positions, whether compensated or not, held by the reporting individual with any firm, corporation, association, partnership, or other organization other than the State of New York or the City of Niagara Falls. If said entity was licensed by any state or local agency, was regulated by any state regulatory agency or local agency, or, as a regular and significant part of the business or activity of said entity, did business with, or had matters other than ministerial matters before, any state or local agency, list the name of any such agency.

Position	Organization	State or Local Agency

(b) List any office, trusteeship, directorship, partnership, or position of any nature including honorary positions, if known, and excluding membership positions, whether compensated or not, held by the spouse or unemancipated child of the reporting individual, with any firm, corporation, association, partnership, or other organization other than the State of New York. If said entity was licensed by any state or local agency, was regulated by any state regulatory agency or local agency, or, as a regular and significant part of the business or activity of said entity, did business with, or had matters other than ministerial matters before any state or local agency, list the name of any such agency.

Position	Organization	State of Local Agency

Financial Disclosure Form

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5. (a) List the name, address and description of any occupation, employment, trade, business or profession engaged in by the reporting individual. If such activity was licensed by any state or local agency, was regulated by any state regulatory agency or local agency, or, as a regular and significant part of the business or activity of said entity, did business with or had matters other than ministerial matters before any state or local agency, list the name of any such agency.

Position	Name & Address of Organization	Description	State or Local Agency

(b) If the spouse or unemancipated child of the reporting individual was engaged in any occupation, employment, trade, business or profession, which activity was licensed by any state or local agency, was regulated by any state regulatory agency or local agency, or, as a regular and significant part of the business or activity of said entity, did business with or had matters other than ministerial matters before any state or local agency, list the name, address and description of such occupation, employment, trade, business or profession and the name of any such agency.

Position	Name & Address of Organization	Description	State or Local Agency

6. List any interest, in excess of \$1,000, excluding bonds and notes, held by the reporting individual, such individual's spouse or unemancipated child, or partnership of which any such person is a member, or corporation, ten per centum or more of the stock of which is owned or controlled by any such person, whether vested or contingent, in any contract made or executed by a state or local agency and include the name of the entity which holds such interest and the relationship of the reporting individual or such individual's spouse or such child to such entity and the interest in such contract. Do not list any interest in any such contract on which final payment has been made and all obligations under the contract except for guarantees and warranties have been performed, provided,

Financial Disclosure Form

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however, that such an interest must be listed if there has been an ongoing dispute during the calendar year for which this statement is filed with respect to any such guarantees or warranties. Do not list any interest in a contract made or executed by a state agency after public notice and pursuant to a process for competitive bidding or a process for competitive requests for proposals.

Self, Spouse or Child	Entity Which Held Interest in Contract	Relationship to Entity & Interest in Contract	Contracting State or Local Agency	Category of Value of Contract

7. List any position the reporting individual held as an officer of any political party or political organization, as a member of any political party committee, or as a political party district leader. The term "party" shall have the same meaning as "party" in the Election Law. The term "political organization" means any party or independent body as defined in the Election Law, or any organization that is affiliated with or a subsidiary of a party or independent body.

8. (a) If the reporting individual practices law, is licensed by the Department of State as a real estate broker or agent or practices a profession licensed by the Department of Education, give a general description of the principal subject areas of matters undertaken by such individual. Additionally, if such an individual practices with a firm or corporation and is a partner or shareholder of the firm or corporation, give a general description of principal subject areas of matters undertaken by such firm or corporation. Do not list the names of the individual clients, customers or patients.

(b) List the name, principal address and general description or the nature of the business activity of any entity in which the reporting individual's spouse had an investment in excess of \$1,000 excluding investments in securities and interests in real property.

9. List each source of gifts, excluding campaign contributions, in excess of \$1,000, received during the reporting period for which this statement is filed by the reporting individual or such individual's spouse or unemancipated child from the same donor, excluding gifts from a relative. Include the name and address of the donor. The term "gifts" does not include reimbursements, which term is defined at Item 10. Indicate the value and nature of each such gift.

Self, Spouse or Child	Name of Donor	Address	Nature of Gift	Category of Value of Gift

10. Identify and briefly describe the source of any reimbursements for expenditures, excluding campaign expenditures and expenditures in connection with official duties reimbursed by the political subdivision for which this statement has been filed, in excess of \$1,000 from each such source. For purposes of this item, the term "reimbursements" shall mean any travel-related expenses provided by non-governmental sources and for activities related to the reporting individual's official duties such as, speaking engagements, conferences, or fact-finding events. The term "reimbursements" does not include gifts reported under Item 9.

Source	Description

11. List the identity and value, if reasonably ascertainable, of each interest in a trust, estate or other beneficial interest, including retirement

plans other than retirement plans of the State of New York or the City of New York, and deferred compensation plans established in accordance with the Internal Revenue Code, in which the reporting individual held a beneficial interest in excess of \$1,000 at any time during the preceding year. Do not report interests in a trust, estate or other beneficial interest established by or for, or the estate of, a relative.

Identity	Category of Value* ¹

12. (a) Describe the terms of, and the parties to, any contract, promise, or other agreement between the reporting individual and any person, firm, or corporation with respect to the employment of such individual after leaving office or position (other than a leave of absence).

(b) Describe the parties to and the terms of any agreement providing for continuation of payments or benefits to the reporting individual in excess of \$1,000 from a prior employer other than the City. (This includes interests in or contributions to a pension fund, profit-sharing plan, or life or health insurance; buy-out agreements; severance agreements, etc.)

13. List below the nature and amount of any income in excess of \$1,000 from each source for the reporting individual and the reporting

¹ The value of such interest shall be reported only if reasonably ascertainable.

Financial Disclosure Form

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individual's spouse for the taxable year last occurring prior to the date of filing. Nature of income includes, but is not limited to, salary for government employment, income from other compensated employment, whether public or private, directorships and other fiduciary positions, contractual arrangements, teaching income, partnerships, honorariums, lecture fees, consultant fees, bank and bond interest, dividends, income derived from a trust, real estate rents, and recognized gains from the sale or exchange of real or other property. Income from a business or profession and real estate rents shall be reported with the source identified by the building address in the case of real estate rents and other wise by the name of the entity and not by the name of the individual customers, clients or tenants, with the aggregate net income before taxes for each building address or entity. The receipt of maintenance received in connection with a matrimonial action, alimony and child support payments shall not be listed.

Self/Spouse	Source	Nature	Category of Amount

14. List the sources of any deferred income in excess of \$1,000 from each source to be paid to the reporting individual following the close of the calendar year of which this disclosure statement is filed, other than deferred compensation reported in Item 11 hereinabove. Deferred income derived from the practice of a profession shall be listed in the aggregate and shall identify as the source the name of the firm, corporation, partnership or association through which the income was derived, but shall not identify individual clients.

Source	Category of Amount

15. List each assignment of income in excess of \$1,000, and each transfer other than to a relative during the reporting period for which this statement is filed for less than fair consideration of an interest in a trust, estate or other beneficial interest, securities or real property, by the reporting individual, in excess of \$1,000, which would otherwise be required to be reported herein and is nor has not been so reported.

Item Assigned or Transferred	Assigned or Transferred to	Category of Amount

16. List below the type and market value of securities held by the reporting individual or such individual's spouse from each issuing entity in excess of \$1,000 at the close of the taxable year last occurring prior to the date of filing, including the name of the issuing entity exclusive of securities held by the reporting individual issued by a professional corporation. Whenever an interest in securities exists through a beneficial interest in a trust, the securities held in such trust shall be listed only if the reporting individual has knowledge thereof except where the reporting individual or the reporting individual's spouse has transferred assets to such trust for his or her benefit in which event such securities shall be listed unless they are not ascertainable by the reporting individual because the trustee is under an obligation or has been instructed in writing not to disclose the contents of the trust to the reporting individual. Securities of which the reporting individual or the reporting individual's spouse is the owner of record, but in which such individual or the reporting individual's spouse has no beneficial interest shall not be listed. Indicate percentage of ownership if the reporting person or the reporting person's spouse holds more than five percent of the stock of a corporation in which the stock is publicly traded or more than ten percent if such stock is not publicly traded. Also list securities owned for investment purposes by a corporation more than fifty percent of the stock of which is owned or controlled by the reporting individual or such individual's spouse. For the purposes of this item, the term "securities" shall mean bonds, mortgages, notes, obligations, warrants and stocks of any class, investment interests in limited or general partnerships and certificates of deposit and such other evidences of indebtedness and certificates of interest as are usually referred to as securities. The market value for such securities shall be reported only if reasonably

ascertainable and shall not be reported if the security is an interest in a general partnership that was listed in Item 8(a) or if the security is corporate stock, not publicly traded, in a trade or business of a reporting individual or a reporting individual's spouse.

Self/Spouse	Issuing Entity	Type of Security	Category of Market Value as of the close of the taxable year last occurring prior to the filing of this statement	Percentage of Corporate Stock Owned or Controlled

17. List below the location, size, general nature, acquisition date, market value and percentage of ownership of any real property in which any vested or contingent interest in excess of \$1,000 is held by the reporting individual or the reporting individual's spouse. Also list real property owned for investment purposes by a corporation more than fifty percent of the stock of which is owned or controlled by the reporting individual or such individual's spouse. Do not list any real property which is the primary or secondary personal residence of the reporting individual or the reporting individual's spouse, except where there is a co-owner who is other than a relative.

Self/Spouse/Other Party	Location	Size	General Nature	Acquisition Date	Category of Market Value

18. List below all notes and accounts receivable, other than from goods or services sold, held by the reporting individual at the close of the taxable year last occurring prior to the date of filing and other debts owed to such individual at the close of the table year last occurring prior to the date of filing, in excess of \$1,000, including the name of the debtor, type of obligation, date due and the nature of the collateral securing payment of each, if any, excluding securities reported in Item 16 hereinabove. Debts, notes and accounts receivable owned to the individual by a relative shall not be reported.

Name of Debtor	Type of Obligation, Date Due and Nature of Collateral, if any	Category of Amount

19. List below all liabilities of the reporting individual and such individual's spouse in excess of \$5,000 as of the date of filing of this statement, other than liabilities to a relative. Do not list liabilities incurred by, or guarantees made by, the reporting individual or such individual's spouse or by any proprietorship, partnership, or corporation in which the reporting individual or such individual's spouse has an interest, when incurred or made in the ordinary course of the trade, business or professional practice of the reporting individual or such individual's spouse. Include the name of the creditor and any collateral pledged by such individual to secure payment of any such liability. A reporting individual shall not list any obligation to pay maintenance in connection with a matrimonial action, alimony or child support payments. Revolving charge account information shall only be set forth if liability thereon is in excess of \$5,000 at the time of filing. Any loan issued in the ordinary course of business by a financial institution to finance educational costs, the cost of home purchase or improvements for a primary or secondary residence, or purchase of a personally owned motor vehicle, household furniture or appliances, shall be excluded. If any such reportable liability has been guaranteed by any third person, list the liability and name the guarantor.

Name of Creditor or Guarantor	Type of Liability and Collateral, if any	Category of Amount

The requirements of law relating to the reporting of financial interests are in the public interest and no adverse inference of unethical or illegal conduct or behavior will be drawn merely from compliance with these requirements.

Signature of Reporting Individual

Date (month/day/year)

NIAGARA COUNTY ANNUAL FINANCIAL DISCLOSURE FORM – 2017
Name and Address

First Name	Middle Name	Last Name
Department/Agency or Committee		Title
Department Address		Phone
Residence Address		Phone

1. Spouse and Dependent Children

Provide the name of your spouse (if married) and names of any dependent children:

_____	_____
Spouse	Child/Age
_____	_____
Child/Age	Child/Age

2. Financial Interest: Note: For questions 3 to 6, do not report the exact dollar amounts. Instead, report Categories of Amounts using the following:

- | | |
|------------------------------------|-------------------------------------|
| Category A: Under \$5,000 | Category D: \$25,000-50,000 |
| Category B: \$5,001-10,000 | Category E: \$50,001-100,000 |
| Category C: \$10,001-25,000 | Category F: Over \$100,000 |

a. Business Positions. List any office, trusteeship, directorship, partnership or other position in any business, propriety or not-for-profit organization held by you and your spouse and dependent children, if any, and indicate whether these businesses are involved with the County of Niagara in any manner.

Name of Family Member	Position	Organization	County Department or Agency and Nature of Involvement
_____	_____	_____	_____
_____	_____	_____	_____

b. Outside Employment. Describe any outside occupation, employment, trade, business or profession providing more than \$1,000.00 for a year for you or your spouse and dependent children, if any, and indicate whether any such activities are regulated by any state or local agency.

Name of Family Member	Position	Name, Address Description of Organization	State or Local Agency	Category of Amount

c. Future Employment. Describe any contact, promise or other agreement between you and anyone else with respect to your employment after leaving your county office or position.

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d. Past Employment. Identify the source and nature of any income in excess of \$1,000 per year from any prior employer including deferred income, contributions to pension or retirement fund, profit plan, severance pay or payments under a buy-out agreement.

Name & Address of Income Source	Description of Income (i.e., pension, deferred)	Category of Amount

e. Investments. Itemize and describe all investments in excess of \$5,000 or 5% of the value in any business, corporation, partnership or other assets including stocks, bonds, loans, pledged collateral or other investments for you, your spouse and dependent children, if any. List location of all real estate within the county or within five (5) miles thereof in which you, your spouse or dependent children have an interest, regardless of its value.

Name of Family Member	Name & Address of Real Estate	Description of Investment	Category of Amount

- f. **Trusts.** Identify each interest in a trust or estate or similar beneficial interest in any assets in excess of \$2,000 except form IRS eligible retirement plans or interest 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
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- g. **Other Income.** Identify the source and nature of any other income in excess of \$1,000 per year from any other source not described above,, including teaching income, lecture fees, consultant for contractual income or other income of any nature for you, your spouse and dependent children.

Name of Family Member	Name/Address of Source	Nature of Income	Category of Amount
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3. **Gifts and Honorariums**

List source of all gifts aggregating in excess of \$250 received during the last year by you, your spouse or dependent children, excluding gifts from relatives. The term "gifts" includes gifts of cash, property, personal items, payments to third parties on your behalf, forgiveness of debt, honorariums and any other payments that are not reportable as income.

Name of Family Member	Name/Address of Donor	Category of Amount
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4. **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 for speaking engagements, conferences or fact finding events that relate to your official duties.

Source	Description	Category of Amount
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5. Debts.

Describe all debts of you, your spouse and dependent children in excess of \$5,000.

Name of Family Member	Name/Address Creditor	Category of Amount

6. Interest in Contracts.

Describe any interest of you, your spouse or dependent children in any contract involve County of any municipality located within Niagara County.

Name of Family Member	Contract Description

8. Political Parties.

List any position you held within the last five (5) years as an officer of any political party, political committee or political organization. The term "political organization" includes any independent or any organization that is affiliated with, or a subsidiary of a political party.

Signed

Date

PLEASE COMPLETE AND SIGN THE FACE OF THE ENCLOSED ENVELOPE

RETURN TO: NIAGARA COUNTY BOARD OF ETHICS
c/o Human Resources Office
111 Main Street, Suite G2
Lockport, New York 14094

ANNUAL STATEMENT OF FINANCIAL DISCLOSURE
TOWN OF LANCASTER

PLEASE ANSWER ALL QUESTIONS. Disclosure forms will not be accepted unless fully completed.

For Calendar Year 2018

1. Name: _____
Address: _____
Phone Number: _____

2. a. Title of Town Position: _____

b. Department, Agency, or other Governmental Agency or Entity:

3. Address and SBL No. of all real property within the Town of Lancaster in which you or your spouse or other family member of your household has an ownership or other financial interest. *Please indicate each S.B.L. listed on the form as a primary residence, a business property and/or rental property.*

Address & S.B.L. Number

Primary: _____

Other: _____

4. List the name and address of any partnership, unincorporated association or business of which you or your spouse is a member, officer or employee in which you or your spouse has a proprietary (*an owner/proprietor*) interest, giving your position and/or your spouse's position, if any, with the partnership association or business. *If none, please state not applicable (NA).*

<u>Position</u>	<u>Organization</u>	<u>Address of Organization</u>
_____	_____	_____
_____	_____	_____

5. List the name and address of any corporation or limited partnership of which you or your spouse is an officer, director or employee or of which you or your spouse legally or beneficially owns or controls more than *five percent (5%) of the issued and outstanding stock or other ownership rights*, listing your position and/or your spouse's position, if any, with the corporation or limited partnership. *If none, please state not applicable (NA).*

Name of Corporation
or Limited Partnership

Address

Position

6. State the self-employment and the general nature thereof, from which you or your spouse has derived, during the previous calendar year, gross income in excess of \$2,000.00. *If none, please state not applicable (NA).*

7. If you are unable after reasonable effort to obtain some or all of the information required herein, so state and give reasons therefore. *If none, please state not applicable (NA).*

8. Have you personally accepted any gifts or donations with a value of \$75 or more? List donators and dollar amount: *(If none, please state not applicable, NA).*

Signature of Reporting Individual

Date _____

ANNUAL STATEMENT OF FINANCIAL DISCLOSURE FOR

TOWN OF HAMBURG

FOR 20____

1. Name and Address.

Last Name Middle Initial First Name

Title

Department or Agency

Department or Agency Address Telephone No.

Residence Address Telephone No.

2. Spouse and Children.

Provide the name of your spouse (if married) and the names of any dependent children:

Spouse

Child/Age

Child/Age

Child/Age

Note: For questions 3 to 6, do not report exact dollar amounts. Instead, report categories of amounts, using the following:

Category A: under \$5,000 Category D: \$25,001 to \$50,000
Category B: \$5,001 to \$10,000 Category E: \$50,001 to \$100,000
Category C: \$10,001 to \$25,000 Category F: Over \$100,000.

CATEGORIES
OF AMOUNT
WILL REMAIN
CONFIDENTIAL

3. Financial Interests.

a. Business Positions. List any office, trusteeship, directorship, partnership, or other position in any business, association, proprietary, or not-for-profit organization held by you and your spouse and dependent children, if any, and indicate whether these businesses are involved with the Town in any manner.

Name of Family Member	Position	Organization	Department or Agency and Nature of Involvement

b. Outside Employment. Describe any outside occupation, employment, trade, business, or profession providing more than \$1,000/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, Description of Organization	State or Local Agency

Category of Amount

c. Future Employment. Describe any contract, promise or other agreement between you and anyone else with respect to your employment after leaving your Town office or position.

d. Past Employment. Identify the source and nature of any income in excess of \$1,000 per year from any prior employer, including deferred income, contributions to a pension or retirement fund, profit sharing plan, severance pay, or payments under a buy-out agreement.

Name and Address of Income Source	Description of Income (i.e., pension, deferred, etc.)

Category of Amount

e. Investments. Itemize and describe all investments in excess of \$5,000 or five per cent (5%) of the value in any business, corporation, partnership, or other assets, including stocks, bonds, loans, pledged collateral, and other investments, for you and your spouse and dependent children, if any. List the location of all real estate within the Town, or within five (5) miles thereof, in which you, your spouse, or dependent children, if any, have an interest, regardless of its value.

Name of Family Member	Name and Address of Business or Real Estate	Description of Investment

Category of Amount

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

g. Other Income. Identify the source and nature of any other income in excess of \$1,000/year from any source not described above, including teaching income, lecture fees, consultant fees, contractual income, or other income of any nature, for you and your spouse and your dependent children, if any.

Name of Family Member	Name and Address of Income Source	Nature of Income

Category
of Amount

4. Gifts and Honorariums.

List the source of all gifts aggregating in excess of \$250.00 received during the last year by you, your spouse or dependent child, excluding gifts from a relative. The term "gifts" includes gifts of cash, property, personal items, payments to third parties on your behalf, forgiveness of debt, honorariums, and any other payments that are not reportable as income.

Name of Family Member	Name and Address of Donor

Category
of Amount

5. Third-Party Reimbursements.

Identify and describe the source of any third-party reimbursement for travel-related expenditures in excess of \$250.00 for any matter that relates to your official duties. The term "reimbursement" includes any travel-related expenses provided by anyone other than the Town 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, your spouse, and dependent children in excess of \$5,000.

Name of Family Member	Name and Address of Creditor

Category
of Amount

7. Interest in Contracts.

Describe any interest of you, your spouse, or your dependent children in any contract involving the Town or any municipality located within the County.

Category
of Amount

8. Political Parties.

List any position you held within the last five (5) years as an officer of any political party, political committee, or political organization. The term "political organization" includes any independent body or any organization that is affiliated with or a subsidiary of a political party.

Signature

Date

**COUNTY OF ERIE
EMPLOYEE DISCLOSURE FORM**

File this form with your department head. Every section must be filled out. If you have no employment or interest to disclose, write "NOT APPLICABLE" in the first line of that section.

NAME: _____
POSITION: _____
DEPARTMENT: _____
WORK: ADDRESS: _____
HOME ADDRESS: _____
WORK TELEPHONE: _____ HOME TELEPHONE: _____

1. State every employment for pay which you hold, whether full time or part time, other than your employment with the County of Erie:

EMPLOYER: _____
ADDRESS: _____
TELEPHONE: _____
YOUR POSITION: _____
YOUR USUAL WORK HOURS: _____

2. State the name of any firm or partnership of which you are a member:

BUSINESS NAME: _____
ADDRESS: _____
TELEPHONE: _____
NATURE OF BUSINESS: _____
USUAL HOURS OF WORK: _____

3. State any self employment or business of which you own or operate personally:

BUSINESS NAME: _____
ADDRESS: _____
TELEPHONE: _____
NATURE OF BUSINESS: _____
USUAL HOURS OF WORK: _____

4. State the Name of corporation in which you, your spouse or your minor children hold five per cent or more of the stock::

CORPORATE NAME: _____
ADDRESS: _____
TELEPHONE: _____
NATURE OF BUSINESS: _____
YOUR POSITION WITH CORPORATION: _____

I file this statement pursuant to Section 8 of the Erie County Code of Ethics. Any false statement or failure to provide required information shall be punishable under the laws prohibiting filing of a false statement.

Date: _____

Signature

Such disclosure form shall be filed with the Erie County Department of Personnel, and shall be held in the permanent personnel record of the employee or officer. Such record shall be made available to the Erie County Board of Ethics at any time, upon request of the board.

b. The following form of financial disclosure shall be filed annually by every elected official; officer or employee; political party official; and candidate for elected office, as those terms are defined in section three of this local law, and such disclosure shall be filed regardless of whether such individual is employed, a member of a board or commission, or otherwise affiliated with the county at the time the request for disclosure is made; however, the Erie County Board of Ethics shall annually review the form and may, in their sole discretion, modify the same as they deem necessary:

ANNUAL STATEMENT OF FINANCIAL DISCLOSURE
County of Erie
For Calendar Year _____

1. Name - _____

2. (a) Title of Position - _____

(b) Department, Agency or other Governmental Entity - _____

(c) Address of Present Office - _____

(d) Office Telephone Number - _____

3. (a) Marital Status - _____. If married, please give spouse's full name including maiden name where applicable. _____

(b) List the names of all unemancipated children

Answer each of the following questions completely, with respect to calendar year _____, unless another period or date is otherwise specified. If additional space is needed, attach additional pages.

Whenever a "value" or "amount" is required to be reported herein, such value or amount shall be reported as being within one of the following categories: Category A - under \$20,000; Category B - \$20,000 to under \$50,000, Category C - \$50,000 to under \$100,000; Category D - \$100,000 to under \$250,000; Category E - \$250,000 to under \$500,000; and Category F - \$500,000 or over. A reporting individual shall indicate the category by letter only.

For the purpose of this of this statement, anywhere the term "local agency" shall appear such term shall mean a local agency, as defined in section eight hundred ten of the General Municipal Law of the political subdivision for which this financial statement disclosure statement has been filed.

4. (a) List any office, trusteeship, directorship, partnership, or position of any nature including honorary positions, if known, and excluding membership positions, whether compensated or not, held by the reporting individual with any firm, corporation, association, partnership, or other organization other than the County of Erie. If said entity was licensed by any state or local agency, was regulated by any state regulatory agency or local agency, or, as a regular and significant part of the business or activity of said entity, did business with, or had matters other than ministerial matter before, any state or local agency, list the name of the agency.

<u>Position</u>	<u>Organization</u>	<u>State or Local Agency</u>

(b) List any office, trusteeship, directorship, partnership, or position of any nature including honorary positions, if known, and excluding membership positions, whether compensated or not, held by the spouse or unemancipated child of the reporting individual, with any firm, corporation, association, partnership, or other organization other than the State of New York. If said entity was licensed by any state or local agency, was regulated by any state regulatory agency or local agency, or, as a regular and significant part of the business or activity of said entity, did business with, or had matters other than ministerial matter before, any state or local agency, list the name of the agency.

<u>Position</u>	<u>Organization</u>	<u>State or Local Agency</u>

5. (a) List the name, address and description of any occupation, employment, trade, business profession engaged in by the reporting individual. If such activity was licensed by any state or local agency, was regulated by any state regulatory agency or local agency, or, as a regular and significant part of the business or activity of said entity, did business with, or had matters other than ministerial matters before, any state or local agency, list the name of such agency.

<u>Position</u>	<u>Name and Address of Organization</u>	<u>Description</u>	<u>State or Local Agency</u>

(b) If the spouse or unemancipated child of the reporting individual was engaged in any occupation, employment, trade, business or profession which activity was licensed by any state or local agency, was regulated by any state regulatory agency or local agency, or, as a regular and significant part of the business or activity of said entity, did business with, or had matters other than ministerial matters before, any state or local agency, list the name, address and description of such occupation, employment, trade, business or profession and the name of such agency.

<u>Position</u>	<u>Name and Address of Organization</u>	<u>Description</u>	<u>State or Local Agency</u>

6. List any interest, in excess of \$1,000, excluding bonds and notes, held by the reporting individual, such individual's spouse or unemancipated child, or partnership of which any such person is a member, or corporation, ten per centum or more of the stock of which is owned or controlled by any such person, whether vested or contingent, in any contract made or executed by a state or local agency and include the name of the entity which holds such interest and the relationship of the reporting individual or such individual's spouse or such child to such entity and the interest in such contract. Do not list any interest in any such contract on which final payment has been made and all obligations under the contract except guarantees and warranties have been performed, provided, however, that such an interest must be listed if there has been an ongoing dispute during the calendar year for which this statement is filed with respect to any such guarantees or warranties. Do not list any interest in a contract made or executed by a state agency after public notice and pursuant to a process for competitive bidding or a process for competitive request for proposals.

<u>Self, Spouse Or Child</u>	<u>Entity Which Held Interest in Contract</u>	<u>Relationship to Entity & Interest In Contract</u>	<u>Contracting State or Local Agency</u>	<u>Category of Value of Contract</u>

7. List any position the reporting individual held as an officer of any political party or political organization, as a member of any political party committee, or as a political party town or zone leader. The term "party" shall have the same meaning as "party" in the election law. The term "political organization" means any party or independent body as defined in the election law or any organization that is affiliated with or a subsidiary of a party of independent body.

8. List each source of gifts, excluding campaign contributions, in excess of \$1,000 received by the reporting individual or such individual's spouse or unemancipated child from the same donor excluding gifts from a relative. Include the name and address of the donor. The term "gifts" does not include reimbursement which term is defined in item 10. Indicate the value and nature of each such gift.

<u>Self, Spouse Or Child</u>	<u>Name of Donor</u>	<u>Address</u>	<u>Nature of Gift</u>	<u>Category of Value of Gift</u>
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9. Identify and briefly describe the source of any reimbursements for expenditures, excluding campaign expenditures in connection with official duties reimbursed by the political subdivision for which this statement has been filed, in excess of \$1,000 from each such source. For purpose of this item, the term "reimbursements" shall mean any travel-related expenses provided by nongovernmental sources and for activities related to the reporting individual's official duties such as, speaking engagements, conferences, or fact finding event. The term "reimbursements" does not include gifts reported under item 9.

<u>Source</u>	<u>Description</u>
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10. List the identity and value of each interest in a trust, estate or other beneficial interest, including retirement plans other than retirement plans of the State of New York or the City of New York and deferred compensation plans established in accordance with the United States internal revenue code, in which the reporting individual held a beneficial interest in excess of \$1,000 at any time during the preceding year. Do not report interests in a trust, estate or other beneficial interest established by, or the estate of, a relative

11. (a) Describe the terms of, and the parties to, any contract, promise, or other agreement between the reporting individual and any person, firm or corporation with respect to the employment of such individual after leaving office or position, including than a leave of absence.

(b) Describe the parties to and the terms of any agreement providing for continuation of payments or benefits to the reporting individual in excess of \$1,000 from a prior employer other than the political subdivision for which this statement is filed. (This includes interests in or contributions to a pension fund, profit-sharing plan, or life or health insurance; buy-out agreements; severance payments, etc.)

12. List below the nature and amount of any income in excess of \$1,000 from each source for the taxable year last occurring prior to the date of filing. Nature of includes, but is not limited to, salary for government employment, income from other compensated employment whether public or private, directorships and other fiduciary positions, contractual arrangements, teaching income, partnerships, honorariums, lecture fees, consultant fees, bank and bond interest, dividends, income derived from a trust, real estate rents, and recognized gains from the sale or exchange of real or other property. Income from a business or profession and real estate rents shall be reported with the source identified by the building address in the case of real estate rents and otherwise by the name of the entity and not by the name of the individual customers, clients or tenants, with the aggregate net income before taxes for each building or entity. The receipt of maintenance received in connection with a matrimonial action, alimony and child support payments shall not be listed.

<u>Self/Spouse</u>	<u>Source</u>	<u>Nature</u>	<u>Category of Amount</u>
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13. List the sources of any deferred income in excess of \$1,000 from each source to be paid to the reporting individual following the close of the calendar year for which this disclosure statement is filed, other than deferred compensation reported in item 11 hereinabove. Deferred income derived from the practice of a profession shall be in the aggregate and shall identify as the source, the name of the firm, corporation, partnership or association through which the income was derived, but shall not identify individual clients.

Source

Category of amount

14. List each assignment of income in excess of \$1,000 and each transfer other than to a relative during the reporting period for which this statement is filed for less than fair consideration of an interest in a trust, estate or other beneficial interest, securities or real property, by the reporting individual, in excess of \$1,000 which would otherwise be required to be reported herein and is not or has not been so reported.

Item Assigned
or Transferred

Assigned or Transferred to

Category of Value

15. List below the type and market value of securities held by the reporting individual or such individual's spouse from each issuing entity in excess of \$1,000 at the close of the taxable year last occurring prior to the date of filing, including the name of the issuing entity exclusive of securities held by the reporting individual issued by a professional corporation. Whenever an interest in securities exists through a beneficial interest in a trust, the securities held in such trust shall be listed only if the reporting individual has knowledge thereof except where the reporting individual or the reporting individual's spouse has transferred assets to such trust for his or her benefit in which event such securities shall be listed unless they are not ascertainable by the reporting individual because the trustee is under an obligation or has been instructed in writing not to disclose the contents of the trust of the reporting individual. Securities of which the reporting individual or the reporting individual's spouse is the owner of record but in which such individual or the reporting individual's spouse has no beneficial interest shall not be listed. Indicate percentage of ownership if the reporting person or the reporting person's spouse holds more than five percent of the stock of a corporation in which the stock is publicly traded or more than ten percent of the stock of a corporation in which the stock is not publicly traded. Also list securities owned for investment purposes by a corporation more than fifty percent of the stock of which is owned or controlled by the reporting individual or individual's spouse. For the purpose of this item the term "securities" shall mean bonds, mortgages, notes, obligations, warrants and stock of any class, investment interests in limited or general partnerships and certificates of deposits and such other evidences of indebtedness and certificates of interest as are usually referred to as securities. The market value for such securities shall be reported only if reasonably ascertainable and shall not be reported if the security is an interest in a general partnership that was listed in item 8 (a) or if security is corporate stock, not publicly traded, in a trade or business of a reporting individual or reporting individual's spouse.

<u>Self/ Spouse</u>	<u>Issuing Entity</u>	<u>Type of Security</u>	<u>Category of Market Value Value as of the close of the taxable year last occurring prior to the filing of this statement</u>	<u>Percentage of Corporate stock owned or controlled</u>

16. List below the location, size, general nature, acquisition date, market value and percentage of ownership of any real property in which any vested or contingent interest in excess of \$1,000 is held by the reporting individual or reporting individual's spouse. Also list real property owned for investment purposes by a corporation more than fifty percent of the stock of which is owned or controlled by the reporting individual or such individual's spouse. Do not list any real property which is the primary or secondary personal residence of the reporting individual or the reporting individual's spouse, except where there is a co-owner who is other than a relative.

<u>Self/ Spouse Other Party</u>	<u>Location</u>	<u>Size</u>	<u>General Nature</u>	<u>Acquisition Date</u>	<u>Category of Market Value</u>	<u>Percentage of Ownership</u>

17. List below all notes and accounts receivable, other than from goods or services sold, held by the reporting individual at the close of the taxable year last occurring prior to the date of the filing and other debts owed to such individual at the close of the taxable year last occurring prior to the date of filing, in excess of \$1,000, including the name of the debtor, type of obligation, date due and nature of the collateral securing payment of each, if any, excluding securities reported in item 16 hereinabove. Debts, notes and accounts receivable owed to the individual by a relative shall not be reported.

<u>Name of Debtor</u>	<u>Type of Obligation Date Due & nature of Collateral, if any</u>	<u>Category of Amount</u>

18. List below all liabilities of the reporting individual and such individual's spouse, in excess of \$5,000 as of the date of filing of this statement, other than liabilities to a relative. Do not list liabilities incurred by, or guarantees made by, the reporting individual or such individual's spouse or by any proprietorship, partnership or corporation in which the reporting individual or individual's spouse has an interest, when incurred or made on the ordinary course of the trade, business or professional practice of the reporting individual or such individual's spouse. Include the name of the creditor and any collateral pledged by such individual to secure payment of any such liability. A reporting individual shall not list any obligation to pay maintenance in connection with a matrimonial action; alimony or child support payments. Revolving charge account information shall only be set forth if liability thereon is in excess of \$5,000 at the time of filing. Any loan issued in the ordinary course of business by a financial institution to finance educational costs, the cost of home purchase or improvements for a primary or secondary residence, or purchase of a personally owned motor vehicle, household furniture or appliances shall be excluded. If any such reportable liability has been guaranteed by any third person, list the liability and name the guarantor.

Name of Creditor of Guarantor	Type of Liability & Collateral, if any	Category of Amount

The requirements of law relating to the reporting of financial interests are in the public interest and no adverse inference of unethical or illegal conduct or behavior will be drawn merely from compliance with these requirements.

Signature of Reporting

Date (month/day/year)

c. Any elected official or candidate for elected office who, either as an individual or as a member or employee of a private entity, organization or for-profit professional association of any kind, that is hired by a third party individual, association, organization, corporation or other entity to provide any type of service, and regardless of whether the elected official or candidate for elected office performs any services for said third party, the elected official or candidate for elected office is required to disclose the identity of that third party to the Erie County Attorney's Office and the Erie County Board of Ethics within five days of the hiring or retention if that third party is seeking any action, determination, ruling or lack of action from any department, administrative unit, or other board of the county, whether or not the elected official or candidate for elected office has personally provided the service to the third party. Such disclosure shall be required irrespective of the service being provided to the third party by the elected official, or candidate for elected office, or their private entity, organization or for-profit professional association. Within seven days of any then currently elected official being hired in a position of employment by any private entity, organization or individual, in whatever form, the elected official must disclose the hiring to the Erie County Board of Ethics and Erie County Attorney's Office. The Erie County Board of Ethics shall, within thirty days of receiving notice of such disclosure, review the details of the compensation and the services or products rendered for such compensation and determine that there is no prohibition in this Code of Ethics for the receipt of said compensation or

MODEL ANNUAL DISCLOSURE FORM

[COUNTY, CITY, TOWN, VILLAGE, OR OTHER MUNICIPALITY] OF

ANNUAL DISCLOSURE STATEMENT

FOR CALENDAR YEAR _____

Last Name	First Name	Initial
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Title	Department or Agency
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Work Address	Work Phone No.
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If the answer to any of the following questions is "none," please so state. Attach additional pages if necessary.

1. **Outside Employers and Businesses.** List the name of every employer or business, other than the [municipality], from which you received more than \$1,000 for services performed or for goods sold or produced during the year [previous calendar year].¹ Do not list individual customers or clients of the business.² Do not list businesses in which you were an investor only

¹ See sections 101(1)(a), (d), (e), (f), 109(3)(b).

² If the municipality determines to require disclosure of major customers and clients of elected officials and compensated policymakers, as discussed above, then the following should be added at the end of this sentence: "(they are listed in Question 10 below)."

(they are listed in Question 2 below). Identify the nature of the business and the type of business, such as a partnership, corporation, or sole proprietorship, and list your relationship(s) to the employer or business (*i.e.*, owner, partner, officer, director, member, employee, and/or shareholder). Provide the same information for your relatives. "Relative" includes your spouse or registered domestic partner, children, grandchildren, parents, sisters, brothers, and grandparents; the parents, children, sisters, and brothers of your spouse or registered domestic partner; the spouses or registered domestic partners of your parents, children, brothers, and sisters; and any person claimed as a dependent on your latest individual state income tax return.³

Name of Family Member	Relationship to You	Name of Employer or Business	Nature of Business	Type of Business	Relationship to Business
<i>[E.g.: John Smith]</i>	<i>Self</i>	<i>TechIM</i>	<i>Computers</i>	<i>Corp.</i>	<i>Pres. & S/H]</i>
<i>[E.g.: Rose Smith]</i>	<i>Wife</i>	<i>Monument Realty</i>	<i>Real Estate</i>	<i>Partnership</i>	<i>Employee]</i>

2. **Investments.** List the name of any entity in which you have an investment of at least 5% of the stock or debt of the entity or \$10,000,⁴ whichever is less. Do not list any entity listed in

³ "Relative" should be defined to include only those relatives whom, under the ethics code, an official may not take an action to benefit. See sections 100(13), 101(1)(b), 101(1)(c).

⁴ The amount should equal the threshold for a conflict of interest under the municipal ethics law. For example if an official does not violate the ethics law by acting to benefit a company in which he or she has an investment of less than \$10,000 or 5%, then disclosure of that interest

response to Question 1 above. Identify the nature of the business and the type of business entity, if any (e.g., corporation). Provide the same information for your spouse or registered domestic partner and any of your children who are under age 18.

Name of Family Member	Relationship to You	Name of Entity	Nature of Business	Type of Business
<i>[E.g.: John Smith]</i>	<i>Self</i>	<i>Verizon</i>	<i>Communications</i>	<i>Corp.</i>

3. **Real Estate.** List the address of each piece of real estate that you or your relatives, as defined in Question 1, own, lease, or rent, in whole or in part. List only real estate that is located in the [municipality] and the [contiguous municipalities]. For residential property, list as the address only the city or village (or, if none, the town) in which the property is located.⁵

Name of Family Member	Relationship to You	Address of Real Estate	Type of Interest
<i>[E.g.: Robert Smith]</i>	<i>Father</i>	<i>2 Main St., Teatown</i>	<i>Hold mortgage</i>

should not be required. See sections 100(9), 101(1)(d), (e), (f), 109(3)(b).

⁵ See sections 101(1)(a), (b), (c), 109(3)(a).

4. **Gifts.** List each gift that you or your spouse or registered domestic partner or child under the age of 18 and living with you received worth \$10⁶ or more during the year [previous calendar year], except gifts from relatives, as defined in Question 1. A “gift” means anything sought or received for less than fair market value, whether in the form of money, a service, a loan, travel, lodging, meals, refreshments, entertainment, discount, forbearance, promise, or tickets, or in any other form. Separate gifts from the same or affiliated donors during the year must be added together for purposes of the \$10 rule. You do not need to list a gift if you know that the donor has had no contracts with, non-ministerial licenses or permits from, funding from, or litigation against the [municipality] during the previous 24 months.

<u>Recipient of Gift</u>	<u>Donor of Gift</u>	<u>Relationship to Donor</u>	<u>Nature of Gift</u>
<i>[E.g.: John Smith</i>	<i>Acme Corp.</i>	<i>Former employer</i>	<i>Free trip to Las Vegas]</i>

5. **Political Contributions.** List each person or entity that made to you or your campaign

⁶ The amount should equal the threshold for prohibited gifts under the municipal ethics law but not more than \$75. See sections 100(5), 101(4), 109(3)(c); Gen. Mun. Law § 805-a(1)(a).

committee, within the previous 24 months, financial contributions, in money, goods, or services, totaling \$1,000⁷ or more to assist in your election to public office.

Name of Contributor

[E.g.: *Alfred Jones*]

6. **Relatives in [Municipality's] Service.** List each relative, as defined in Question 1, who is an officer or employee of the [municipality], whether paid or unpaid, including the relative's name, relationship to you, title, and department.⁸

Name of Family Member	Relationship to You	Title	Department
[E.g.: <i>Alex Jones</i>]	<i>Sister's husband</i>	<i>Code Enf. Officer</i>	<i>Building</i>

⁷ The amount should equal the threshold for a conflict of interest under the municipal ethics law. For example, if an official does not violate the ethics law by acting to benefit a person who donated \$500 to the official's campaign, then disclosure of that contribution should not be required on the annual disclosure statement. See sections 101(1)(h), 109(3)(d).

⁸ See sections 101(1)(b), 109(3)(e).

7. **Volunteer Positions.** List each volunteer office or position that you hold with any not-for-profit organization. Do not list entities of which you were a member only or for which you volunteered only in a non-policymaking, non-administrative capacity, such as a Little League coach. Provide the same information for your spouse or registered domestic partner.⁹

You or

<u>Spouse/RDP</u>	<u>Name of Entity</u>	<u>Position</u>	<u>Nature of Business</u>
<i>[E.g.: Spouse</i>	<i>Shepherd's Food Panty Bd. of Directors member</i>		<i>Distributes free food]</i>

8. **Money You Owe (Elected Officials and Compensated Policymakers Only).** List each person or entity to which you or your spouse or your registered domestic partner owes \$10,000¹⁰ or more. Do not list money owed to relatives, as defined in Question 1. Do not list credit card debts unless you have owed the money for at least 60 days.

<u>Debtor</u>	<u>Creditor</u>	<u>Type of Obligation</u>
<i>[E.g.: John & Rose Smith</i>	<i>Chase Bank</i>	<i>Mortgage loan]</i>

⁹ See sections 101(1)(i), 109(3)(f).

¹⁰ The amount should be equal to the amount that would constitute a financial relationship between the official and the creditor, thus prohibiting the official from taking an official action that might benefit that creditor. See sections 101(1)(f), 109(3)(g).

9. **Money Owed to You** (Elected Officials and Compensated Policymakers Only). List each person or entity that owes you or your spouse or your registered domestic partner \$10,000¹¹ or more. Do not list money owed by relatives, as defined in Question 1.

<u>Creditor</u>	<u>Debtor</u>	<u>Type of Obligation</u>
<i>[E.g.: John Smith]</i>	<i>Alexis Doe</i>	<i>Personal loan</i>

[10. **Customers and clients.** (Elected Officials and Compensated Policymakers Only). List the name of each customer or client from whom or from which you or your spouse or registered domestic partner earned \$1,000 or more during the year [previous calendar year]. Do not disclose the names of medical or dental patients, mental health clients, or, in the case of lawyers, clients in criminal, bankruptcy, or domestic relations matters.]¹²

¹¹ The amount should be equal to the amount that would constitute a financial relationship between the official and the debtor, thus prohibiting the official from taking an official action that might benefit that debtor. See sections 101(1)(f), 109(3)(h).

¹² If, as discussed in connection with section 109, the municipality wishes to require disclosure of major customers and clients of elected officials and compensated policymakers, this provision

[Name of Customer or Client] _____

[E.g.: John Smith]

*I certify that all of the above information is true to the best of my knowledge and that, within the past two weeks, I have read the two-page ethics guide attached to this form.*¹³

Signed: _____

Date Signed: _____

_____ may be added to the disclosure form. See sections 100(3), 101(1)(d), 109(3)(b)(i) and *supra* note 74.

¹³ A copy of the code of ethics (not the entire ethics law, just the code itself, that is, section 101) should be attached to the disclosure form, if the code is sufficiently short. If it is not, then a summary, of no more than two pages, should be attached.

TOWN OF CLARENCE



ANNUAL STATEMENT OF DISCLOSURE

FOR CALENDAR YEAR ____

FILL OUT COMPLETELY

NAME: _____
(Last) (First) (Middle initial)

ADDRESS: _____ NY _____
(Street Address) (Town) (Zip Code)

SPOUSE (If applicable): _____

TOWN/COMMITTEE POSITION(S) HELD

DATE OF HIRE/APPOINTMENT/ELECTION

The purpose of the Annual Disclosure is to identify potential conflicts of interest before such conflicts occur. In answering the questions on this Statement of Disclosure, the following definitions are critical:

1. Interest, as used in this Disclosure, is defined as follows:

- A. Providing goods, influence, investment, property or service(s) to any person, business or entity for which compensation or benefit is expected or received, and
- B. Holding ownership, title or right, alone or with others, to a property, within the Town or bordering the Town.

2. Contract, as used in this Disclosure, shall be defined in accordance with the Standard English usage.

Please answer the following three questions and then sign your name.

1. Do you, your spouse or dependents have an interest in any business or entity doing business with the Town currently or within the past twelve (12) months?

Yes _____ No _____

2. Do you, your spouse or dependents have an interest in any contract made or executed by the Town within the past twelve (12) months?

Yes _____ No _____

3. Do you receive any benefits, compensation, or other consideration that are derived directly or indirectly from your employment or association with the Town of Clarence other than your remuneration from the Town for the services you provide?

Yes _____ No _____

If you answered yes to any of these 3 questions, you should describe the nature, source, amount of such benefits, compensation and other considerations as per instructions for filing and the Explanation of Annual Statement of Disclosure. Please attach an additional sheet of paper if necessary.

During the current year, if there are any changes in your answer to items 1, 2, or 3 above, you must file an amended "Annual Disclosure" with the Town Clerk within thirty (30) days of such change.

I HEREBY CERTIFY THAT THE INFORMATION I HAVE PROVIDED IN THIS ANNUAL DISCLOSURE IS TRUE, CORRECT, AND COMPLETE. I HAVE REVIEWED THE CURRENT CODE OF ETHICS FOR THE TOWN OF CLARENCE.

Date: _____

(Signature)

(Print Name)

(Return this form to the Town Clerk)



Town of Cheektowaga

**ANNUAL STATEMENT of
FINANCIAL DISCLOSURE**

YEAR: 2017

****ALL QUESTIONS MUST BE ANSWERED****

THIS FORM MUST BE RETURNED on or before ****May 15, 2017**** to the following:

(a self-addressed/postage-paid envelope is enclosed for use in returning this form)

Town of Cheektowaga Board of Ethics Committee
c/o Town Clerk's Office
3301 Broadway Street
Cheektowaga, NY 14227

PART A:

1. NAME AND ADDRESS

Last Name	First Name	Middle Initial
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Title

Department	Department Address	Telephone No.
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Home Address	Telephone No.
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2. SPOUSE AND CHILDREN

Provide the name of your spouse (if married), children and all other adult members of your household: *(ANSWER N/A IF NOT APPLICABLE)*

Spouse	_____	
Child	_____	Age: _____
Child	_____	Age: _____
Child	_____	Age: _____
Adult Member	_____	
Adult Member	_____	

3. INTEREST IN CONTRACTS

Describe any interest that you, your spouse, your children or adult members of your household have in any contract involving the Town or any municipality located within the Town of Cheektowaga (i.e., Sloan, Depew):

(ANSWER N/A IF NOT APPLICABLE)

Name:

Name of Family Member or Adult Member of Household:

Contract Description:

4. POLITICAL PARTIES

List any position you have held within the last five (5) years in any political party, political committee or political organization. The term "political organization" includes any independent body or any organization that is affiliated with or a subsidiary of a political party: *(ANSWER N/A IF NOT APPLICABLE)*

PART B:

Note: For questions 5 thru 8, do not report exact dollar amounts. Instead, report categories of amounts using the following:

- | | |
|----------------------------------|-----------------------------------|
| Category A: Under \$5,000 | Category E: \$50,001 to \$75,000 |
| Category B: \$5,001 to \$10,000 | Category F: \$75,001 to \$100,000 |
| Category C: \$10,001 to \$25,000 | Category G: Over \$100,000 |
| Category D: \$25,001 to \$50,000 | |

5. FINANCIAL INTERESTS

A. Business Positions

List any office, trusteeship, directorship, partnership or other position in any business, association, proprietary or not-for-profit organization held by you, and/or your spouse and/or your children and/or any adult members of your household. Please indicate if the organization in which you or your family or adult household member holds such position, transacts business with the Town of Cheektowaga and describe the nature of same. *(ANSWER N/A IF NOT APPLICABLE)*

Name of Person Involved	Title of Position	Organization	Type of Business Transactions

B. If the reporting individual practices law, is licensed by the Department of State as a real estate broker or agent or practices a profession licensed by the Department of Education, give a general description of the principal subject areas of matters undertaken by such individual. Additionally, if such an individual practices with a firm or corporation and is a partner or shareholder of the firm or corporation, give a general description of principal subject areas of matters undertaken by such firm or corporation. Do not list the names of the individual clients, customers or patients: *(ANSWER N/A IF NOT APPLICABLE)*

C. **Outside Employment/Other Income.** Describe any outside occupation, employment, trade, business or profession providing more than \$1,000/year for you, your spouse and/or other adult member of your household, if any, and indicate whether such activities are regulated by any state or local agency. Also identify the source and nature of any other income in excess of \$1,000/year from any source not described above, including teaching income, lecture fees, consultant fees, contractual income, commissions, or other income of any nature, for you, your spouse and/or any adult member of your household:

Name of Person	Position	Name, Address and Description of Organization	State or Local Agency

D. Investments. Itemize and describe all investments which exceed a value of \$5,000 excluding personal savings accounts, retirement accounts, term life insurance, U.S. Government Treasury bonds, bills and notes, but including stocks, bonds, loans, pledged collateral and other investments, for you, your spouse and/or adult members of your household, if any:

(ANSWER N/A IF NOT APPLICABLE)

Name of Person	Description of Investment	Name and Address of Business	Category of Amount

E. Real Estate. List the location of all real estate, excluding your personal residence, within the Town of Cheektowaga (including real estate located within the Village of Depew and/or the Village of Sloan) in which you, your spouse, children and/or adult members of your household have an interest, regardless of its value:
(ANSWER N/A IF NOT APPLICABLE)

Name of Person	Description of Investment	Name and Address of Real Estate	Category of Amount

F. List below all notes and accounts receivable, other than from goods or services sold, held by the reporting individual at the close of the taxable year last occurring prior to the date of filing and other debts owed to such individual at the close of the table year last occurring prior to the date of filing, in excess of \$1,000 including the name of the debtor, type of obligation, date due and the nature of the collateral securing payment of each, if any, excluding securities reported in item 5(a) hereinabove. Debts, notes and accounts receivable owed to the individual by a spouse, parent, sibling, child or adult member of your household need not be reported: *(ANSWER N/A IF NOT APPLICABLE)*

Name of Debtor

Type of Obligation, Date Due, and Nature of collateral, if any

8. LIABILITIES

List any liability over \$5,000 owed at any time during the reporting period, other than a loan from a financial institution or business entity granted on terms made available to the general public. ***Do not include*** any liability, such as a mortgage, a student loan, or a credit card account from a financial institution or business entity granted on terms made available to the general public, loans secured by automobiles, household furniture, or appliances, or liabilities that you owe to your spouse, parent, sibling, child, grandchild and/or adult member of your household.
(ANSWER N/A IF NOT APPLICABLE)

9. RELATIVES WORKING FOR THE TOWN

Please list any relatives, blood or through marriage, that are employees of the Town of Cheektowaga. These include mother, father, brother, sister, husband, wife, son, daughter, step-son, step-daughter, mother-in-law, father-in-law, brother-in-law, sister-in-law, niece, nephew, aunt, uncle, cousin. Also, list the name of the department they work in: (IF DOESN'T APPLY, INDICATE N/A)

<u>Relative Name</u>	<u>Relationship</u>	<u>Department</u>
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I hereby affirm under penalty of perjury that the foregoing statements are true to the best of my knowledge.

DATED: _____, 2017

SIGNATURE

**Annual Statement of Financial Disclosure For
City of Buffalo 2018**

If you fill in information electronically on this form, you must print out the form and sign. Please bring all signed forms to the City Clerk's office.

CITY POSITION

City
Position(s)

Boards/
Committees

Paid/
Unpaid

Please indicate if the answer to any of the following questions is "none".

"Close Relative" means your spouse, child, stepchild, brother, sister, parent or a person you claimed as a dependent on your latest state or federal income tax return.

Name and Address

Last Name:

First:

M.I.:

Title:

Dept./
Agency:

Dept./ Agency
Address:

Department
Telephone No.

Principal
Residence:

Personal
Telephone No.

Email

Spouse and Children

Please provide the name of your spouse (if married) and the names of any dependent children.

Spouse:

Child/ Age:

Child/ Age:

Child/ Age:

Interest in Contracts

Describe any interest of yours or a close relative in any contract involving the City of Buffalo or any municipal corporation located within the City of Buffalo.

Name of Family Member	Contract	Description

Political Parties

List any positions you held within the last five (5) years as an officer of any political committee or political organization. The term "political organization" includes any independent body or organization that is affiliated with or a subsidiary of a political party.

Party/ Organization	Position

Gifts and Honorariums

List the source of all gifts received in the past year from the same or affiliated source aggregating in excess of \$100.00 received during the last year by you or a close relative, from any person or organization having had a regulatory or financial relationship with the City of Buffalo.

Source(s)

Real Estate

List the address of each piece of real property you or a close relative own or have a financial interest in (including an interest through a family trust or business organization). List only real estate that is in the City of Buffalo or within five (5) miles of the boundary of the City of Buffalo.

Name of Family Member	Relationship to You	Address of Real Estate	Type of Investment

Your Employment or Business

List the name of any employer or business from which you receive compensation for services rendered or goods sold or produced or of which you are a member, officer or employee.

Name of Employer or Business	Nature of Business	Your position

Your Spouse's Employment or Business

List the employment information for your spouse

Name of Employer or Business	Nature of Business	Spouse's Position

Investments

List your interest in business entities or trusts in which you or a close relative has had financial or regulatory activity with either the City or City Development Agency within the last year or is expected to have such activity in the next year, except for a publicly traded corporation of which you own less than five percent of the outstanding stock and except for a personal savings or retirement account.

Name of Employer or Business	Nature of Business	Type of Business

Signature:	Date:
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Please keep this booklet, the copy of your completed statement and receipt for your records.

Other Financial Interest

A. Outside Employment.

Describe any outside occupation, employment, trade, business or profession providing more than \$1,000/ year for you or a close relative, if any, and indicate whether such activities are regulated by any state or local agency.

Name of Family Member	Position	Name and Address of Organization	State/ Local

B. Future Employment.

Describe any contract, promise or other agreement between you and anyone else with respect to your employment after leaving your City office or position.

Name of Family Member	Position	Name and Address of Organization	State/ Local

C. Past Employment.

Identify the source and nature of any income in excess of \$1,000/ year from any prior employer, including deferred income, contributions to a pension or retirement fund, profit sharing plan, severance pay or payments under a buyout agreement.

Name and Address of Income Source:	Description of Income (Pension, deferred, etc.)

Third-Party Reimbursements

Identify and describe the source of any third-party payment or reimbursement for City of Buffalo travel-related expenditures in excess of \$250.00 for any matter that relates to your official duties. The term "reimbursement" includes any travel-related expenses provided by anyone other than the City for speaking engagements, conference or fact-finding events that relate to your official duties.

Source	Description

Loans and Debts

Describe all loans and debts of you or a close relative in excess of \$5,000 (excluding retail accommodations such as primary mortgages, home equity loans, charge accounts, lines of credit and credit cards extended in the normal course of business which are ordinarily available to the general public by financial institutions or merchants and which are not extended in circumstances in which it might be reasonably inferred that they were extended with the intention to influence or reward you in relation to the performance of your duties)

Name of Family Member	Name and Address of Creditor

Signature: _____

Date: _____

Annual Statement of Financial Disclosure Town of Amherst

For Calendar Year 2018

1. Name: _____

Address: _____

Email Address: _____

If married, spouse's name: _____

2. a. Title of Town Position: _____

b. Department, Agency or other Governmental Entity

3. Do you receive any benefits, compensation or other consideration that are derived directly or indirectly from your employment or association with the Town of Amherst, other than your remuneration from the Town?

YES _____ NO _____

If "YES", please describe the nature, source of and amount of such benefits, compensation or other consideration.

Nature

Source

Amount

4. List the address and SBL (located immediately above your name and address on the tax bill) of all real property in which you, your spouse or other family member of your household has an ownership or other financial interest.

Name of Owner

Address

(OVER)

5. List the name and address of any partnership, unincorporated association, corporation, business or employer of any sort, of which you or your spouse is a member, officer or employee, or from which you or your spouse derive income of any nature, giving your position and/or your spouse's position, if any, with such entity.

<u>Self/Spouse</u>	<u>Position</u>	<u>Organization and Address</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

6. List the name and address of any corporation, partnership, unincorporated association, or business, of which you or your spouse legally or beneficially owns or controls more than five percent (5%) of the issued and outstanding stock or other ownership rights.

<u>Self/Spouse</u>	<u>Organization and Address</u>
_____	_____
_____	_____
_____	_____

7. State any self-employment, and the general nature thereof, from which you or your spouse has derived gross income in excess of two thousand dollars (\$2,000) during the previous calendar year.

<u>Self/Spouse</u>	<u>General Nature</u>
_____	_____
_____	_____
_____	_____

8. If you are unable, after reasonable effort, to obtain any of the information required herein, so state and explain.

Signature of Reporting Individual

Date