

COUNTY OF ULSTER

ANNUAL STATEMENT OF FINANCIAL DISCLOSURE FORM

Eve Walter NAME (Please Print)

Legislature POSITION and DEPARTMENT

January 1, 2022 – December 31, 2022

CALENDAR YEAR

FEB 1 4 2023 ULSTER COUNTY LEGISLATURE



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

Please print clearly	and return to the vister Coun	ty Legislature by May 1st
Walter	Eve	M Nichala Maria
Last Name	First Name	Middle Initial
Legislature	Legislatn	
Title/Capacity in which statement i	is required Department/Ager	ncy in which this function reports
214 Fair Street 10	Strequired Department/Ager	845-340-3800
Work Address	,	Work Telephone Number
within one mile of the Co	unty's boundary that you, you have a financial interest in.	of property within Ulster County or ur spouse, domestic partner or
<u>Address of Real Estate</u>		Type of Interest
		rusident
12-1 Huchents	T INV 14 12561	vental
	Annual An	
your spouse, domestic po rendered or goods sold o dependent children are include any entity in which	artner or dependent children or produced or of which you, yo a member of a board of direct ch you, your spouse, domestic	outside employer* from which you, receive compensation for services your spouse, domestic partner or ctors, officer, or employee. Also c partner or dependent children has han five percent of the outstanding
None (Check if appropri	iate)	
Family Member	Name of Business/Employe	r Relationship to Business
Self har husband	Alliana Chicago Ar E	employer seller
MATTER CONTRACTOR OF THE PROPERTY OF THE PROPE	No. Accordance and accordance of the state o	

3.	Other Income. Identify the source and nature of any other income in excess of \$1,000.00 per year from any source not described above, including employment income, teaching income, lecture fees, consultant fees, contractual income, or other income of any nature, for you, your spouse, domestic partner, or dependent children. This includes income derived from the County of Ulster if you, your spouse, domestic partner or dependent children are employees of the County during the reportable year. This, however, does not include any maintenance connected with a matrimonial action, alimony or child support payments.
	None (Check if appropriate)
	Name & Address Nature of Name of Family Member of Income Source Investment
	Miana Chicago Salary Misband Age Salary
4.	Relatives in Ulster County service. List each relative who is an officer or employee of Ulster County, whether paid or unpaid, including relative's name, relationship to you, title, and department. Relatives include your spouse, domestic partner, child, stepchild, grandchild, brother, sister, parent, stepparent, plus any person you claimed as a dependent on your latest income tax return, and that dependent's spouse or domestic partner. None (Check if appropriate) Name of Relative Relationship to You Title Department
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5.	Money you owe. List any debts of \$10,000 or more that you owe to an officer or employee of Ulster County or anyone that you are aware of who does business with Ulster County. Do not list debts that you owe to banking companies that have an official banking relationship with Ulster County. None (Check if appropriate) Creditor Type of Obligation

Δ None (Check if appropriate)		
Debtor	Type of Obliga	<u>tion</u>
	e any interest you, your spouse, d iny contract involving the County	
None (Check if appropriate)		
Name of Family Member	Contract Desc	ription

of the value in any business, c bonds, loans, pledged collate	cribe all investments in excess of orporation, partnership, or other eral, and other investments, for you excluding investments in public	assets including stocks, ou, your spouse, domestic
of the value in any business, coonds, loans, pledged collate partner or dependent childrer nyerest in real property. None (Check if appropriate)	orporation, partnership, or other eral, and other investments, for yo	assets including stocks, ou, your spouse, domestic
of the value in any business, coonds, loans, pledged collate partner or dependent childrent press in real property. None (Check if appropriate) Name of Family Member	orporation, partnership, or other eral, and other investments, for you excluding investments in public	assets including stocks, ou, your spouse, domestic ally traded securities and
of the value in any business, conds, loans, pledged collate cartner or dependent childrer nterest in real property.	orporation, partnership, or other eral, and other investments, for you excluding investments in public Name & Address of Business Location of Real Estate	assets including stocks, bu, your spouse, domestice ally traded securities and Description of Asset
of the value in any business, coonds, loans, pledged collate partner or dependent children press in real property. None (Check if appropriate) Name of Family Member Name of Family Member Prusts. Identify each interest in excess of \$2,000.00, except for	orporation, partnership, or other eral, and other investments, for you excluding investments in public Name & Address of Business Location of Real Estate	assets including stocks, bu, your spouse, domestic ally traded securities and Description of Asset Description of Investment icial interest in any assets interests in an estate or true

9.	Gifts and Honorariums. List the source of all gifts aggregating in excess of \$75.00 received during the last year by you, your spouse, domestic partner or dependent children 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 whether or not they are reportable as income. This does not include campaign contributions made to a political committee.		
	None (Check if appropriate)		
	Name of Family Member Name & Address of Donor		
	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. If any such reportable loan has been guaranteed by any third party, list the liability and name of the guarantor. None (Check if appropriate)		
	Name of Family Member Name & Address of Creditor Collateral, if any		
11.	Political Parties. List any position you held as an officer of a political party, political 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.		
	None (Check if appropriate)		
	Chair NP Dems 2020-2022		
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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

-	2/14/23 Date
State of New York County of Uster } ss.: On the day of Februar/ in the undersigned, a Notary Public in and for Eve Wolfer personally known satisfactory evidence to be the individual whose not and acknowledged to me that he/she executed this/her signature on the instrument, the individual individual acted executed the instrument.	the same in his/her capacity and that by

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.

* 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.