

COUNTY OF ULSTER

ANNUAL STATEMENT OF FINANCIAL DISCLOSURE FORM

Jeffery A. Blins NAME (Please Print)

Legislator, Ulster Gusty legislature POSITION and DEPARTMENT

Devend

January 1, 2023 - December 31, 2023

CALENDAR YEAR

RECEIVED

APR 0 5 2024

ULSTER COUNTY LEGISLATURE



COUNTY OF ULSTER ANNUAL STATEMENT OF FINANCIAL DISCLOSURE FORM FOR THE CALENDAR YEAR _____2023_

Please print clearly	and return to the Ulster Cou	inty Legislature by May 1st
Collins	Jeffery	A
Last Name	First Name (Middle Initial
County Legislatu Title/Capacity in which statement is	or County	Learslature
Title/Capacity in which statement is	required Department/Ag	ency in which this function reports
Work Address		Work Telephone Number
1. Real estate ownership. List within one mile of the County's of household own or have a find the None (Check if appropriate of the County).	s boundary that you, or an i nancial interest in.	e of property within Ulster County or mmediate family member or member
Address of Real Estate	<u> I</u>	ype of Interest
84 Zena Rd, Wa 33 Rock Ciky Ro	oodstock	Owner Owner Owner
		Owner
rendered or goods sold or pro of household are a member o	or member of househole duced or of which you, an f a board of directors, offic amily member, or member	outside employer ¹ from which you, a d receive compensation for service immediate family member, or member, er, or employee. Also include any entit of household has an ownership interes utstanding stock owned.
None (Check if appropria	te)	
<u>Family Member</u>	Name of Business/Employe	er <u>Relationship to Business</u>
Self	Cardinal Technology	alle owner
Daughter	Lake Hill Garden	employee
<u>>e/†</u>	340 Best	employee

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 Employme from the County of Ulster in excess o or member of household during t maintenance connected with a mo	f\$1,000.00 pei he reportable	r year for you, or year. This, hov	an immediat vever, does	e family member not include any
None (Check if appropriate)				
Name of Family Member/Member of	of Household	County Departr	ment/Division/	Office
<u>Self</u>		Coc	nty leg	is lature
	<u>. 1</u> .			
				
4. Other Income. Identify the source year from any source not described lecture fees, consultant fees, control immediate family member, or mem does not include any maintenance support payments.	l above, inclu actual income ber of househ	ding employme e; or other incor old during the re	nt income, te ne of any na eportable yea	eaching income, iture, for you, an ar. This, however,
None (Check if appropriate)	•	. •		
Name of Family Member Self	Name & Ad of Income S 847en Zena Democa		Nature Investm Loay	
5. Immediate Family Member/Mem who is an officer or employee of Land name, relationship to you, title, and household include a spouse, un-em County officer's or employee's late persons who are continually or at continually or at regular intervals live	llster County, d department ancipated ch st individual o regular interv	whether paid of the control of the c	or unpaid, inc mily member ilmed as a de come tax ret	cluding relative's s or members of ependent on the urn or unrelated
None (Check if appropriate)			•	
Name of Relative Relati	onship to You	<u>Title</u>	<u> </u>	<u>Department</u>
				. •
		<u> </u>		
				1

6. Money you owe. List any debts of Ulster County or anyone that you ar debts that you owe to banking con County.	e aware of w	ho does business wit	h Ulster County Do	nat list
None (Check if appropriate)	•	•		
<u>Creditor</u>		Type of Obligation		
the SAA Charles Control of the Control				
-				_
6 a. Money owed to you. List any of County or anyone that you are away	debts of \$10,0 are of who do	000 or more that offic oes business with Ulste	ers or employees of r County owes you.	f Ulster
Debtor		There are A Ole II as a Ministra		
<u>Debioi</u>		Type of Obligation		
				<u>.</u>
				_
7. Interest in Contracts. Describe an household have in any contract involved None (Check if appropriate) Name of Family Member	olving the Co	unty of Ulster. Contract Descriptio		ber of
		<u>ggriniggri ggganging</u>		
	····			
		· ,		
8. Investments. Itemize and describe the value in any business, corporation pleaged collateral, and other investigation household excluding investments in None (Check if appropriate)	on, partnershi tments, for yc	p, or other assets incl ou, an immediate fam	uding stocks, bonds, nily member, or mem	loans,
Name of Family Member		ldress of Business ock City Rod Woalsto	Description of Asset	t
Self & wife Self & wife	Rock Cit	y Road Holding	OWNES/Par	
Name of Family 11, 11, 11, 11	Location of	Real Estate	Description of	
Name of Family Member	(<u>including</u> h	ome, if owned)	<u>Investment</u>	
Self fwife	105 Card	and Ct: Wardstack	Home	
Self	The Farm	lar Group land, M	3.6% owners!	iρ
Mother	the Far	and, M mer Group	3.6% ownersh	P

rel	cess of \$2,000.00, except ative, for you, an immedic None (Check if appropr		or noosenold.
	Name of Family Member	<u>Trustee/Executor</u>	Description of <u>Trust/Estate</u>
gif inc An co or	ring the last year by you, its from a relative. The tern come from property, witho interest free or reduced in the stitute the making of a git other items or services oth lics Law.	an immediate family member n "gifts" shall mean the giving ut expecting to receive somet nterest loan or the sale of an ite ft. "Gift" does not include camp erwise excluded as gifts as pro	egating in excess of \$75.00 received, or member of household excluding of some item of value, or the use of hing of at least equal value in return. Em for less than fair market value also paign contributions authorized by law evided for in Section 5F of the County
	l 💆 None (Check if appropri	OTEI	
	None (Check if appropri	Name & Address of D	<u>onor</u>
		•	<u>onor</u>
		•	onor
bo	Name of Family Member a. Complimentary Attender of the County Ethics Law,	Name & Address of D ance. List all complimentary at at a value greater than \$75.0 tical events received during the second secon	tendance, as provided for in Section 00, including food and beverage, at the last year by you, an immediate
bo	Name of Family Member a. Complimentary Attended of the County Ethics Law, na fide charitable or poli	Name & Address of D ance. List all complimentary at at a value greater than \$75.0 tical events received during the second secon	tendance, as provided for in Section 00, including food and beverage, at the last year by you, an immediate
bo	name of Family Member a. Compilmentary Attender of the County Ethics Law, na fide charitable or poli-	Name & Address of D ance. List all complimentary at at a value greater than \$75.0 tical events received during to household.	tendance, as provided for in Section 00, including food and beverage, at the last year by you, an immediate
bo	name of Family Member a. Compilmentary Attender of the County Ethics Law, na fide charitable or poli-	Name & Address of D ance. List all complimentary at at a value greater than \$75.0 tical events received during to household.	tendance, as provided for in Section 00, including food and beverage, at the last year by you, an immediate
bo far	a. Complimentary Attended of the County Ethics Law, na fide charitable or polinily member, or member of the Mame of Family Member. Loans. Describe all loans the sess of \$5,000.00. This does ancial institution to finance rimary or secondary residenture or appliances. If any	Name & Address of D ance. List all complimentary at at a value greater than \$75.0 tical events received during to household. Name & Address of Dode in the cost of ence, or purchase of a personal such reportable loan has been as a contract of the cost of ence, or purchase of a personal such reportable loan has been contract the cost of the	tendance, as provided for in Section 00, including food and beverage, at the last year by you, an immediate
bo far	a. Complimentary Attended of the County Ethics Law, not fide charitable or polimity member, or member of the Mame of Family Member. Loans. Describe all loans the sess of \$5,000.00. This does ancial institution to finance or many or secondary resides.	Name & Address of D ance. List all complimentary at at a value greater than \$75.0 tical events received during to household. Name & Address of Domination of include any loan issued in educational costs, the cost of ence, or purchase of a personal such reportable loan has been guarantor.	tendance, as provided for in Section 20, including food and beverage, at the last year by you, an immediate ponor nember, or member of household in the ordinary course of business by a home purchase or improvements for ally 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)
First Vice Chair VIster County Democratic Committee
Co-Chair Woodstock Democratic Committee
Member NY State Democratic 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. None (Check if appropriate)
Director, Member Board of Directors Family of Woodstock Montes President, Spand of Directors Woodstock Housing Alliance

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 Leerlify that Lwill undertake and carry out this responsibility to the best of my ability.

and carry out this responsibility to the best of my ability.
_ 4/18/2024
Date
State of New York }
County of <u>Vister</u>) ss.:
On the 19th day of April 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

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

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