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11100722D HOUSE BILL NO. 2301

Offered January 12, 2011 Prefiled January 12, 2011

A BILL to amend and reenact §§ 2.2-3117 and 30-111 of the Code of Virginia, relating to the State and Local Government Conflict of Interests Act and the General Assembly Conflicts of Interests Act; disclosure of certain professional services income; advocacy.

## Patron—Englin

Referred to Committee on Rules

Be it enacted by the General Assembly of Virginia:

1. That §§ 2.2-3117 and 30-111 of the Code of Virginia are 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:

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.

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**59** Are you or a member of your immediate family a paid officer or paid director of a business? 60

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

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.

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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.

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.

8D. Did you, your employer, a member of your immediate family, a business for which you or a member of your family is a paid officer or director, or persons with whom you have a close financial association receive total compensation in excess of \$1,000 during the past 12 months for any activity undertaken specifically intended to influence public policy or public opinion in the Commonwealth or elsewhere?

EITHER check NO // OR check YES // and complete Schedule G-4.

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          9. Real Estate.
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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 (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 AI			
	e foregoing information is full, tru		my knowledge.
Signature			
Commonwealth of Virg	ginia		
of	to wit:		
The foregoing disclo	sure form was acknowledged	before me	
This day	of, 20 , b	У	
Notary Public			
My commission expire	es		
	led to complete Statement.)		
· •	SCHEDULES		
	to		
	STATEMENT OF ECONOMIC	INTERESTS.	
NAME			
	CES AND DIRECTORSHIPS.		
Identify each business of	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	
	<del></del>		
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#### 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.

RETURN TO ITEM 2

Report contingent liabilities below and indicate which debts are contingent.

1. My personal debts are as follows:

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Check Check one HB2301 4 of 19

appropriate categories	\$10,001 to \$50,000	More than \$50,000
Banks	\$30,000	\$50,000
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.)		
2. The personal debts of the members of my immediate fam	aly are as follows:	
Check	Check	
appropriate	\$10,001 to	
categories	\$50,000	\$50,000
caccgories	4307000	,
Banks		
Banks Savings institutions		
Banks Savings institutions		
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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.)		
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.)  SCHEDULE C - SECURITIES.		
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.)  SCHEDULE C - SECURITIES. "Securities" INCLUDES stocks, bonds, "Securit	RETURN	TO ITEM
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.)  SCHEDULE C - SECURITIES.  "Securities" INCLUDES stocks, bonds, "Securit mutual funds, limited partnerships, certific	RETURN	I TO ITEM
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.)  SCHEDULE C - SECURITIES.  "Securities" INCLUDES stocks, bonds, "Securit mutual funds, limited partnerships, certific	RETURN ies" EXCLUDES ates of deposi	I TO ITEM

mmediate 00. Name

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

If no reportable securities, check here / /.

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Name of Issuer	Type of Entity	(stocks, b	Security onds, mutual , etc.)	to \$50,000	to \$250,000	than \$250,000
				<u> </u>	<del></del>	
List each source for any other thing of exceeding \$200 for y work in your capacity. List payments or routside the Commonw. List a payment even Do not list inform an employer already 1	value (exclurour presentative as an office reimbursement wealth.  en if you dornation about a	ding meals or tion of a singler or employee ats by an advis- nated it to char a payment if y	drinks coinciden e talk, participati of your agency. sory or governme rity. ou returned it wi	it with a milion in one ental agency	meeting) with a meeting, or property only for me	combined voublication eetings or to
If no payment mus						
Payer App	_	Value	Circumstance		Type of pay (e.g. honor travel rein ment, etc.	raria, mburse-
					RETURN TO	ITEM 5
	GIFTS. s, governmen entertainmented you with n total value or event. Do exceeded \$50 ion. Do not lunrelated to	tal entity, or int at a single gifts or entert; and for which not list entert in value. Do list gifts or othe your public	ndividual that, do event and the volument in any of the control of	uring the palue receive combination aid nor resunless the sentertains e given by	past 12 month red by you ex n and the val ndered service e average va ment related a relative or paign contrib	as, (i) furni acceeded \$5 lue received es in excha lue per per to your pri personal fr utions pub

#### SCHEDULE F - BUSINESS INTERESTS.

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292 293 294 Complete this Schedule for each self-owned or family-owned business (including rental property, a farm, or consulting work), partnership, or corporation in which you or a member of your immediate family, separately or together, own an interest having a value in excess of \$10,000.

If the enterprise is owned or operated under a trade, partnership, or corporate name, list that name;

RETURN TO ITEM 6

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otherwise, merely explain the nature of the enterprise. If rental property is owned or operated under a trade, partnership, or corporate name, list the name only; otherwise, give the address of each property.

Account for business interests held in trust.

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	ration		City or	Matina	of Enter	mrico		¢E0 001	Morac
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								to	
								\$250,000	
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Name	Type	of	Name						
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of Busi- ness	Busi- ness	tion							
of Busi- ness If yo	Busi- ness	received		or more f	From a sing	gle busines	s within t		

Name of state governmental agency

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350 351 Type of business

# 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.

	Check if ser-	Type of		Value	e of Compe	ensation	
	vices were ren- dered	vice ren-	\$1,001 to \$10,000	to	\$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							- <u></u>
Intrastate							
transportation							
companies							
Oil or gas retail companies							
Banks							
Savings institutions							
Loan or finance companies							
Manufacturing							
companies (state							
type of product,							
e.g., textile,							
furniture, etc.)							
Mining companies							
Life insurance							
companies							
Casualty insurance							
companies							
Other insurance							
companies							
Retail companies							
Beer, wine or liquor							
companies or							
distributors							
Trade associations							
Professional							
associations							
Associations of							

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estate. land, etc.). name.

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	Nature of	Recipient		Amoui	nt Receive	ed	
-	Repre- senta- tion	of Compen- sation	\$1,001 to \$10,000	to \$50,000	\$50,001 to \$100,000	to \$250,000	and over
							<del></del>
amily hol 10,000 or List ea	ds an inter more. Eac ch locat and cou	rest, including the parcel shall ion Denty es	g a partners Il be listed i	ship intere ndividually ne type of own in e	est, option, e y. of real	easement, or	land contract, value al estate is recorded in
or city own rea	) where	. at	cional, apercial, op	partment			that name.
own rea	l estate	. at	cional, apercial, op	partment pen land	, etc.).		<del>-</del>

if applicable.

List all contracts, whether pency for the sale or exchangelds an interest, including a collude at \$10,000 or more. List hich you or a member of your equirement to disclose an interest.	ATE CONTRACTS WITH GOVE pending or completed within the ge of real estate in which you or corporate, partnership or trust intent all contracts with a governmentar immediate family holds such an est in a lease does not apply to an the ownership interest exceeds the	past 12 months, with a gove a member of your immedia- est, option, easement, or land al agency for the lease of real interest valued at \$1,000 or m interest derived through an o
State officers and employees	report contracts with state agencies report contracts with local agencies	
List your real estate interest and the person or entity, including the type of entity, which is party to the contract. Describe any management role and the percentage ownership interest you or your immediate family member has in the real estate or entity.	List each governmental agency which is a party to the contract and indicate the county or city where the real estate is located.	State the annual income from the contract, and the amount, if any, of income you or any immediate family member derives annually from the contract.
bstantially as follows:	e used for filings required by sub	ERESTS.
Office or position held Home address Names of members of imme DEFI "Business" means a corpo association, trust or foundation, hether or not for profit. "Close financial association	or sought	MATERIAL. ietorship, firm, enterprise, carrying on a business or property the filer shares significant

Close financial association" means an association in which the filer 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 legislator is no longer employed, or (ii) the receipt of compensation for work performed by the legislator as an independent

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527 contractor of a business that represents an entity before any state governmental agency when the
 528 legislator has had no communications with the state governmental agency.
 529 "Contingent liability" means a liability that is not presently fixed or determined, but may become

"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 legislator, or provides to the legislator, 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 legislator, who is a dependent of the legislator or of whom the legislator is a dependent.

"Lobbyist relationship" means (i) an engagement, agreement, or representation that relates to legal services, consulting services, or public relations services, whether gratuitous or for compensation, between a member or member-elect and any person who is, or has been within the prior calendar year, registered as a lobbyist with the Secretary of the Commonwealth, or (ii) a greater than three percent ownership interest by a member or member-elect in a business that employs, or engages as an independent contractor, any person who is, or has been within the prior calendar year, registered as a lobbyist with the Secretary of the Commonwealth. The disclosure of a lobbyist relationship shall not (i) constitute a waiver of any attorney-client or other privilege, (ii) require a waiver of any attorney-client or other privilege for a third party, or (iii) be required where a member or member-elect is employed or engaged by a person and such person also employs or engages a person in a lobbyist relationship so long as the member or member-elect has no financial interest in the lobbyist relationship.

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 11. 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.

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.

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.

EITHÊR 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 a legislator? Do not include payments and reimbursements from the Commonwealth for meetings attended in your capacity as a legislator; see Question 11 and Schedule D2 to report such meetings.

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 any salary received as a member of the General Assembly pursuant to § 30-19.11.)

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

7. Business Interests and Lobbyist Relationships.

7A. 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-1.

7B. Do you have a lobbyist relationship as that term is defined above?

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

8. Payments for Representation and Other Services.

8A. Did you represent 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?

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 any businesses before any state governmental agency for which total compensation was received during the past 12 months in excess of \$1,000?

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? Services reported under this provision shall not include services involving the representation of businesses that are reported under question 8A or 8B above.

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

8D. Did you, your employer, a member of your immediate family, a business for which you or a member of your family is a paid officer or director, or persons with whom you have a close financial association receive total compensation in excess of \$1,000 during the past 12 months for any activity undertaken specifically intended to influence public policy or public opinion in the Commonwealth or elsewhere?

EITHER check NO // OR check YES // and complete Schedule G-4.

9. Real Estate.

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.

10. Real Estate Contracts with State 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 state governmental agency?

If the real estate contract provides for the leasing of the property to a state governmental agency, do you or a member of your immediate family hold an interest in the real estate, including a corporate, partnership, or trust interest, option, easement, or land contract valued at more than \$1,000? Account for all such contracts whether or not your interest is reported in Schedule F or H. 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.

11. Payments by the Commonwealth for Meetings.

During the past 12 months did you receive lodging, transportation, money, or anything else of value with a combined value exceeding \$200 from the Commonwealth for a single meeting attended

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each creditor.)

650 out-of-state in your capacity as a legislator? Do not include reimbursements from the Commonwealth for 651 meetings attended in the Commonwealth. EITHER check NO / / OR check YES / / and complete Schedule D-2. 652 Statements of Economic Interests are open for public inspection. 653 654 AFFIRMATION. In accordance with the rules of the house in which I serve, if I receive a request that this disclosure 655 statement be corrected, augmented, or revised in any respect, I hereby pledge that I shall respond 656 promptly to the request. I understand that if a determination is made that the statement is insufficient, I 657 will satisfy such request or be subjected to disciplinary action of my house. 658 I swear or affirm that the foregoing information is full, true and correct to the best of my knowledge. 659 660 Signature Commonwealth of Virginia 661 \_\_\_ of \_\_\_\_\_ to wit: 662 The foregoing disclosure form was acknowledged before me 663 This \_\_\_\_ day of \_\_\_\_ , 20\_\_\_, by \_\_\_\_\_ 664 665 My commission expires 666 667 (Return only if needed to complete Statement.) 668 **SCHEDULES** 669 TO 670 STATEMENT OF ECONOMIC INTERESTS. 671 NAME SCHEDULE A - OFFICES AND DIRECTORSHIPS. 672 Identify each business of which you or a member of your immediate family is a paid officer or paid 673 674 director. 675 676 677 Name of Business Address of Business Position Held 678 679 680 681 682 683 RETURN TO ITEM 2 684 SCHEDULE B - PERSONAL LIABILITIES. Report personal liability by checking each category. Report only debts in excess of \$10,000. Do not 685 686 report debts to any government. Do not report loans secured by recorded liens on property at least equal 687 in value to the loan. 688 Report contingent liabilities below and indicate which debts are contingent. 689 1. My personal debts are as follows: 690 691 692 Check Check one \$10,001 to More than 693 appropriate 694 categories \$50,000 \$50,000 695 Banks 696 Savings institutions 697 Other loan or finance companies 698 Insurance companies 699 Stock, commodity or other brokerage **700** companies **701** Other businesses: 702 (State principal business activity for each 703 creditor.) 704 705 706 Individual creditors: 707 (State principal business or occupation of

2. The personal d	ebts of the i	members of my immediate	family are as	s follows:	
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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 a combined value exceeding \$200 for your presentation of a single talk, participation in one meeting, or publication of a work in your capacity as a legislator. Do not list payments or reimbursements by the Commonwealth. (See Schedule D-2 for such payments or reimbursements.) List a payment even if you 767 donated it to charity. Do not list information about a payment if you returned it within 60 days or if you 768 received it from an employer already listed under Item 6 or from a source of income listed on Schedule 769 770 If no payment must be listed, check here / / . 771 772 773 Type of Payment 774 (e.g., Honoraria, 775 Travel reimburse-776 Approximate Value Circumstances ment, etc.) 777 778 779 **780 781** 782 RETURN TO ITEM 5 783 SCHEDULE D-2 - PAYMENTS BY THE COMMONWEALTH FOR MEETINGS. List each meeting for which the Commonwealth provided payments or reimbursements during the 784 **785** past 12 months to you for lodging, transportation, money, or any other thing of value (excluding meals or drinks coincident with a meeting) with a combined value exceeding \$200 for your participation in **786** your capacity as a legislator. Do not list payments or reimbursements by the Commonwealth for 787 788 meetings or travel within the Commonwealth. **789** If no payment must be listed, check here / /. 790 **791 792** Type of Payment 793 (e.g., Travel 794 reimbursement, **795** Payer Approximate Value Circumstances etc.) 796 **797** 798 **799** 800 SCHEDULE E - GIFTS. 801 802 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 803 value, or (ii) furnished you with gifts or entertainment in any combination and the value received by 804 you exceeded \$100 in total value; and for which you neither paid nor rendered services in exchange. 805 List each such gift or event. 806 Do not list entertainment events unless the average value per person attending the event exceeded 807 \$50 in value. Do not list business entertainment related to your private profession or occupation. Do not 808 list gifts or other things of value given by a relative or personal friend for reasons clearly unrelated to 809 your public position. Do not list campaign contributions publicly reported as required by Chapter 9.3 810 (§ 24.2-945 et seq.) of Title 24.2 of the Code of Virginia. 811 812 813 Name of Business, Organization, or 814 City or 815 County 816 and State Gift or Event Approximate Value Individual 817 818 819 820 821

SCHEDULE F-1 - BUSINESS INTERESTS.

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Complete this Schedule for each self-owned or family-owned business (including rental property, a farm, or consulting work), partnership, or corporation in which you or a member of your immediate

RETURN TO ITEM 6

family, separately or together, own an interest having a value in excess of \$10,000.

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

Address of City or (farming, \$50,001	iness poration, tnership,		Nature of	G	ross incom	ne
Rental County law, rental \$50,000 to Property and State property, etc.) or less \$250,000	ress of tal	County	law, rental	\$50,000 or less	to	M t \$25

### SCHEDULE F-2 - LOBBYIST RELATIONSHIPS AND PAYMENTS.

Complete this Schedule for each lobbyist relationship with the following:

- (i) any person who is, or has been within the prior calendar year, registered as a lobbyist with the Secretary of the Commonwealth, or
- (ii) any business in which you have a greater than three percent ownership interest and that business employs, or engages as an independent contractor, any person who is, or has been within the prior calendar year, registered as a lobbyist with the Secretary of the Commonwealth.

			_	ents to oyist
List each person or business	Describe each relationship	Dates of relationship	\$10,000 or less	More than \$10,0001

THE DISCLOSURE OF A LOBBYIST RELATIONSHIP SHALL NOT (I) CONSTITUTE A WAIVER OF ANY ATTORNEY-CLIENT OR OTHER PRIVILEGE, (II) REQUIRE A WAIVER OF ANY ATTORNEY-CLIENT OR OTHER PRIVILEGE FOR A THIRD PARTY, OR (III) BE REQUIRED WHERE A MEMBER OR MEMBER-ELECT IS EMPLOYED OR ENGAGED BY A PERSON AND SUCH PERSON ALSO EMPLOYS OR ENGAGES A PERSON IN A LOBBYIST RELATIONSHIP SO LONG AS THE MEMBER OR MEMBER-ELECT HAS NO FINANCIAL INTEREST IN THE LOBBYIST RELATIONSHIP.

SCHEDULE G-1 - PAYMENTS FOR REPRESENTATION BY YOU.

List the businesses you represented before any state governmental agency, excluding any court or judge, 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 filed by you.

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

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SCHEDULE H - REAL ESTATE.

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997 998 List real estate other than your principal residence in which you or a member of your immediate family holds an interest, including a partnership interest, option, easement, or land contract, valued at

RETURN TO ITEM 9

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\$10,000 or more. Each parcel must be listed individually. 1000 1001 1002 Describe the type of real 1003 estate you own in each location (business, If the real estate is recreational, apartment, owned or recorded in a name other than your 1004 List the location List the location (state, and county 1005 or city where you 1006 1007 own real estate own, list that name etc.) 1008 1009 1010 1011 1012 1013 1014 RETURN TO ITEM 10 1015 SCHEDULE I - REAL ESTATE CONTRACTS WITH STATE GOVERNMENTAL AGENCIES. 1016 List all contracts, whether pending or completed within the past 12 months, with a state governmental agency for the sale or exchange of real estate in which you or a member of your 1017 immediate family holds an interest, including a corporate, partnership or trust interest, option, easement, 1018 or land contract, valued at \$10,000 or more. List all contracts with a state governmental agency for the 1019 lease of real estate in which you or a member of your immediate family holds such an interest valued at 1020 \$1,000 or more. This requirement to disclose an interest in a lease does not apply to an interest derived 1021 1022 through an ownership interest in a business unless the ownership interest exceeds three percent of the 1023 total equity of the business. 1024 1025 1026 List your real 1027 estate interest and 1028 the person or entity, 1029 including the type of 1030 entity, which is 1031 party to the contract. State the annual 1032 Describe any income from the management role and List each
the percentage governmental agency
ownership interest which is a party to
you or your immediate the contract and
family member has in indicate the county
the real estate or city where the
or entity. real estate is located. 1033 contract, and the 1034 amount, if any, of 1035 income you or any 1036 immediate family 1037 member derives 1038 annually from 1039 or entity. real estate is located. the contract. 1040 1041 1042 1043 1044 1045 B. Any legislator who makes a knowing misstatement of a material fact on the Statement of 1046 1047 1048

Economic Interests shall be subject to disciplinary action for such violations by the house in which the legislator sits.

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- C. In accordance with the rules of each house, the Statement of Economic Interests of all members of each house shall be reviewed. If a legislator's Statement is found to be inadequate as filed, the legislator shall be notified in writing and directed to file an amended Statement correcting the indicated deficiencies, and a time shall be set within which such amendment shall be filed. If the Statement of Economic Interests, in either its original or amended form, is found to be adequate as filed, the legislator's filing shall be deemed in full compliance with this section as to the information disclosed thereon.
  - D. Ten percent of the membership of a house, on the basis of newly discovered facts, may in writing

request the house in which those members sit, in accordance with the rules of that house, to review the Statement of Economic Interests of another member of that house in order to determine the adequacy of his filing. In accordance with the rules of each house, each Statement of Economic Interests shall be promptly reviewed, the adequacy of the filing determined, and notice given in writing to the legislator whose Statement is in issue. Should it be determined that the Statement requires correction, augmentation or revision, the legislator involved shall be directed to make the changes required within such time as shall be set under the rules of each house.

If a legislator, after having been notified in writing in accordance with the rules of the house in which he sits that his Statement is inadequate as filed, fails to amend his Statement so as to come into compliance within the time limit set, he shall be subject to disciplinary action by the house in which he sits. No legislator shall vote on any question relating to his own Statement.