APPENDIX "B"



COUNTY OF ULSTER

ANNUAL STATEMENT OF FINANCIAL DISCLOSURE FORM

NAME (Please Print)

POSITION and DEPARTMENT

January 1, 2023- December 31, 2023

CALENDAR YEAR



COUNTY OF ULSTER ANNUAL STATEMENT OF FINANCIAL DISCLOSURE FORM FOR THE CALENDAR YEAR $\ 2023$

Please print clearly and return to the Ulster County Legislature by May 1st

Last Name	First Name	Middle Initial
Title/Capacity in which statement is requ	ired Department	/Agency in which this function reports
Work Address		Work Telephone Number
	undary that you, or acial interest in.	piece of property within Ulster County or an immediate family member or member
Address of Real Estate	,	Type of Interest
		<u> </u>
immediate family member, or rendered or goods sold or produc of household are a member of a l	member of house sed or of which you, poard of directors, o y member, or memb	iny outside employer ¹ from which you, ar hold receive compensation for services an immediate family member, or membe officer, or employee. Also include any entity over of household has an ownership interest e outstanding stock owned.
None (Check if appropriate)		
Family Member Na	me of Business/Emp	loyer Relationship to Business

¹ Outside employment includes the practice of law, a NYS Department of State licensed real estate broker or agent, or practice of a profession licensed by the Department of Education. If an individual practices with a firm or corporation and is a partner or shareholder of the firm or corporation, provide a general description of principal subject areas of matters undertaken by the firm or corporation. Do not list names of individual clients, customers or patients.

3. Income From County Employmenton the County of Ulster in excess or member of household during maintenance connected with a mainten	of\$1,000.00 per ye the reportable y	ear for you, or an im rear. This, however	mediate family member, does not include any
None (Check if appropriate)		i, diirriorry or crilid s	орроп раутетіз.
Name of Family Member/Member	of Household	County Department/	<u>Division/Office</u>
			_
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			·
4. Other Income. Identify the source year from any source not describe lecture fees, consultant fees, contimmediate family member, or mer does not include any maintenant support payments.	d above, includi ractual income, nber of househol	ng employment incore of other income of during the report	come, teaching income, any nature, for you, an able year. This, however,
None (Check if appropriate)			
Name of Family Member	Name & Addr of Income Sou		Nature of Investment
<u> </u>			
5. Immediate Family Member/Mer who is an officer or employee of name, relationship to you, title, a household include a spouse, un-ec County officer's or employee's lapersons who are continually or a continually or at regular intervals line.	Ulster County, wand department. mancipated child test individual or tregular interva	hether paid or un Immediate family of d or person claimed joint state income s living or in the p	paid, including relative's members or members of d as a dependent on the e tax return or unrelated
None (Check if appropriate		•	
Name of Relative Relative	ationship to You	<u>Title</u>	<u>Department</u>
			_

Ulster County or anyone that you debts that you owe to banking c	are aware of	who does business	with Ulster Coun	ity. Do not list
County.				
None (Check if appropriate)				
<u>Creditor</u>		Type of Obligation	<u>on</u>	
e e e e e e e e e e e e e e e e e e e				<u> </u>
<u> </u>				
6 a. Money owed to you. List an County or anyone that you are a				
None (Check if appropriate)			•	
<u>Debtor</u>		Type of Obligation	<u>on</u>	
				:
None (Check if appropriate)		Cantanat Danain		N 1
Name of Family Member		Contract Descrip	<u>otion</u>	
· .	<u> </u>			· ———
-	·			
8. Investments. Itemize and describe value in any business, corpord pledged collateral, and other invitable household excluding investments	ation, partners estments, for y	hip, or other assets ir you, an immediate fo	ncluding stocks, amily member, o	bonds, loans, or member of
None (Check if appropriate)				
Name of Family Member	Name & A	Address of Business	<u>Description</u>	of Asset
				·
Name of Family Member		of Real Estate home, if owned)	Description <u>Investment</u>	of
·				·

None (Check if appropria		
Name of Family Member	<u>Trustee/Executor</u>	Description of <u>Trust/Estate</u>
during the last year by you, a gifts from a relative. The term income from property, withou An interest free or reduced int constitute the making of a gift or other items or services othe Ethics Law.	immediate family member, or a gifts" shall mean the giving of s expecting to receive something rest loan or the sale of an item for 'Gift" does not include campaign wise excluded as gifts as provide	ing in excess of \$75.00 received member of household excluding ome item of value, or the use of of at least equal value in return. or less than fair market value also in contributions authorized by law ed for in Section 5F of the County
Nana/Chaalifananayanayia	,)	
None (Check if appropria Name of Family Member	·	r
Name of Family Member	Name & Address of Dono	<u>r</u>
	·	<u>.</u>
Name of Family Member 10 a. Complimentary Attenda 5F of the County Ethics Law,	Name & Address of Dono ce. List all complimentary attended to a value greater than \$75.00, in all events received during the	dance, as provided for in Section acluding food and beverage, at last year by you, an immediate
Name of Family Member 10 a. Complimentary Attenda 5F of the County Ethics Law, bona fide charitable or politi	Name & Address of Dono ce. List all complimentary attended to a value greater than \$75.00, in all events received during the	dance, as provided for in Section ncluding food and beverage, at last year by you, an immediate
Name of Family Member 10 a. Complimentary Attenda 5F of the County Ethics Law, bona fide charitable or politifamily member, or member of	Name & Address of Dono ce. List all complimentary attended to a value greater than \$75.00, in all events received during the household.	dance, as provided for in Section ncluding food and beverage, at last year by you, an immediate
Name of Family Member 10 a. Complimentary Attenda 5F of the County Ethics Law, bona fide charitable or politifamily member, or member of	Name & Address of Dono ce. List all complimentary attended to a value greater than \$75.00, in all events received during the household.	dance, as provided for in Section ncluding food and beverage, at last year by you, an immediate
Name of Family Member 10 a. Complimentary Attenda 5F of the County Ethics Law, bona fide charitable or politifamily member, or member of Name of Family Member 11. Loans. Describe all loans to excess of \$5,000.00. This does financial institution to finance a primary or secondary reside	Name & Address of Dono ce. List all complimentary attend t a value greater than \$75.00, in tal events received during the household. Name & Address of Dono you, an immediate family men of include any loan issued in the ducational costs, the cost of hor ice, or purchase of a personally uch reportable loan has been g	dance, as provided for in Section ncluding food and beverage, at last year by you, an immediate
Name of Family Member 10 a. Complimentary Attenda 5F of the County Ethics Law, bona fide charitable or politifamily member, or member of Name of Family Member 11. Loans. Describe all loans to excess of \$5,000.00. This does financial institution to finance a primary or secondary reside furniture or appliances. If any	Name & Address of Dono ce. List all complimentary attend t a value greater than \$75.00, in tal events received during the household. Name & Address of Dono you, an immediate family men of include any loan issued in the ducational costs, the cost of hor ice, or purchase of a personally uch reportable loan has been guarantor.	dance, as provided for in Section notuding food and beverage, at last year by you, an immediate

12. Political Parties. List any position you held as an officer of a political party, political committee, candidate campaign committee, or political organization within the last five (5) years. The term "political organization" includes any independent body or any organization that is affiliated with or a subsidiary of a political party or any committee organized for the purpose of electing or defeating a candidate or ballot initiative.
None (Check if appropriate)
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13. Not-for-Profit Organizations. List any position you held as an officer of a not-for-profit organization within the reporting year. The term "nonprofit organization" includes any organization that is organized pursuant to the New York Not-for-Profit Corporation Law. None (Check if appropriate)
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Certification:

I hereby certify under penalty of perjury, that the information disclosed on this form is true and complete to the best of my knowledge.

I hereby acknowledge my continuing responsibility to disclose any conflicts of interest or potential conflicts of interest and/or rescue myself from any act or action as required by Ulster County's Ethics Law. I certify that I will undertake and carry out this responsibility to the best of my ability.

Siç	inature						Date		············		
	State of New York County of	} } ss.:	•								
	On the	day	of		in	the	year <u>.</u>		k	pefore	me the
	undersigned, a	Notary	Public	in ersona	and	for own t	said	State,	person	ally a	ppeared e basis of
	satisfactory evider and acknowledge his/her signature of individual acted, e	ed to me to on the in:	the indi hat he/ strumen	vidua 'she e t, the	l whose xecute indivi	e nar ed th	ne is su e same	bscribec in his/he	I to the version of the contract of the contra	vithin ir citv an	nstrument d that by
	(Signature and Off	ice of indi	vidual t	aking	ackno	wlec	lgemer	nt)			

The deadline for filing is May 1st. Please return the completed form to the Ulster County Legislature at 244 Fair Street, 6th floor, Kingston, NY 12401.