

## **Executive Officer Financial Disclosure Form**

Who must file: Executive Officers, members of the Vermont State Ethics Commission, and the Executive Director of the State Ethics Commission must file a financial disclosure form annually. 3 V.S.A §§ 1211(a) and 1212(a). An Executive Officer is defined as a State Officer (the Governor, Lieutenant Governor, Treasurer, Secretary of State, Auditor of Accounts, or Attorney General), or an individual "under the Office of the Governor, an agency secretary or deputy or a department commissioner or deputy." 3 V.S.A. § 1201(3). Required disclosure information includes information regarding your spouse or "domestic partner." 3 V.S.A. § 1211(a)(1). "Domestic partner," as used throughout this form, is defined in 3 V.S.A § 1211(e)(1).

When: Financial disclosure forms must be filed on or before January 15 each year. If appointed after January 15, this form must be filed within 10 days of appointment. 3 V.S.A. § 1211(d)(1). Information required by this form is for the previous 12 months. 3 V.S.A. § 1211(a).

Were you a candidate for statewide office or legislature last year? If you filed a 17 V.S.A. § 2414 candidate disclosure form in the preceding year, and the information provided on that form has not changed since that filing, you may update and file that form indicating that there has been no change. 3 V.S.A. § 1211(d)(2). If there has been ANY change in the information provided on the candidate disclosure form, including becoming an Executive Officer, you must complete and file this form.

If needed, please attach additional pages to complete this form.

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Your name:			
Email address:			
Office/Agency/Department:			
Title:			
Date you assumed office or d	ate of appointment:		

Information provided below is for the 12 months preceding this report. 3 V.S.A. § 1211(c)(1).

spouse or domestic partne employer's business addre	the previous 12 months: List each employed er, or both of you together received income of ess. You do not need to provide the actual doll ture of your employment. 3 V.S.A. § 1211(a)	f \$5,000.00 or more and lar amount. If you are se
□ I (and my spouse/dome	estic partner) have no sources of employment	income required to be
Employer Name	Employer Business Address or description of work if self-employed	You/Spouse or Domestic Partner/Joint
B. <b>Investment income in</b>	the previous 12 months: For you, your spous	e or domestic partner, o
of you together, list each so the solution of	ource of investment income that totals more ed to provide the actual dollar amount. 3 V.S.A clude, but are not limited to, stocks, bonds, moventures and business interests not included in the disclosed unless which case the ownership should be listed in	than \$5,000.00. 3 V.S.A A § 1211(a)(1)(B). Source nutual funds, income- n Part 3 below. Brokera ess stock ownership
of you together, list each so the solution of	ource of investment income that totals more ed to provide the actual dollar amount. 3 V.S.A clude, but are not limited to, stocks, bonds, moventures and business interests not included in the disclosed unless which case the ownership should be listed in	than \$5,000.00. 3 V.S.A A § 1211(a)(1)(B). Source nutual funds, income- n Part 3 below. Brokera ess stock ownership n Part 3 below. Retireme

I (and my spouse/domest	ic partner) have i	no other sources of	income required to be list
9	Source of Income		You/Spouse or Domestic Partner/Joint
of Vermont on which you		•	ed by law or that receives for A § 1211(a)(2).
e: List each board, commi of Vermont on which you I have no service to list. Board, Commission, c	serve and your p	osition on it. 3 V.S.	•
of Vermont on which you I have no service to list.  Board, Commission, o	serve and your pother Entity	List any company	A § 1211(a)(2).  Position held  which you or your spouse of
of Vermont on which you  I have no service to list.  Board, Commission, c	wious 12 months:	List any company ent. 3 V.S.A § 1211	A § 1211(a)(2).  Position held  which you or your spouse (a)(3).

	eases or contracts required to be listed.
Type of lease or contract	You/Spouse or Domestic Partner/Joint
obbying Activities: If your spouse or domestic partner is use's name below and, if applicable, the name of your sp	
☐ My spouse/domestic partner has no lobbying acti	vities required to be listed.
Name of spouse/domestic partner	Name of lobbying firm, if applicab
rtify that the information provided on all pages of this di	sclosure form is true to the best of my knowle
rmation, and belief.	
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