1997 SESSION

HOUSE SUBSTITUTE

	977550803
1	HOUSE BILL NO. 2090
2	AMENDMENT IN THE NATURE OF A SUBSTITUTE
3 4	(Proposed by the House Committee on Privileges and Elections on February 1, 1997)
4 5	(Patron Prior to Substitute—Delegate Watkins)
6	A BILL to amend and reenact §§ 2.1-639.15 and 2.1-639.41 of the Code of Virginia, relating to the
7	conflict of interests laws; disclosure forms.
8	Be it enacted by the General Assembly of Virginia:
9	1. That §§ 2.1-639.15 and 2.1-639.41 of the Code of Virginia are amended and reenacted as
10	follows:
11	§ 2.1-639.15. Disclosure form.
12 13	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:
13	D shan be substantiarly as follows.
15	STATEMENT OF ECONOMIC INTERESTS.
16	STATEMENT OF BEONOMIC INTERESTS.
17	Name
18	Office or position held or sought
19	Home address
20	Names of members of immediate family
21	-
22	DEFINITIONS AND EXPLANATORY MATERIAL.
23	
24	"Immediate family" means (i) a spouse and (ii) any other person
25	residing in the same household as the officer or employee, who
26	is a dependent of the officer or employee or of whom the officer
27	or employee is a dependent.
28	
29 20	"Dependent" means any person, whether or not related by blood or
30 21	marriage, who receives from the officer or employee, or provides
31 32	to the officer or employee, more than one-half of his financial
32 33	support.
33 34	"Business" means a corporation, partnership, sole proprietorship,
35	firm, enterprise, franchise, association, trust or foundation, or
36	any other individual or entity carrying on a business or
37	profession, whether or not for profit.
38	
39	"Close financial association" does not mean an association based on
40	the receipt of retirement benefits or deferred compensation from a
41	business by which the person filing this statement is no longer
42	employed. "Close financial association" does not include an
43	association based on the receipt of compensation for work performed
44	by the person filing as an independent contractor of a business that
45	represents an entity before any state governmental agency when the
46	person filing has had no communications with the state governmental
47 48	agency.
48 49	"Cift" moong ony gratuity forer diagount entertainment
49 50	"Gift" means any gratuity, favor, discount, entertainment, hospitality, loan, forbearance, or other item having monetary value.
50 51	It includes services as well as gifts of transportation, local
52	travel, lodgings and meals, whether provided in-kind, by purchase
53	of a ticket, payment in advance or reimbursement after the expense
54	has been incurred. "Gift" shall not include any offer of a ticket
55	or other admission or pass unless the ticket, admission, or pass is

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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. 120 EITHER check NO / / OR check YES / / and complete 121 Schedule E. 122 6. Salary and Wages. 123 List each employer that pays you or a member of your immediate 124 family salary or wages in excess of \$10,000 annually. (Exclude 125 state or local government or advisory agencies.) 126 If no reportable salary or wages, check here / /. 127 128 129 130 7. Business Interests. 131 Do you or a member of your immediate family separately or 132 together, operate your own business, or own or control an 133 interest in excess of \$10,000 in a business? 134 EITHER check NO / / OR check YES / / and complete 135 Schedule F. 136 8. Payments for Representation. 137 8A. Did you represent any businesses before any state governmental 138 agencies, excluding courts or judges, for which you received 139 total compensation during the past 12 months in excess of 140 \$1,000, excluding compensation for other services to such 141 businesses and representation consisting solely of the filing 142 of mandatory papers and subsequent representation regarding the 143 mandatory papers? (Officers and employees of local 144 governmental and advisory agencies do NOT need to answer this 145 question or complete Schedule G-1.) 146 EITHER check NO / / OR check YES / / and complete 147 Schedule G-1. 148 8B. Subject to the same exceptions as in 8A, did persons with whom 149 you have a close financial association (partners, associates or 150 others) represent any businesses before any state governmental 151 agency for which total compensation was received during the past 152 12 months in excess of \$1,000? (Officers and employees of local 153 governmental and advisory agencies do NOT need to answer this 154 question or complete Schedule G-2.) 155 EITHER check NO / / OR check YES / / and complete 156 Schedule G-2. 157 8C. Did you or persons with whom you have a close financial 158 association furnish services to businesses operating in 159 Virginia for which total compensation in excess of \$1,000 160 was received during the past 12 months? 161 EITHER check NO / / OR check YES / / and complete 162 Schedule G-3. 163 9. Real Estate. 164 9A. State Officers and Employees. Do you or a member of your immediate family hold an interest,

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?

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169 170 171	Account for real estate held in trust. EITHER check NO / / OR check YES / / and complete Schedule H-1.
172 173 174 175 176 177 178	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
179 180 181	address on Schedule F? Account for real estate held in trust. EITHER check NO / / OR check YES / / and complete Schedule H-2.
182 183 184 185 186 187 188 189 190 191 192 193 194 195 196 197 198 199 200	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.
201 202	Statements of Economic Interests are open for public inspection.
203 204	AFFIRMATION BY ALL FILERS
205 206 207	I swear or affirm that the foregoing information is full, true and correct to the best of my knowledge.
208 209 210	Signature Commonwealth of Virginia ofto wit:
 211 212 213 214 	The foregoing disclosure form was acknowledged before me Thisday of19 by Notary Public
215 216	My commission expires
217 218	SCHEDULES
210 219	to STATEMENT OF ECONOMIC INTERESTS
219 220	DIALEMENT OF ECONOMIC INTEREDID
221	NAME
222	
223	SCHEDULE A - OFFICES AND DIRECTORSHIPS.
224 225	Identify each business of which you or a member of your

226 immediate family is a paid officer or paid director. 227 228 229 230 231 Name of Business Address of Business Position Held 232 233 . 234 . 235 . 236 . 237 238 _____ 239 _____ 240 RETURN TO ITEM 2 241 242 SCHEDULE B - PERSONAL LIABILITIES. 243 244 Report personal liability by checking each category. Report only 245 debts in excess of \$10,000. Do not report debts to any government. 246 Do not report loans secured by recorded liens on property at least 247 equal in value to the loan. 248 Report contingent liabilities below and indicate which debts are 249 contingent. 250 251 1. My personal debts are as follows: 252 253 254 255 256 Check Check one 257 appropriate \$10,001 to More than 258 \$50,000 \$50,000 categories 259 260 Banks 261 Savings institutions 262 Other loan or finance companies 263 Insurance companies 264 Stock, commodity or other brokerage 265 companies 266 Other businesses: 267 (State principal business activity for each 268 creditor.) 269 270 271 Individual creditors: 272 (State principal business or 273 occupation of each creditor.) 274 275 276 277 _____ 278 _____ 279 280 2. The personal debts of the members of my immediate family are as 281 follows:

282 283 ----284 ------285 286 Check Check one 287 appropriate \$10,001 to More than 288 categories \$50,000 \$50,000 289 290 Banks 291 Savings institutions **292** Other loan or finance companies 293 Insurance companies **294** Stock, commodity or other brokerage 295 companies **296** Other businesses: 297 (State principal business activity 298 for each creditor.) 299 300 **301** Individual creditors: **302** (State principal business or 303 occupation of each creditor.) 304 305 306 307 _____ 308 _____ 309 RETURN TO ITEM 3 310 311 SCHEDULE C - SECURITIES. 312 313"Securities" INCLUDES stocks, bonds,"Securities" EXCLUDES314mutual funds, money market funds,certificates of deposit,315limited partnerships, and commodityannuity contracts, and 316 futures contracts. insurance policies. 317 318 Identify each business or Virginia governmental entity in which you **319** or a member of your immediate family, directly or indirectly, **320** separately or together, own securities valued in excess of \$10,000. 321 322 Do not list U.S. Bonds or other government securities not issued 323 by the Commonwealth of Virginia or its authorities, agencies, or 324 local governments. Do not list organizations that do not do 325 business in this Commonwealth, but most major businesses conduct 326 business in Virginia. Account for securities held in trust. 327 328 If no reportable securities, check here / / 329 _____ 330 _____ 331 Type of Security Check one 332 333 (stocks, bonds, mutual More 334 Type of or money market funds, \$10,001 to than 335 Name of Issuer Entity etc.) \$50,000 \$50,000 336 337 338

339 340 341 342 _____ 343 RETURN TO ITEM 4 344 345 SCHEDULE D - PAYMENTS FOR TALKS, MEETINGS, AND PUBLICATIONS. 346 347 List each source from which you received during the past 12 months 348 lodging, transportation, money, or any other thing of value 349 (excluding meals or drinks coincident with a meeting) with 350 combined value exceeding \$200 for your presentation of a single 351 talk, participation in one meeting, or publication of a work in 352 your capacity as an officer or employee of your agency. 353 354 List payments or reimbursements by an advisory or governmental 355 agency only for meetings or travel outside the Commonwealth. 356 357 List a payment even if you donated it to charity. 358 359 Do not list information about a payment if you returned it within 360 60 days or if you received it from an employer already listed 361 under Item 6 or from a source of income listed on Schedule F. 362 363 If no payment must be listed, check here / / 364 365 _____ 366 367 Type of payment 368 (e.g. honoraria, 369 travel reimburse-370 Payer ment, etc.) Approximate Value Circumstances 371 . 372 . 373 . 374 . 375 376 _____ 377 _____ 378 RETURN TO ITEM 5 379 380 SCHEDULE E - GIFTS. 381 382 List each business, governmental entity, or individual that 383 furnished you with any gift or gifts whose total value 384 exceeded \$200 \$100 during the past 12 months and for which you 385 neither paid nor rendered services in exchange. Do not list 386 business entertainment related to your private profession or 387 occupation. Do not list gifts from a relative or from a 388 personal friend given for reasons clearly unrelated to 389 your public position. Do not list campaign contributions 390 publicly reported as required by Chapter 9 (§ 24.2-900 et seq.) 391 of Title 24.2 of the Code of Virginia. 392 _____ 393 394

Name of Busines Organization, of Individual	or	City or County and State	Approxi	imate Value
				 1 TO ITEM
SCHEDULE F - B	USINESS INTE	ERESTS.		
(including : partnership	rental prope , or corpora amily, separ	for each self or family erty, a farm, or consult ation in which you or a rately or together, own 10,000.	ing work), member of	your
nature of th under a trad otherwise, interests h	he enterpris de, partners give the ado eld in trust	t that name; otherwise m se. If rental property i ship, or corporate name, dress of each property.	is owned on list the Account fo	r operated name only or busines
Name of Business, Corporation,			Gross	income
Partnership, Farm; Address	City or	Nature of Enterprise		
of Rental	County	(farming, law,	\$50,000	More tha
Property	and State	rental property, etc.)		
			• • • • • • • •	
			• • • • • • • •	
			RETURI	
SCHEDULE G-1 - List the bus agency, exc. total compet excluding co representat	PAYMENTS FO sinesses you luding any o nsation dur: ompensation ion consist: subsequent a		RETURN J. y state gov ch you rece in excess o such busine g of mandat	TO ITEM vernmental eived of \$1,000 esses and cory

452 amount received by dollar category from each such business. You 453 may state the type, rather than name, of the business if you are 454 required by law not to reveal the name of the business represented 455 by you. 456 457 458 Only STATE officers and employees should complete this Schedule. 459 460 _____ 461 462 463 Amount Received 464 Name Type Pur-Name \$1,001 More 465 of of of to---than pose 466 Busi- Busi- of Agen- \$10,000 \$10,000 **467** ness ness Repreсу 468 senta-469 tion 470 \$1,001 \$10,001 \$50,001 \$100,001 \$250,001 471 to to to to and 472 \$10,000 \$50,000 \$100,000 \$250,000 over 473 . 474 . 475 . 476 . 477 478 _____ 479 480 SCHEDULE G-2 - PAYMENTS FOR REPRESENTATION BY ASSOCIATES. 481 482 List the businesses that have been represented before any state 483 governmental agency, excluding any court or judge, by persons who **484** are your partners, associates or others with whom you have a close 485 financial association and who received total compensation in 486 excess of \$1,000 for such representation during the past 12 487 months, excluding representation consisting solely of the filing 488 of mandatory papers and subsequent representation regarding the 489 mandatory papers filed by your partners, associates or others 490 with whom you have a close financial association. 491 492 Identify such businesses by type and also name the state 493 governmental agencies before which such person appeared on behalf 494 of such businesses. 495 496 Only STATE officers and employees should complete this Schedule. 497 498 499 500 501 Type of business Name of state governmental agency 502 503 504 505 506 . 507

508 _____ 509 510 511 SCHEDULE G-3 - PAYMENTS FOR REPRESENTATION GENERALLY. 512 513 Indicate below types of businesses that operate in Virginia to 514 which services were furnished by you or persons with whom you have 515 a close financial association and for which total compensation in 516 excess of \$1,000 was received during the past 12 months. 517 518 Identify opposite each category of businesses listed below (i) the 519 type of business, (ii) the type of service rendered and (iii) the 520 value by dollar category of the compensation received for all 521 businesses falling within each category. 522 523 ------524 ------525 526 Value of Compensation Check Type \$1,001 More 527 528 if of serser-529 to than 530 vices vices \$10,000 \$10,000 531 renwere 532 rendered 533 dered \$1,001 \$10,001 \$50,001 \$100,001 \$250,001 534 to to to and 535 \$10,000 \$50,000 \$100,000 \$250,000 over 536 Electric 537 utilities 538 Gas util-539 ities 540 Telephone 541 utilities 542 Water util-543 ities 544 Cable tele-545 vision 546 companies 547 Interstate 548 transporta 549 tion com-550 panies 551 Intrastate 552 transporta 553 tion com-554 panies 555 Oil or gas 556 retail com-557 panies 558 Banks 559 Savings 560 institu-561 tions 562 Loan or fi-563 nance com-564 panies

Manufactur- ing com-							
panies (sta	ate						
type of pro							
duct, e.g.,							
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furniture							
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Mining com-							
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Other	• • • • •			• • • • • • •			
						RETURN T	O ITEM
SCHEDULE H-1	- REA	L ESTATE	- STATE	OFFICERS	AND EME	PLOYEES.	
List real	estat	- other ·	than vou	r princin	al regió	dence in w	hich
						n interest	
						ent, or la	
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idt oogb legtigt		
List each location	Describe the type of	If the real estate
(state, and county	real estate you own	is owned or record
or city) where you	in each location	in a name other th
own real estate.	(business, recreational,	your own, list that
	apartment, commercial,	name.
	open land, etc.).	
		• • • • • • • • • • • • • • • • • • • •
		• • • • • • • • • • • • • • • • • • • •
	• • • • • • • • • • • • • • • • • • • •	
SCHEDULE H-2 - REAL H	ESTATE - LOCAL OFFICERS ANI	D EMPLOYEES.
residence in which an interest, inclu or land contract,	, city, or town other than n you or a member of your : uding a partnership interes valued at \$10,000 or more tate individually if you w	immediate family ho st, option, easemer . You may list each
List the counties and cities in which you own real estate.	Describe the type of real estate you own in each county or city (business, recreational,	-
	apartment, commercial, open land, etc.).	name.
		•••••

678 percent of the total equity of the business. 679 State officers and employees report contracts with state agencies. 680 Local officers and employees report contracts with local agencies. 681 682 State the annual List your real List each **683** estate interest qovernmental agency income from the 684 and the person which is a party to contract, and the 685 or entity, the contract and inamount, if any, of 686 including the dicate the county income you or any **687** type of entity, or city where the real immediate family 688 which is party estate is located. member derives 689 to the contract. annually from the 690 Describe any contract. 691 management role 692 and the percentage 693 ownership interest 694 you or your 695 immediate family 696 member has in the **697** real estate or entity. **698** 699 700 701 702 703 704 705 § 2.1-639.41. Disclosure form. A. The disclosure form to be used for filings required by § 2.1-639.40 A and B shall be substantially 706 707 as follows: 708 709 STATEMENT OF ECONOMIC INTERESTS. 710 711 Name 712 Office or position held or sought 713 Home address 714 Names of members of immediate family 715 716 DEFINITIONS AND EXPLANATORY MATERIAL. 717 718 "Immediate family" means (i) a spouse and (ii) any other person 719 residing in the same household as the legislator, who is a dependent 720 of the legislator or of whom the legislator is a dependent. 721 722 "Dependent" means any person, whether or not related by blood or 723 marriage, who receives from the legislator, or provides to the 724 legislator, more than one-half of his financial support. 725 726 "Business" means a corporation, partnership, sole proprietorship, 727 firm, enterprise, franchise, association, trust or foundation, or 728 any other individual or entity carrying on a business or profession, 729 whether or not for profit. 730 731 "Close financial association" does not mean an association based on 732 the receipt of retirement benefits or deferred compensation from a 733 business by which the legislator is no longer employed. "Close

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734 financial association" does not include an association based on the 735 receipt of compensation for work performed by the legislator as an 736 independent contractor of a business that represents an entity before 737 any state governmental agency when the legislator has had no 738 communications with the state governmental agency. 739 740 "Gift" means any gratuity, favor, discount, entertainment, 741 hospitality, loan, forbearance, or other item having monetary value. 742 It includes services as well as gifts of transportation, local 743 travel, lodgings and meals, whether provided in-kind, by purchase 744 of a ticket, payment in advance or reimbursement after the expense 745 has been incurred. "Gift" shall not include any offer of a ticket 746 or other admission or pass unless the ticket, admission, or pass is 747 used. "Gift" shall not include honorary degrees and presents from 748 relatives. "Relative" means the donee's spouse, child, uncle, aunt, 749 niece, or nephew; a person to whom the donee is 750 engaged to be married; the donee's or his spouse's parent, 751 grandparent, grandchild, brother, or sister; or the donee's brother's 752 or sister's spouse. 753 754 TRUST. If you or your immediate family, separately or together, are 755 the only beneficiaries of a trust, treat the trust's assets as if 756 you own them directly. If you or your immediate family has a 757 proportional interest in a trust, treat that proportion of the 758 trust's assets as if you own them directly. For example, if you 759 and your immediate family have a one-third interest in a trust, 760 complete your Statement as if you own one-third of each of the 761 trust's assets. If you or a member of your immediate family created 762 a trust and can revoke it without the beneficiaries' consent, treat 763 its assets as if you own them directly. 764 765 REPORT TO THE BEST OF INFORMATION AND BELIEF. Information required 766 on this Statement must be provided on the basis of the best 767 knowledge, information and belief of the individual filing the 768 Statement as of the date of this report unless otherwise stated. 769 770 COMPLETE ITEMS 1 THROUGH 10. REFER TO SCHEDULES ONLY IF DIRECTED. 771 772 You may attach additional explanatory information. 773 774 1. Offices and Directorships. 775 776 Are you or a member of your immediate family a paid officer or paid 777 director of a business? 778 EITHER check NO / / OR check YES / / and complete Schedule A. 779 2. Personal Liabilities. 780~ Do you or a member of your immediate family owe more than \$10,000 $\,$ 781 to any one creditor including contingent liabilities? (Exclude debts 782 to any government and loans secured by recorded liens on property 783 at least equal in value to the loan.) 784 EITHER check NO / / OR check YES / / and complete Schedule B. 785 3. Securities. 786 Do you or a member of your immediate family, directly or 787 indirectly, separately or together, own securities valued in 788 excess of \$10,000 invested in one business? Account for mutual 789 funds, limited partnerships and trusts. 790 EITHER check NO / / OR check YES / / and complete Schedule C.

791 4. Payments for Talks, Meetings, and Publications. 792 During the past 12 months did you receive lodging, transportation, 793 money, or anything else of value with a combined value exceeding 794 \$200 for a single talk, meeting, or published work in your capacity 795 as a legislator? 796 EITHER check NO / / OR check YES / / and complete Schedule D. 797 5. Gifts. 798 During the past 12 months did a business, government, or individual 799 other than a relative or personal friend furnish you with any gift 800 or gifts the total value of which exceeded \$200 \$100 and for which 801 you neither paid nor rendered services in exchange? Account for all 802 business entertainment (except if related to your private profession 803 or occupation) even if unrelated to your official duties. 804 EITHER check NO / / OR check YES / / and complete Schedule E. 805 6. Salary and Wages. 806 List each employer that pays you or a member of your immediate 807 family salary or wages in excess of \$10,000 annually. (Exclude 808 state or local government or advisory agencies.) 809 If no reportable salary or wages, check here / /. 810 811 812 813 814 815 7. Business Interests. 816 Do you or a member of your immediate family separately or together, 817 operate your own business, or own or control an interest in excess 818 of \$10,000 in a business? 819 EITHER check NO / / OR check YES / / and complete Schedule F. 820 8. Payments for Representation. 821 8A. Did you represent any businesses before any state governmental 822 agencies, excluding courts or judges, for which you received total 823 compensation during the past 12 months in excess of \$1,000, 824 excluding compensation for other services to such businesses and 825 representation consisting solely of the filing of mandatory papers 826 and subsequent representation regarding the mandatory papers? 827 EITHER check NO / / OR check YES / / and complete Schedule G-1. 828 8B. Subject to the same exceptions as in 8A, did persons with whom 829 you have a close financial association (partners, associates or 830 others) represent any businesses before any state governmental 831 agency for which total compensation was received during the past 832 12 months in excess of \$1,000? 833 EITHER check NO / / OR check YES / / and complete Schedule G-2. 834 8C. Did you or persons with whom you have a close financial 835 association furnish services to businesses operating in Virginia 836 for which total compensation in excess of \$1,000 was received 837 during the past 12 months? 838 EITHER check NO / / OR check YES / / and complete Schedule G-3. 839 9. Real Estate. 840 Do you or a member of your immediate family hold an interest, 841 including a partnership interest, valued at \$10,000 or more in real 842 property (other than your principal residence) for which you have 843 not already listed the full address on Schedule F? Account for real 844 estate held in trust. 845 EITHER check NO / / OR check YES / / and complete Schedule H. 846 10. Real Estate Contracts with State Governmental Agencies.

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847 Do you or a member of your immediate family hold an interest valued 848 at more than \$10,000 in real estate, including a corporate, 849 partnership, or trust interest, option, easement, or land contract, 850 which real estate is the subject of a contract, whether pending or 851 completed within the past twelve months, with a state governmental 852 agency? If the real estate contract provides for the leasing of the 853 property to a state governmental agency, do you or a member of your 854 immediate family hold an interest in the real estate, including a 855 corporate, partnership, or trust interest, option, easement, or land 856 contract valued at more than \$1,000? Account for all such contracts 857 whether or not your interest is reported in Schedules F or H. This 858 requirement to disclose an interest in a lease does not apply to an 859 interest derived through an ownership interest in a business unless 860 the ownership interest exceeds three percent of the total equity of 861 the business. 862 EITHER check NO / / OR check YES / / and complete Schedule I. 863 864 Statements of Economic Interests are open for public inspection. 865 866 AFFIRMATION 867 868 In accordance with the rules of the house in which I serve, if I 869 receive a request that this disclosure statement be corrected, 870 augmented, or revised in any respect, I hereby pledge that I shall 871 respond promptly to the request. I understand that if a 872 determination is made that the statement is insufficient, I will 873 satisfy such request or be subjected to disciplinary action of 874 my house. 875 876 I swear or affirm that the foregoing information is full, true and 877 correct to the best of my knowledge. 878 879 Signature 880 Commonwealth of Virginia 881 of to wit: 882 The foregoing disclosure form was acknowledged before me 883 This day of 19. . by 884 Notary Public 885 My commission expires 886 (Return only if needed to complete Statement.) 887 888 SCHEDULES 889 to STATEMENT OF ECONOMIC INTERESTS 890 891 892 NAME 893 894 SCHEDULE A - OFFICES AND DIRECTORSHIPS. 895 896 Identify each business of which you or a member of 897 your immediate family is a paid officer or paid director. 898 899 900 _____ 901 902 Name of Business Address of Business Position Held 903 .

904 . 905 . 906 . 907 908 909 910 RETURN TO ITEM 2 911 912 SCHEDULE B - PERSONAL LIABILITIES. 913 914 Report personal liability by checking each category. Report only 915 debts in excess of \$10,000. Do not report debts to any government 916 Do not report loans secured by recorded liens on property at 917 least equal in value to the loan. 918 Report contingent liabilities below and indicate which debts are 919 contingent. 920 921 1. My personal debts are as follows: 922 923 _____ 924 925 926 Check Check one 927 appropriate \$10,001 to More than 928 \$50,000 categories \$50,000 929 Banks 930 Savings institutions 931 Other loan or finance companies 932 Insurance companies 933 Stock, commodity or other brokerage 934 companies 935 Other businesses: 936 (State principal business activity for each 937 creditor.) 938 939 940 Individual creditors: 941 (State principal business or occupation of 942 each creditor.) 943 944 945 946 947 2. The personal debts of the members of my immediate family are as 948 follows: 949 950 951 _____ 952 953 Check Check one 954 appropriate \$10,001 to More than 955 categories \$50,000 \$50,000 956 957 Banks 958 Savings institutions 959 Other loan or finance companies

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1017 your capacity as a legislator. 1018 1019 List payments or reimbursements by the Commonwealth only for 1020 meetings or travel outside the Commonwealth. 1021 1022 List a payment even if you donated it to charity. 1023 1024 Do not list information about a payment if you returned it within 1025 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. 1026 1027 1028 If no payment must be listed, check here / / 1029 1030 1031 1032 1033 Type of payment 1034 (e.g. honoraria, 1035 travel reimburse-1036 Approximate Value Payer Circumstances ment, etc.) 1037 . 1038 . 1039 . 1040 . 1041 _____ 1042 1043 1044 RETURN TO ITEM 5 1045 1046 SCHEDULE E - GIFTS. 1047 1048 List each business, governmental entity, or individual that 1049 furnished you with any gift or gifts whose total value exceeded 1050 \$200 \$100 during the past 12 months and for which you neither paid 1051 nor rendered services in exchange. Do not list business 1052 entertainment related to your private profession or occupation. 1053 Do not list gifts or other things of value given by a relative or 1054 personal friend for reasons clearly unrelated to your public 1055 position. Do not list campaign contributions publicly reported as 1056 required by Chapter 9 of Title 24.2 of the Code of Virginia. 1057 1058 1059 1060 1061 Name of Business, 1062 Organization, or City or County 1063 Individual and State Approximate Value 1064 . 1065 . 1066 . 1067 . 1068 _____ 1069 _____ 1070 1071

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RETURN TO ITEM 6

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1073 SCHEDULE F - BUSINESS INTERESTS.
1074
1075
       Complete this Schedule for each self or family owned business
1076
       (including rental property, a farm, or consulting work),
1077
       partnership, or corporation in which you or a member of your
1078
       immediate family, separately or together, own an interest having
1079
       a value in excess of $10,000.
1080
1081
      If the enterprise is owned or operated under a trade,
1082
       partnership, or corporate name, list that name; otherwise merely
1083
       explain the nature of the enterprise. If rental property is owned
1084
       or operated under a trade, partnership, or corporate name, list
1085
       the name only; otherwise, give the address of each property.
1086
       Account for business interests held in trust.
1087
1088
    _____
1089
    _____
1090
1091 Name of Business,
                                                 Gross income
1092 Corporation,
1093 Partnership,
                                Nature of Enterprise $50,000 More
1094 Farm; Address of City or County (farming, law, rental or than
1095 Rental Property and State property, etc.)
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1104
1105 SCHEDULE G-1 - PAYMENTS FOR REPRESENTATION BY YOU.
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1107
       List the businesses you represented before any state governmental
1108
       agency, excluding any court or judge, for which you received
1109
       total compensation during the past 12 months in excess of $1,000,
1110
      excluding compensation for other services to such businesses and
1111
       representation consisting solely of the filing of mandatory
1112
       papers and subsequent representation regarding the mandatory
1113
      papers filed by you.
1114
1115
       Identify each business, the nature of the representation and the
1116
       amount received by dollar category from each such business. You
1117
       may state the type, rather than name, of the business if you are
1118
       required by law not to reveal the name of the business represented
1119
       by you.
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1299	Describe any	real estate is	family member
1300	management role and	located.	derives annually
1301	the percentage		from the
1302	ownership interest		contract.
1303	you or your immediate		
1304	family member has in		
1305	the real estate		
1306	or entity.		
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B. Any legislator who makes a knowing misstatement of a material fact on the Statement ofEconomic Interests shall be subject to disciplinary action for such violations by the house in which thelegislator sits.

1318 C. In accordance with the rules of each house, the Statement of Economic Interests of all members
1319 of each house shall be reviewed. If a legislator's Statement is found to be inadequate as filed, the
1320 legislator shall be notified in writing, directed to file an amended Statement correcting the indicated
1321 deficiencies, and a time set within which such amendment shall be filed. If the Statement of Economic
1322 Interests, in either its original or amended form, is found to be adequate as filed, the legislator's filing
1323 shall be deemed in full compliance with this section as to the information disclosed thereon.

1324 D. Ten percent of the membership of a house, on the basis of newly discovered facts, may in writing 1325 request the house in which those members sit, in accordance with the rules of that house, to review the 1326 Statement of Economic Interests of another member of that house in order to determine the adequacy of 1327 his filing. In accordance with the rules of each house, each Statement of Economic Interests shall be 1328 promptly reviewed, the adequacy of the filing determined, and notice given in writing to the legislator 1329 whose Statement is in issue. Should it be determined that the Statement requires correction, 1330 augmentation or revision, the legislator involved shall be directed to make the changes required within 1331 such time as shall be set under the rules of each house.

1332 If a legislator, after having been notified in writing in accordance with the rules of the house in 1333 which he sits that his Statement is inadequate as filed, fails to amend his Statement so as to come into 1334 compliance within the time limit set, he shall be subject to disciplinary action by the house in which he 1335 sits. No legislator shall vote on any question relating to his own Statement.