

**APPENDIX I**

ANNUAL STATEMENT OF FINANCIAL DISCLOSURE FOR  
COUNTY OF LIVINGSTON  
FOR 2018

The requirements relating to the reporting of financial interests are in the public interests. No adverse inference of unethical or illegal conduct or behavior should be drawn from these requirements. **EVERY line MUST be filled in for this form to be accepted. If the line is not applicable to you, please be sure put "none" or "N/A".**

1. Name and Address.

|                      |
|----------------------|
| Name                 |
| Title                |
| Department or Agency |
| County Address       |
| County Telephone     |

2. Spouse and Children.

Provide the name of your spouse (if married) and the names of any dependent children (**If not applicable, write "None" or "N/A".**):

|           |           |
|-----------|-----------|
| Spouse    | Child/Age |
| Child/Age | Child/Age |

3. Financial Interests.

- a. Business Positions. List any office, trusteeship, directorship, partnership or other position in any business, association, proprietary, or not-for-profit organization for you and your spouse and dependent children, if any, and indicate whether these businesses are involved with the County of Livingston in any manner. **(If not applicable, write “None” or “N/A”.)**

| Name of Family Member | Position | Organization | County Department or Agency and Nature of Involvement |
|-----------------------|----------|--------------|---|
|                       |          |              |   |
|                       |          |              |   |
|                       |          |              |   |

- b. Outside Employment. Describe any outside occupation, employment, trade, business or profession providing more than \$1,000/year for you and your spouse and dependent children, if any, and indicate whether such activities are regulated by any State or local agency. **(If not applicable, write “None” or “N/A”.)**

| Name of Family Member | Position | Description of Organization | State or Local Agency |
|-----------------------|----------|-----------------------------|-----------------------|
|                       |          |                             |                       |
|                       |          |                             |                       |
|                       |          |                             |                       |

- c. Future Employment. Describe any contract, promise or other agreement between you and anyone else, with respect to your employment after leaving your County office or position. **(If not applicable, write “None” or “N/A”.)**

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d. Past Employment. Identify the source and nature or any income in excess of \$1,000 per year from any prior employer, including deferred income, contributions to a pension or retirement funds, profit sharing plan, severance pay, or payments under a buy-out agreement. **(If not applicable, write “None” or “N/A”.)**

| Name and Address of Income Source | Description of Income<br>(i.e. pension, deferred, etc.) |
|-----------------------------------|---|
| _____                             | _____   |
| _____                             | _____   |
| _____                             | _____   |

e. Investments.

1) Itemize and describe all investments in excess of \$5,000 or five percent (5%) of the value in any business, corporation, partnership, or other assets including stocks, bonds, I.R.A.'s, loans, pledged collateral, and other investments, for you and your spouse and dependent children, if any. List the location of all real estate, within the County or within five (5) miles of the County in which you, your spouse or dependent children, if any, have an interest, regardless of its value. **(If not applicable, write “None” or “N/A”.)**

| Name of Family Member | Name and Address of Business | Description of Investment |
|-----------------------|------------------------------|---------------------------|
| _____                 | _____                        | _____                     |
| _____                 | _____                        | _____                     |
| _____                 | _____                        | _____                     |

2) Do you own or rent your personal residence? Own  Rent  If you own your personal residence, set forth the address and the names of the title owner(s):

Address \_\_\_\_\_ Title Owner(s) \_\_\_\_\_

|       |       |
|-------|-------|
| _____ | _____ |
| _____ | _____ |

- f. Trusts. Identify each interest in a trust or estate or similar beneficial interest in any assets in excess of \$2,000, except for IRS eligible retirement plans or interests in an estate or trust of a relative, for you and your spouse and your dependent children. **(If not applicable, write “None” or “N/A”.)**

| Name of Family Member | Trustee/Executor | Description of Trust/Estate |
|-----------------------|------------------|-----------------------------|
| _____                 | _____            | _____                       |
| _____                 | _____            | _____                       |
| _____                 | _____            | _____                       |

- g. Other Income. Identify the source and nature of any other income in excess of \$1,000/year from any source not described above, including teaching income, lecture fees, consultant fees, contractual income, or other income of any nature, for you and your spouse and your dependent children, if any. **(If not applicable, write “None” or “N/A”.)**

| Name of Family Member | Name and Address of Income Source | Nature of Income |
|-----------------------|-----------------------------------|------------------|
| _____                 | _____                             | _____            |
| _____                 | _____                             | _____            |
| _____                 | _____                             | _____            |

4. Gifts and Honorariums.

List the source of all gifts aggregating in excess of \$250.00 received during the last year by you, your spouse or dependent child, 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 that are not reportable as income. **(If not applicable, write “None” or “N/A”.)**

| Name of Family Member | Name and Address of Donor |
|-----------------------|---------------------------|
| _____                 | _____                     |
| _____                 | _____                     |
| _____                 | _____                     |

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5. Third-Party Reimbursements.

Identify and describe the source of any third-party reimbursement for travel-related expenditures in excess of \$250.00 for any matter that relates to your official duties. The term "reimbursement" includes any travel-related expenses provided by anyone other than the County for speaking engagements, conferences, or fact finding events that relate to your official duties. **(If not applicable, write "None" or "N/A".)**

| Source | Description |
|--------|-------------|
| <hr/>  | <hr/>       |
| <hr/>  | <hr/>       |
| <hr/>  | <hr/>       |

6. Loans.

Describe all loans to you, your spouse and dependent children in excess of \$5,000 that are payable upon demand, where the creditor is not a federally insured bank or savings and loan institution. **(If not applicable, write "None" or "N/A".)**

| Name of Family Member | Name and Address of Creditor |
|-----------------------|------------------------------|
| <hr/>                 | <hr/>                        |
| <hr/>                 | <hr/>                        |
| <hr/>                 | <hr/>                        |
| <hr/>                 | <hr/>                        |

7. Interest in Contracts.

Describe any interest of you, your spouse or dependent children in any contract involving the County. **(If not applicable, write "None" or "N/A".)**

| Name of family member | Contract Description |
|-----------------------|----------------------|
| _____                 | _____                |
| _____                 | _____                |
| _____                 | _____                |
| _____                 | _____                |

8. Political Parties.

List any position you held within the last five (5) years as an officer of any political party, political committee or political organization. The term "political organization" includes any independent body or any organization that is affiliated with or a subsidiary of a political party. **(If not applicable, write "None" or "N/A".)**

\_\_\_\_\_

\_\_\_\_\_  
**Signature**

\_\_\_\_\_  
**Date**

**ATTENTION PLEASE -- The completed Annual Statement of Financial Disclosure must be filed with the CLERK OF THE BOARD OF SUPERVISORS by April 13, 2018. The Board of Ethics will begin its review process by April 23, 2018. Please submit your completed disclosure form in a sealed envelope addressed to "Board of Ethics." Thank you for your cooperation.**