APPENDIX "B"



COUNTY OF ULSTER

ANNUAL STATEMENT OF

FINANCIAL DISCLOSURE FORM

RECEIVED MAR 21 2023

ULSTER COUNTY LEGISLATURE

Chris Hewitt NAME (Please Print)

Legislator, ulster Legislature POSITION and DEPARTMENT

2023

CALENDAR YEAR



COUNTY OF ULSTER ANNUAL STATEMENT OF FINANCIAL DISCLOSURE FORM FOR THE CALENDAR YEAR _____

17	arly and return to the Ulster C	
Hewitt	Chris	
Last Name	First Name	Middle Initial
Legislator	Legisla	ture
Title/Capacity in which statem	ent is required Department/	Agency in which this function reports
\$ 244 Fair St., k	Cinyston NY 12402	845-340-3900
Work Address		Work Telephone Number
of household own or hav None (Check if ap	e a financial interest in.	in immediate family member or member
Address of Real Estate	<u>}</u>	Type of Interest
		Owner
immediate family mem rendered or goods sold of of household are a memi in which you, an immedia	ber, or member of housel or produced or of which you, ber of a board of directors, of	ny outside employer ¹ from which you, ar nold receive compensation for service an immediate family member, or membe ficer, or employee. Also include any entity er of household has an ownership interest e outstanding stock owned.
None (Check if app	opriate)	
<u>Family Member</u>	Name of Business/Empl	over Relationship to Business
self	Hudson Valley Current	executive director
wife	Hudson Valley Current The Art Effect	exective director
	. ,	

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.

or	om the County of Ulster in e member of household of aintenance connected w	excess of \$1,000.00 p during the reportat vith a matrimonial a	er year for you, o ble vear. This, ho	wever, does not inc	member
	None (Check if approp	riate)			
•	Name of Family Member/N	Member of Household	County Depar	ment/Division/Office	
	solf		legi	lature	•
			· · · · · · · · · · · · · · · · · · ·		
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ac	mediate family member, pes not include any main pport payments. None (Check if appropri	itenance connecte	d with a matrim	onial action, alimon	y or child
	V Hone (check ii appropr				
•	Name of Family Member	Name & A of Income		Nature of Investment	*
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5.	Immediate Family Membe	er/member of House			
na ho Co pe	Immediate Family Members or is an officer or employ time, relationship to you, to usehold include a spouse punty officer's or employers ons who are continually or at regular interval.	vee of Ulster Count title, and departme t, un-emancipated o ee's latest individua y or at regular inte	y, whether paid nt. Immediate fo child or person cl I or joint state in rvals living or in	or unpaid, including amily members or me aimed as a depende come tax return or	relative's embers of ent on the unrelated
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6. Money you owe. List any debts of Ulster County or anyone that you are debts that you owe to banking com County.	e aware of wl	ho does business wi	th Ulster County. Do not list
None (Check if appropriate)			,
<u>Creditor</u>	•	Type of Obligation	
	- .		
	-		
6 a. Money owed to you. List any d County or anyone that you are awa	ebts of \$10,00 are of who do	00 or more that offices business with Ulste	cers or employees of Ulster er County owes you.
None (Check if appropriate)	•		
<u>Debtor</u>		Type of Obligation	
	-		
7. Interest in Contracts. Describe any household have in any contract involved None (Check if appropriate)			ily member, or member of
Name of Family Member		Contract Description	<u>on</u>
	<u>-</u> ,		· · · · · · · · · · · · · · · · · · ·
8. Investments. Itemize and describe the value in any business, corporation pledged collateral, and other invest household excluding investments in place. None (Check if appropriate)	n, partnership ments, for you oublicly trade	o, or other assets inc u, an immediate fan d securities and inte	luding stocks, bonds, loans, nily member, or member of erest in real property.
Name of Family Member	Name & Add	dress of Business	Description of Asset
Name of Family Member	Location of I	Real Estate ome, if owned)	Description of Investment
-			

None (Check if approx	MUCIEI	nt plans or inter nember of hous	orioid.
	, indicip	·.	
Name of Family Membe	<u>Trustee/Execut</u>	or	Description of <u>Trust/Estate</u>
			<u> </u>
during the last year by you, gifts from a relative. The ter income from property, with an interest free or reduced it constitute the making of a gor other items or services of Ethics Law. None (Check if appropring Name of Family Member)	m "gifts" shall mean the out expecting to receive nterest loan or the sale of ift. "Gift" does not include nerwise excluded as gifts iate)	giving of some something of a fan item for less campaign con as provided for	ber of household excli item of value, or the u t least equal value in re s than fair market value
10 a. Complimentary Attend 5F of the County Ethics Law, cona fide charitable or poli amily member, or member of	" a raibe greater mar	i 4/3.00, includii	e, as provided for in Sec ng food and beverage ear by you, an immed
10 a. Complimentary Attend 5F of the County Ethics Law, cona fide charitable or poli amily member, or member of Name of Family Member	" a raibe greater mar	Fring the last y_{ϵ}	e, as provided for in Sec ng food and beverage ear by you, an immed
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oona fide charitable or poli amily member, or member o	tical events received du of household. \(\int \n \n \n \)	Fring the last y_{ϵ}	e, as provided for in Sec ng food and beverage ear by you, an immed
Name of Family Member 1. Loans. Describe all loans access of \$5,000.00. This does nancial institution to finance primary or secondary reside primary or appliances. If any ne liability and name of the content of the	tical events received distributed in household. Non E Name & Addres To you, an immediate far not include any loan issueducational costs, the cence, or purchase of a persuch reportable loan houseantor.	mily member, o	ng food and beverage ear by you, an immed or member of househo ary course of business to chase or improvement
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13. <u>Not-</u>	tor-Profit O	<u>irganizatio</u>	ns. List an	y positio	n you i	approf	s an or	nization"	includ	les ar
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No.

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. Law Law I will undertake and carry out this responsibility to the best of my ability.

State of New York
County of Ulster) ss.:

On the 21^{5th} day of March in the year 2023 before me the undersigned, a Notary Public in and for said State, personally appeared Chris Hewith personally known to me or proved to me on the basis of satisfactory evidence to be the individual whose name is subscribed to the within instrument and acknowledged to me that he/she executed the same in his/her capacity and that by his/her signature on the instrument, the individual, or person upon behalf of which the

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.