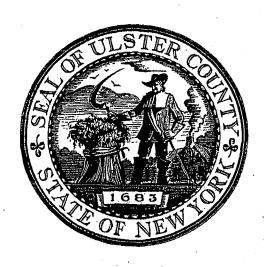
#### APPENDIX "B"



# 1

### **COUNTY OF ULSTER**

## ANNUAL STATEMENT OF FINANCIAL DISCLOSURE FORM

## RECEIVED

AUG 2 1 2024

ULSTER COUNTY LEGISLATURE

### Gina E. Hansut

NAME (Please Print)

Legislator

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

Hansut	Gina	. E
ast Name	First Name	Middle Initial
Legislator	Legislature	
Title/Capacity in which statement is require	ed Department/Age	ency in which this function reports
244 Fair Street, Kingston, NY 12402	·	845-340-3900
Work Address		Work Telephone Number
of household own or have a finance  None (Check if appropriate)  Address of Real Estate		ype of Interest
Address of Real Estate	. <u>I</u>	ype of Interest
		Owner - Home
	<u> </u>	<u> </u>
immediate family member, or rendered or goods sold or produce of household are a member of a k	member of househo ed or of which you, ar board of directors, offic y member, or member	outside employer <sup>1</sup> from which you, or ld receive compensation for service immediate family member, or member, or employee. Also include any enterestanding stock owned.
None (Check if appropriate)		
Family Member Na	me of Business/Employ	<u>rer</u> <u>Relationship to Business</u>
	· · · · · · · · · · · · · · · · · · ·	

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.

ar from any source not described above, including employment income, teaching inc ture fees, consultant fees, contractual income, or other income of any nature, for yo mediate family member, or member of household during the reportable year. This, howes not include any maintenance connected with a matrimonial action, alimony or oport payments.  None (Check if appropriate)  Name & Address Nature of Investment  Name of Family Member  Name Source  Investment  Name of Family Member of Household in Ulster County service. List each reaction is an officer or employee of Ulster County, whether paid or unpaid, including relative, relationship to you, title, and department. Immediate family members or membrate usehold include a spouse, un-emancipated child or person claimed as a dependent of the properties of the properties.  None (Check if appropriate)	intenance connected with			
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Name of Relative Relationship to You <u>Title</u> <u>Department</u>	no is an officer or employee ame, relationship to you, title busehold include a spouse, u bunty officer's or employee's ersons who are continually o	e of Ulster County, whe, and department. In In-emancipated child Is latest individual or just at regular intervals	ether paid or nmediate fam or person clair oint state inco living or in th	unpaid, including relat illy members or membe med as a dependent or ome tax return or unrela
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None (Check if appropria	re)	
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 necome from property, withou an interest free or reduced into constitute the making of a gift or other items or services other thics Law.	the source of all gifts aggregate immediate family member, or "gifts" shall mean the giving of stexpecting to receive something erest loan or the sale of an item for "Gift" does not include campaig wise excluded as gifts as provided.	member of household excluding ome item of value, or the use of g of at least equal value in return or less than fair market value also n contributions authorized by lav
✓ None (Check if appropria	re)	
	Name & Address of Dona	r
Name of Family Member	Name & Address of Dono	<u>r</u>
	Name & Address of Dono	<u> </u>
Name of Family Member  O a. Complimentary Attenda  of the County Ethics Law, on the county is the county in the county in the county is the county in the county in the county is the county in the county in the county in the county is the county in the county in the county in the county is the county in the county in the county in the county is the county in the county in the county in the county is the county in the county in the county in the county is the county in the county in the county in the county is the county in the county in the county in the county is the county in the county in the county in the county is the county in the county in the county in the county is the county in the county in the county in the county is the county in the county in the county in the county is the county in the co	nce. List all complimentary attendat a value greater than \$75.00, in call events received during the	dance, as provided for in Sectio
Name of Family Member  O a. Complimentary Attenda For of the County Ethics Law,	nce. List all complimentary attendat a value greater than \$75.00, in call events received during the	dance, as provided for in Section ncluding food and beverage, c last year by you, an immediate
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Name of Family Member  O a. Complimentary Attenda  of of the County Ethics Law, on a fide charitable or politicamily member, or member of the Name of Family Member  1. Loans. Describe all loans the excess of \$5,000.00. This does in ancial institution to finance a primary or secondary reside turniture or appliances. If any	nce. List all complimentary attendat a value greater than \$75.00, in cal events received during the household.  Name & Address of Dono  Do you, an immediate family mere not include any loan issued in the educational costs, the cost of homo nce, or purchase of a personally such reportable loan has been guarantor.	dance, as provided for in Section cluding food and beverage, of last year by you, an immediate of household experience of business by the purchase or improvements for owned motor vehicle, household

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)
Town of Lloyd Republican Committee
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.  Mone (Check if appropriate)

#### 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 ad carry out this responsibility to the best of my ability.

<u>8/20/24</u> Date

County of Wster } ss.:

On the 204 day of light in the year 2024 before me the

undersigned, a Notary Public in and for said State, personally appeared 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 individual acted, executed the instrument.

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

Solding the sold fine