## HOUSE BILL NO. 2090

AMENDMENT IN THE NATURE OF A SUBSTITUTE
(Proposed by the House Committee on Privileges and Elections on February 1, 1997)
(Patron Prior to Substitute-Delegate Watkins)
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 $\S \S 2.1-639.15$ 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.
"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.
"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

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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.

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

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

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

You may attach additional explanatory information.

1. Offices and Directorships.

Are you or a member of your immediate family a paid officer
or paid director of a business?
EITHER check NO / / OR check YES / / and complete Schedule A.
2. Personal Liabilities.

Do you or a member of your immediate family owe more than $\$ 10,000$ to any one creditor including contingent liabilities?
(Exclude debts to any government and loans secured by recorded
liens on property at least equal in value to the loan.)
EITHER check NO / / OR check YES / / and complete
Schedule B.
3. Securities.

Do you or a member of your immediate family, directly or
indirectly, separately or together, own securities valued
in excess of $\$ 10,000$ invested in one business? Account for
mutual funds, limited partnerships and trusts.
EITHER check NO / / OR check YES / / and complete Schedule C.
4. Payments for Talks, Meetings, and Publications.

During the past 12 months did you receive lodging,
transportation, money, or anything else of value with a
combined value exceeding $\$ 200$ for a single talk, meeting,
or published work in your capacity as an officer or employee of
your agency?
EITHER check NO / / OR check YES / / and complete
Schedule D.
5. Gifts.

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    During the past }12\mathrm{ 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 / /.
                            ........................................................
                            ........................................................
                .........................................................
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\mathrm{ 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 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\mathrm{ months?
        EITHER check NO / / OR check YES / / and complete
        Schedule G-3.
    9. Real Estate.
9A. State Officers and Employees.
        Do you or a member of your immediate family hold an interest,
        including a partnership interest, valued at $10,000 or more in
        real property (other than your principal residence) for which
        you have not already listed the full address on Schedule F?
9A. State Officers and Employees.
Do you or a member of your immediate family hold an interest, real property (other than your principal residence) for which you have not already listed the full address on Schedule F?
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Account for real estate held in trust. EITHER check NO / / OR check YES / / and complete Schedule $\mathrm{H}-1$.
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 $\mathrm{H}-2$.
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, whether pending or completed within the past twelve 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 schedules $F$, $H-1$, or $H-2$. This requirement to disclose an interest in a lease does not apply to an interest derived through an ownership interest in a business unless the ownership interest exceeds three percent of the total equity of the business. EITHER check NO / / OR check YES / / and complete Schedule I.

Statements of Economic Interests are open for public inspection.

## AFFIRMATION BY ALL FILERS

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

Signature....................................................................... . . . .
Commonwealth of Virginia
......of..........to wit:
The foregoing disclosure form was acknowledged before me
This........day of..................19.. by ..............
Notary Public
My commission expires.
(Return only if needed to complete Statement.)
SCHEDULES
to
STATEMENT OF ECONOMIC INTERESTS

NAME . . . . . . . . . . . . . . . . . . . . . .
SCHEDULE A - OFFICES AND DIRECTORSHIPS.

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

$\qquad$

| Name of Business | Address of Business | Position Held |
| :---: | :---: | :---: |
| ．．．．．．．．．．．． |  |  |
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SCHEDULE B - PERSONAL LIABILITIES.
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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
Check one categories

| $\$ 10,001$ | to $\quad$ More than |
| :--- | :--- |
| $\$ 50,000$ | $\$ 50,000$ |

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．）
．．．．．．．．．．．．．．．．

．．．．．．．．．．．．．．．．．．．


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

282
283
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Check
appropriate
categories

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.)
$\qquad$
(State principal business or
occupation of each creditor.)
. . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . .
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$\qquad$
$\qquad$
$\qquad$ RETURN TO ITEM 3

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SCHEDULE C - SECURITIES.
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"Securities" INCLUDES stocks, bonds, "Securities" EXCLUDES
mutual funds, money market funds, certificates of deposit,
limited partnerships, and commodity annuity contracts, and
futures contracts. insurance policies.
Identify each business or Virginia governmental entity in which you
or a member of your immediate family, directly or indirectly,
separately or together, own securities valued in excess of $\$ 10,000$.
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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$\qquad$RETURN TO ITEM 4

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SCHEDULE D - PAYMENTS FOR TALKS, MEETINGS, AND PUBLICATIONS.
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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
    combined value exceeding \(\$ 200\) for your presentation of a single
    talk, participation in one meeting, or publication of a work in
    your capacity as an officer or employee of your agency.
    List payments or reimbursements by an advisory or governmental
    agency only for meetings or travel outside the Commonwealth.
    List a payment even if you donated it to charity.
    Do not list information about a payment if you returned it within
    60 days or if you received it from an employer already listed
    under Item 6 or from a source of income listed on Schedule \(F\).
    If no payment must be listed, check here / /
                    Type of payment
                    (e.g. honoraria,
                    travel reimburse-
    Payer Approximate Value Circumstances ment, etc.)

......... .................... ................. .................
......... .................... .........................................

RETURN TO ITEM 5
SCHEDULE E - GIFTS.
List each business, governmental entity, or individual that
furnished you with any gift or gifts whose total value
exceeded $\$ 200 \$ 100$ 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 from a relative or from a
personal friend given for reasons clearly unrelated to
your public position. Do not list campaign contributions
publicly reported as required by Chapter 9 (\$ 24.2-900 et seq.)
of Title 24.2 of the Code of Virginia.

SChedule e - Gifts.
List each business, governmental entity, or individual that furnished you with any gift or gifts whose total value exceeded $\$ 200$ \$100 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 from a relative or from a personal friend given for reasons clearly unrelated to your public position. Do not list campaign contributions publicly reported as required by Chapter 9 ( $\$ 24.2-900$ et seq.) of Title 24.2 of the Code of Virginia.
Name of Business,
Organization, or
City or County
$\begin{array}{ll}\text { Individual } & \text { and State } \\ \text {...................... Approximate Value }\end{array}$


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..................... ................. ......................
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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.

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

Only STATE officers and employees should complete this Schedule.


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 and subsequent representation regarding the mandatory papers filed by your partners, associates or others with whom you have a close financial association.

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

Only STATE officers and employees should complete this Schedule.

SCHEDULE G-3 - PAYMENTS FOR REPRESENTATION 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 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 | Type | \$1,001 More |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: |
| if | of |  |  |  |  |
| ser- | ser- | to than |  |  |  |
| vices | vices | \$10,000 \$10,000 |  |  |  |
| were | ren- |  |  |  |  |
| ren- | dered |  |  |  |  |
| dered |  | $\begin{array}{cc} \$ 1,001 & \$ 10,001 \\ \text { to } & \text { to } \end{array}$ | $\begin{gathered} \$ 50,001 \\ \text { to } \end{gathered}$ | $\begin{gathered} \$ 100,001 \\ \text { to } \end{gathered}$ | $\begin{gathered} \$ 250,001 \\ \text { and } \end{gathered}$ |
|  |  | \$10,000 \$50,000 | \$100,000 | \$250,000 | over |

Electric
utilities
Gas util-
ities
Telephone
utilities
Water util-
ities
Cable tele-
vision
companies
Interstate
transporta
tion com-
panies
Intrastate
transporta
tion com-
panies
Oil or gas
retail com-
panies
Banks
Savings
institu-
tions
Loan or fi-
nance com-
panies

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Manufactur-
ing com-
panies (state
type of pro-
duct, e.g.,
textile,
furniture
etc.)
Mining com-
panies
Life insur-
ance com-
panies
Casualty in-
surance com-
panies
Other insur-
ance com-
panies
Retail com-
panies ..... ....... ....... ....... ...... ......... ........
Beer, wine
or liquor
companies or
distribu-
tors
Trade asso-
ciations
Professional
associa-
tions
Associa&bsol;
tions of
public
    employees
    or
    officials
    Counties,
    cities or
    towns
    Labor
    organi-
    zations
    Other
                                    RETURN TO ITEM 9
SCHEDULE H-1 - REAL ESTATE - STATE OFFICERS AND EMPLOYEES.
    List real estate other than your principal residence in which

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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.).

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If the real estate is owned or recorded in a name other than your own, list that name.
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SCHEDULE H-2 - REAL ESTATE - LOCAL OFFICERS AND EMPLOYEES.
List real estate located in your county, city, or town, and any
contiguous county, city, or town other than your principal
residence in which you or a member of your immediate family hold
an interest, including a partnership interest, option, easement,
or land contract, valued at \$10,000 or more. You may list each
parcel of real estate individually if you wish.

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SCHEDULE I - REAL ESTATE CONTRACTS WITH GOVERNMENT AGENCIES.
    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
        \(\$ 1,000\) or more. 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.
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    State officers and employees report contracts with state agencies.
    Local officers and employees report contracts with local agencies.
    ```
\begin{tabular}{lll} 
List your real & List each & State the annual \\
estate interest & governmental agency & income from the \\
and the person & which is a party to & contract, and the \\
or entity, & the contract and in- & amount, if any, of \\
including the & dicate the county & income you or any \\
type of entity, & or city where the real immediate family \\
which is party & estate is located. & \begin{tabular}{l} 
member derives \\
to the contract.
\end{tabular} \\
Describe any & & \begin{tabular}{l} 
annally from the \\
contract.
\end{tabular}
\end{tabular}
management role
and the percentage
ownership interest
you or your
immediate family
member has in the
real estate or entity.
..........................
......................... ..........................

"Immediate family" means (i) a spouse and (ii) any other person
§ 2.1-639.41. Disclosure form.
A. The disclosure form to be used for filings required by \(\S 2.1-639.40 \mathrm{~A}\) and B shall be substantially as follows:

\section*{STATEMENT OF ECONOMIC INTERESTS.}

Name
Office or position held or sought
Home address
Names of members of immediate family

DEFINITIONS AND EXPLANATORY MATERIAL.
residing in the same household as the legislator, who is a dependent of the legislator or of whom the legislator is a dependent.
"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.
"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" does not mean an association based on the receipt of retirement benefits or deferred compensation from a business by which the legislator is no longer employed. "Close
financial association" does not include an association based on the receipt of compensation for work performed by the legislator as an independent contractor of a business that represents an entity before any state governmental agency when the legislator has had no communications with the state governmental agency.
"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.

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

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

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

You may attach additional explanatory information.
1. Offices and Directorships.

Are you or a member of your immediate family a paid officer or paid director of a business?
EITHER check NO / / OR check YES / / and complete Schedule A.
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.

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 / /. 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.
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.

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

Statements of Economic Interests are open for public inspection.

\section*{AFFIRMATION}

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

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

\section*{Signature}

Commonwealth of Virginia
......... of .......... to wit:
The foregoing disclosure form was acknowledged before me
This ......... day of .......... 19. . . by ......................
Notary Public
My commission expires
(Return only if needed to complete Statement.)

SCHEDULES
to
STATEMENT OF ECONOMIC INTERESTS

NAME

SCHEDULE A - OFFICES AND DIRECTORSHIPS.

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

Name of Business Address of Business Position Held
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.............. .......................................
..................
............... .............................................
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RETURN TO ITEM 2

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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.
    Report contingent liabilities below and indicate which debts are
    contingent.
1. My personal debts are as follows:
    2. The personal debts of the members of my immediate family are as
follows:

\section*{Check}
appropriate categories

Banks
Savings institutions
Other loan or finance companies

Check one \(\$ 10,001\) to More than \(\$ 50,000 \quad \$ 50,000\) .......... ......... .......... ......... .......... .........
\(\qquad\)
\(\qquad\)
\(\qquad\)
\(\qquad\)
Other businesses:
(State principal business activity for each
creditor.)
. . . . . . . .

Individual creditors:
(State principal business or occupation of
each creditor.)
    . . . . . . . . . . . . . . . .
    . . . . . . . . . . . . . . . .


\section*{Insurance companies}

Stock, commodity or other brokerage
companies
Other businesses:
(State principal business activity for each creditor.)
......... ..........
. . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . \(\qquad\)
Individual creditors:
(State principal business or occupation of each creditor.)


\(\qquad\)
\(\qquad\)

\(\qquad\)
\(\qquad\)
\(\qquad\)

RETURN TO ITEM 3

\section*{SCHEDULE C - SECURITIES.}
"Securities" INCLUDES stocks, bonds, "Securities" EXCLUDES mutual funds, money market funds, certificates of deposit, limited partnerships, and commodity annuity contracts, and futures contracts. insurance policies.

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

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 / /


SCHEDULE D - PAYMENTS FOR TALKS, MEETINGS, AND PUBLICATIONS.
List each source from which you received during the past 12 months lodging, transportation, money, or any other thing of value (excluding meals or drinks coincident with a meeting) with combined value exceeding \(\$ 200\) for your presentation of a single talk, participation in one meeting, or publication of a work in

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    your capacity as a legislator.
    ```
    List payments or reimbursements by the Commonwealth only for
    meetings or travel outside the Commonwealth.
    List a payment even if you donated it to charity.
    Do not list information about a payment if you returned it within
    60 days or if you received it from an employer already listed
    under Item 6 or from a source of income listed on Schedule \(F\).
    If no payment must be listed, check here / /


SCHEDULE E - GIFTS.
    List each business, governmental entity, or individual that
    furnished you with any gift or gifts whose total value exceeded
    \(\$ 200 \$ 100\) 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. Do not list campaign contributions publicly reported as
    required by Chapter 9 of Title 24.2 of the Code of Virginia.

Organization, or City or County
Individual and State Approximate Value
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 -RETURN TO ITEM 6
\begin{tabular}{|c|c|}
\hline 1073 & SCHEDULE F - BUSINESS INTERESTS. \\
\hline 1074 & \\
\hline 1075 & Complete this Schedule for each self or family owned business \\
\hline 1076 & (including rental property, a farm, or consulting work), \\
\hline 1077 & partnership, or corporation in which you or a member of your \\
\hline 1078 & immediate family, separately or together, own an interest having \\
\hline 1079 & a value in excess of \$10,000. \\
\hline 1080 & \\
\hline 1081 & If the enterprise is owned or operated under a trade, \\
\hline 1082 & partnership, or corporate name, list that name; otherwise merely \\
\hline 1083 & explain the nature of the enterprise. If rental property is owned \\
\hline 1084 & or operated under a trade, partnership, or corporate name, list \\
\hline 1085 & the name only; otherwise, give the address of each property. \\
\hline 1086 & Account for business interests held in trust. \\
\hline 1087 & \\
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\hline 1090 & \\
\hline 1091 & Name of Business, Gross income \\
\hline 1092 & Corporation, \\
\hline 1093 & Partnership, Nature of Enterprise \$50,000 More \\
\hline 1094 & Farm; Address of City or County (farming, law, rental or than \\
\hline 1095 & Rental Property and State property, etc.) less \$50,000 \\
\hline 1096 & \\
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\hline 1103 & RETURN TO ITEM 8 \\
\hline 1104 & \\
\hline 1105 & SCHEDULE G-1 - PAYMENTS FOR REPRESENTATION BY YOU. \\
\hline 1106 & \\
\hline 1107 & List the businesses you represented before any state governmental \\
\hline 1108 & agency, excluding any court or judge, for which you received \\
\hline 1109 & total compensation during the past 12 months in excess of \(\$ 1,000\), \\
\hline 1110 & excluding compensation for other services to such businesses and \\
\hline 1111 & representation consisting solely of the filing of mandatory \\
\hline 1112 & papers and subsequent representation regarding the mandatory \\
\hline 1113 & papers filed by you. \\
\hline 1114 & \\
\hline 1115 & Identify each business, the nature of the representation and the \\
\hline 1116 & amount received by dollar category from each such business. You \\
\hline 1117 & may state the type, rather than name, of the business if you are \\
\hline 1118 & required by law not to reveal the name of the business represented \\
\hline 1119 & by you. \\
\hline 1120 & \\
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\hline 1125 & Name Type Pur- Name \$1,001 More \\
\hline 1126 & of of pose of to than \\
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\hline 1128 & ness ness Repre- cy \\
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\section*{HB2090H1}
\begin{tabular}{|c|c|c|c|c|c|c|c|}
\hline 1186 & & & \multicolumn{5}{|c|}{Value of Compensation} \\
\hline 1187 & Check & Type & \$1,001 & More & & & \\
\hline 1188 & if & of & & & & & \\
\hline 1189 & ser- & ser- & to & than & & & \\
\hline 1190 & vices & vices & \$10,000 & \$10,000 & & & \\
\hline 1191 & were & ren- & & & & & \\
\hline 1192 & ren- & dered & & & & & \\
\hline 1193 & dered & & \$1,001 & \$10,001 & \$50,001 & \$100,001 & \$250,001 \\
\hline 1194 & & & to & to & to & to & and \\
\hline 1195 & & & \$10,000 & \$50,000 & \$100,000 & \$250,000 & over \\
\hline 1196 & Electric & & & & & & \\
\hline 1197 & utilities & & & & & . . . . . . & \\
\hline 1198 & Gas util- & & & & & & \\
\hline 1199 & ities & & & & . . . . . . & . . . . . . . & \\
\hline 1200 & Telephone & & & & & & \\
\hline 1201 & utilities & & & & . . . . . & . . . . . & \\
\hline 1202 & Water util- & & & & & & \\
\hline 1203 & ities & & & & . . . . . & . . . . . & \\
\hline 1204 & Cable tele- & & & & & & \\
\hline 1205 & vision & & & & & & \\
\hline 1206 & companies & & & . . . . . . & . . . . . & . . . . . . . & . . . . . \\
\hline 1207 & Interstate & & & & & & \\
\hline 1208 & transporta & & & & & & \\
\hline 1209 & tion com- & & & & & & \\
\hline 1210 & panies & & & . . . . . & . . . . \(\cdot\) & . . . . . . - & . . . . . \\
\hline 1211 & Intrastate & & & & & & \\
\hline 1212 & transporta & & & & & & \\
\hline 1213 & tion com- & & & & & & \\
\hline 1214 & panies & & & . . . . . & -•••• & . . . . . . \(\cdot\) & . . . . . \\
\hline 1215 & Oil or gas & & & & & & \\
\hline 1216 & retail com- & & & & & & \\
\hline 1217 & panies & & & . . . . . & . . . . & . . . . . . . & \\
\hline 1218 & Banks . & & & & -• & . . . . . . - & \\
\hline 1219 & Savings & & & & & & \\
\hline 1220 & institu- & & & & & & \\
\hline 1221 & tions & & & . & - & . . . . . - & \\
\hline 1222 & Loan or fi- & & & & & & \\
\hline 1223 & nance com- & & & & & & \\
\hline 1224 & panies .... & & & & -••••• & -•••••• & \\
\hline 1225 & Manufactur- & & & & & & \\
\hline 1226 & ing com- & & & & & & \\
\hline 1227 & panies (state & & & & & & \\
\hline 1228 & type of pro- & & & & & & \\
\hline 1229 & duct, e.g., & & & & & & \\
\hline 1230 & textile, & & & & & & \\
\hline 1231 & furniture & & & & & & \\
\hline 1232 & etc.) & & & & & & \\
\hline 1233 & Mining com- & & & & & & \\
\hline 1234 & panies & & & & & & \\
\hline 1235 & Life insur- & & & & & & \\
\hline 1236 & ance com- & & & & & & \\
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\hline 1238 & Casualty in- & & & & & & \\
\hline 1239 & surance com- & & & & & & \\
\hline 1240 & panies & & & & & & \\
\hline 1241 & Other insur- & & & & & & \\
\hline 1242 & ance com- & & & & & & \\
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Retail com-
panies
Beer, wine
or liquor
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ciations
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public
employees
or
officials
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cities or
towns
Labor
organi-
zations
Other

RETURN TO ITEM 10

SCHEDULE I - REAL ESTATE CONTRACTS WITH STATE GOVERNMENTAL AGENCIES.

List all contracts, whether pending or completed within the past twelve months, with a state 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 state governmental agency for the lease of real estate in which you or a member of your immediate family holds such an interest valued at \(\$ 1,000\) or more. 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.

List your real estate interest and the person or entity, including the type of entity, which is party to the contract.

\section*{List each}
governmental agency which is a party to the contract and indicate the county or city where the

State the annual income from the contract, and the amount, if any, of income you or any immediate
\begin{tabular}{|c|c|c|}
\hline Describe any management role and the percentage ownership interest you or your immediate family member has in the real estate or entity. & real estate is located. & ```
family member
derives annually
from the
contract.
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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.```

