

**FORM B**

**ROCKLAND COUNTY  
ANNUAL STATEMENT OF FINANCIAL DISCLOSURE**

**Calendar Year 2023**

\_\_\_\_\_

Last Name

First Name

Middle Initial

\_\_\_\_\_

Current Employer/Business

Title/Position

\_\_\_\_\_

Advisory Council/Board/Commission/Appointment(s)

\_\_\_\_\_

Work Address

Work Phone No.

\_\_\_\_\_

Home Address

Home Phone No.

\_\_\_\_\_

Email Address

If married, please give spouse's full name, including maiden name

Marital Status: \_\_\_\_\_ where applicable. \_\_\_\_\_

List the names of all children under 21 living with you at home:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

The purpose of this disclosure statement is to identify potential conflicts that may exist between private and public life with respect to your duties while an elected official, officer, employee, political party official, candidate for County elected office or serving on a voluntary Rockland County board, commission or advisory council. Please follow all directions carefully and attach additional pages if necessary. Disclosure of the information on this form is required for compliance with the Rockland County Code of Ethics and New York General Municipal Law.

**DO NOT LEAVE ANY SECTION BLANK: Use N/A or NONE**

### 1. Outside Employment and Business

List the name of every employer or business from which you were paid more than \$2,500 for services performed or for goods sold or produced, whether you were a paid member, officer, director, or employee during the reporting period. Do not list the County of Rockland as an employer (this information is covered in question 3 below) or individual customers or clients of the business. Do not list businesses in which you were an investor only (these are identified in question 2 below). Identify the nature and type of the business, such as a partnership, corporation, limited liability company, or sole proprietorship, and list your relationships(s) to the employer or business (i.e., owner, partner, officer, director, member, employee and/or shareholder) and state your position with the employer. Provide the same information for your spouse.

Name	Relationship to you	Name of Employer or Business	Nature of Business	Type of Business	Position Held
<i>e.g.: John Doe</i>	<i>Husband</i>	<i>ABC Realty</i>	<i>Real Estate</i>	<i>Partnership</i>	<i>Employee</i>

### 2. Privately Held Businesses

List the name of any privately held entity in which, during the reporting period, you had an ownership interest of at least 20% of the entity or an investment with a total value of at least \$50,000 in the entity. Do not list any entity listed in response to question 1 above or any publicly traded entity. Identify the nature of the business and the type of business (e.g. corporation, limited liability company, partnership). Provide the same information for your spouse or children under 21 living with you at home.

Name	Relationship to You	Name of Entity	Nature of Business	Type of Business
<i>e.g.: Mary Doe</i>	<i>Self</i>	<i>R&amp;D Investigations</i>	<i>Private Investigations</i>	<i>Corporation</i>

### 3. Rockland County Employment

List any and all relatives, defined with respect to this question only as your spouse, children, siblings, parents or in-laws, including yourself, who were employed by the County of Rockland in a permanent, full-time capacity during the reporting period. Please include the position or title and the department.

Name	Relationship to you	Position Held/Title	County Department
<i>e.g.: Ralph Roe</i>	<i>Father-in-law</i>	<i>Attorney</i>	<i>Law Department</i>

#### 4. Government and Not-for-Profit Positions

List each office or position, whether paid or unpaid, that you held during the reporting period with any federal, state or municipal government entity or with any not-for-profit organization. Do not list entities where you were only a member but had no office or position. Do not list entities where you only volunteered in a non-policy-making, non-administrative capacity, such as a neighborhood Girl Scout leader or a Little League coach. Do not list any office or position reported elsewhere on this form.

Entity or Organization	Position
<i>e.g.: Salvation Army</i>	<i>Board Member</i>

#### 5. Gifts

List each gift worth \$75 or more that you or your spouse received from any person, firm or entity that has or had a matter pending during the reporting period before you, your department or the board, commission or counsel upon which you serve. For purposes of this question, “matter pending,” means a formal request for a contract, goods, services, funding, license or permit. A “gift” means anything of value for which you or your spouse paid nothing or paid less than the fair market value and may be in the form of money, services, reduced interest on a loan, travel, travel reimbursements, entertainment, hospitality, or in any other form. Note that separate gifts from the same or affiliated donor during the reporting period must be added together for purposes of the \$75 threshold.

Name	Relationship to you	Donor of Gift	Nature of Gift
<i>e.g. Mary Doe</i>	<i>Self</i>	<i>XYZ Corp.</i>	<i>Free trip to Atlantic City</i>

The reporting of information in this statement is required by the New York State General Municipal Law and the Laws of Rockland County. Improper use of the information contained in this statement by any third person or entity in violation of privacy or other rights is separately punishable in accordance with the law. Please be advised that, pursuant to New York State law, this statement is available in its entirety for public inspection and reproduction, but any information within the statement deemed exempt by New York State law or the Laws of Rockland County shall be redacted accordingly.

*I certify that all of the above information is true to the best of my knowledge and that within the past two weeks I have read the attached summary of the Rockland County Code of Ethics.*

If you are submitting this form electronically, you must agree to the statement below:

By checking this box, typing in my name and today's date and e-mailing this document to the Board of Ethics, I understand and agree that I am electronically signing and filing this Annual Statement of Financial Disclosure for Rockland County. I understand that by signing and submitting this Statement in this fashion, it is the legal equivalent of having placed my handwritten signature on the submitted Statement and this attestation. I also understand and agree that by electronically signing and submitting this Statement in this fashion, I am certifying that I personally completed this Statement, that I reviewed its entire contents and that I am affirming the truth of the information contained therein.

\_\_\_\_\_

Type Name of Reporting Individual

\_\_\_\_\_

Date (month/day/year)

If you are **NOT** submitting this form electronically, you must sign and date it below and submit a hard copy to the Board of Ethics.

\_\_\_\_\_

Signature of Reporting Individual

\_\_\_\_\_

Date (month/day/year)