

COUNTY OF ULSTER

ANNUAL STATEMENT OF

FINANCIAL DISCLOSURE FORM

RECEIVED

APR 26 2024

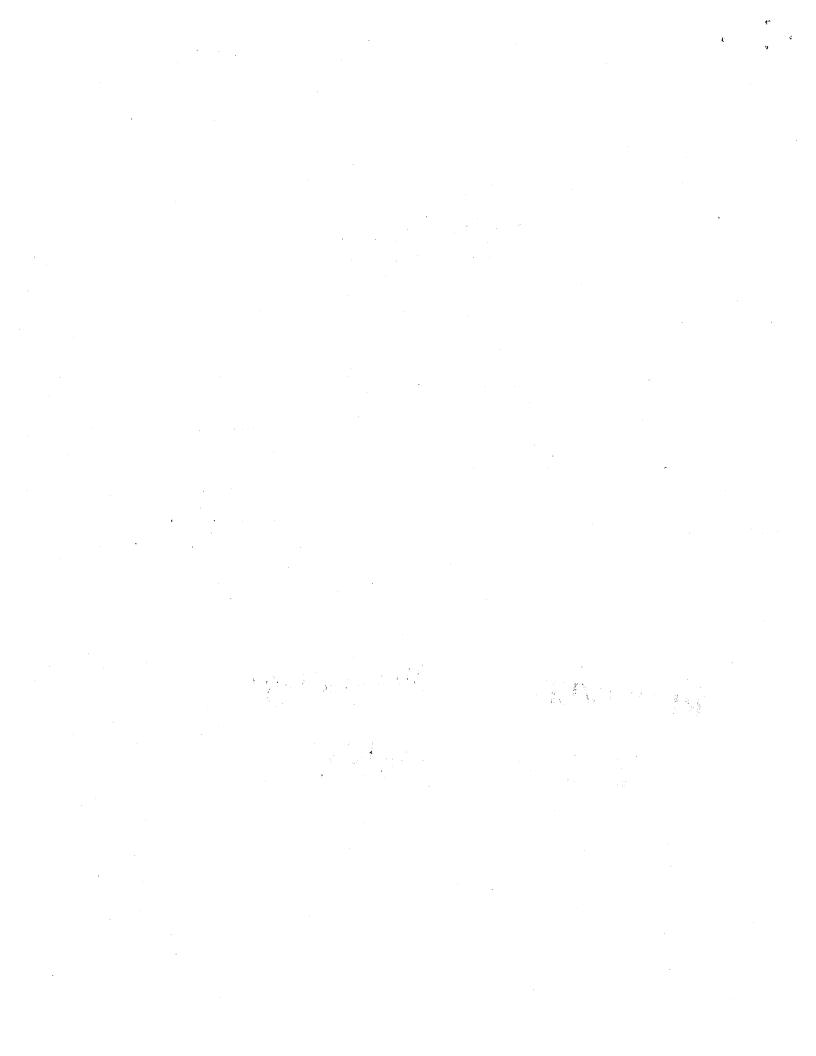
ULSTER COUNTY LEGISLATURE

March Callaghe NAME (Please Print)

Comprolu-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 Title/Capacity in which statement is required

Comptoller's Office

Department/Agency in which this function reports 244 Fair St. 5th Floor Kingston NY 845-340-3529
Work Address
Work Telephone Number 1. Real estate ownership. List the address of each piece of property within Ulster County or within one mile of the County's boundary that you, or an immediate family member or member of household own or have a financial interest in. None (Check if appropriate). Address of Real Estate 2. Outside employment/business. List the name of any outside employer! from which you, an immediate family member, or member of household receive compensation for services rendered or goods sold or produced or of which you, an immediate family member, or member of household are a member of a board of directors, officer, or employee. Also include any entity in which you, an immediate family member, or member of household has an ownership interest, except a corporation with less than ten percent of the outstanding stock owned. None (Check if appropriate) Family Member Name of Business/Employer Relationship to Business Brian Donoghue Inquiring Mads Bookstone

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 from the County of Ulster or member of househol maintenance connected	in excess of \$1,000,00 pe Id during the reportable	ryear for you, or o e vear. This, how	an immediate fam vever does not it	nily member
None (Check if app	•			1011101
Name of Family Membe	er/Member of Household	County Departn	nent/Division/Office	
March Callege	٠٠	^	trolleis Office	
			. 44 JW 2 14	
				·
4. Other Income. Identify year from any source no lecture fees, consultant fimmediate family membedoes not include any managements.	r described above, inclu ees, contractual incom er, or member of housel	iding employmer e, or other incom oold during the re	nt income, teaching ne of any nature, portable vear. This	ng income, for you, an
None (Check if appr	opriate)	· ·		
Name of Family Mem	Name & Ac ber of Income S		Nature of <u>Investment</u>	
				
		CA Section	2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	
5. Immediate Family Mer who is an officer or emp name, relationship to yo household include a spou County officer's or emplopersons who are continually or at regular in	ployee of Ulster County, u, title, and departmen use, un-emancipated ch oyee's latest individual ually or at regular intery	whether paid o t. Immediate fan nild or person clai or joint state inc rals living or in th	r unpaid, includin nily members or n imed as a depend ome tax return o	g relative's nembers of dent on the
None (Check if ap	propriate)			
Name of Relative	Relationship to You	<u>Title</u>	Depa	rtment
		- W. W.		

6. Money you owe. List any debts of Ulster County or anyone that you debts that you owe to banking corCounty.	ire aware of w	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 County or anyone that you are aw	debts of \$10,0 are of who do	00 or more that offic es business with Ulste	cers or employees of er County owes you	Ulster
Hone (Check if appropriate)			or coorny Gwos you.	
<u>Debtor</u>		Type of Obligation		
				•
				_
household have in any contract inv None (Check if appropriate) Name of Family Member	olving the Col	Contract Descriptio	<u>n</u>	
8. Investments. Itemize and describe the value in any business, corporation pledged collateral, and other investments in the collateral investments.	on, partnership tments, for you	o, or other assets incl u, an immediate fam	uding stocks, bonds, illy member, or mem	loans.
None (Check if appropriate)				
Name of Family Member	Name & Add	dress of Business	Description of Asset	
Name of Family Member	65 Pantle HSBN: M 65 Pant Location of F	tran 52 Sougester our 57 otron 54 Sougester	Description of	
Brian Danoghie			Investment	* .
->um portugues	Sange	htron 52 utes	- Cures	
			*	

		rlate)				
	Name of Family Membe	<u>r</u>	<u>Trustee/Executor</u>		Description of <u>Trust/Estate</u>	
		 .				
						
	10. Gifts and Honorariums. I					
:	during the last year by you, gifts from a relative. The terr income from property, without An interest free or reduced inconstitute the making of a goor other items or services of Ethics Law.	out experiment of the contract	snall mean the giving cting to receive sometl can or the sale of an ite does not include camp	of some ite ning of at le m for less th	em of value, or the use ast equal value in renant fair market value	se c eturr also
	Name of Family Member		Name of Asialas as to	•		
	Name of Lanily Member		Name & Address of Do	<u>onor</u>		
•.					•	
						-
	10 a. Complimentary Attend 5F of the County Ethics Law, bona fide charitable or poli family member, or member of	, ai a va itical eve	aue greater than \$75.00 Ents received during th) including	y food and become	
	bona fide charitable or poli	, at a va itical eve of housel	ive greater than \$75.00 phis received during the hold.	0, including ne last yea	y food and become	
	bona fide charitable or polifamily member, or member	, at a va itical eve of housel	aue greater than \$75.00 Ents received during th	0, including ne last yea	y food and become	
	bona fide charitable or polifamily member, or member	, at a va itical eve of housel	ive greater than \$75.00 phis received during the hold.	0, including ne last yea	y food and become	
	bona fide charitable or polifamily member, or member of Mame of Family Member	itical eve of housel - - -	nue greater than \$75.00 ents received during the hold. Name & Address of Do	0, including ne last yea nor	g food and beverag Ir by you, an immed	e, c diat
	bona fide charitable or polifamily member, or member of Mame of Family Member Name of Family Member	to you.	ents received during the hold. Name & Address of Do	ne last yea	g food and beverage ir by you, an immed	e, c diat
	bona fide charitable or polifamily member, or member of Mame of Family Member 11. Loans. Describe all loans excess of \$5,000,00. This does	to you, c	nue greater than \$75.00 ents received during the hold. Name & Address of Do an immediate family medical any loan issued in	ne last year nor nember, or	member of househo	e, c diat
	bona fide charitable or poliformily member, or member of the control of the contr	to you, of not included and or	nue greater than \$75.00 ents received during the hold. Name & Address of Do an immediate family mude any loan issued in lonal costs, the cost of he purchase of a personal portable loan has been	ne last year nor nember, or the ordinar nome purch	member of househor course or improvement	e, c diat
	bona fide charitable or poliformily member, or member of the country thinks taw, bona fide charitable or poliformily member, or member of the country that the	to you, of an order of houseld of houseld order	nue greater than \$75.00 ents received during the hold. Name & Address of Do an immediate family mude any loan issued in lonal costs, the cost of he purchase of a personal portable loan has been	ne last year nor nember, or the ordinar nome purch	member of househor course or improvement	e, diat

	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
٠.	of electing or defeating a candidate or ballot initiative.
	None (Check if appropriate)
	Condidate for Country Comproller 2019 2021 Condidate for Country Executine 2025
	Condidate for Landy Executine 2025
	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) Board Mamber Fand Grait Find



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 my ability.

<u>4|26|24</u> Date

State of New York
County of USICA

On the 20th day of April in the year 2024 before me the

undersigned, a Notary Public in and for said State, personally appeared here. 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

at 244 Fair Street, 6th floor, Kingston, NY 12401.