



COUNTY OF ULSTER

ANNUAL STATEMENT OF FINANCIAL DISCLOSURE FORM

NAME (Please Print)

POSITION and DEPARTMENT

January 1, 2022 – December 31, 2022 CALENDAR YEAR

RECEIVED
FEB 1 4 2023

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 County Legislature by May 1st

Last Name	First Name	Middle Initial
•		
Legislator	Legis	lature
Title/Capacity in which statem	ent is required Departmen	nt/Agency in which this function reports
244 Fair St.		
Work Address		Work Telephone Number
within one mile of the	County's boundary that yo or have a financial interest	piece of property within Ulster County or ou, your spouse, domestic partner or tin.
Address of Real Estate	2	Type of Interest
		Owner
276 Canal St. Ellege:	11e, NY 12428	OUNEC
278 Canal St, Ellens:		OWNER
		And the second s
	A.),	
2. Outside employment,	partner or dependent chil	any outside employer* from which you, ildren receive compensation for services you, your spouse, domestic partner or
rendered or goods so dependent children of include any entity in v	are a member of a board o vhich you, your spouse, dor except a corporation with	of directors, officer, or employee. Also mestic partner or dependent children ha less than five percent of the outstandin
rendered or goods so dependent children of include any entity in van ownership interest, stock owned.	are a member of a board o vhich you, your spouse, dor except a corporation with	of directors, officer, or employee. Also mestic partner or dependent children had less than five percent of the outstandin

None (Chec	ck if appropriate)		
Name of Fam	il <u>y Member</u>	Name & Address of Income Source	Nature of <u>Investment</u>
SolF		HIT.S Shows	CONTRACTO
			n officer or employee of Ulste
atest income		ent, plus any person you clain hat dependent's spouse or d)	
<u> V</u> None (Che			
Name of Rela		lationship to You <u>Title</u>	<u>Department</u>
		lationship to You <u>Title</u>	<u>Department</u>
Name of Rela	ative Re		Department Owe to an officer or employed

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
10.	Loans. Describe all loans to you (and/or your spouse, and/or domestic partner, and/or dependent children) in excess of \$5,000.00. This does not include any loan issued in the 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) Type of loan &
	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)

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.

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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.

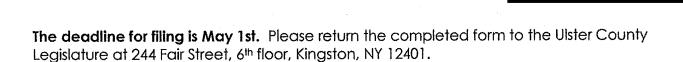


State of New York

County of Uster }ss.:

On the day of retrovery in the year 2023 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

ent)



* 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.