

1994 SESSION

INTRODUCED

LD2187759

HOUSE BILL NO. 935

Offered January 25, 1994

A BILL to amend and reenact §§ 2.1-639.15 and 2.1-639.41 of the Code of Virginia, relating to the conflict of interests laws; disclosure forms, including disclosure of certain real estate and lease interests.

Patrons—Purkey, Bloxom, Cox, Dillard, Giesen, Howell, Ingram, Kidd, Marshall, Martin, McClure, Mims, Nelms, Reid, Rhodes, Rollison, Sherwood, Tata, Wagner and Wardrup; Senators: Earley and Stolle

Referred to Committee on Privileges and Elections

Be it enacted by the General Assembly of Virginia:

1. That §§ 2.1-639.15 and 2.1-639.41 of the Code of Virginia are amended and reenacted as follows:

§ 2.1-639.15. Disclosure form.

The disclosure form to be used for filings required by § 2.1-639.13 A and D, and § 2.1-639.14 A and D shall be substantially as follows:

STATEMENT OF ECONOMIC INTERESTS.

Name

Office or position held or sought

Home address

Names of members of immediate family

DEFINITIONS AND EXPLANATORY MATERIAL.

"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.

"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.

"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.

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 9. 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

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11/2/22 5:30

56 or paid director of a business?

57 EITHER check NO / / OR check YES / / and complete

58 Schedule A.

59 2. Personal Liabilities.

60 Do you or a member of your immediate family owe more than
61 \$10,000 to any one creditor including contingent liabilities?
62 (Exclude debts to any government and loans secured by recorded
63 liens on property at least equal in value to the loan.)

64 EITHER check NO / / OR check YES / / and complete

65 Schedule B.

66 3. Securities.

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

71 EITHER check NO / / OR check YES / / and complete

72 Schedule C.

73 4. Payments for Talks, Meetings, and Publications.

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

79 EITHER check NO / / OR check YES / / and complete

80 Schedule D.

81 5. Gifts, Travel, and Business Entertainment.

82 During the past 12 months did a business, government, or
83 individual other than a relative or personal friend furnish
84 you with tickets to sporting events or shows, travel expenses,
85 meals or lodging, favors, services, property, loans, money,
86 gifts, or anything else of value
87 the total value of which exceeded \$200 and for which you
88 neither paid nor rendered, services in exchange? Account for
89 all business entertainment (except if related to your private
90 profession or occupation) even if unrelated to your official
91 duties.

92 EITHER check NO / / OR check YES / / and complete

93 Schedule E.

94 6. Salary and Wages.

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

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

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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.

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? (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 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 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 located in Virginia (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, 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 Government 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 with a governmental agency? Account for all such contracts whether or not your interest is reported in schedules F, H-1, or H-2.

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

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

169of.....to wit:

170 The foregoing disclosure form was acknowledged before me

171 This.....day of.....19.. by

172 Notary Public

173 My commission expires.....

174 (Return only if needed to complete Statement.)

175

176 SCHEDULES

177 to

178 STATEMENT OF ECONOMIC INTERESTS

179 NAME.....

180 SCHEDULE A - OFFICES AND DIRECTORSHIPS.

181 Identify each business of which you or a member of your

182 immediate family is a paid officer or paid director.

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184

185 Name of Business	Address of Business	Position Held
186 _____	_____	_____
187 _____	_____	_____
188 _____	_____	_____
189 _____	_____	_____
190 _____	_____	_____

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RETURN TO ITEM 2

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196 SCHEDULE B - PERSONAL LIABILITIES.

197 Report personal liability by checking each category. Report only

198 debts in excess of \$10,000. Do not report debts to any government.

199 Do not report loans secured by recorded liens on property at least

200 equal in value to the loan.

201 Report contingent liabilities below and indicate which debts are contingent.

202 1. My personal debts are as follows:

203

204 Check	205 Check one	
206 appropriate	\$10,001 to	More than
categories	\$50,000	\$50,000
207		
208 Banks	_____	_____
209 Savings and loan associations	_____	_____
210 Other loan or finance companies	_____	_____
211 Insurance companies	_____	_____
212 Stock, commodity or other brokerage	_____	_____
213 companies	_____	_____
214 Other businesses:		
215 (State principal business activity for each		
216 creditor.)	_____	_____
217 _____	_____	_____
218 _____	_____	_____
219 Individual creditors:		
220 (State principal business or		
221 occupation of each creditor.)	_____	_____
222 _____	_____	_____
223 _____	_____	_____
224		

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225 2. The personal debts of the members of my immediate family are as

226 follows:

227			
228	Check	Check one	
229	appropriate	\$10,001 to	More than
230			
231	categories	\$50,000	\$50,000
232	Banks	_____	_____
233	Savings and loan associations	_____	_____
234	Other loan or finance companies	_____	_____
235	Insurance companies	_____	_____
236	Stock, commodity or other brokerage	_____	_____
237	companies	_____	_____
238	Other businesses:		
239	(State principal business activity		
240	for each creditor.)	_____	_____
241	_____	_____	_____
242	Individual creditors:		
243	(State principal business or		
244	occupation of each creditor.)	_____	_____
245	_____	_____	_____
246	_____	_____	_____

247
248 RETURN TO ITEM 3
249

250 SCHEDULE C - SECURITIES.

251	"Securities" INCLUDES stocks, bonds,	"Securities" EXCLUDES
252	mutual funds, money market funds,	certificates of deposit,
253	imited partnerships, and commodity	annuity contracts, and
254	futures contracts.	insurance policies.
255	Identify each business or Virginia governmental entity in which you	
256	or a member of your immediate family, directly or indirectly,	
257	separately or together, own securities valued in excess of \$10,000.	
258	Do not list U.S. Bonds or other government securities not issued by	
259	the Commonwealth of Virginia or its authorities, agencies, or local	
260	governments. Do not list organizations that do not do business in	
261	this Commonwealth, but most major businesses conduct business in	
262	Virginia. Account for securities held in trust.	
263	If no reportable securities, check here / /	

264				
265		Type of Security	Check one	
266		(stocks, bonds, mutual	More	
267		or money market funds, \$10,001 to	than	
268	Name of Issuer	Type of Entity etc.)	\$50,000	\$50,000
269	_____	_____	_____	_____

270
271 RETURN TO ITEM 4
272

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

274 List each source from which you received during the past 12 months
275 lodging, transportation, money, or any other thing of value
276 (excluding meals or drinks coincident with a meeting) with
277 combined value exceeding \$200 for your presentation of a single
278 talk, participation in one meeting, or publication of a work in
279 your capacity as an officer or employee of your agency.
280 List payments or reimbursements by an advisory or governmental
281 agency only for meetings or travel outside the Commonwealth.

282 List a payment even if you donated it to charity.
 283 Do not list information about a payment if you returned it within
 284 60 days or if you received it from an employer already listed
 285 under Item 6 or from a source of income listed on Schedule F.
 286 If no payment must be listed, check here / /

			Type of payment (e.g. Honoraria, travel reimburse- ment, etc.)
288	Payer	Approximate Value	Circumstances
289	_____	_____	_____
290	_____	_____	_____
291	_____	_____	_____
292	_____	_____	_____

296
 297 RETURN TO ITEM 5

298 SCHEDULE E - GIFTS, TRAVEL, AND BUSINESS ENTERTAINMENT.

299 List each business, governmental entity, or individual that
 300 furnished you with tickets to sporting events or shows, travel
 301 expenses, meals or lodging, favors, services, property, loans,
 302 money, gifts, or other thing of pecuniary value,
 303 whose total value exceeded \$200 during the past 12 months
 304 and for which you neither paid nor rendered services in exchange.
 305 Do not list business entertainment related to your private
 306 profession or occupation. Do not list gifts or other things of
 307 value given by a relative or personal friend for
 308 reasons clearly unrelated to your public position.

309
 310 When calculating value, you need not consider:
 311 Meals, lodging, or hospitality that an individual furnished you
 312 at his own expense and not as a business expense if clearly
 313 unrelated to your public position, or

314
 315 Campaign contributions publicly reported as required by Chapter
 316 9 of Title ~~24.1~~ 24.2 of the Code of Virginia.

317 "Relative" means: your spouse, child, uncle, aunt, niece,
 318 nephew, or person to whom you are engaged to be married;
 319 your or your spouse's parent, grandparent, grandchild,
 320 brother, or sister; or your brother's or sister's spouse.

	Name of Business, Organization, or Individual	City or County and State	Approximate Value
322	_____	_____	_____
323	_____	_____	_____
324	_____	_____	_____
325	_____	_____	_____

329
 330 RETURN TO ITEM 6

331 SCHEDULE F - BUSINESS INTERESTS.

332 Complete this Schedule for each self or family owned business
 333 (including rental property, a farm, or consulting work),
 334 partnership, or corporation in which you or a member of your
 335 immediate family, separately or together, own an interest having
 336 a value in excess of \$10,000.
 337 If the enterprise is owned or operated under a trade, partnership,
 338 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.

Name of Business, Corporation, Partnership, Farm; Address of Rental Property	City or County and State	Nature of Enterprise (farming, law, rental property, etc.)	Gross income \$50,000 or less	More than \$50,000
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

RETURN TO ITEM 8

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.

Identify each business, the nature of the representation and the amount received by category from each such business.

Only STATE officers and employees should complete this Schedule.

Name of Business	Type of Business	Purpose of Representation	Name of Agency	Amount Received \$1,001 to \$10,000	More than \$10,000
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

SCHEDULE G-2 - PAYMENTS FOR REPRESENTATION BY ASSOCIATES.

List the businesses that have been represented before any state governmental agency, excluding any court or judge, by persons who are your partners, associates or others with whom you have a close financial association and who received total compensation in excess of \$1,000 for such representation during the past 12 months, excluding representation consisting solely of the filing of mandatory papers.

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 government agency
_____	_____
_____	_____
_____	_____
_____	_____

SCHEDULE G-3 - PAYMENTS FOR REPRESENTATION GENERALLY.

395 Indicate below types of businesses that operate in Virginia to
 396 which services were furnished by you or persons with whom you have
 397 a close financial association and for which total compensation in
 398 excess of \$1,000 was received during the past 12 months.
 399 Identify opposite each category of businesses listed below (i) the
 400 type of business, (ii) the type of service rendered and (iii) the
 401 value of the compensation received for all businesses falling
 402 within each category.

			Value of Compensation	
	Check if	Type of	\$1,001	More
	services	service	to	than
	were rendered	rendered	\$10,000	\$10,000
408	Electric utilities	_____	_____	_____
409	Gas utilities	_____	_____	_____
410	Telephone utilities	_____	_____	_____
411	Water utilities	_____	_____	_____
412	Cable television	_____	_____	_____
413	companies	_____	_____	_____
414	Interstate	_____	_____	_____
415	transportation	_____	_____	_____
416	companies	_____	_____	_____
417	Intrastate	_____	_____	_____
418	transportation	_____	_____	_____
419	companies	_____	_____	_____
420	Oil or gas	_____	_____	_____
421	retail	_____	_____	_____
422	companies	_____	_____	_____
423	Banks	_____	_____	_____
424	Savings and	_____	_____	_____
425	loan	_____	_____	_____
426	associations	_____	_____	_____
427	Loan or finance	_____	_____	_____
428	companies	_____	_____	_____
429	Manufacturing	_____	_____	_____
430	companies	_____	_____	_____
431	(state type of	_____	_____	_____
432	product,	_____	_____	_____
433	e.g., textile,	_____	_____	_____
434	furniture	_____	_____	_____
435	etc.)	_____	_____	_____
436	Mining companies	_____	_____	_____
437	Life insurance	_____	_____	_____
438	companies	_____	_____	_____
439	Casualty insurance	_____	_____	_____
440	companies	_____	_____	_____
441	Other insurance	_____	_____	_____
442	companies	_____	_____	_____
443	Retail companies	_____	_____	_____
444	Beer, wine or	_____	_____	_____
445	liquor companies	_____	_____	_____
446	or distributors	_____	_____	_____
447	Trade associations	_____	_____	_____
448	Professional	_____	_____	_____
449	associations	_____	_____	_____
450	Associations of	_____	_____	_____
451	public employees	_____	_____	_____

452	or officials	_____	_____	_____	_____
453	Counties, cities or	_____	_____	_____	_____
454	towns	_____	_____	_____	_____
455	Labor organizations	_____	_____	_____	_____
456	Other	_____	_____	_____	_____

RETURN TO ITEM 9

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

460 List real estate located in Virginia other than your principal
 461 residence in which you or a member of your immediate family hold
 462 an interest, including a partnership interest, option, easement,
 463 or land contract, valued at \$10,000 or more. You may list each
 464 parcel of real estate individually if you wish.

466	List the counties	Describe the type of	If the real estate
467	and cities in which	real estate you own	is owned or recorded
468	you own real estate	in each county or city	in a name other than
469		(business, recreational,	your own, list that
470		apartment, commercial,	name
471		open land, etc.)	
472	_____	_____	_____
473	_____	_____	_____
474	_____	_____	_____
475	_____	_____	_____
476	_____	_____	_____

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

479 List real estate located in your county, city, or town, and any
 480 contiguous county, city, or town other than your principal
 481 residence in which you or a member of your immediate family hold
 482 an interest, including a partnership interest, option, easement,
 483 or land contract, valued at \$10,000 or more. You may list each
 484 parcel of real estate individually if you wish.

486	List the counties	Describe the type of	If the real estate
487	and cities in which	real estate you own	is owned or recorded
488	you own real estate	in each county or city	in a name other than
489		(business, recreational,	your own, list that
490		apartment, commercial,	name
491		open land, etc.)	
492	_____	_____	_____
493	_____	_____	_____
494	_____	_____	_____
495	_____	_____	_____
496	_____	_____	_____

498 SCHEDULE J - REAL ESTATE CONTRACTS WITH GOVERNMENT AGENCIES.

499 List all contracts with a governmental agency for the sale, lease
 500 or exchange of real estate in which you or a member of your immediate
 501 family holds an interest, including a corporate, partnership or trust
 502 interest, option, easement, or land contract, valued at \$10,000
 503 or more.

504 State officers and employees report contracts with state agencies.

505 Local officers and employees report contracts with local agencies.

506			
507	List your real	List each	State the annual

508 estate interest governmental agency income from the
 509 and the person which is a party to contract, and the
 510 or entity, the contract.and in- amount, if any, of
 511 including the dicate the county income you or any
 512 type of entity, or city where the real immediate family
 513 which is party estate is located member derives
 514 to the contract. annually from the
 515 Describe any contract.
 516 management role
 517 and the percentage
 518 ownership interest
 519 you or your
 520 immediate family
 521 member has in the
 522 real estate or entity.

523 _____
 524 _____
 525 _____
 526 _____
 527 _____
 528 _____

529
 530 § 2.1-639.41. Disclosure form.

531 A. The disclosure form to be used for filings required by § 2.1-639.40 A and B shall be substantially
 532 as follows:

533 STATEMENT OF ECONOMIC INTERESTS.

534 Name
 535 Office or position held or sought
 536 Home address
 537 Names of members of immediate family

538 DEFINITIONS AND EXPLANATORY MATERIAL.

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

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

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

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

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

stated.

COMPLETE ITEMS 1 THROUGH 9. 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.

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 a legislator?

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

5. Gifts, Travel, and Business Entertainment.

During the past 12 months did a business, government, or individual other than a relative or personal friend furnish you with tickets to sporting events or shows, travel expenses, meals or lodging, favors, services, property, loans, money, gifts, or anything else of value the total value of which exceeded \$200 and for which you neither paid nor rendered, services in exchange? 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.

- 621 8A. Did you represent any businesses before any state governmental
622 agencies, excluding courts or judges, for which you received
623 total compensation during the past 12 months in excess of \$1,000,
624 excluding compensation for other services to such businesses and
625 representation consisting solely of the filing of mandatory
626 papers?
627 EITHER check NO / / OR check YES / / and complete
628 Schedule G-1.
- 629 8B. Subject to the same exceptions as in 8A, did persons with whom
630 you have a close financial association (partners, associates or
631 others) represent any businesses before any state governmental
632 agency for which total compensation was received during the past
633 12 months in excess of \$1,000?
634 EITHER check NO / / OR check YES / / and complete
635 Schedule G-2.
- 636 8C. Did you or persons with whom you have a close financial
637 association furnish services to businesses operating in Virginia
638 for which total compensation in excess of \$1,000 was received
639 during the past 12 months?
640 EITHER check NO / / OR check YES / / and complete
641 Schedule G-3.
- 642 9. Real Estate.
643 Do you or a member of your immediate family hold an interest,
644 including a partnership interest, valued at \$10,000 or more in
645 real property located in Virginia (other than your principal
646 residence) for which you have not already listed the full address
647 on Schedule F? Account for real estate held in trust.
648 EITHER check NO / / OR check YES / / and complete
649 Schedule H.
- 650 10. *Real Estate Contracts with State Agencies.*
651 *Do you or a member of your immediate family hold an interest*
652 *valued at more than \$10,000 in real estate, including a*
653 *corporate, partnership, or trust interest, option,*
654 *easement, or land contract, which real estate is the*
655 *subject of a contract with a state governmental agency? Account*
656 *for all such contracts whether or not your interest is reported*
657 *in schedules F or H.*
658 *EITHER check NO / / OR check YES / / and complete*
659 *Schedule J.*

660 Statements of Economic Interests are open for public inspection.

661
662 AFFIRMATION

663 In accordance with the rules of the house in which I serve, if I
664 receive a request that this disclosure statement be corrected,
665 augmented, or revised in any respect, I hereby pledge that I shall
666 respond promptly to the request. I understand that if a determination
667 is made that the statement is insufficient, I will satisfy such
668 request or be subjected to disciplinary action of my house.

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

671 Signature.....

672 Commonwealth of Virginia

673of.....to wit:

674 The foregoing disclosure form was acknowledged before me

675 This.....day of.....19.. by

676 Notary Public

677 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	Check one More than \$50,000
Banks	_____	_____
Savings and loan associations	_____	_____
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 family are as follows:

Check appropriate	Check one \$10,001 to More than
_____	_____

734			
735	categories	\$50,000	\$50,000
736	Banks	_____	_____
737	Savings and loan associations	_____	_____
738	Other loan or finance companies	_____	_____
739	Insurance companies	_____	_____
740	Stock, commodity or other brokerage	_____	_____
741	companies	_____	_____
742	Other businesses:		
743	(State principal business activity		
744	for each creditor.)	_____	_____
745	_____	_____	_____
746	Individual creditors:		
747	(State principal business or		
748	occupation of each creditor.)	_____	_____
749	_____	_____	_____
750	_____	_____	_____

RETURN TO ITEM 3

754 SCHEDULE C - SECURITIES.

755	"Securities" INCLUDES stocks, bonds,	"Securities" EXCLUDES
756	mutual funds, money market funds,	certificates of deposit,
757	imited partnerships, and commodity	annuity contracts, and
758	futures contracts.	insurance policies.

759 Identify each business or Virginia governmental entity in which you
 760 or a member of your immediate family, directly or indirectly,
 761 separately or together, own securities valued in excess of \$10,000.
 762 Do not list U.S. Bonds or other government securities not issued by
 763 the Commonwealth of Virginia or its authorities, agencies, or local
 764 governments. Do not list organizations that do not do business in
 765 this Commonwealth, but most major businesses conduct business in
 766 Virginia. Account for securities held in trust.

767 If no reportable securities, check here / /

768				
769		Type of Security	Check one	
770		(stocks, bonds, mutual	More	
771	Type of	or money market funds, \$10,001 to	than	
772	Name of Issuer	Entity etc.)	\$50,000	\$50,000
773	_____	_____	_____	_____

RETURN TO ITEM 4

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

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

784 List payments or reimbursements by the Commonwealth only for
 785 meetings or travel outside the Commonwealth.

786 List a payment even if you donated it to charity.

787 Do not list information about a payment if you returned it within
 788 60 days or if you received it from an employer already listed
 789 under Item 6 or from a source of income listed on Schedule F.

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

Type of payment
(e.g. Honoraria,
travel reimburse-
ment, etc.)

Payer Approximate Value Circumstances

RETURN TO ITEM 5

SCHEDULE E - GIFTS, TRAVEL, AND BUSINESS ENTERTAINMENT.

List each business, governmental entity, or individual that furnished you with tickets to sporting events or shows, travel expenses, meals or lodging, favors, services, property, loans, money, gifts, or other thing of pecuniary value, whose total value exceeded \$200 during the past 12 months and for which you neither paid nor rendered services in exchange. 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.

When calculating value, you need not consider:
Meals, lodging, or hospitality that an individual furnished you at his own expense and not as a business expense if clearly unrelated to your public position, or

Campaign contributions publicly reported as required by Chapter 9 of Title ~~24.1~~ 24.2 of the Code of Virginia.

"Relative" means: your spouse, child, uncle, aunt, niece, nephew, or person to whom you are engaged to be married; your or your spouse's parent, grandparent, grandchild, brother, or sister; or your brother's or sister's spouse.

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

RETURN TO ITEM 6

SCHEDULE F - BUSINESS INTERESTS.

Complete this Schedule for each self 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; 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.

847
 848 Name of Gross income
 849 Business,
 850 Corporation,
 851 Partnership,
 852 Farm; Address City or Nature of Enterprise
 853 of Rental County (farming, law, \$50,000 More than
 854 Property and State rental property, etc.) or less \$50,000
 855 _____
 856 _____
 857 _____
 858

859 RETURN TO ITEM 8

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

861 List the businesses you represented before any state governmental
 862 agency, excluding any court or judge, for which you received
 863 total compensation during the past 12 months in excess of \$1,000,
 864 excluding compensation for other services to such businesses and
 865 representation consisting solely of the filing of mandatory
 866 papers.

867 Identify each business, the nature of the representation and the
 868 amount received by category from each such business.

869
 870 Amount Received
 871 Name of Type of Purpose of Name of \$1,001 to More than
 872 Business Business Representation Agency \$10,000 \$10,000
 873 _____
 874 _____
 875 _____
 876 _____
 877

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

879 List the businesses that have been represented before any state
 880 governmental agency, excluding any court or judge, by persons who
 881 are your partners, associates or others with whom you have a close
 882 financial association and who received total compensation in
 883 excess of \$1,000 for such representation during the past 12
 884 months, excluding representation consisting solely of the filing
 885 of mandatory papers.

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

889
 890 Type of business Name of state government agency
 891 _____
 892 _____
 893 _____
 894 _____
 895

896 SCHEDULE G-3 - PAYMENTS FOR REPRESENTATION GENERALLY.

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

901 Identify opposite each category of businesses listed below (i) the
 902 type of business, (ii) the type of service rendered and (iii) the
 903 value of the compensation received for all businesses falling

904 within each category.

905				Value of	Compensation
906				\$1,001	More
907		Check if	Type of	to	than
908		services	service		
909		were rendered	rendered	\$10,000	\$10,000
910	Electric utilities	_____	_____	_____	_____
911	Gas utilities	_____	_____	_____	_____
912	Telephone utilities	_____	_____	_____	_____
913	Water utilities	_____	_____	_____	_____
914	Cable television	_____	_____	_____	_____
915	companies	_____	_____	_____	_____
916	Interstate	_____	_____	_____	_____
917	transportation	_____	_____	_____	_____
918	companies	_____	_____	_____	_____
919	Intrastate	_____	_____	_____	_____
920	transportation	_____	_____	_____	_____
921	companies	_____	_____	_____	_____
922	Oil or gas	_____	_____	_____	_____
923	retail	_____	_____	_____	_____
924	companies	_____	_____	_____	_____
925	Banks	_____	_____	_____	_____
926	Savings and	_____	_____	_____	_____
927	loan	_____	_____	_____	_____
928	associations	_____	_____	_____	_____
929	Loan or finance	_____	_____	_____	_____
930	companies	_____	_____	_____	_____
931	Manufacturing	_____	_____	_____	_____
932	companies	_____	_____	_____	_____
933	(state type of	_____	_____	_____	_____
934	product,	_____	_____	_____	_____
935	e.g., textile,	_____	_____	_____	_____
936	furniture	_____	_____	_____	_____
937	etc.)	_____	_____	_____	_____
938	Mining companies	_____	_____	_____	_____
939	Life insurance	_____	_____	_____	_____
940	companies	_____	_____	_____	_____
941	Casualty insurance	_____	_____	_____	_____
942	companies	_____	_____	_____	_____
943	Other insurance	_____	_____	_____	_____
944	companies	_____	_____	_____	_____
945	Retail companies	_____	_____	_____	_____
946	Beer, wine or	_____	_____	_____	_____
947	liquor companies	_____	_____	_____	_____
948	or distributors	_____	_____	_____	_____
949	Trade associations	_____	_____	_____	_____
950	Professional	_____	_____	_____	_____
951	associations	_____	_____	_____	_____
952	Associations of	_____	_____	_____	_____
953	public employees	_____	_____	_____	_____
954	or officials	_____	_____	_____	_____
955	Counties, cities or	_____	_____	_____	_____
956	towns	_____	_____	_____	_____
957	Labor organizations	_____	_____	_____	_____
958	Other	_____	_____	_____	_____
959		_____	_____	_____	_____

RETURN TO ITEM 9

960
 961 SCHEDULE H - REAL ESTATE.
 962 List real estate located in Virginia other than your principal
 963 residence in which you or a member of your immediate family hold
 964 an interest, including a partnership interest, option, easement,
 965 or land contract, valued at \$10,000 or more. You may list each
 966 parcel of real estate individually if you wish.
 967
 968 List the counties Describe the type of If the real estate
 969 and cities in which real estate you own is owned or recorded
 970 you own real estate in each county or city in a name other than
 971 (business, recreational, your own, list that
 972 apartment, commercial, name
 973 open land, etc.)
 974 _____
 975 _____
 976 _____
 977 _____
 978 _____
 979
 980 SCHEDULE J - REAL ESTATE CONTRACTS WITH STATE GOVERNMENT AGENCIES.
 981 List all contracts with a state governmental agency for the sale, lease
 982 or exchange of real estate in which you or a member of your immediate
 983 family holds an interest, including a corporate, partnership or trust
 984 interest, option, easement, or land contract, valued at \$10,000
 985 or more.

986			
987	List your real	List each state	State the annual
988	estate interest	governmental agency	income from the
989	and the person	which is a party to	contract, and the
990	or entity,	the contract and in-	amount, if any, of
991	including the	dicade the county	income you or any
992	type of entity,	or city where the	immediate family
993	which is party	estate is located.	member derives
994	to the contract.		annually from the
995	Describe any		contract.
996	management role		
997	and the percentage		
998	ownership interest		
999	you or your		
1000	immediate family		
1001	member has in the		
1002	real estate or entity.		
1003	_____	_____	_____
1004	_____	_____	_____
1005	_____	_____	_____
1006	_____	_____	_____
1007	_____	_____	_____
1008	_____	_____	_____
1009			

1010 B. Any legislator who makes a knowing misstatement of a material fact on the Statement of
 1011 Economic Interests shall be subject to disciplinary action for such violations by the house in which the
 1012 legislator sits.

1013 C. In accordance with the rules of each house, the Statement of Economic Interests of all members
 1014 of each house shall be reviewed. If a legislator's Statement is found to be inadequate as filed, the
 1015 legislator shall be notified in writing, directed to file an amended Statement correcting the indicated
 1016 deficiencies, and a time set within which such amendment shall be filed. If the Statement of Economic

1017 Interests, in either its original or amended form, is found to be adequate as filed, the legislator's filing
1018 shall be deemed in full compliance with this section as to the information disclosed thereon.

1019 D. Ten percent of the membership of a house, on the basis of newly discovered facts, may in writing
1020 request the house in which those members sit, in accordance with the rules of that house, to review the
1021 Statement of Economic Interests of another member of that house in order to determine the adequacy of
1022 his filing. In accordance with the rules of each house, each Statement of Economic Interests shall be
1023 promptly reviewed, the adequacy of the filing determined, and notice given in writing to the legislator
1024 whose Statement is in issue. Should it be determined that the Statement requires correction,
1025 augmentation or revision, the legislator involved shall be directed to make the changes required within
1026 such time as shall be set under the rules of each house.

1027 If a legislator, after having been notified in writing in accordance with the rules of the house in
1028 which he sits that his Statement is inadequate as filed, fails to amend his Statement so as to come into
1029 compliance within the time limit set, he shall be subject to disciplinary action by the house in which he
1030 sits. No legislator shall vote on any question relating to his own Statement.

1031 **2. That the provisions of this act shall become effective on January 1, 1995.**

1032 #