

VIRGINIA ACTS OF ASSEMBLY — CHAPTER

An Act to amend and reenact § 2.2-3117 of the Code of Virginia, relating to the State and Local Government Conflict of Interests Act; disclosure of real estate interests.

[S 533]

Approved

Be it enacted by the General Assembly of Virginia:**1. That § 2.2-3117 of the Code of Virginia is amended and reenacted as follows:**

§ 2.2-3117. Disclosure form.

The disclosure form to be used for filings required by § 2.2-3114 A and D, and § 2.2-3115 A and D shall be substantially as follows:

STATEMENT OF ECONOMIC INTERESTS.

Name

Office or position held or sought

Address

Names of members of immediate family

DEFINITIONS AND EXPLANATORY MATERIAL.

"Business" means a corporation, partnership, sole proprietorship, firm, enterprise, franchise, association, trust or foundation, or any other individual or entity carrying on a business or profession, whether or not for profit.

"Close financial association" means an association in which the person filing shares significant financial involvement with an individual and the filer would reasonably be expected to be aware of the individual's business activities and would have access to the necessary records either directly or through the individual. "Close financial association" does not mean an association based on (i) the receipt of retirement benefits or deferred compensation from a business by which the person filing this statement is no longer employed, or (ii) the receipt of compensation for work performed by the person filing as an independent contractor of a business that represents an entity before any state governmental agency when the person filing has had no communications with the state governmental agency.

"Contingent liability" means a liability that is not presently fixed or determined, but may become fixed or determined in the future with the occurrence of some certain event.

"Dependent" means any person, whether or not related by blood or marriage, who receives from the officer or employee, or provides to the officer or employee, more than one-half of his financial support.

"Gift" means any gratuity, favor, discount, entertainment, hospitality, loan, forbearance, or other item having monetary value. It includes services as well as gifts of transportation, local travel, lodgings and meals, whether provided in-kind, by purchase of a ticket, payment in advance or reimbursement after the expense has been incurred. "Gift" shall not include any offer of a ticket or other admission or pass unless the ticket, admission, or pass is used. "Gift" shall not include honorary degrees and presents from relatives. "Relative" means the donee's spouse, child, uncle, aunt, niece, or nephew; a person to whom the donee is engaged to be married; the donee's or his spouse's parent, grandparent, grandchild, brother, or sister; or the donee's brother's or sister's spouse.

"Immediate family" means (i) a spouse and (ii) any other person residing in the same household as the officer or employee, who is a dependent of the officer or employee or of whom the officer or employee is a dependent.

TRUST. If you or your immediate family, separately or together, are the only beneficiaries of a trust, treat the trust's assets as if you own them directly. If you or your immediate family has a proportional interest in a trust, treat that proportion of the trust's assets as if you own them directly. For example, if you and your immediate family have a one-third interest in a trust, complete your Statement as if you own one-third of each of the trust's assets. If you or a member of your immediate family created a trust and can revoke it without the beneficiaries' consent, treat its assets as if you own them directly.

REPORT TO THE BEST OF INFORMATION AND BELIEF. Information required on this Statement must be provided on the basis of the best knowledge, information and belief of the individual filing the Statement as of the date of this report unless otherwise stated.

COMPLETE ITEMS 1 THROUGH 10. REFER TO SCHEDULES ONLY IF DIRECTED.

You may attach additional explanatory information.

1. Offices and Directorships.

Are you or a member of your immediate family a paid officer or paid director of a business?

EITHER check NO // OR check YES // and complete Schedule A.

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2. Personal Liabilities.

Do you or a member of your immediate family owe more than \$10,000 to any one creditor including contingent liabilities? (Exclude debts to any government and loans secured by recorded liens on property at least equal in value to the loan.)

EITHER check NO // OR check YES // and complete Schedule B.

3. Securities.

Do you or a member of your immediate family, directly or indirectly, separately or together, own securities valued in excess of \$10,000 invested in one business? Account for mutual funds, limited partnerships and trusts.

EITHER check NO // OR check YES // and complete Schedule C.

4. Payments for Talks, Meetings, and Publications.

During the past 12 months did you receive lodging, transportation, money, or anything else of value with a combined value exceeding \$200 for a single talk, meeting, or published work in your capacity as an officer or employee of your agency?

EITHER check NO // OR check YES // and complete Schedule D.

5. Gifts.

During the past 12 months did a business, government, or individual other than a relative or personal friend (i) furnish you with any gift or entertainment at a single event, and the value received by you exceeded \$50 in value or (ii) furnish you with gifts or entertainment in any combination and the value received by you exceeded \$100 in total value; and for which you neither paid nor rendered services in exchange? Account for entertainment events only if the average value per person attending the event exceeded \$50 in value. Account for all business entertainment (except if related to your private profession or occupation) even if unrelated to your official duties.

EITHER check NO // OR check YES // and complete Schedule E.

6. Salary and Wages.

List each employer that pays you or a member of your immediate family salary or wages in excess of \$10,000 annually. (Exclude state or local government or advisory agencies.)

If no reportable salary or wages, check here //.

.....

7. Business Interests.

Do you or a member of your immediate family, separately or together, operate your own business, or own or control an interest in excess of \$10,000 in a business?

EITHER check NO // OR check YES // and complete Schedule F.

8. Payments for Representation and Other Services.

8A. Did you represent, excluding activity defined as lobbying in § 2.2-419, any businesses before any state governmental agencies, excluding courts or judges, for which you received total compensation during the past 12 months in excess of \$1,000, excluding compensation for other services to such businesses and representation consisting solely of the filing of mandatory papers and subsequent representation regarding the mandatory papers? (Officers and employees of local governmental and advisory agencies do NOT need to answer this question or complete Schedule G-1.)

EITHER check NO // OR check YES // and complete Schedule G-1.

8B. Subject to the same exceptions as in 8A, did persons with whom you have a close financial association (partners, associates or others) represent, excluding activity defined as lobbying in § 2.2-419, any businesses before any state governmental agency for which total compensation was received during the past 12 months in excess of \$1,000? (Officers and employees of local governmental and advisory agencies do NOT need to answer this question or complete Schedule G-2.)

EITHER check NO // OR check YES // and complete Schedule G-2.

8C. Did you or persons with whom you have a close financial association furnish services to businesses operating in Virginia pursuant to an agreement between you and such businesses, or between persons with whom you have a close financial association and such businesses for which total compensation in excess of \$1,000 was received during the past 12 months?

EITHER check NO // OR check YES // and complete Schedule G-3.

9. Real Estate.

9A. State Officers and Employees.

Do you or a member of your immediate family hold an interest, including a partnership interest, valued at \$10,000 or more in real property (other than your principal residence) for which you have not already listed the full address on Schedule F? Account for real estate held in trust.

EITHER check NO // OR check YES // and complete Schedule H-1.

9B. Local Officers and Employees.

Do you or a member of your immediate family hold an interest, including a partnership *interest or option, easement, or land contract*, valued at \$10,000 or more in real property located in the county, city or town in which you serve or in a county, city or town contiguous to the county, city or town in which you serve (other than your principal residence) for which you have not already listed the full address on Schedule F? Account for real estate held in trust.

EITHER check NO // OR check YES // and complete Schedule H-2.

10. Real Estate Contracts with Governmental Agencies.

Do you or a member of your immediate family hold an interest valued at more than \$10,000 in real estate, including a corporate, partnership, or trust interest, option, easement, or land contract, which real estate is the subject of a contract, whether pending or completed within the past 12 months, with a governmental agency? If the real estate contract provides for the leasing of the property to a governmental agency, do you or a member of your immediate family hold an interest in the real estate valued at more than \$1,000? Account for all such contracts whether or not your interest is reported in Schedule F, H-1, or H-2. This requirement to disclose an interest in a lease does not apply to an interest derived through an ownership interest in a business unless the ownership interest exceeds three percent of the total equity of the business.

EITHER check NO // OR check YES // and complete Schedule I.

Statements of Economic Interests are open for public inspection. AFFIRMATION BY ALL FILERS.

I swear or affirm that the foregoing information is full, true and correct to the best of my knowledge.

Signature

Commonwealth of Virginia

..... of to wit:

The foregoing disclosure form was acknowledged before me

This day of, 20. . . , by

Notary Public

My commission expires

(Return only if needed to complete Statement.)

SCHEDULES

to

STATEMENT OF ECONOMIC INTERESTS.

NAME

SCHEDULE A - OFFICES AND DIRECTORSHIPS.

Identify each business of which you or a member of your immediate family is a paid officer or paid director.

Name of Business	Address of Business	Position Held

RETURN TO ITEM 2

SCHEDULE B - PERSONAL LIABILITIES.

Report personal liability by checking each category. Report only debts in excess of \$10,000. Do not report debts to any government. Do not report loans secured by recorded liens on property at least equal in value to the loan.

Report contingent liabilities below and indicate which debts are contingent.

1. My personal debts are as follows:

Check appropriate categories	Check one \$10,001 to \$50,000	More than \$50,000
Banks		
Savings institutions		
Other loan or finance companies		
Insurance companies		

177 Stock, commodity or other brokerage
 178 companies _____
 179 Other businesses: _____
 180 (State principal business activity for each
 181 creditor.) _____
 182 _____
 183 _____
 184 Individual creditors:
 185 (State principal business or
 186 occupation of each creditor.) _____
 187 _____
 188 _____

189 2. The personal debts of the members of my immediate family are as follows:

191	192	193	194	195	196	197	198	199	200	201	202	203	204	205	206	207	208	209	210	211	212	213
	Check		Check one																			
	appropriate		\$10,001 to																			
	categories		\$50,000																			
	Banks																					
	Savings institutions																					
	Other loan or finance companies																					
	Insurance companies																					
	Stock, commodity or other brokerage																					
	companies																					
	Other businesses:																					
	(State principal business activity for each																					
	creditor.)																					
	Individual creditors:																					
	(State principal business or																					
	occupation of each creditor.)																					

214 RETURN TO ITEM 3

215 SCHEDULE C - SECURITIES.

216 "Securities" INCLUDES stocks, bonds,	"Securities" EXCLUDES
217 mutual funds, limited partnerships,	certificates of deposit,
218 and commodity futures contracts.	money market funds, annuity
219	contracts, and insurance policies.

220 Identify each business or Virginia governmental entity in which you or a
 221 member of your immediate family, directly or indirectly, separately or
 222 together, own securities valued in excess of \$10,000.

223 Name each entity and type of security individually.

224 Do not list U.S. Bonds or other government securities not issued by the
 225 Commonwealth of Virginia or its authorities, agencies, or local
 226 governments. Do not list organizations that do not do business in this
 227 Commonwealth, but most major businesses conduct business in Virginia.

228 Account for securities held in trust.

229 If no reportable securities, check here / /.

230 _____
 231 _____
 232 _____

Check one

Name of Issuer	Type of Entity	Type of Security stocks, bonds, mutual funds, etc.)	\$10,001 to \$50,000	\$50,001 to \$250,000	More than \$250,000

RETURN TO ITEM 4

SCHEDULE D - PAYMENTS FOR TALKS, MEETINGS, AND PUBLICATIONS.

List each source from which you received during the past 12 months lodging, transportation, money, or any other thing of value (excluding meals or drinks coincident with a meeting) with combined value exceeding \$200 for your presentation of a single talk, participation in one meeting, or publication of a work in your capacity as an officer or employee of your agency.

List payments or reimbursements by an advisory or governmental agency only for meetings or travel outside the Commonwealth.

List a payment even if you donated it to charity.

Do not list information about a payment if you returned it within 60 days or if you received it from an employer already listed under Item 6 or from a source of income listed on Schedule F.

If no payment must be listed, check here / /.

Payer	Approximate Value	Circumstances	Type of payment (e.g. honoraria, travel reimbursement, etc.)

RETURN TO ITEM 5

SCHEDULE E - GIFTS.

List each business, governmental entity, or individual that, during the past 12 months, (i) furnished you with any gift or entertainment at a single event and the value received by you exceeded \$50 in value, or (ii) furnished you with gifts or entertainment in any combination and the value received by you exceeded \$100 in total value; and for which you neither paid nor rendered services in exchange. List each such gift or event. Do not list entertainment events unless the average value per person attending the event exceeded \$50 in value. Do not list business entertainment related to your private profession or occupation. Do not list gifts or other things of value given by a relative or personal friend for reasons clearly unrelated to your public position. Do not list campaign contributions publicly reported as required by Chapter 9.3 (§ 24.2-945 et seq.) of Title 24.2 of the Code of Virginia.

Name of Business, Organization, or Individual	City or County and State	Gift or Event	Approximate Value

RETURN TO ITEM 6

SCHEDULE F - BUSINESS INTERESTS.

Complete this Schedule for each self-owned or family-owned business (including rental property, a

291 farm, or consulting work), partnership, or corporation in which you or a member of your immediate
 292 family, separately or together, own an interest having a value in excess of \$10,000.

293 If the enterprise is owned or operated under a trade, partnership, or corporate name, list that name;
 294 otherwise, merely explain the nature of the enterprise. If rental property is owned or operated under a
 295 trade, partnership, or corporate name, list the name only; otherwise, give the address of each property.
 296 Account for business interests held in trust.

297						
298						
299	Name of Business,		Nature of		Gross Income	
300	Corporation,		Enterprise			
301	Partnership,	City or	(farming, law	\$50,001	More	
302	Farm; Address of	County	rental	\$50,000	to	than
303	Rental Property	and State	property, etc.)	or less	\$250,000	\$250,000
304						
305						
306						
307						
308						
309						

310 RETURN TO ITEM 8

311 SCHEDULE G-1 - PAYMENTS FOR REPRESENTATION BY YOU.

312 List the businesses you represented, excluding activity defined as lobbying in § 2.2-419, before any
 313 state governmental agency, excluding any court or judge, for which you received total compensation
 314 during the past 12 months in excess of \$1,000, excluding compensation for other services to such
 315 businesses and representation consisting solely of the filing of mandatory papers and subsequent
 316 representation regarding the mandatory papers filed by you.

317 Identify each business, the nature of the representation and the amount received by dollar category
 318 from each such business. You may state the type, rather than name, of the business if you are required
 319 by law not to reveal the name of the business represented by you.

320 Only STATE officers and employees should complete this Schedule.

321									
322									
323									
324									
325	Amount Received								
326	Name	Type	Pur-	Name					
327	of	of	pose	of					
328	Busi-	Busi-	of	Agen-					
329	ness	ness	Repre-	cy	\$1,001	\$10,001	\$50,001	\$100,001	\$250,001
330			senta-		to	to	to	to	and
331			tion		\$10,000	\$50,000	\$100,000	\$250,000	over
332									
333									
334									
335									
336									
337									

338 If you have received \$250,001 or more from a single business within the
 339 reporting period, indicate the amount received, rounded to the nearest
 340 \$10,000.

341 Amount Received: _____

342 SCHEDULE G-2 - PAYMENTS FOR REPRESENTATION BY ASSOCIATES.

343 List the businesses that have been represented, excluding activity defined as lobbying in § 2.2-419,
 344 before any state governmental agency, excluding any court or judge, by persons who are your partners,
 345 associates or others with whom you have a close financial association and who received total
 346 compensation in excess of \$1,000 for such representation during the past 12 months, excluding
 347 representation consisting solely of the filing of mandatory papers and subsequent representation
 348 regarding the mandatory papers filed by your partners, associates or others with whom you have a close

financial association.

Identify such businesses by type and also name the state governmental agencies before which such person appeared on behalf of such businesses.

Only STATE officers and employees should complete this Schedule.

Type of business	Name of state governmental agency

SCHEDULE G-3 - PAYMENTS FOR SERVICES GENERALLY.

Indicate below types of businesses that operate in Virginia to which services were furnished by you or persons with whom you have a close financial association pursuant to an agreement between you and such businesses, or between persons with whom you have a close financial association and such businesses and for which total compensation in excess of \$1,000 was received during the past 12 months.

Identify opposite each category of businesses listed below (i) the type of business, (ii) the type of service rendered and (iii) the value by dollar category of the compensation received for all businesses falling within each category.

			Value of Compensation				
	Check if ser- vices were ren- dered	Type of ser- vice ren- dered	\$1,001 to \$10,000	\$10,001 to \$50,000	\$50,001 to \$100,000	\$100,001 to \$250,000	\$250,001 and over
Electric utilities							
Gas utilities							
Telephone utilities							
Water utilities							
Cable television companies							
Interstate transportation companies							
Intrastate transportation companies							
Oil or gas retail companies							
Banks							
Savings institutions							
Loan or finance companies							
Manufacturing companies (state type of product, e.g., textile,							

406	furniture, etc.)	_____	_____	_____	_____	_____	_____
407	Mining companies	_____	_____	_____	_____	_____	_____
408	Life insurance						
409	companies	_____	_____	_____	_____	_____	_____
410	Casualty insurance						
411	companies	_____	_____	_____	_____	_____	_____
412	Other insurance						
413	companies	_____	_____	_____	_____	_____	_____
414	Retail companies	_____	_____	_____	_____	_____	_____
415	Beer, wine or liquor						
416	companies or						
417	distributors	_____	_____	_____	_____	_____	_____
418	Trade associations	_____	_____	_____	_____	_____	_____
419	Professional						
420	associations	_____	_____	_____	_____	_____	_____
421	Associations of						
422	public employees						
423	or officials	_____	_____	_____	_____	_____	_____
424	Counties, cities or						
425	towns	_____	_____	_____	_____	_____	_____
426	Labor						
427	organizations	_____	_____	_____	_____	_____	_____
428	Other	_____	_____	_____	_____	_____	_____

RETURN TO ITEM 9

432 SCHEDULE H-1 - REAL ESTATE - STATE OFFICERS AND EMPLOYEES.

433 List real estate other than your principal residence in which you or a member of your immediate
 434 family holds an interest, including a partnership interest, option, easement, or land contract, valued at
 435 \$10,000 or more. You may list each parcel of real estate individually if you wish.

437			
438	List each location	Describe the type of	If the real estate is
439	(state, and county	real estate you own in	owned or recorded in
440	or city) where you	each location (business,	a name other than your
441	own real estate.	recreational, apartment,	own, list that name.
442		commercial, open land,	
443		etc.).	

444	_____	_____	_____
445	_____	_____	_____
446	_____	_____	_____
447	_____	_____	_____
448	_____	_____	_____
449	_____	_____	_____

451 SCHEDULE H-2 - REAL ESTATE - LOCAL OFFICERS AND EMPLOYEES.

452 List real estate located in your county, city, or town, and any contiguous county, city, or town other
 453 than your principal residence in which you or a member of your immediate family holds an interest,
 454 including a partnership interest or option, easement, or land contract, valued at \$10,000 or more. You
 455 may list each parcel of real estate individually if you wish. Also list the names of any co-owners of such
 456 property, if applicable.

457				
458				
459	List each	Describe the	If the real	List the names
460	location (state,	type of real	estate is owned	of any
461	and county	estate you own	or recorded in a	co-owners,
462	or city) where	in each location,	name other than	if applicable

463	you own	(business,	your own, list
464	real estate	recreational,	that name.
465		apartment,	
466		commercial, open	
467		land, etc.).	
468	_____	_____	_____
469	_____	_____	_____
470	_____	_____	_____
471	_____	_____	_____
472	_____	_____	_____

473
474 **SCHEDULE I - REAL ESTATE CONTRACTS WITH GOVERNMENTAL AGENCIES.**

475 List all contracts, whether pending or completed within the past 12 months, with a governmental
 476 agency for the sale or exchange of real estate in which you or a member of your immediate family
 477 holds an interest, including a corporate, partnership or trust interest, option, easement, or land contract,
 478 valued at \$10,000 or more. List all contracts with a governmental agency for the lease of real estate in
 479 which you or a member of your immediate family holds such an interest valued at \$1,000 or more. This
 480 requirement to disclose an interest in a lease does not apply to an interest derived through an ownership
 481 interest in a business unless the ownership interest exceeds three percent of the total equity of the
 482 business.

483 State officers and employees report contracts with state agencies.

484 Local officers and employees report contracts with local agencies.

485	_____		
486	_____		
487	List your real estate	List each governmental	State the annual income
488	interest and the person	agency which is a party	from the contract, and
489	or entity, including	to the contract and	the amount, if any, of
490	the type of entity,	indicate the county or	income you or any
491	which is party to the	city where the real	immediate family member
492	contract.	estate is located.	derives annually from
493	Describe any management		the contract.
494	role and the percentage		
495	ownership interest you		
496	or your immediate		
497	family member has in		
498	the real estate or		
499	entity.		
500	_____	_____	_____
501	_____	_____	_____
502	_____	_____	_____
503	_____	_____	_____
504	_____	_____	_____
505	_____	_____	_____
506	_____	_____	_____