1997 SESSION

SENATE BILL NO. 813 Offered January 9, 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. trons—Miller, K.G., Benedetti, Bolling, Earley, Hanger, Martin, Norment, Schrock, Stolle and Waddell Referred to the Committee on General Laws Be it enacted by the General Assembly of Virginia: That §§ 2.1-639.15 and 2.1-639.41 of the Code of Virginia are amended and reenacted as llows: § 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 shall be substantially as follows: STATEMENT OF ECONOMIC INTERESTS.
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me fice or position held or sought me address
fice or position held or sought
mes of members of immediate family
DEFINITIONS AND EXPLANATORY MATERIAL.
immediate family" means (i) a spouse and (ii) any other person esiding in the same household as the officer or employee, who a dependent of the officer or employee or of whom the officer e employee is a dependent.
Dependent" means any person, whether or not related by blood or arriage, who receives from the officer or employee, or provides the officer or employee, more than one-half of his financial apport.
Business" means a corporation, partnership, sole proprietorship, .rm, enterprise, franchise, association, trust or foundation, or my other individual or entity carrying on a business or rofession, whether or not for profit.
Gift" means any gratuity, favor, discount, entertainment, ospitality, loan, forbearance, or other item having monetary value. I includes services as well as gifts of transportation, local ravel, lodgings and meals, whether provided in-kind, by purchase a ticket, payment in advance or reimbursement after the expense as been incurred. "Gift" shall not include any offer of a ticket other admission or pass unless the ticket, admission, or pass is sed. "Gift" shall not include honorary degrees and presents from elatives. "Relative" means the donee's spouse, child, uncle, aunt, ecce, or nephew; a person to whom the donee is headed to be married; the donee's or his spouse's parent, candparent, grandchild, brother, or sister; or the donee's cother's or sister's spouse.

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56 TRUST. If you or your immediate family, separately or together, 57 are the only beneficiaries of a trust, treat the trust's assets 58 as if you own them directly. If you or your immediate family has 59 a proportional interest in a trust, treat that proportion of the 60 trust's assets as if you own them directly. For example, if you 61 and your immediate family have a one-third interest in a trust, 62 complete your Statement as if you own one-third of each of the 63 trust's assets. If you or a member of your immediate family 64 created a trust and can revoke it without the beneficiaries' 65 consent, treat its assets as if you own them directly. 66 67 REPORT TO THE BEST OF INFORMATION AND BELIEF. Information 68 required on this Statement must be provided on the basis of the 69 best knowledge, information and belief of the individual filing 70 the Statement as of the date of this report unless otherwise 71 stated. 72 73 complete items 1 through 10. Refer to schedules only if directed. 74 75 You may attach additional explanatory information. 76 77 1. Offices and Directorships. 78 Are you or a member of your immediate family a paid officer 79 or paid director of a business? 80 EITHER check NO / / OR check YES / / and complete 81 Schedule A. 82 2. Personal Liabilities. 83 Do you or a member of your immediate family owe more than 84 \$10,000 to any one creditor including contingent liabilities? 85 (Exclude debts to any government and loans secured by recorded 86 liens on property at least equal in value to the loan.) 87 EITHER check NO / / OR check YES / / and complete 88 Schedule B. 89 3. Securities. 90 Do you or a member of your immediate family, directly or 91 indirectly, separately or together, own securities valued 92 in excess of \$10,000 invested in one business? Account for 93 mutual funds, limited partnerships and trusts. 94 EITHER check NO / / OR check YES / / and complete 95 Schedule C. 96 4. Payments for Talks, Meetings, and Publications. 97 During the past 12 months did you receive lodging, 98 transportation, money, or anything else of value with a 99 combined value exceeding \$200 for a single talk, meeting, 100 or published work in your capacity as an officer or employee of 101 your agency? 102 EITHER check NO / / OR check YES / / and complete 103 Schedule D. 104 5. Gifts. 105 During the past 12 months did a business, government, or 106 individual other than a relative or personal friend furnish 107 you with any gift or gifts the total value of which 108 exceeded \$200 \$25 and for which you neither paid nor 109 renderedservices in exchange? Account for all business 110 entertainment (except if related to your private profession 111 or occupation) even if unrelated to your official duties. 112 EITHER check NO / / OR check YES / / and complete

113 Schedule E. 114 6. Salary and Wages. 115 List each employer that pays you or a member of your immediate 116 family salary or wages in excess of \$10,000 annually. (Exclude 117 state or local government or advisory agencies.) 118 If no reportable salary or wages, check here / /. 119 120 121 122 7. Business Interests. 123 Do you or a member of your immediate family separately or 124 together, operate your own business, or own or control an 125 interest in excess of \$10,000 in a business? 126 EITHER check NO / / OR check YES / / and complete 127 Schedule F. 128 8. Payments for Representation. 129 8A. Did you represent any businesses before any state governmental 130 agencies, excluding courts or judges, for which you received 131 total compensation during the past 12 months in excess of 132 \$1,000, excluding compensation for other services to such 133 businesses and representation consisting solely of the filing 134 of mandatory papers? (Officers and employees of local 135 governmental and advisory agencies do NOT need to answer this 136 question or complete Schedule G-1.) 137 EITHER check NO / / OR check YES / / and complete 138 Schedule G-1. 139 8B. Subject to the same exceptions as in 8A, did persons with whom 140 you have a close financial association (partners, associates or 141 others) represent any businesses before any state governmental 142 agency for which total compensation was received during the past 143 12 months in excess of \$1,000? (Officers and employees of local 144 governmental and advisory agencies do NOT need to answer this 145 question or complete Schedule G-2.) 146 EITHER check NO / / OR check YES / / and complete 147 Schedule G-2. 148 8C. Did you or persons with whom you have a close financial 149 association furnish services to businesses operating in 150 Virginia for which total compensation in excess of \$1,000 151 was received during the past 12 months? 152 EITHER check NO / / OR check YES / / and complete 153 Schedule G-3. 154 9. Real Estate. 155 9A. State Officers and Employees. 156 Do you or a member of your immediate family hold an interest, including a partnership interest, valued at \$10,000 or more in 157 158 real property (other than your principal residence) for which 159 you have not already listed the full address on Schedule F? 160 Account for real estate held in trust. 161 EITHER check NO / / OR check YES / / and complete 162 Schedule H-1. 163 9B. Local Officers and Employees. 164 Do you or a member of your immediate family hold an interest, 165 including a partnership interest, valued at \$10,000 or more in 166 real property located in the county, city or town in which you 167 serve or in a county, city or town contiguous to the county, 168 city or town in which you serve (other than your principal

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	address on Schedu	hich you have not already listed ule F? Account for real estate he / / OR check YES / / and comple	eld in trust.
	Schedule H-2.		
		racts with Government Agencies.	
±0.		ber of your immediate family hold	d an interest
		than \$10,000 in real estate, inc.	
		nership, or trust interest, optic	
		nd contract, which real estate is	
	subject of a com	ntract, whether pending or comple	eted within
	the past twelve	months, with a governmental age	ncy? If the
	real estate cont	tract provides for the leasing or	f the property
	to a governmenta	al agency, do you or a member of	your immediate
	family hold an :	interest in the real estate value	ed at more than
		for all such contracts whether (
		orted in schedules F, H-1, or H-2	
		disclose an interest in a lease of	
	-		
		derived through an ownership into	
		the ownership interest exceeds	three percent
	-	uity of the business.	
	EITHER check NO	/ / OR check YES / / and comp	lete
	Schedule I.		
Sta	tements of Econor	mic Interests are open for public	c inspection.
bea			s moreceron.
		AFFIRMATION BY ALL FILERS	
		AFFIRMATION BI ADD FIDERS	
Si	gnature mmonwealth of Vir		
	of	to wit:	
Th	e foregoing disc	losure form was acknowledged befo	ore me
		19 by	
	tary Public		
		res	
		ded to complete Statement.)	• • •
(Re	curn only 11 need	ueu lo compiele Statement.)	
		SCHEDULES	
		to	
	S	TATEMENT OF ECONOMIC INTERESTS	
		NAME	
SCHE	DULE A - OFFICES	AND DIRECTORSHIPS.	
	Identify each	business of which you or a member	er of your
		ily is a paid officer or paid di	
Name	of Business	Address of Business	Position Hel

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

Savings institut	ions						
Other loan or fi		panies		• •			
Insurance compan				• •		•	
Stock, commodity	v or other	brokerage					
companies Other businesses				••	• • • • • • • • •	•	• • • • • • • •
(State principal		activity					
for each cr		accivity					
							· · · · · · · · ·
Individual credi							
(State principal	business	or					
occupation	of each cr	reditor.)		••			
				• •			
) ITEM
SCHEDULE C - SEC	CURITIES.						
"Securities" INC	LUDES stor	cks, bonds	,	"Seci	urities"	EXCI	LUDES
mutual funds, mo					ificates		
limited partners	ships, and	commodity		annu	ity contr	act	s, and
Eutures contract	s.			insu	rance pol	ici	es.
or a member of y separately or to Do not list	ogether, ow	n securit	ies value	ed in e	excess of	\$10	
by the Comm local gover business in	nonwealth c rnments. Do n this Comm	of Virgini not list nonwealth,	a or its organiza but most	autho: tions : majo:	rities, a that do r busines	geno not ses	cies, or do conduct
business in If no reportable	e securitie	es, check i	here / /	,			
		Туре	of Securi	ty	Ch	eck	one
			bonds, m				More
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Name of Issuer	Entity		etc.)		\$50,000		\$50,00
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339 lodging, transportation, money, or any other thing of value 340 (excluding meals or drinks coincident with a meeting) with 341 combined value exceeding \$200 for your presentation of a single 342 talk, participation in one meeting, or publication of a work in 343 your capacity as an officer or employee of your agency. 344 345 List payments or reimbursements by an advisory or governmental 346 agency only for meetings or travel outside the Commonwealth. 347 348 List a payment even if you donated it to charity. 349 350 Do not list information about a payment if you returned it within 351 60 days or if you received it from an employer already listed 352 under Item 6 or from a source of income listed on Schedule F. 353 354 If no payment must be listed, check here / / 355 _____ 356 _____ 357 358 Type of payment 359 (e.g. honoraria, 360 travel reimburse-361 ment, etc.) Payer Approximate Value Circumstances 362 . 363 . 364 . 365 . 366 367 _____ 368 _____ 369 RETURN TO ITEM 5 370 371 SCHEDULE E - GIFTS. 372 373 List each business, governmental entity, or individual that 374 furnished you with any gift or gifts whose total value 375 exceeded \$200 \$25 during the past 12 months and for 376 which you neither paid nor rendered services in exchange. 377 Do not list business entertainment related to your private 378 profession or occupation. Do not list gifts from a relative 379 or from a personal friend given for reasons clearly unrelated to 380 your public position. Do not list campaign contributions 381 publicly reported as required by Chapter 9 (§ 24.2-900 et seq.) 382 of Title 24.2 of the Code of Virginia. 383 _____ 384 _____ 385 386 Name of Business, 387 Organization, or City or County 388 Individual and State Approximate Value 389 . 390 . 391 . 392 . 393 394

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			REIURN	TO ITEM
SCHEDULE F - B	BUSINESS INT	ERESTS.		
(including partnership immediate f	rental prop , or corpor	for each self or family of erty, a farm, or consultination in which you or a more rately or together, own an 10,000.	ng work), ember of	your
or corporat nature of t under a tra otherwise, interests h	te name, lis the enterpri ade, partner give the ad held in trus	wned or operated under a t t that name; otherwise me se. If rental property is ship, or corporate name, i dress of each property. Ac t.	rely expl owned or list the ccount fo	ain the operate name onl r busine
 Name of				
Business, Corporation,			GLOSS	income
Partnership,				
Farm; Address	City or			
of Rental Property	County and State	, <u>,</u> ,	\$50,000	More th \$50,000
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SCHEDULE G-1 - List the bu agency, exc total compe excluding c	• PAYMENTS F sinesses yo luding any ensation dur compensation	· · · · · · · · · · · · · · · · · · ·	RETURN state gov you rece excess o ch busine	TO ITEM rernmenta ived f \$1,000 sses and
SCHEDULE G-1 - List the bu agency, exc total compe excluding c representat papers. Identify ea amount esti	PAYMENTS F esinesses yo cluding any ensation dur compensation cion consist ach business mated compe	OR REPRESENTATION BY YOU. u represented before any s court or judge, for which ing the past 12 months in for other services to suc ing solely of the filing of , the nature of the represent nsation received by categor	RETURN state gov you rece excess o ch busine of mandat	TO ITEM rernmenta ived f \$1,000 sses and ory
SCHEDULE G-1 - List the bu agency, exc total compe excluding c representat papers. Identify ea amount esti from each s	PAYMENTS F sinesses yo luding any ensation dur compensation ion consist ach business mated compe such busines	OR REPRESENTATION BY YOU. u represented before any a court or judge, for which ing the past 12 months in for other services to suc ing solely of the filing o , the nature of the represent nsation received by categors.	RETURN RETURN state gov you rece excess o ch busine of mandat sentation ory	TO ITEM TO ITEM ived f \$1,000 ory and the
SCHEDULE G-1 - List the bu agency, exc total compe excluding c representat papers. Identify ea amount esti from each s Only STATE	• PAYMENTS F • PAYMENTS F usinesses yo cluding any ensation dur compensation cion consist ach business mated compe such busines officers an	OR REPRESENTATION BY YOU. u represented before any s court or judge, for which ing the past 12 months in for other services to suc ing solely of the filing of , the nature of the represent nsation received by categors. d employees should complet	 RETURN state gov you rece excess o ch busine of mandat sentation ory te this S	TO ITEM rernmenta ived f \$1,000 sses and ory and the chedule.
SCHEDULE G-1 - List the bu agency, exc total compe excluding c representat papers. Identify ea amount esti from each s Only STATE	PAYMENTS F sinesses yo luding any ensation dur compensation ion consist ach business mated compe such busines officers an	OR REPRESENTATION BY YOU. u represented before any a court or judge, for which ing the past 12 months in for other services to suc ing solely of the filing o , the nature of the represent nsation received by categors.	RETURN RETURN state gov you rece excess o ch busine of mandat sentation ory te this S	TO ITEM rernmenta ived f \$1,000 ory and the chedule.

452 Business Business Representation Agency \$10,000 \$10,000 Estimated Compensation _____ SCHEDULE G-2 - PAYMENTS FOR REPRESENTATION BY ASSOCIATES. List the businesses that have been represented before any state governmental agency, excluding any court or judge, by persons who are your partners, associates or others with whom you have a close financial association and who received total compensation in excess of \$1,000 for such representation during the past 12 months, excluding representation consisting solely of the filing of mandatory papers. Identify such businesses by type and also name the state governmental agencies before which such person appeared on behalf of such businesses. Only STATE officers and employees should complete this Schedule. Type of business Name of state governmental agency _____ _____ 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 of the estimated compensation received for all businesses falling within each category. _____ Value of Compensation

	Check if services were rendered	Type of service rendered	\$1,001Moretothan\$10,000\$10,000Estimated compensation
Electric utilities			
Gas utilities			
Telephone utilities			
Water utilities			
Cable television			
companies			
Interstate			
transportation			
companies			
Intrastate			
transportation			
companies			
Oil or gas			
retail			
companies			
Banks			
Savings			· · · · · · · · · · · · · ·
institutions			
Loan or finance			
companies			
Manufacturing			
companies			
(state type of			
product,			
e.g., textile,			
furniture,			
etc.)	• • • • • • • • • • • • • • •	• • • • • • • • • •	
Mining companies	• • • • • • • • • • • • • • •		•••••
Life insurance			
companies	• • • • • • • • • • • • • •	• • • • • • • • •	•••••
Casualty insurance			
companies	• • • • • • • • • • • • • •		
Other insurance			
companies			
Retail companies			
Beer, wine or			
liquor companies			
or distributors			
Trade associations			
Professional			
associations			
Associations of			
public employees			
or officials			
Counties, cities or			
towns			
Labor organizations			
Other			
			RETURN TO ITEM

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565 566 SCHEDULE H-1 - REAL ESTATE - STATE OFFICERS AND EMPLOYEES. 567 568 List real estate other than your principal residence in which 569 you or a member of your immediate family hold an interest, 570 including a partnership interest, option, easement, or land 571 contract, valued at \$10,000 or more. You may list each parcel 572 of real estate individually if you wish. 573 574 575 _____ 576 577 List each location Describe the type of If the real estate 578 (state, and county real estate you own is owned or recorded 579 or city) where you in each location in a name other than (business, recreational, your own, list that 580 own real estate. 581 apartment, commercial, name. 582 open land, etc.). 583 584 585 586 587 588 589 SCHEDULE H-2 - REAL ESTATE - LOCAL OFFICERS AND EMPLOYEES. 590 591 List real estate located in your county, city, or town, and any 592 contiguous county, city, or town other than your principal 593 residence in which you or a member of your immediate family hold **594** an interest, including a partnership interest, option, easement, 595 or land contract, valued at \$10,000 or more. You may list each 596 parcel of real estate individually if you wish. 597 598 599 _____ 600 601 List the counties Describe the type of If the real estate 602 and cities in which real estate you own is owned or recorded 603 you own real estate. in each county or city in a name other than 604 (business, recreational, your own, list that 605 apartment, commercial, name. 606 open land, etc.). 607 608 609 610 611 612 613 614 615 RETURN TO ITEM 10 616 617 SCHEDULE I - REAL ESTATE CONTRACTS WITH GOVERNMENT AGENCIES. 618 619 List all contracts, whether pending or completed within the 620 past twelve months, with a governmental agency for the sale

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621 or exchange of real estate in which you or a member of 622 your immediate family holds an interest, including a corporate, 623 partnership or trust interest, option, easement, or land contract, 624 valued at \$10,000 or more. List all contracts with a 625 governmental agency for the lease of real estate in which you or a 626 member of your immediate family holds such an interest valued at 627 \$1,000 or more. This requirement to disclose an interest in a 628 lease does not apply to an interest derived through an ownership 629 interest in a business unless the ownership interest exceeds three 630 percent of the total equity of the business. 631 State officers and employees report contracts with state agencies. 632 Local officers and employees report contracts with local agencies. 633 634 List your real List each State the annual governmental agency 635 estate interest income from the 636 and the person which is a party to contract, and the the contract and in-637 or entity, amount, if any, of 638 including the dicate the county income you or any 639 type of entity, or city where the real immediate family 640 which is party estate is located. member derives 641 to the contract. annually from the 642 Describe any contract. 643 management role 644 and the percentage 645 ownership interest 646 you or your 647 immediate family 648 member has in the 649 real estate or entity. 650 651 652 653 654 655 656 657 § 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 658 659 as follows: 660 661 STATEMENT OF ECONOMIC INTERESTS. **662** 663 Name 664 Office or position held or sought 665 Home address 666 Names of members of immediate family 667 DEFINITIONS AND EXPLANATORY MATERIAL. 668 669 670 "Immediate family" means (i) a spouse and (ii) any other person 671 residing in the same household as the legislator, who is a dependent 672 of the legislator or of whom the legislator is a dependent. 673 674 "Dependent" means any person, whether or not related by blood or 675 marriage, who receives from the legislator, or provides to the 676 legislator, more than one-half of his financial support. 677

678 "Business" means a corporation, partnership, sole proprietorship, 679 firm, enterprise, franchise, association, trust or foundation, or 680 any other individual or entity carrying on a business or profession, 681 whether or not for profit. 682 683 "Gift" means any gratuity, favor, discount, entertainment, 684 hospitatity, loan, forbearance, or other item having monetary value. 685 It includes services as well as gifts of transportation, local 686 travel, lodgings and meals, whether provided in-kind, by purchase 687 of a ticket, payment in advance or reimbursement after the expense 688 has been incurred. "Gift" shall not include any offer of a ticket 689 or other admission or pass unless the ticket, admission, or pass is 690 used. "Gift" shall not include honorary degrees and presents from 691 relatives. "Relative" means the donee's spouse, child, uncle, aunt, 692 niece, or nephew; a person to whom the donee is 693 engaged to be married; the donee's or his spouse's parent, grandparent, 694 grandchild, brother, or sister; or the donee's brother's or sister's 695 spouse. **696** 697 TRUST. If you or your immediate family, separately or together, are 698 the only beneficiaries of a trust, treat the trust's assets as if 699 you own them directly. If you or your immediate family has a 700 proportional interest in a trust, treat that proportion of the 701 trust's assets as if you own them directly. For example, if you 702 and your immediate family have a one-third interest in a trust, 703 complete your Statement as if you own one-third of each of the 704 trust's assets. If you or a member of your immediate family created 705 a trust and can revoke it without the beneficiaries' consent, treat 706 its assets as if you own them directly. 707 $708\,$ REPORT TO THE BEST OF INFORMATION AND BELIEF. Information required 709 on this Statement must be provided on the basis of the best 710 knowledge, information and belief of the individual filing the 711 Statement as of the date of this report unless otherwise stated. 712 713 COMPLETE ITEMS 1 THROUGH 10. REFER TO SCHEDULES ONLY IF DIRECTED. 714 715 You may attach additional explanatory information. 716 717 1. Offices and Directorships. 718 719 Are you or a member of your immediate family a paid officer or paid 720 director of a business? 721 EITHER check NO / / OR check YES / / and complete Schedule A. 722 2. Personal Liabilities. 723 Do you or a member of your immediate family owe more than \$10,000 724 to any one creditor including contingent liabilities? (Exclude debts 725 to any government and loans secured by recorded liens on property 726 at least equal in value to the loan.) 727 EITHER check NO / / OR check YES / / and complete Schedule B. 728 3. Securities. 729 Do you or a member of your immediate family, directly or 730 indirectly, separately or together, own securities valued in 731 excess of \$10,000 invested in one business? Account for mutual 732 funds, limited partnerships and trusts. 733 EITHER check NO / / OR check YES / / and complete Schedule C.

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734 4. Payments for Talks, Meetings, and Publications. 735 During the past 12 months did you receive lodging, transportation, 736 money, or anything else of value with a combined value exceeding 737 \$200 for a single talk, meeting, or published work in your capacity 738 as a legislator? 739 EITHER check NO / / OR check YES / / and complete Schedule D. 740 5. Gifts. 741 During the past 12 months did a business, government, or individual 742 other than a relative or personal friend furnish you with any gift 743 or gifts the total value of which exceeded $\frac{200}{25}$ and for 744 which you neither paid nor rendered services in exchange? 745 Account for all business entertainment (except if related to your 746 private profession or occupation) even if unrelated to your 747 official duties. 748 EITHER check NO / / OR check YES / / and complete Schedule E. 749 6. Salary and Wages. 750 List each employer that pays you or a member of your immediate 751 family salary or wages in excess of \$10,000 annually. (Exclude 752 state or local government or advisory agencies.) 753 If no reportable salary or wages, check here / /. 754 755 756 757 758 759 7. Business Interests. 760 Do you or a member of your immediate family separately or together, 761 operate your own business, or own or control an interest in excess 762 of \$10,000 in a business? $763\,$ EITHER check NO / / OR check YES / / and complete Schedule F. 764 8. Payments for Representation. 765 8A. Did you represent any businesses before any state governmental 766 agencies, excluding courts or judges, for which you received total 767 compensation during the past 12 months in excess of \$1,000, 768 excluding compensation for other services to such businesses and 769 representation consisting solely of the filing of mandatory papers? 770~ EITHER check NO / / OR check YES / / and complete Schedule G-1. 771 8B. Subject to the same exceptions as in 8A, did persons with whom 772 you have a close financial association (partners, associates or 773 others) represent any businesses before any state governmental 774 agency for which total compensation was received during the past 775 12 months in excess of \$1,000? 776 EITHER check NO / / OR check YES / / and complete Schedule G-2. 777 8C. Did you or persons with whom you have a close financial 778 association furnish services to businesses operating in Virginia 779 for which total compensation in excess of \$1,000 was received 780 during the past 12 months? 781 EITHER check NO / / OR check YES / / and complete Schedule G-3. 782 9. Real Estate. 783 Do you or a member of your immediate family hold an interest, 784 including a partnership interest, valued at \$10,000 or more in real 785 property (other than your principal residence) for which you have 786 not already listed the full address on Schedule F? Account for real 787 estate held in trust. 788 EITHER check NO / / OR check YES / / and complete Schedule H. 789 10. Real Estate Contracts with State Governmental Agencies. 790 Do you or a member of your immediate family hold an interest valued

791 at more than \$10,000 in real estate, including a corporate, 792 partnership, or trust interest, option, easement, or land contract, 793 which real estate is the subject of a contract, whether pending or 794 completed within the past twelve months, with a state governmental 795 agency? If the real estate contract provides for the leasing of the 796 property to a state governmental agency, do you or a member of your 797 immediate family hold an interest in the real estate, including a 798 corporate, partnership, or trust interest, option, easement, or land 799 contract valued at more than \$1,000? Account for all such contracts 800 whether or not your interest is reported in Schedules F or H. This 801 requirement to disclose an interest in a lease does not apply to an 802 interest derived through an ownership interest in a business unless 803 the ownership interest exceeds three percent of the total equity of 804 the business. 805 EITHER check NO / / OR check YES / / and complete Schedule I. 806 807 Statements of Economic Interests are open for public inspection. 808 809 AFFIRMATION 810 811 In accordance with the rules of the house in which I serve, if I 812 receive a request that this disclosure statement be corrected, 813 augmented, or revised in any respect, I hereby pledge that I shall 814 respond promptly to the request. I understand that if a 815 determination is made that the statement is insufficient, I will 816 satisfy such request or be subjected to disciplinary action of 817 my house. 818 819 I swear or affirm that the foregoing information is full, true and 820 correct to the best of my knowledge. 821 822 Signature 823 Commonwealth of Virginia 824 of to wit: 825 The foregoing disclosure form was acknowledged before me 826 This day of 19. . . by 827 Notary Public 828 My commission expires 829 (Return only if needed to complete Statement.) 830 831 SCHEDULES 832 to 833 STATEMENT OF ECONOMIC INTERESTS 834 835 NAME 836 837 SCHEDULE A - OFFICES AND DIRECTORSHIPS. 838 839 Identify each business of which you or a member of 840 your immediate family is a paid officer or paid director. 841 842 843 _____ 844 845 Name of Business Address of Business Position Held 846 .

847 . 848 . 849 . 850 _____ 851 _____ 852 853 RETURN TO ITEM 2 854 855 SCHEDULE B - PERSONAL LIABILITIES. 856 857 Report personal liability by checking each category. Report only 858 debts in excess of \$10,000. Do not report debts to any government. 859 Do not report loans secured by recorded liens on property at 860 least equal in value to the loan. 861 Report contingent liabilities below and indicate which debts are 862 contingent. 863 864 1. My personal debts are as follows: 865 866 _____ 867 _____ 868 869 Check one Check 870 appropriate \$10,001 to More than 871 \$50,000 categories \$50,000 872 Banks 873 Savings institutions 874 Other loan or finance companies 875 Insurance companies 876 Stock, commodity or other brokerage 877 companies 878 Other businesses: 879 (State principal business activity for each 880 creditor.) 881 882 883 Individual creditors: 884 (State principal business or occupation of 885 each creditor.) 886 887 888 889 890 2. The personal debts of the members of my immediate family are as 891 follows: 892 893 _____ 894 _____ 895 896 Check Check one 897 appropriate \$10,001 to More than 898 categories \$50,000 \$50,000 899 900 Banks 901 Savings institutions 902 Other loan or finance companies 903 Insurance companies

904 Stock, commodity or other brokerage 905 companies 906 Other businesses: 907 (State principal business activity for each 908 creditor.) 909 910 911 Individual creditors: 912 (State principal business or occupation of 913 each creditor.) 914 915 916 917 RETURN TO ITEM 3 918 919 SCHEDULE C - SECURITIES. 920 921 "Securities" EXCLUDES "Securities" INCLUDES stocks, bonds, 922 mutual funds, money market funds, certificates of deposit, 923 limited partnerships, and commodity annuity contracts, and 924 futures contracts. insurance policies. 925 926 Identify each business or Virginia governmental entity in which you 927 or a member of your immediate family, directly or indirectly, 928 separately or together, own securities valued in excess of \$10,000. 929 930 Do not list U.S. Bonds or other government securities not issued 931 by the Commonwealth of Virginia or its authorities, agencies, or 932 local governments. Do not list organizations that do not do 933 business in this Commonwealth, but most major businesses conduct 934 business in Virginia. Account for securities held in trust. 935 936 If no reportable securities, check here / / 937 938 _____ 939 _____ 940 Type of Security Check one 941 (stocks, bonds, mutual or More 942 money market funds, \$10,001 to than Type of 943 Name of Issuer Entity \$50,000 etc.) \$50,000 944 . 945 . 946 . 947 . 948 _____ 949 _____ 950 951 RETURN TO ITEM 4 952 953 SCHEDULE D - PAYMENTS FOR TALKS, MEETINGS, AND PUBLICATIONS. 954 955 List each source from which you received during the past 12 956 months lodging, transportation, money, or any other thing of 957 value (excluding meals or drinks coincident with a meeting) with 958 combined value exceeding \$200 for your presentation of a single 959 talk, participation in one meeting, or publication of a work in

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your	capacity as a legisla	tor.					
	List payments or reimbursements by the Commonwealth only for meetings or travel outside the Commonwealth.						
List	List a payment even if you donated it to charity.						
	ot list information ab						
60 d	ays or if you received r Item 6 or from a sou	it from an employer	already listed				
	o payment must be list						
			Type of payme (e.g. honorar:				
Daver	Approximate Valu	e Circumstance	travel reimburs s ment, etc				
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			RETURN TO ITEM				
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1017 1018 Complete this Schedule for each self or family owned business 1019 (including rental property, a farm, or consulting work), 1020 partnership, or corporation in which you or a member of your 1021 immediate family, separately or together, own an interest having 1022 a value in excess of \$10,000. 1023 1024 If the enterprise is owned or operated under a trade, 1025 partnership, or corporate name, list that name; otherwise merely 1026 explain the nature of the enterprise. If rental property is owned 1027 or operated under a trade, partnership, or corporate name, list the name only; otherwise, give the address of each property. 1028 1029 Account for business interests held in trust. 1030 1031 _____ 1032 _____ 1033 1034 Name of Business, Gross income 1035 Corporation, 1036 Partnership, Nature of Enterprise \$50,000 More 1037 Farm; Address of City or County (farming, law, rental or than 1038 Rental Property and State property, etc.) less \$50,000 1039 1040 1041 . 1042 . 1043 _____ 1044 1045 1046 RETURN TO ITEM 8 1047 1048 SCHEDULE G-1 - PAYMENTS FOR REPRESENTATION BY YOU. 1049 1050 List the businesses you represented before any state governmental 1051 agency, excluding any court or judge, for which you received 1052 total compensation during the past 12 months in excess of \$1,000, 1053 excluding compensation for other services to such businesses and 1054 representation consisting solely of the filing of mandatory 1055 papers. 1056 1057 Identify each business, the nature of the representation and the 1058 amount estimated compensation received by category from 1059 each such business. 1060 1061 1062 _____ 1063 1064 Amount Received 1065 Name of Type of Purpose of Name of \$1,001 to More than 1066 Business Business Representation Agency \$10,000 \$10,000 1067 Estimated compensation 1068 1069 1070 . 1071 . 1072 _____

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1073 _____ 1074 1075 SCHEDULE G-2 - PAYMENTS FOR REPRESENTATION BY ASSOCIATES. 1076 1077 List the businesses that have been represented before any state 1078 governmental agency, excluding any court or judge, by persons who 1079 are your partners, associates or others with whom you have a 1080 close financial association and who received total compensation 1081 in excess of \$1,000 for such representation during the past 12 1082 months, excluding representation consisting solely of the filing 1083 of mandatory papers. 1084 1085 Identify such businesses by type and also name the state 1086 governmental agencies before which such person appeared on behalf 1087 of such businesses. 1088 1089 _____ 1090 _____ 1091 Type of business Name of state governmental agency 1092 1093 1094 1095 1096 1097 1098 1099 schedule G-3 - payments for representation generally. 1100 1101 Indicate below types of businesses that operate in Virginia to 1102 which services were furnished by you or persons with whom you 1103 have a close financial association and for which total 1104 compensation in excess of \$1,000 was received during the past 12 1105 months. 1106 1107 Identify opposite each category of businesses listed below (i) 1108 the type of business, (ii) the type of service rendered and (iii) 1109 the value of the estimated compensation received for all businesses 1110 falling within each category. 1111 1112 1113 _____ 1114 1115 Value of Compensation 1116 Check if Type of \$1,001 More services service to than 1117 1118 were rendered rendered \$10,000 \$10,000 1119 Estimated 1120 compensation 1121 Electric utilities 1122 Gas utilities 1123 Telephone utilities 1124 Water utilities 1125 Cable television 1126 companies 1127 Interstate 1128 transportation 1129 companies

Intrastate			
transportation			
companies			
Oil or gas retail			
companies			
Banks			
Savings			
institutions			
Loan or finance			
companies			
Manufacturing compar			
(state type of produ			
e.g., textile, furn	iture		
etc.)			
Mining companies			
Life insurance			
companies			
Casualty insurance			
companies			
Other insurance			
companies			
Retail companies			
Beer, wine or liquor	C		
companies or			
distributors			
Trade associations Professional		• • • • • • • • •	
associations			
Associations of			
public employees			
or officials			
Counties, cities or			
towns			
Labor organizations			
Other			
			RETURN TO ITEM
SCHEDULE H - REAL EST	FATE.		
	-		residence in which ye
			an interest, includin
a partnership inte			
valued at \$10,000			ch parcel of real
estate individual	ly if you wish.		
ist each location I	Describe the ty	pe or real	II The real estate
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state, and county e	estate you own	in each	
state, and county e or city) where you		in each ess,	owned or recorded a name other than
state, and county e r city) where you i wn real estate.	estate you own location (busin	in each ess, partment,	owned or recorded

1186 1187 1188 1189 1190 1191 _____ _____ 1192 1193 1194 RETURN TO ITEM 10 1195 1196 SCHEDULE I - REAL ESTATE CONTRACTS WITH STATE GOVERNMENTAL AGENCIES. 1197 1198 List all contracts, whether pending or completed within the past 1199 twelve months, with a state governmental agency for the sale or 1200 exchange of real estate in which you or a member of your 1201 immediate family holds an interest, including a corporate, 1202 partnership or trust interest, option, easement, or land 1203 contract, valued at \$10,000 or more. List all contracts with a 1204 state governmental agency for the lease of real estate in which 1205 you or a member of your immediate family holds such an interest 1206 valued at \$1,000 or more. This requirement to disclose an 1207 interest in a lease does not apply to an interest derived through 1208 an ownership interest in a business unless the ownership interest 1209 exceeds three percent of the total equity of the business. 1210 1211 _____ 1212 _____ 1213 1214 List your real List each State the annual 1215 estate interest and income from the governmental agency 1216 the person or entity, which is a party to contract, and the 1217 including the type of the contract and amount, if any, indicate the county 1218 entity, which is of income you or 1219 party to the contract. or city where the any immediate 1220 Describe any real estate is family member 1221 management role and located. derives annually 1222 the percentage from the 1223 ownership interest contract. 1224 you or your immediate 1225 family member has in 1226 the real estate 1227 or entity. 1228 1229 1230 1231 1232 1233 _____ 1234 _____ 1235 1236 B. Any legislator who makes a knowing misstatement of a material fact on the Statement of

1236 B. Any legislator who makes a knowing misstatement of a material fact on the Statement of 1237 Economic Interests shall be subject to disciplinary action for such violations by the house in which the 1238 legislator sits.

1239 C. In accordance with the rules of each house, the Statement of Economic Interests of all members 1240 of each house shall be reviewed. If a legislator's Statement is found to be inadequate as filed, the 1241 legislator shall be notified in writing, directed to file an amended Statement correcting the indicated 1242 deficiencies, and a time set within which such amendment shall be filed. If the Statement of Economic

1243 Interests, in either its original or amended form, is found to be adequate as filed, the legislator's filing 1244 shall be deemed in full compliance with this section as to the information disclosed thereon.

1245 D. Ten percent of the membership of a house, on the basis of newly discovered facts, may in writing 1246 request the house in which those members sit, in accordance with the rules of that house, to review the 1247 Statement of Economic Interests of another member of that house in order to determine the adequacy of 1248 his filing. In accordance with the rules of each house, each Statement of Economic Interests shall be 1249 promptly reviewed, the adequacy of the filing determined, and notice given in writing to the legislator 1250 whose Statement is in issue. Should it be determined that the Statement requires correction, 1251 augmentation or revision, the legislator involved shall be directed to make the changes required within 1252 such time as shall be set under the rules of each house.

1253 If a legislator, after having been notified in writing in accordance with the rules of the house in 1254 which he sits that his Statement is inadequate as filed, fails to amend his Statement so as to come into 1255 compliance within the time limit set, he shall be subject to disciplinary action by the house in which he 1256 sits. No legislator shall vote on any question relating to his own Statement.