977550803

HOUSE BILL NO. 2090

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AMENDMENT IN THE NATURE OF A SUBSTITUTE (Proposed by the House Committee on Privileges and Elections) (Patron Prior to Substitute—Delegate Watkins)

House Amendments in [] — February 3, 1997

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.

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.

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Name Office or position held or sought Home address

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Names of members of immediate family

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DEFINITIONS AND EXPLANATORY MATERIAL.

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"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.

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"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.

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"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.

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"Close financial association" does not mean an association based on the receipt of retirement benefits or deferred compensation from a business by which the person filing this statement is no longer employed. "Close financial association" does not include an association based on 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.

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"Gift" means any gratuity, favor, discount, entertainment, 50 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

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 ${f 56}$ used. "Gift" shall not include honorary degrees and presents from 57 relatives. "Relative" means the donee's spouse, child, uncle, aunt, 58 niece, or nephew; a person to whom the donee is 59 engaged to be married; the donee's or his spouse's parent, 60 grandparent, grandchild, brother, or sister; or the donee's 61 brother's or sister's spouse. 62 63 64 TRUST. If you or your immediate family, separately or together, 65 are the only beneficiaries of a trust, treat the trust's assets 66 as if you own them directly. If you or your immediate family has 67 a proportional interest in a trust, treat that proportion of the 68 trust's assets as if you own them directly. For example, if you 69 and your immediate family have a one-third interest in a trust, 70 complete your Statement as if you own one-third of each of the 71 trust's assets. If you or a member of your immediate family 72 created a trust and can revoke it without the beneficiaries' 73 consent, treat its assets as if you own them directly. 74 75 REPORT TO THE BEST OF INFORMATION AND BELIEF. Information 76 required on this Statement must be provided on the basis of the 77 best knowledge, information and belief of the individual filing 78 the Statement as of the date of this report unless otherwise 79 stated. 80 81 COMPLETE ITEMS 1 THROUGH 10. REFER TO SCHEDULES ONLY IF DIRECTED. 82 83 You may attach additional explanatory information. 84 85 1. Offices and Directorships. 86 Are you or a member of your immediate family a paid officer 87 or paid director of a business? 88 EITHER check NO / / OR check YES / / and complete 89 Schedule A. 90 2. Personal Liabilities. 91 Do you or a member of your immediate family owe more than 92 \$10,000 to any one creditor including contingent liabilities? 93 (Exclude debts to any government and loans secured by recorded 94 liens on property at least equal in value to the loan.) 95 EITHER check NO $\ / \ \ /$ OR check YES $\ / \ \ /$ and complete 96 Schedule B. 97 3. Securities. 98 Do you or a member of your immediate family, directly or 99 indirectly, separately or together, own securities valued 100 in excess of \$10,000 invested in one business? Account for 101 mutual funds, limited partnerships and trusts. 102 EITHER check NO / / OR check YES / / and complete 103 Schedule C. 104 4. Payments for Talks, Meetings, and Publications. 105 During the past 12 months did you receive lodging, 106 transportation, money, or anything else of value with a 107 combined value exceeding \$200 for a single talk, meeting, 108 or published work in your capacity as an officer or employee of 109 your agency? 110 EITHER check NO / / OR check YES / / and complete 111 Schedule D.

112 5. Gifts.

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113
        During the past 12 months did a business, government, or
114
        individual other than a relative or personal friend furnish
115
        you with any gift or gifts the total value of which
116
        exceeded $200 $100 and for which you neither paid nor rendered
117
        services in exchange? Account for all business entertainment
118
         (except if related to your private profession or occupation)
119
        even if unrelated to your official duties.
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        EITHER check NO / / OR check YES / / and complete
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        Schedule E.
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122 6. Salary and Wages.

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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 / /.

130 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 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.
- 148 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.)

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 FITHER shock NO / / OR shock VES / / and complete

155 EITHER check NO / / OR check YES / / and complete 156 Schedule G-2.

- 163 9. Real Estate.
- 164 9A. State Officers and Employees.

165 Do you or a member of your immediate family hold an interest, 166 including a partnership interest, valued at \$10,000 or more in 167 real property (other than your principal residence) for which 168 you have not already listed the full address on Schedule F? HB2090EH1 4 of 25

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169
        Account for real estate held in trust.
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        EITHER check NO / / OR check YES / / and complete
171
        Schedule H-1.
172
   9B. Local Officers and Employees.
173
        Do you or a member of your immediate family hold an interest,
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        including a partnership interest, valued at $10,000 or more in
175
        real property located in the county, city or town in which you
176
        serve or in a county, city or town contiguous to the county,
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        city or town in which you serve (other than your principal
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        residence) for which you have not already listed the full
179
        address on Schedule F? Account for real estate held in trust.
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        EITHER check NO / / OR check YES / / and complete
181
        Schedule H-2.
182 10. Real Estate Contracts with Government Agencies.
183
         Do you or a member of your immediate family hold an interest
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         valued at more than $10,000 in real estate, including a
185
         corporate, partnership, or trust interest, option,
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         easement, or land contract, which real estate is the
187
         subject of a contract, whether pending or completed within
188
         the past twelve months, with a governmental agency? If the
189
         real estate contract provides for the leasing of the property
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         to a governmental agency, do you or a member of your immediate
191
         family hold an interest in the real estate valued at more than
192
         $1,000? Account for all such contracts whether or not your
193
         interest is reported in schedules F, H-1, or H-2. This
194
         requirement to disclose an interest in a lease does not apply
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         to an interest derived through an ownership interest in a
196
         business unless the ownership interest exceeds three percent
197
         of the total equity of the business.
198
         EITHER check NO / / OR check YES / / and complete
199
         Schedule I.
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201
     Statements of Economic Interests are open for public inspection.
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203
                          AFFIRMATION BY ALL FILERS
204
205
      I swear or affirm that the foregoing information is full, true and
206 correct to the best of my knowledge.
207
208
      Signature.....
209
      Commonwealth of Virginia
210
      .....of......to wit:
211
      The foregoing disclosure form was acknowledged before me
212
      213
      Notary Public
214
      My commission expires.....
215
     (Return only if needed to complete Statement.)
216
217
                                SCHEDULES
218
                                    t.o
219
                      STATEMENT OF ECONOMIC INTERESTS
220
221
                                         NAME.....
222
223
   SCHEDULE A - OFFICES AND DIRECTORSHIPS.
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225
           Identify each business of which you or a member of your
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Name of Business	Address of Business	Po	sition
SCHEDULE B - PERSONAL	LIABILITIES.		
Report contingent l contingent. 1. My personal debts	iabilities below and indicates are as follows:	te which (debts a
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	\$1		one More
Check appropriate categories	\$10 \$50	Check	one More \$50,
Check appropriate categories Banks Savings institutions	\$1 \$5 	Check 0,001 to 0,000	one More \$50,
Check appropriate categories Banks Savings institutions Other loan or finance	\$1 \$5 companies	Check 0,001 to 0,000	one More \$50,
Check appropriate categories Banks Savings institutions Other loan or finance Insurance companies Stock, commodity or ot	\$10 \$50 companies	Check 0,001 to 0,000	one More \$50,
Check appropriate categories Banks Savings institutions Other loan or finance Insurance companies Stock, commodity or ot companies	\$10 \$50 companies ther brokerage	Check 0,001 to 0,000	one More \$50,
Check appropriate categories Banks Savings institutions Other loan or finance Insurance companies Stock, commodity or ot companies Other businesses:	\$10 \$50 companies ther brokerage	Check 0,001 to 0,000	one More \$50,
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Check appropriate categories Banks Savings institutions Other loan or finance Insurance companies Stock, commodity or ot companies Other businesses: (State principal busin creditor.)	\$10 \$50 companies ther brokerage	Check 0,001 to 0,000	one More \$50,
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Check appropriate categories Banks Savings institutions Other loan or finance Insurance companies Stock, commodity or ot companies Other businesses: (State principal busir creditor.)	\$10 \$50 companies cher brokerage ness activity for each ness or	Check 0,001 to 0,000	one More \$50,
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SCHEDULE D	- PAYMENTS FOR TALKS, M	EETINGS, AND PUBL	ICATIONS.
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Payer		Circumstances	ment, etc.
SCHEDULE E			RETURN TO I

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SCHEDULE F - B	USINESS INT	ERESTS.		
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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

							d complete		
Name Type Pur- Name \$1,001 More of of pose of to than Busi- Busi- of Agen- \$10,000 \$10,000 ness ness Repre- cy senta- tion \$1,001 \$10,001 \$50,001 \$100,001 \$. to to to to \$10,000 \$50,000 \$100,000 \$250,000 SCHEDULE G-2 - PAYMENTS FOR REPRESENTATION BY ASSOCIATES. List the businesses that have been represented before any segovernmental agency, excluding any court or judge, by person are your partners, associates or others with whom you have afinancial 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 foof mandatory papers and subsequent representation regarding mandatory papers filed by your partners, associates or others.							Amount 1	Received	
SCHEDULE G-2 - PAYMENTS FOR REPRESENTATION BY ASSOCIATES. List the businesses that have been represented before any so governmental agency, excluding any court or judge, by person are your partners, associates or others with whom you have a 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 foof mandatory papers and subsequent representation regarding mandatory papers filed by your partners, associates or others.	of d Busi- D	of Busi-	pose of Repre- senta-	of Agen-	to 	than			
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SCHEDULE G-2 - PAYMENTS FOR REPRESENTATION BY ASSOCIATES. List the businesses that have been represented before any segmental agency, excluding any court or judge, by personare your partners, associates or others with whom you have a 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 formulatory papers and subsequent representation regarding mandatory papers filed by your partners, associates or others.									
List the businesses that have been represented before any segmental agency, excluding any court or judge, by personare your partners, associates or others with whom you have a 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 formulatory papers and subsequent representation regarding mandatory papers filed by your partners, associates or other									
Identify such businesses by type and also name the state governmental agencies before which such person appeared on lof such businesses.	CHEDUI List	LE G-2	2 2 - PAYM busines	ENTS F	OR REPRES	SENTATION	BY ASSOC	IATES.	state
Only STATE officers and employees should complete this Scheo	List gove are find exce mont of t mand with	t the ernmer your ancial ess of ths, emandat datory h whor	busines ntal age partner l associ f \$1,000 excludin tory pap y papers m you ha such bu ntal age	ENTS F ses th ncy, e s, ass ation for s g repr ers an filed ve a c siness ncies	OR REPRES at have heading ociates of and who representation of subsequents of the subseq	SENTATION Deen repr any cour or others received esentatio on consis uent repr partners ancial as	BY ASSOCIATION ASSOCIATION SO NAME OF THE PROPERTY OF THE PROP	IATES. efore any e, by pers m you have pensation the past i ly of the n regardin tes or oth he state	state sons w e a cl in 12 filin ng the hers
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SCHEDULE G-3 -	PAYMENTS	5 FOR	REPRESI	ENTATION	I GENERA	ALLY	7.	
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						RETURN T	O ITEM 9
CHEDULE H-1	. – REAI	L ESTATE	- STATE	OFFICERS	AND EMI	PLOYEES.	
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of real e	state i	individua	ally if y	you wish.			

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List each location (state, and county or city) where you own real estate.	Describe the type of real estate you own in each location (business, recreational, apartment, commercial, open land, etc.).	-
• • • • • • • • • • • • • • • • • • • •	• • • • • • • • • • • • • • • • • • • •	
SCHEDULE H-2 - REAL	ESTATE - LOCAL OFFICERS AN	D EMPLOYEES.
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an interest, incluor land contract,		st, option, easeme . You may list eac
an interest, incluor land contract,	uding a partnership intereduction walued at \$10,000 or more tate individually if you was a second control of the control of th	st, option, easements. You may list each ish.
an interest, inclusion land contract, parcel of real est	Describe the type of real estate you own	st, option, easemed. You may list each ish. If the real estate is owned or record in a name other to
an interest, inclusion or land contract, parcel of real est	Describe the type of real estate you own in each county or city (business, recreational, apartment, commercial, open land, etc.).	st, option, easemed. You may list each ish. If the real estate is owned or recording a name other to your own, list the name.
an interest, inclusion or land contract, parcel of real est	Describe the type of real estate you own in each county or city (business, recreational, apartment, commercial, open land, etc.).	st, option, easemed. You may list each ish. If the real estate is owned or recording a name other to your own, list the name.
an interest, incluor land contract, parcel of real est	Describe the type of real estate you own in each county or city (business, recreational, apartment, commercial, open land, etc.).	st, option, easemed. You may list each ish. If the real estate is owned or recording a name other to your own, list the name.
an interest, incluor land contract, parcel of real est	Describe the type of real estate you own in each county or city (business, recreational, apartment, commercial, open land, etc.).	st, option, easemed. You may list each ish. If the real estate is owned or recording a name other to your own, list the name.
an interest, inclusion or land contract, parcel of real est	Describe the type of real estate you own in each county or city (business, recreational, apartment, commercial, open land, etc.).	st, option, easemed. You may list each ish. If the real estate is owned or recording a name other syour own, list the name.
an interest, incluor land contract, parcel of real est	Describe the type of real estate you own in each county or city (business, recreational, apartment, commercial, open land, etc.).	st, option, easemed. You may list each ish. If the real estate is owned or recording a name other to your own, list the name. RETURN TO ITEM

List all contracts, whether pending or completed within the past twelve months, with a governmental agency for the sale or exchange of real estate in which you or a member of your immediate family holds an interest, including a corporate, partnership or trust interest, option, easement, or land contract, valued at \$10,000 or more. List all contracts with a governmental agency for the lease of real estate in which you or a member of your immediate family holds such an interest valued at

78	\$1,000 or more. Thi	s requirement to disclos	se an interest in a
9	lease does not appl	y to an interest derived	l through an ownership
0	interest in a busin	less unless the ownership	interest exceeds three
1	percent of the tota	l equity of the business	S.
2	State officers and	employees report contrac	cts with state agencies.
3	Local officers and	employees report contrac	cts with local agencies.
4			
5	List your real	List each	State the annual
6	estate interest	governmental agency	income from the
7	and the person	which is a party to	contract, and the
8	or entity,	the contract and in-	amount, if any, of
9	including the		income you or any
0	_	or city where the real	immediate family
1	which is party		member derives
2	to the contract.	estate is ideated.	annually from the
3	Describe any		
3 4			contract.
- 5	management role		
	and the percentage		
6	ownership interest		
7	you or your		
8	immediate family		
9	member has in the		
0	real estate or entity.		
1			
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3			
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6			
8 9 0 1 2	§ 2.1-639.41. Disclosure form to as follows:		§ 2.1-639.40 A and B shall be substan
3	S	STATEMENT OF ECONOMIC INT	TERESTS.
1 5	Name		
6		d or gought	
		d or sought	
7			
3	Names of members of in	mediate family	
9			
0	DEF	'INITIONS AND EXPLANATORY	MATERIAL.
1			
2	"Immediate family" me	ans (i) a spouse and (ii) any other person
3	residing in the same h	ousehold as the legislat	or, who is a dependent
4		of whom the legislator is	
5		5	-
6		person whether or not	

"Business" means a corporation, partnership, sole proprietorship, 731 firm, enterprise, franchise, association, trust or foundation, or any other individual or entity carrying on a business or profession, 733 whether or not for profit.

marriage, who receives from the legislator, or provides to the

legislator, more than one-half of his financial support.

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"Close financial association" does not mean an association based on 736 the receipt of retirement benefits or deferred compensation from a 737 business by which the legislator is no longer employed. "Close 738 financial association" does not include an association based on the 739 receipt of compensation for work performed by the legislator as an 740 independent contractor of a business that represents an entity before 741 any state governmental agency when the legislator has had no 742 communications with the state governmental agency.

743 **744**

"Gift" means any gratuity, favor, discount, entertainment, 745 hospitality, loan, forbearance, or other item having monetary value. 746 It includes services as well as gifts of transportation, local 747 travel, lodgings and meals, whether provided in-kind, by purchase 748 of a ticket, payment in advance or reimbursement after the expense 749 has been incurred. "Gift" shall not include any offer of a ticket 750 or other admission or pass unless the ticket, admission, or pass is 751 used. "Gift" shall not include honorary degrees and presents from 752 relatives. "Relative" means the donee's spouse, child, uncle, aunt, 753 niece, or nephew; a person to whom the donee is 754 engaged to be married; the donee's or his spouse's parent, grandparent, grandchild, brother, or sister; or the donee's brother's 756 or sister's spouse.

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758 TRUST. If you or your immediate family, separately or together, are 759 the only beneficiaries of a trust, treat the trust's assets as if $760\,$ you own them directly. If you or your immediate family has a 761 proportional interest in a trust, treat that proportion of the 762 trust's assets as if you own them directly. For example, if you 763 and your immediate family have a one-third interest in a trust, 764 complete your Statement as if you own one-third of each of the 765 trust's assets. If you or a member of your immediate family created 766 a trust and can revoke it without the beneficiaries' consent, treat 767 its assets as if you own them directly.

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769 REPORT TO THE BEST OF INFORMATION AND BELIEF. Information required 770 on this Statement must be provided on the basis of the best 771 knowledge, information and belief of the individual filing the 772 Statement as of the date of this report unless otherwise stated.

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

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776 You may attach additional explanatory information.

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778 1. Offices and Directorships.

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

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EITHER check NO / / OR check YES / / and complete Schedule A. 783 2. Personal Liabilities.

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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.

789 3. Securities. **790**

Do you or a member of your immediate family, directly or

791 indirectly, separately or together, own securities valued in **792** excess of \$10,000 invested in one business? Account for mutual 793 funds, limited partnerships and trusts. **794**

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.

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During the past 12 months did a business, government, or individual other than a relative or personal friend furnish you with any gift or gifts the total value of which exceeded \$200 \$100 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 / /.

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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 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 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.

844 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

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847 property (other than your principal residence) for which you have 848 not already listed the full address on Schedule F? Account for real 849 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 twelve 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 Schedules 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

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

Statements of Economic Interests are open for public inspection.

AFFIRMATION

In accordance with the rules of the house in which I serve, if I 874 receive a request that this disclosure statement be corrected, augmented, or revised in any respect, I hereby pledge that I shall 876 respond promptly to the request. I understand that if a 877 determination is made that the statement is insufficient, I will satisfy such request or be subjected to disciplinary action 879 of my house.

I swear or affirm that the foregoing information is full, true and 882 correct to the best of my knowledge.

883	
884	Signature
885	Commonwealth of Virginia
886	of to wit:
887	The foregoing disclosure form was acknowledged before me
888	This day of 19 by
889	Notary Public
890	My commission expires
891	(Return only if needed to complete Statement.)
892	
893	SCHEDULES
894	to
895	STATEMENT OF ECONOMIC INTERESTS
896	

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

Name of Business Address of Business SCHEDULE B - PERSONAL LIABILITIES. Report personal liability by checking each cadebts in excess of \$10,000. Do not report debto not report loans secured by recorded liens least equal in value to the loan. Report contingent liabilities below and indicated contingent. 1. My personal debts are as follows:	RETU	JRN TO IT: ort only overnment
SCHEDULE B - PERSONAL LIABILITIES. Report personal liability by checking each cadebts in excess of \$10,000. Do not report debto not report loans secured by recorded liens least equal in value to the loan. Report contingent liabilities below and indicated contingent. 1. My personal debts are as follows:	RETU RETU ategory. Repo ots to any go	JRN TO IT
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debts in excess of \$10,000. Do not report debt Do not report loans secured by recorded liens least equal in value to the loan. Report contingent liabilities below and indiccontingent. 1. My personal debts are as follows:	ots to any gos on property	overnment z at
Check appropriate categories	Check \$10,001 to \$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.)		
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2. The personal debts of the members of my follows:	immediate fa	amily are

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categories							
Banks							
Savings institu	utions						
Other loan or	finance co	mpanies					
Insurance compa	anies						
Stock, commodit	ty or othe:	r brokera	age				
companies							
Other business							
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creditor.)							• • • • • •
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					RETURN	TO	ITEM 3
SCHEDULE C - SI	ECURITIES.						
	NCLUDES st	ocks, bor	nds,	"Sec	urities"	EXC	LUDES
"Securities" II							
"Securities" II mutual funds, r			,	cert	ificates	of	deposit
mutual funds, r	money mark	et funds					
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schedule D - payments for talks, meetings, and publications.

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		sements by the Comm de the Commonwealth	
List a p	eayment even if yo	ou donated it to ch	arity.
60 days	or if you receive	about a payment if ed it from an emplo ource of income lis	
If no pa	yment must be li	sted, check here /	/
Davor	Approximate Va	lue Circumsta	Type of payment (e.g. Honoraria, travel reimburse- nces ment, etc.)
	Approximate va.		
			RETURN TO ITEM 5
			RETURN TO TIEM 5
SCHEDULE E	- GIFTS.		
furnishes \$200 \$100 nor rendertain Do not legersonal position.	ed you with any gard of during the passelered services in a sment related to dist gifts or other friend for reason. Do not list care	t 12 months and for exchange. Do not your private profeer things of value ons clearly unrelat	total value exceeded which you neither paid list business ession or occupation. given by a relative or ed to your public ons publicly reported as
Name of Bu	ısiness,		
Organizati	on, or	City or County	
Individual		and State	Approximate Value
	• • • • • • • • • • • • • • • • • • • •		

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			R	ETURN TO ITE
SC	HEDULE F - BUS	INESS INTERESTS		
	(including rer partnership, o immediate fam	ntal property, a or corporation :	ach self or family owne a farm, or consulting w in which you or a membe or together, own an in	ork), r of your
	partnership, of explain the nation of operated up the name only account for bu	or corporate name ture of the end nder a trade, pa ; otherwise, give usiness interest	r operated under a trad me, list that name; oth terprise. If rental pro artnership, or corporat we the address of each ts held in trust.	erwise merel perty is own e name, list property.
	me of Business	,		Gross incor
Pa Fa	rporation, rtnership, rm; Address of	City or County	Nature of Enterprise y (farming, law, rental	
	ental Property		property, etc.)	less \$50
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			property, etc.)	less \$50,
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	List the busing agency, excluding compared to the presentation of	nesses you reproding any court of ation during the pensation for of a consisting solutions are presented to the consisting solutions at the consisting solutions are presented to the consistency and the consistency are presented to	property, etc.)	less \$50

Name of Busi- ness	Type of Busi- ness	Repre- senta-	Name of Agen- cy	Amount Received \$1,001
				\$1,001 \$10,001 \$50,001 \$100,001 \$250,001 to to to and \$10,000 \$50,000 \$100,000 \$250,000 over
cl ir mc of ma wi	lose fin excess on the contract of mandatory ith whom dentify overnments	nancial s of \$1, excludin tory pap y papers m you ha such bu	associa 000 for g represers and a filed ave a consiness encies incies in	ociates or others with whom you have a ation and who received total compensation or such representation during the past 12 essentation consisting solely of the filing of subsequent representation regarding the by your partners, associates or others lose financial association. es by type and also name the state before which such person appeared on behalf
		siness	• •	Name of state governmental agency

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 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

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C	Check if	Type of	\$1,001		alue of Co	ompensatio	on
	ser- vices were ren-	ser- vice ren- dered		than \$10,000			
	dered		to	to	to	\$100,001 to	\$250,00 and
			\$10,000	\$50,000	\$100,000	\$250,000	over
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type of pr duct, e.g. textile,							
furniture etc.)							• • • • • •
Mining com panies							

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		RETURN TO IT
SCHEDULE I - REAL ESTATE	E CONTRACTS WITH STATE GOV	ERNMENTAL AGEN
twelve months, with a exchange of real esta immediate family hold partnership or trust contract, valued at \$ state governmental ac you or a member of you valued at \$1,000 or member at \$1	whether pending or complet a state governmental agencate in which you or a member an interest, including interest, option, easemen \$10,000 or more. List all gency for the lease of reacur immediate family holds more. This requirement to	y for the sale er of your a corporate, t, or land contracts with l estate in which such an interedisclose an
an ownership interest	does not apply to an inter t in a business unless the t of the total equity of t	ownership inte
an ownership interest exceeds three percent	t in a business unless the	sownership into the business. State the ar income from contract, ar amount, if a of income you any immediat family members.
an ownership interest exceeds three percent	List each governmental agency which is a party to the contract and indicate the county or city where the real estate is	State the ar income from contract, ar amount, if a of income you any immediate family member derives annufrom the contract.
an ownership interest exceeds three percent	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 ar income from contract, ar amount, if a of income you any immediat family member derives annufrom the contract.
an ownership interest exceeds three percent 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 ar income from contract, ar amount, if a of income you any immediat family member derives annufrom the contract.
an ownership interest exceeds three percent 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 ar income from contract, ar amount, if a of income you any immediat family member derives annufrom the contract.

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

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, directed to file an amended Statement correcting the indicated deficiencies, and a time 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.