TOWN OF UNIVERSITY PARK ETHICS COMMISSION

FINANCIAL DISCLOSURE STATEMENT

I Would Like To Be Notified If Someone Looks At My Form ☐

Instructions:

1. Fill in the preliminary information requested in the box below. Be sure to correctly identify the reporting period.
2. Upon completion of your financial disclosure statement, sign and date the lower portion of the page and make the required oath or affirmation.

This form must be filed on or before April 30 of each year during which an elected official holds office. This form must accompany any petition for candidacy filed under Section 506 of the Charter.

PLEASE PRINT OR TYPE

FIRST NAME	INITIAL	LAST NAME
HOME ADDRESS. AN ADDRESS THAT YOU HAVE DESIGNATED AS YOUR HOME ADDRESS WILL NOT BE DISCLOSED TO THE PUBLIC.		
OFFICE FOR CANDIDACY		
E-MAIL ADDRESS		

This financial disclosure statement describes all interests and related transactions and matters required to be disclosed by the Maryland Public Ethics Law, §5-101, *et seq.* General Provisions Article, Annotated Code of Maryland, and the Town's Ethics Code with respect to the period indicated and pertaining to the person filing the statement. The statement consists of this cover sheet, the checklist, and Schedules A through J.

I hereby make oath or affirm under the penalties of perjury that the contents of this financial disclosure statement, including the Schedules attached hereto, are complete, true and correct to the best of my knowledge, information and belief.

Signature of Person Filing: _____

(SEAL)

Date: _____

Ethics Commission Form No. 2

Instructions:

Check the proper block to Questions A through I. Do not leave any questions unanswered. If you check "Yes" to any question by sure to complete the corresponding Schedule. An individual who is required to disclose the name of a business under this section shall disclose any other names that the business is trading as or doing business as.

Caution: Please read all instructions on accompanying instruction sheet including all definitions, before completing this form.

		YES	NO
A.	I or a member of my immediate family held interests during reporting period in real property located in or outside Maryland. (If "Yes," complete Schedule A.)	A.	
B.	I or a member of my immediate family held interests during reporting period in corporations, partnerships and similar entities. (If "Yes," complete Schedule B.)	B.	
C.	I or a member of my immediate family held interests in a non-corporate business entity which did business with the Town, other than a partnership. (If "Yes", complete Schedule C.)	C.	
D.	I received gifts during reporting period from persons doing business with the Town, regulated by the Town, or from an association, or any entity acting on behalf of an association that is engaged only in representing counties or municipal corporations or from a person or entity registered or required to register as a lobbyist. (If "Yes," complete Schedule D.)	D.	
E.	I or a member of my immediate family was a partner or held an office, directorship, or salaried employment during reporting period in or with a business entity doing business with the Town. (If "Yes," complete Schedule E.)	E.	
F.	I or a member of my immediate family owed debts (excluding retail credit accounts) during reporting period to persons doing business with the Town. (If "Yes," complete Schedule F.)	F.	
G.	A member of my immediate family was employed by the Town during reporting period. (If "Yes," complete Schedule G.)	G.	
H.	I or a member of my immediate family received a salary or was sole or partial owner of a business entity other than the Town from which earned income was received, during the reporting period. (If "Yes," complete Schedule H.)	H.	
I.	I or a member of my immediate family had a financial or contractual relationship with: The University of Maryland Medical System; A Governmental Entity of the State or a Local Government in	I.	

the State; or
A Quasi-Governmental Entity of the State or Local Government in the State. (If "yes" complete schedule I)

J. Is additional information set forth on Schedule J? (If "Yes," complete Schedule J.) **J.**

FOR USE BY TOWN OFFICES ONLY

Received _____ By _____
Date Town Clerk's Office

Schedule A – Real Property Interests

Do you have any interest (**as an owner or a tenant**, including interests in time shares) in real property in Maryland or in any other state or country?

___ Yes
___ No (Go to Schedule B)

<u>If Yes</u>; (Answer each question below. A separate Schedule A will be required for each property you need to disclose.)

1. What is the address or legal description of the property? (Give Street Address, if you know it. If the property is your primary residence, you may enter the lot and block legal description instead, if you wish)
Street Address _____
City/State/Zip _____

2. What kind of property is it?

Improved (indicate whether property is residential or commercial property): _____

Unimproved (vacant lot): _____

3. Is the interest held directly by you or is it attributable to you? (See Paragraph E of Instructions for definition of "Attributable.")

Direct_____ Attributable_____

4. Are you the owner or tenant?

Owner_____ Tenant_____

5. Do you hold the interest solely or is it jointly held with another?

Solely_____ Jointly_____ Tenants by the Entirety____

If held jointly, or by tenants by the entirety, the name(s) of the other joint owner(s):_____

_____

6. Are there any legal conditions or encumbrances on the property? (Example: mortgages, liens, contracts, options, etc.)

___ Yes
___ No

<u>If yes</u>, what is/are the name(s) of the lender(s), creditor(s), lien holder(s), etc?_____

7. What date was the property acquired? _____

8. How was the property acquired? (Example: purchase, gift, inheritance, etc.)

_____

9. From whom was the property acquired? (Name of individual or entity from whom you purchased or inherited the property or who gifted the property to you.)

_____

10. What consideration was given when the property was acquired? (Dollar amount paid or, if you received the property as a gift or inherited it, the fair market value at the time you acquired your interest in the property) _____

11. Have you transferred any interest in this property during the reporting period?

___ Yes
___ No

If Yes;

11.A. What percentage of interest did you transfer:_____%

11.B. What consideration did you receive for the interest: _____

11.C. To whom did you transfer the interest: _____

If you have any additional interests in real property in Maryland, any other state or any other country, please use additional sheet(s), if necessary, and respond to each above question for each such entry.

Schedule B – Interests in Corporations and Partnerships

Did you have any interest in any corporations, partnerships, limited liability partnerships (LLP) or limited liability companies (LLC) during the reporting period whether or not the entity did business with the Town? You are not required to report a mutual fund or exchange traded fund that is publicly traded on a national scale unless the mutual fund or exchange traded fund is composed primarily of holdings of stocks and interests in a specific sector or area that is regulated by the Town.

___ Yes
___ No (Go to Schedule C)

If Yes; (Answer each question below. A separate Schedule B will be required for each interest you need to disclose.)

1. What is the name of the entity? Include the complete name of the entity, do not identify solely by trading symbol:_____

2. Does the stock of the corporation trade on a stock exchange?

___ Yes
___ No

If "no," the legal address of the entity's principal office.

_____

3. Is the interest held directly by you or is it attributable to you? (See Paragraph E of Instructions for definition of "Attributable.")

Directly:_____ Attributable:_____

4. Do you hold the interest in your name alone, or is it held jointly?

In your name alone: _____ Jointly:_____

If jointly, the percentage of your interest: _____%

5. What is the nature of your interest and its dollar value or the number of shares? (Example: stock, notes, bonds, puts, calls, straddles, purchase options, etc.) If in a non-publicly traded entity or LLP or LLC, report the percentage of ownership.

Type: _____
Dollar Value of Shares: _____ or Number of Shares: _____

percentage of ownership:_____%

6. Are there any legal conditions or encumbrances that apply to your interest in the entity? (Example: mortgages, liens, contracts, options, etc.)

___ No

___ Yes; **If yes**, name of entity holding the encumbrance: _____

7. Did you acquire an interest in the entity during the reporting period?

___ Yes
___ No

If Yes;

7A. In what month was the interest acquired? _____

7B. How was the interest in the entity acquired? (Example: purchase, gift, will, etc.):_____

7C. From whom did you acquire the interest in the entity? (If you purchased it from a brokerage, the name of the brokerage):_____

7D. What consideration was given when the interest was acquired? (Dollar amount paid, or if you received the property as a gift or inherited it, the fair market value at the time you acquired your interest in the property):_____

8. Have you transferred any interest in this entity during the reporting period?

___ Yes
___ No

If Yes;

8A. What portion of the interest was transferred? _____

8B. What consideration did you receive for the interest in the entity? (Dollar amount paid, or if you received the property as a gift or inherited it, the fair market value and terms at the time you transferred your interest in the property):_____

8C. To whom did you transfer your interest in the entity?_____

If you have additional interests in corporations or partnerships, please use additional sheet(s) if necessary, and answer each of the above questions for each additional entry.

Schedule C – Interests in Non-Corporate Business Entities Doing Business with the Town

Do you have an interest in any non-corporate business entity (i.e. a sole proprietorship) that did business with the Town during the reporting period?

___ Yes
___ No (Go to Schedule D)

<u>If Yes;</u> (Answer each question below. A separate Schedule C will be required for each business entity to be disclosed.)

1. Name and Address of the Principal office of the business entity?

Name: _____

Address: _____

City/State/Zip: _____

2. Is the interest held directly by you or is it attributable to you? (See Paragraph E of Instructions for definition of "Attributable.")

Direct: _____Attributable: _____

3. Do you hold the interest solely or is it jointly held with another?

Solely: _____ Jointly:_____

3.A. If jointly, the percentage of your joint interest: _____%

3.B. Dollar value of your interest in the entity: $_____; or

percentage of your interest in the entity: _____%

4. Are there any legal conditions or encumbrances that apply to your interest in the entity? (Example: mortgages, liens, contracts, options, etc.)

___ Yes, If yes give name of creditor: _____
___ No

5. Was any interest <u>acquired</u> during the reporting year?

___ Yes
___ No

<u>If Yes;</u>

5A. What month was the interest acquired? _____

5B. How was the interest in the entity acquired? (Example: purchase, gift, will, etc.)
_____

5C. From whom did you acquire the interest? _____

5D. What consideration was given when the interest was acquired? (Dollar amount paid or if you received the property as a gift or inherited it, the fair market value at the time you acquired your interest in the property) _____

6. Did you transfer any of your interest during the reporting period?

___ Yes
___ No

If yes;

6A. What percentage of interest, if less than all, was transferred?_____%

6B. What consideration did you receive for the interest in the entity? (Dollar amount paid or if you received the property as a gift or inherited it, the fair market value and terms at the time you transferred your interest in the property): _____

6C. To whom did you transfer your interest in the entity?_____

If you have additional interests in sole proprietorship(s) that did business with the Town during the reporting year, please use additional sheet(s) if necessary, and answer each of the above questions for each additional entry.

Schedule D – Gifts

During the reporting period, did you receive any gift(s), directly or indirectly, in excess of a value of $20 or a series of gifts from the same donor with a cumulative value of $100 or more from a person or entity who: 1) did business with the Town or is an association, or any entity acting on behalf of an association, that is engaged only in representing counties or municipal corporations; 2) is engaged in an activity that was regulated or controlled by the Town; or 3) was a regulated lobbyist? Gifts received from a member of the official's or employee's immediate family, another child, or a parent of the individual, do not need to be disclosed.

___ Yes
___ No (Go to Schedule E)

<u>If Yes</u>; (Answer each question below. A separate Schedule D will be required for each gift.)

1. Who gave you the gift?

_____

2. What was the nature of the gift? (Example: book, restaurant meal, theater tickets, book, etc.)

_____

3. What was the value of the gift?

_____

4. If the gift was given to someone else at your direction, list the identity of the recipient of the gift.

_____

Please use additional sheet(s), if necessary, for any additional entries.

Schedule E – Officers, Directorships, Salaried Employment and Similar Interests

During the reporting period, did you or any member of your immediate family (spouse, domestic partner or dependent child) have any salaried employment or hold any office or directorship with an entity that did business with the Town?

___ Yes
___ No (Go to Schedule F)

<u>If Yes</u>; (Answer each question below. A separate Schedule E will be required for each disclosure.)

1. What is the name and address of the business entity?

Name: _____

Address: _____

City/State/Zip: _____

2. Who was the individual who held the position or interest listed above? (Example: yourself, spouse, dependent child)

Self: _____ Spouse: _____ Dependent child:_____

2A. Name of spouse or dependent child: _____

3. What is the title of the office you, your spouse or dependent child held? (Example: limited partner, director, treasurer, chair of the board of trustees, etc.)

_____

4. What year did the position begin? _____

5. With what Town department did the business entity do business?_____

_____

6. What was the nature of the business? (Example: regulated by the Town, registered under the lobbying law, or involved with sales and contracts with the Town)

_____

If necessary, please use additional sheet(s) for any additional entries.

Schedule F – Debts You Owe

During the reporting period, did you owe a debt (excluding a retail credit account) to a financial entity that did business with the Town? **[NOTE: If, on Schedule A, B or C you listed a financial entity that did business with the Town as the holder of your mortgage or other encumbrance, you must complete Schedule F with regard to that indebtedness.]**

___ Yes
___ No (Go to Schedule G)

<u>If Yes</u>; (Answer each question below. A separate Schedule F will be required for each debt to be disclosed.)

1. To whom did you owe the debt? (Do not include consumer credit debts)

_____

2. When was the debt incurred? _____

3. What are the interest rate and terms of payment of the debt?

Interest Rate_____

Terms (monthly, bimonthly, annually, etc): _____

4. What was the amount of the debt as of the end of the reporting period. If debt existed during the reporting period but was paid in full at the end of the period, put $0.
$_____

5. Did the principal of the debt increase _____or decrease _____ during the reporting period, and by how much? $_____

6. Was any security given for the debt?

___ Yes
___ No

If Yes; Please state what type of security was given (home, car, boat, etc):

_____

7. If this is a transaction in which you were involved, but which resulted in a debt being owed by your spouse or dependent child, identify your spouse or child and describe the transaction. _____

If necessary, please use additional sheet(s) for any additional entries.

Schedule G – Family Members Employed by the Town

During the reporting period, were any members of your immediate family (spouse, domestic partner or dependent children) employed by the Town in any capacity?

____ Yes
____ No (Go to Schedule H)

<u>If Yes</u>; (Answer each question below. A separate Schedule G will be required for each member of the immediate family who is employed by the Town.)

1. What is the relation and name of the immediate family member employed by the Town? _____

2. What is the name of the department that employed the member of your immediate family? _____

3. What was the title of your immediate family member's position in the Town during the reporting period? _____

If necessary, please use additional sheet(s) for any additional entries.

Schedule H – Employment/Business Ownership

During the reporting period, did you or any member of your immediate family, receive any earned income from an entity other than the Town? Please note that your dependent child's employment or business ownership does not need to be disclosed unless the place of employment or the business entity is subject to regulation or the authority of the Town or was doing business with the Town

___ Yes
___ No (Go to Schedule I)

<u>If Yes</u>; (Answer each question below. A separate Schedule H will be required for each member of the immediate family who had employment or ownership of a business entity.)

1. If, during the reporting period, you or a member of your immediate family had employment from which you or they earned income, list the relation, name, and address of the employment.

Name: _____

Relationship: _____

Name of Employer: _____

Address: _____

City/State/Zip: _____

2. If, during the reporting period, you or a member of your immediate family wholly or partially owned any business entity from which income was earned, list the relation, name and address of the business entity.

Name: _____

Relationship: _____

Name of Business Entity: _____

Address: _____

City/State/Zip: _____

If necessary, please use additional sheet(s) for any additional entries.

Schedule I – Relationship with University of Maryland Medical System, State or local government, or quasi-governmental entity.

A quasi-governmental entity is an entity that is created by state or local statute, that performs a public function, and that is supported in whole or in part by the state or local government but is managed privately.

During the reporting period, did you or an immediate family member have a financial or contractual relationship with:

The University of Maryland Medical System:
A governmental entity of the State or a local government in the State; or
A quasi-governmental entity of the State or local government in the State.

Do not list employment as a municipal elected official.

For each financial or contractual relationship, provide:

1. The name and address of the entity:

_____

2. A description of the relationship:

_____

(3) The subject matter of the relationship:

_____

4. The consideration received from the relationship.

_____

The Commission will not provide public access to information related to consideration received from the relationship.

SCHEDULE J. Other

Is there any additional information or interest you would like to disclose?

STANDARDS OF CONDUCT

The Town of University Park Ethics Law includes standards of conduct applicable to financial disclosure filers and Town employees and appointed officials. The standards address disqualification from participation, prohibited secondary employment, prohibited ownership interests, misuse of position, prohibited solicitation and acceptance of gifts, misuse of confidential information, post-employment limitations, prohibited dealings with the Town, and procurement specifications assistance restrictions. The Law provides for exceptions and exemptions under certain circumstances.

Filers wanting more detailed information about these requirements should contact the Town Ethics Commission.

PRIVACY NOTICE

The Public Ethics Law (§5-101 *et seq.* of the General Provisions Article, Annotated Code of Maryland) and the Town Ethics Code require the collection of this information, which will be used primarily for public disclosure and to determine compliance with the Law. The information may be disclosed to any requesting person, including officials of State, local or federal government, who record their name and address, and this record will be provided to the filer upon request, provided however that public access is not authorized for an individual's home address that the individual has designated as the individual's home address or information related to consideration received from the relationship with University of Maryland Medical System, State or local government, or quasi-governmental entity reported in Schedule I. The filer has the right to review, correct and amend the record.