APPENDIX "B"





COUNTY OF ULSTER

ANNUAL STATEMENT OF FINANCIAL DISCLOSURE FORM

NAME (Please Print)

2022 X

MAR 0 8 2023

ULSTER COUNTY LEGISLATURE



COUNTY OF ULSTER ANNUAL STATEMENT OF FINANCIAL DISCLOSURE FORM FOR THE CALENDAR YEAR 2033

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Last Name	First Name	Midd	le Initial
CEGISLATOR			
Title/Capacity in which statement is	required Department/A	Agency in which this function	on reports
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Work Address		Work Telephone Numb	per
within one mile of the County's of household own or have a fine None (Check if appropriate Additional Section 1997).	inancial interest in.		
<u>Address of Real Estate</u>		Type of Interest	
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3851 RT-9W HIE	INCAND, NY	OWN	
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2. Outside employment/busin immediate family member, rendered or goods sold or pro of household are a member o in which you, an immediate for except a corporation with less	or member of househ duced or of which you, of f a board of directors, of amily member, or member	old receive comper an immediate family n ficer, or employee. Als er of household has an	nsation for service nember, or member to include any entit n ownership interes
None (Check if appropria	te)	F	

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.

or member of	ty of Ulster in e f household d	ployment. Identify the xcess of \$1,000,00 pluring the reportable the matrimonial ac	er year for you, o le year. This, h	or an immedia owever, does	te family memb
None (Cl	heck if appropr	iate)	*	e <u>k</u>	
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Name of Fa	·. amily Member	. Name & A		Natur	
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6. Money you owe. List any debts of Ulster County or anyone that you are debts that you owe to banking compounty.	aware of w	ho does business wit	h Ulster County, Do	not list
None (Check if appropriate)	sai			*
* ** **	• •			
<u>Creditor</u>		Type of Obligation		
* _*	* *			
				 _
6 a. Money owed to you. List any de County or anyone that you are awar	ebts of \$1.0,0	00 or more that offices business with Ulste	ers or employees of	f Ulster
None (Check if appropriate)		C3 D031(1033 WIII 1 Olate	. County owes you.	٠.
<u>Debtor</u>		Type of Obligation	•	
	***	Type of Conganon	•	:
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7. Interest in Contracts. Describe any household have in any contract invol	interest you	, an immediate fami Intv of Ukter	ly member, or mem	ber of
None (Check if appropriate)	iving me cod	orny or object.	·	
[V] resid (entertin apprepriate)	,		, 1	·
Name of Family Member	, , , , , , , , , , , , , , , , , , ,	Contract Description	<u>in</u>	
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R Investments Itemize and describe	all investmen	oto in overes of \$5.00	0.00 or five borner	1507) - E
8. Investments. Itemize and describe the value in any business, corporation pledged collateral, and other investments in phousehold excluding investments in p	n, partnership nents, for yo	o, or other assets incl u, an immediate fam	uding stocks, bonds, nily member, or men	, loans, nber of
None (Check if appropriate)				
Name of Family Member	Name & Ad	dress of Business	Description of Asse	<u>t</u>
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Name of Family Member	Location of lincluding he	Real Estate ome, if owned)	Description of Investment	
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	9. Trusts. Identify each interes excess of \$2,000.00, except fo relative, for you, an immediate None (Check if appropriate	r IRS eligib e family me	le retirement pla	ins or interest	s in an estate or trust of
	Name of Family Member	<u>Trus</u>	stee/Executor		Description of Trust/Estate
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	income from property, without An interest free or reduced into constitute the making of a gift. or other items or services other Ethics Law.	erest loan "Gift" doe: wise exclu	or the sale of an s not include car	item for less t npaian contr	han fair market value als
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	name of Family Member	<u>Na</u>	me & Address of	Donor	
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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 my ability.

State of New York
County of Ulaler ss.:

On the aday of March in the year 2023 before me the undersigned, a Notary Public in and for said State, personally appeared Thomas Coscosan 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 filling is May 1st. Please return the completed form to the Ulster County Legislature at 244 Fair Street, 6th floor, Kingston, NY 12401.