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970997757 1 SENATE BILL NO. 813 2 3 4 5 6 AMENDMENT IN THE NATURE OF A SUBSTITUTE (Proposed by the Senate Committee on General Laws on January 29, 1997) (Patron Prior to Substitute—Senator Miller, K.G.) 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 The disclosure form to be used for filings required by § 2.1-639.13 A and D, and § 2.1-639.14 A and 13 D shall be substantially as follows: 14 15 STATEMENT OF ECONOMIC INTERESTS. 16 **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 "Dependent" means any person, whether or not related by blood or **30** marriage, who receives from the officer or employee, or provides 31 to the officer or employee, more than one-half of his financial 32 support. 33 34 "Business" means a corporation, partnership, sole proprietorship, 35 firm, enterprise, franchise, association, trust or foundation, or any other individual or entity carrying on a business or 37 profession, whether or not for profit. 38 39 40 "Close financial association" does not mean an association based on the receip-41 t of retirement benefits or deferred compensation from a business by which the-42 person filing this statement is 43 no longer employed. "Close financial association" does not include an associa-44 tion based on the receipt of compensation for work performed by the person fil-45 ing as an independent contractor of a business that represents an entity before any state governmental agency when t-47 he person filing has had no communications with the state governmental agency. 48 49 **50** "Gift" means any gratuity, favor, discount, entertainment,

51 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

54 of a ticket, payment in advance or reimbursement after the expense has been incurred. "Gift" shall not include any offer of a ticket SB813S1 2 of 24

56 or other admission or pass unless the ticket, admission, or pass is 57 used. "Gift" shall not include honorary degrees and presents from 58 relatives. "Relative" means the donee's spouse, child, uncle, aunt, 59 niece, or nephew; a person to whom the donee is 60 engaged to be married; the donee's or his spouse's parent, 61 grandparent, grandchild, brother, or sister; or the donee's **62** brother's or sister's spouse.

63 64

65 TRUST. If you or your immediate family, separately or together, 66 are the only beneficiaries of a trust, treat the trust's assets 67 as if you own them directly. If you or your immediate family has 68 a proportional interest in a trust, treat that proportion of the 69 trust's assets as if you own them directly. For example, if you 70 and your immediate family have a one-third interest in a trust, 71 complete your Statement as if you own one-third of each of the 72 trust's assets. If you or a member of your immediate family 73 created a trust and can revoke it without the beneficiaries' 74 consent, treat its assets as if you own them directly.

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76 REPORT TO THE BEST OF INFORMATION AND BELIEF. Information required on this Statement must be provided on the basis of the 78 best knowledge, information and belief of the individual filing 79 the Statement as of the date of this report unless otherwise 80 stated.

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

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84 You may attach additional explanatory information.

85 **86** 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.

91 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.

98 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.

105 4. Payments for Talks, Meetings, and Publications. 106 During the past 12 months did you receive lodging, 107 transportation, money, or anything else of value with a 108 combined value exceeding \$200 for a single talk, meeting, 109 or published work in your capacity as an officer or employee of 110 your agency?

111 EITHER check NO / / OR check YES / / and complete 112 Schedule D.

During the past 12 months did a business, government, or

individual other than a relative or personal friend furnish

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116
        you with any gift or gifts the total value of which
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        exceeded $200 $100 and for which you neither paid nor rendered
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        services in exchange? Account for all business entertainment
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        (except if related to your private profession or occupation)
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        even if unrelated to your official duties.
123
        EITHER check NO / / OR check YES / / and complete
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        Schedule E.
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    6. Salary and Wages.
126
        List each employer that pays you or a member of your immediate
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        family salary or wages in excess of $10,000 annually. (Exclude
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        state or local government or advisory agencies.)
129
        If no reportable salary or wages, check here / /.
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              131
              ......
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              ......
133
    7. Business Interests.
134
        Do you or a member of your immediate family separately or
135
        together, operate your own business, or own or control an
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        interest in excess of $10,000 in a business?
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        EITHER check NO / / OR check YES / / and complete
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        Schedule F.
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    8. Payments for Representation.
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    8A. Did you represent any businesses before any state governmental
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        agencies, excluding courts or judges, for which you received
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        total compensation during the past 12 months in excess of
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        $1,000, excluding compensation for other services to such
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        businesses and representation consisting solely of the filing
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        of mandatory papers and subsequent representation regarding the
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147
        mandatory papers? (Officers and employees of local
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        governmental and advisory agencies do NOT need to answer this
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        question or complete Schedule G-1.)
150
        EITHER check NO / / OR check YES / / and complete
151
        Schedule G-1.
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    8B. Subject to the same exceptions as in 8A, did persons with whom
153
        you have a close financial association (partners, associates or
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160 Schedule G-2.

161 8C. Did you or persons with whom you have a close financial
162 association furnish services to businesses operating in
163 Virginia for which total compensation in excess of \$1,000
164 was received during the past 12 months?
165 EITHER check NO / / OR check YES / / and complete
166 Schedule G-3.

EITHER check NO $\ / \ \ /$ OR check YES $\ / \ \ /$ and complete

question or complete Schedule G-2.)

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

167 9. Real Estate.

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113 5. Gifts.

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168 9A. State Officers and Employees.

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169 Do you or a member of your immediate family hold an interest, 170 including a partnership interest, valued at \$10,000 or more in 171 real property (other than your principal residence) for which 172 you have not already listed the full address on Schedule F? 173 Account for real estate held in trust. 174 EITHER check NO / / OR check YES / / and complete 175 Schedule H-1. 176 9B. Local Officers and Employees. 177 Do you or a member of your immediate family hold an interest, 178 including a partnership interest, valued at \$10,000 or more in 179 real property located in the county, city or town in which you 180 serve or in a county, city or town contiguous to the county, 181 city or town in which you serve (other than your principal 182 residence) for which you have not already listed the full 183 address on Schedule F? Account for real estate held in trust. 184 EITHER check NO / / OR check YES / / and complete 185 Schedule H-2. 186 10. Real Estate Contracts with Government Agencies. 187 Do you or a member of your immediate family hold an interest 188 valued at more than \$10,000 in real estate, including a 189 corporate, partnership, or trust interest, option, 190 easement, or land contract, which real estate is the 191 subject of a contract, whether pending or completed within 192 the past twelve months, with a governmental agency? If the 193 real estate contract provides for the leasing of the property 194 to a governmental agency, do you or a member of your immediate 195 family hold an interest in the real estate valued at more than 196 \$1,000? Account for all such contracts whether or not your 197 interest is reported in schedules F, H-1, or H-2. This 198 requirement to disclose an interest in a lease does not apply 199 to an interest derived through an ownership interest in a 200 business unless the ownership interest exceeds three percent 201 of the total equity of the business. 202 EITHER check NO $\ / \ \ /$ OR check YES $\ / \ \ /$ and complete 203 Schedule I. 204 205 Statements of Economic Interests are open for public inspection. 206 207 AFFIRMATION BY ALL FILERS 208 209 I swear or affirm that the foregoing information is full, true and 210 correct to the best of my knowledge. 211 212 Signature..... 213 Commonwealth of Virginia 214of......to wit: 215 The foregoing disclosure form was acknowledged before me 216 This......19.. by 217 Notary Public 218 My commission expires..... 219 (Return only if needed to complete Statement.) 220 221 SCHEDULES 222 223 STATEMENT OF ECONOMIC INTERESTS

NAME.....

	iness of which you or		
Name of Business	Address of Busines	s Po	osition Hel
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			RN TO ITEM
SCHEDULE B - PERSONAL LIA	ABILITIES.		
equal in value to the Report contingent liak contingent.		dicate which	debts are
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appropriate		\$10,001 to	
categories		\$50,000	\$50,000
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Savings institution	ns		
Other loan or finar	nce companies		
Insurance companies	S		
Stock, commodity or	r other brokerage		
companies			
Other businesses:			
(State principal bu			
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Individual creditor	 rs:		
(State principal bu	usiness or		
occupation of	each creditor.)		
		RETURI	N TO ITEM
SCHEDULE C - SECURI	ITIES.		
"Securities" INCLUI	DES stocks, bonds,	"Securities" I	EXCLUDES
mutual funds, money		certificates o	of deposi
limited partnership	ps, and commodity	annuity contra	acts, and
futures contracts.		insurance poli	icies.
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or a member of your	r immediate family, direc	-	_
or a member of your		-	_
or a member of your separately or toget	r immediate family, direc ther, own securities valu	ed in excess of	\$10,000.
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Name of Issu	-		etc.)		
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					TO ITEM 4
SCHEDULE D -	- PAYMENTS FOR	TALKS, MEE	TINGS, AND PO	UBLICATIONS.	
lodging, (excludir combined talk, par	transportation of transportation of meals or draw value exceeding tricipation in acity as an official extension of the control	n, money, c inks coinci ng \$200 for one meetin	r any other t dent with a r your present g, or publica	thing of val meeting) wit tation of a ation of a w	ue h single
agency or	ments or reimbunly for meeting	gs or trave	l outside the	e Commonweal	
Do not 1					
60 days ounder Ite	ist information or if you received on 6 or from a ment must be	ived it fro source of listed, che	m an employer	r already li	.sted
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60 days of under Ited If no payon Payer SCHEDULE E - List each furnished exceeded	Approximate V	vernmental gift or giing the pas	m an employer income listed ck here / /	Type of (e.g. ho travel r s ment, RETURN adividual th tal value and for whice	payment noraria, eimburseetc.) TO ITEM 5
60 days of under Ited If no pay	Approximate When the substitute of the substitut	vernmental gift or giing the pas	m an employer income listed ck here / /	Type of (e.g. ho travel r ment, RETURN mdividual th tal value and for whice Do not l	payment onoraria, reimburseetc.)

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rate name, list the name only property. Account for business Gross income terprise w, \$50,000 More that the structure of the
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Gross income terprise w, \$50,000 More th rty, etc.) or less \$50,000
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therwise merely property is own

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.

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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.

Amount Received

```
Name Type Purpose
                     Name
                              $1,001 More
of
            of Repre- of
                               to than
       οf
                     Agency $10,000 $10,000
Busi- Busi- senta-
ness ness tion
                             $1,001 $10,001 $50,001 $100,001 $250,001
                               to
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                                                                  and
                             $10,000 $50,000 $100,000 $250,000
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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. SB813S1 10 of 24

Type of busin	ess	Name of	state g	overnment	tal agenc	Y
SCHEDULE G-3	- PAYMENT	'S FOR REF	PRESENTAT	ION GENE	RALLY.	
Indicate b which serv						
a close fi						
excess of	\$1,000 wa	s receive	ed during	the past	t 12 montl	ns.
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type of bu						
	, ,		4 1			
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value <i>by d</i> businesses					received	tor all
					received	for all
	falling	within ea	ach catego	ory.		
businesses	falling	within ea	ach catego	ory.		
businesses	falling	within ea	ach catego	ory. 		
businesses	falling	within ea	ach catego	ory. Value (
businesses	falling Check if	within ea	\$1,001	ory. Value o		
businesses	falling Check if ser-	within ea	\$1,001	ory. Value of More		
businesses	falling Check if ser- vices	Type of services	\$1,001	ory. Value o		
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businesses	falling Check if ser- vices were ren-	Type of services ren-	\$1,001 \$1,001 to	Value of More than \$10,000	\$50,001	\$100,001
businesses	falling Check if ser- vices were ren-	Type of services ren-	\$1,001 \$1,001 to	Value of More than \$10,000	\$50,001	\$100,001
businesses	falling Check if ser- vices were ren-	Type of services ren-	\$1,001 \$1,001 to	Value of More than \$10,000	\$50,001	\$100,001
businesses	falling Check if ser- vices were ren-	Type of services ren-	\$1,001 \$1,001 to	Value of More than \$10,000	\$50,001	\$100,001
businesses Electric utilities Gas util-	falling Check if ser- vices were ren-	Type of services ren-	\$1,001 \$1,001 to \$10,000	Value of More than \$10,000 to \$50,000	\$50,001	\$100,001
Electric utilities Gas utilities Telephone utilities	falling Check if ser- vices were ren-	Type of services ren-	\$1,001 \$1,001 to \$10,000	Value of More than \$10,000 to \$50,000	\$50,001	\$100,001
Electric utilities Gas utilities Telephone utilities Water util-	Check if ser- vices were ren- dered	Type of services ren-	\$1,001 to \$10,000	Value (Value (than	\$50,001	\$100,001
Electric utilities Gas utilities Telephone utilities Water utilities	Check if ser- vices were ren- dered	Type of services ren-	\$1,001 to \$10,000	Value (Value (than	\$50,001	\$100,001
Electric utilities Gas utilities Telephone utilities Water utilities Cable tele-	Check if ser- vices were ren- dered	Type of services ren-	\$1,001 \$0 \$1,000 \$10,000	Value (Value (than	\$50,001	\$100,001
Electric utilities Gas utilities Telephone utilities Water utilities	Check if ser- vices were ren- dered	Type of services ren-	\$1,001 \$0 \$1,000 \$10,000	Value (Value (than	\$50,001	\$100,001

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tion com- panies	 	 	 	
Intrastate				
transporta				
tion com-				
panies	 	 	 	
Oil or gas				
retail com-				
panies	 	 	 	
Banks	 	 	 	
Savings				
institutions	 	 	 	
Loan or fi-				
nance com-				
panies	 	 	 	
Manufactur-				
ing com-				
panies (state				
type of pro-				
duct, e.g.,				
textile, fur-				
niture 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				
distributors	 	 	 	
Trade asso-				
ciations	 	 	 	
Professional				
associations	 	 	 	
Associations				
of public				
employees or				
officials	 	 	 	
Counties,	 	 	 	
cities or				
towns	 	 	 	
Labor organi-	 	 	 	- • •
zations	 	 	 	_
Other	 	 	 	• • •

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List real estate you or a member o	ESTATE - STATE OFFICERS AN	
you or a member o		D EMPLOYEES.
contract, valued	other than your principal of your immediate family ho nership interest, option, e at \$10,000 or more. You mandividually if you wish.	ld an interest, asement, or land y list each parcel
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.).	is owned or recorded in a name other than your own, list that
		your principal immediate family hold st. option. easement.
an interest, incl or land contract,	en you or a member of your uding a partnership intere valued at \$10,000 or more state individually if you w	<pre>immediate family hold st, option, easement, . You may list each</pre>
an interest, incl or land contract,	uding a partnership intere valued at \$10,000 or more	<pre>immediate family hold st, option, easement, . You may list each</pre>
an interest, incl or land contract, parcel of real es	uding a partnership intere valued at \$10,000 or more state individually if you w Describe the type of	immediate family hold st, option, easement, You may list each ish. If the real estate
an interest, incl or land contract, parcel of real es	Describe the type of real estate you own	immediate family hold st, option, easement, You may list each ish. If the real estate is owned or recorded in a name other than
an interest, incl or land contract, parcel of real es 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.).	immediate family hold st, option, easement, You may list each ish. If the real estate is owned or recorded in a name other than your own, list that name.
an interest, incl or land contract, parcel of real es	Describe the type of real estate you own in each county or city (business, recreational, apartment, commercial, open land, etc.).	immediate family hold st, option, easement, You may list each ish. If the real estate is owned or recorded in a name other than your own, list that name.
an interest, incl or land contract, parcel of real es 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.).	immediate family hold st, option, easement, . You may list each ish. If the real estate is owned or recorded in a name other than your own, list that name.
an interest, incl or land contract, parcel of real es 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.).	immediate family hold st, option, easement, . You may list each ish. If the real estate is owned or recorded in a name other than your own, list that name.

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.

State officers and employees report contracts with state agencies. Local officers and employees report contracts with local agencies.

691	List your real	List each	State the annual
692	estate interest	governmental agency	income from the
693	and the person	which is a party to	contract, and the
694	or entity,	the contract and in-	amount, if any, of
695	including the	dicate the county	income you or any
696	type of entity,	or city where the real	immediate family
697	which is party	estate is located.	member derives
698	to the contract.		annually from the
699	Describe any		contract.
700	management role		
701	and the percentage		
702	ownership interest		
703	you or your		
704	immediate family		
705	member has in the		
706	real estate or entity.		
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§ 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 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 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.

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734 735

"Business" means a corporation, partnership, sole proprietorship, 736 firm, enterprise, franchise, association, trust or foundation, or 737 any other individual or entity carrying on a business or profession, whether or not for profit.

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"Close financial association" does not mean an association based on the recei-742 pt of retirement benefits or deferred compensation from a business by which th-743 e legislator is no longer employed. "Close 744 financial association" does not include an association based on the receipt ofcompensation for work performed by the legislator as an independent contracto-746 r of a business that represents an entity before any state 747 governmental agency when the legislator has had no communications with the state governmental agency.

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"Gift" means any gratuity, favor, discount, entertainment, 752 hospitality, loan, forbearance, or other item having monetary value. 753 It includes services as well as gifts of transportation, local 754 travel, lodgings and meals, whether provided in-kind, by purchase 755 of a ticket, payment in advance or reimbursement after the expense 756 has been incurred. "Gift" shall not include any offer of a ticket or other admission or pass unless the ticket, admission, or pass is 758 used. "Gift" shall not include honorary degrees and presents from 759 relatives. "Relative" means the donee's spouse, child, uncle, aunt, 760 niece, or nephew; a person to whom the donee is 761 engaged to be married; the donee's or his spouse's parent, grandparent, 762 grandchild, brother, or sister; or the donee's brother's or sister's 763 spouse.

764

765 TRUST. If you or your immediate family, separately or together, are 766 the only beneficiaries of a trust, treat the trust's assets as if 767 you own them directly. If you or your immediate family has a 768 proportional interest in a trust, treat that proportion of the 769 trust's assets as if you own them directly. For example, if you 770 and your immediate family have a one-third interest in a trust, 771 complete your Statement as if you own one-third of each of the 772 trust's assets. If you or a member of your immediate family created 773 a trust and can revoke it without the beneficiaries' consent, treat 774 its assets as if you own them directly.

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776 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.

779 **780**

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

782

783 You may attach additional explanatory information.

784

1. Offices and Directorships.

785 786 787

Are you or a member of your immediate family a paid officer or paid 788 director of a business?

789 EITHER check NO / / OR check YES / / and complete Schedule A.

790 2. Personal Liabilities. 791 Do you or a member of your immediate family owe more than \$10,000 792 to any one creditor including contingent liabilities? (Exclude debts to any government and loans secured by recorded liens on property **794** at least equal in value to the loan.) 795

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

3. Securities.

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797 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 800 funds, limited partnerships and trusts.

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

4. Payments for Talks, Meetings, and Publications. 803 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.

809 During the past 12 months did a business, government, or individual 810 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 812 neither paid nor rendered services in exchange? Account for all 813 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.

818 List each employer that pays you or a member of your immediate family salary or wages in excess of \$10,000 annually. (Exclude **820** state or local government or advisory agencies.)

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

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7. Business Interests.

828 Do you or a member of your immediate family separately or together, operate your own business, or own or control an interest in excess of \$10,000 in a business?

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

- 8. Payments for Representation.
- 8A. Did you represent any businesses before any state governmental agencies, excluding courts or judges, for which you received total compensation during the past 12 months in excess of \$1,000, excluding compensation for other services to such businesses and representation consisting solely of the filing of mandatory papers

and subsequent representation regarding the mandatory papers? EITHER check NO / / OR check YES / / and complete Schedule G-1.

8B. Subject to the same exceptions as in 8A, did persons with whom you have a close financial association (partners, associates or others) represent any businesses before any state governmental agency for which total compensation was received during the past 12 months in excess of \$1,000?

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

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847 8C. Did you or persons with whom you have a close financial 848 association furnish services to businesses operating in Virginia 849 for which total compensation in excess of \$1,000 was received **850** during the past 12 months?

851 EITHER check NO / / OR check YES / / and complete Schedule G-3. 852

9. Real Estate.

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902 903 the business.

853 Do you or a member of your immediate family hold an interest, 854 including a partnership interest, valued at \$10,000 or more in real 855 property (other than your principal residence) for which you have 856 not already listed the full address on Schedule F? Account for real estate held in trust.

858 EITHER check NO / / OR check YES / / and complete Schedule H.

10. Real Estate Contracts with State Governmental Agencies. $860\,$ Do you or a member of your immediate family hold an interest valued 861 at more than \$10,000 in real estate, including a corporate, 862 partnership, or trust interest, option, easement, or land contract,

863 which real estate is the subject of a contract, whether pending or 864 completed within the past twelve months, with a state governmental 865 agency? If the real estate contract provides for the leasing of the 866 property to a state governmental agency, do you or a member of your immediate family hold an interest in the real estate, including a 868 corporate, partnership, or trust interest, option, easement, or land contract valued at more than \$1,000? Account for all such contracts 870 whether or not your interest is reported in Schedules F or H. This 871 requirement to disclose an interest in a lease does not apply to an 872 interest derived through an ownership interest in a business unless

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

Statements of Economic Interests are open for public inspection.

873 the ownership interest exceeds three percent of the total equity of

AFFIRMATION

In accordance with the rules of the house in which I serve, if I 882 receive a request that this disclosure statement be corrected, 883 augmented, or revised in any respect, I hereby pledge that I shall 884 respond promptly to the request. I understand that if a 885 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.

892	Signature
893	Commonwealth of Virginia
894	of to wit:
895	The foregoing disclosure form was acknowledged before me
896	This day of 19 by
897	Notary Public
898	My commission expires
899	(Return only if needed to complete Statement.)

SCHEDULES

		NAME			
SCHEDULE	A - OFFICES	AND DIRECTORSHIPS.			
	your immedia	h business of which yo	ficer or p	paid d	lirector.
		Address of Busines			
		Address of Busines			
	· · · · · · · · · · · · · · · · · · ·			 	
				RETUR	RN TO ITEM
SCHEDULE	B - PERSONAL	LIABILITIES.			
Do not least Report contir	report loan equal in value contingent agent.	\$10,000. Do not report secured by recorded ue to the loan. liabilities below and are as follows:	liens on p	proper	ty at
Do not least Report contir	report loan equal in value contingent agent.	s secured by recorded ue to the loan. liabilities below and	liens on p	oroper which	debts are
Do not least Report contir	report loan equal in value contingent agent.	s secured by recorded ue to the loan. liabilities below and are as follows:	liens on p	oroper which	debts are
Do not least Report contir 1. My per	report loan equal in value contingent agent. resonal debts agent. Check ropriate	s secured by recorded ue to the loan. liabilities below and are as follows:	liens on prindicate with the control of the control	which neck c	debts are
Do not least Report contir	report loan equal in value contingent agent. sonal debts agent.	s secured by recorded ue to the loan. liabilities below and are as follows:	liens on prindicate with the control of the control	which neck c	debts are
Do not least Report contir 1. My per appr cat Banks	report loan equal in value contingent agent. rsonal debts according to the contingent agent.	s secured by recorded ue to the loan. liabilities below and are as follows:	liens on prindicate with the control of the control	oroper which	debts are
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Do not least Report continuation. My per cat Banks Savings Other local Insurance	creport loan equal in value contingent equal in value contingent equal in value contingent equal debts equal	s secured by recorded ue to the loan. liabilities below and are as follows:	liens on prindicate with the control of the control	proper which	debts are
Do not least Report continuation. My per cat Banks Savings Other local Insurance	creport loan equal in value contingent agent. csonal debts accompanies commodity or equal in value agent.	s secured by recorded ue to the loan. liabilities below and are as follows:	liens on principle with the state of the sta	oroper which	debts are
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Do not least Report continuation of the continuation of the companies of t	creport loan equal in value contingent agent. Check copriate regories institutions companies commodity or establishesses: principal bus and creditors	s secured by recorded ue to the loan. liabilities below and are as follows: e companies other brokerage iness activity for each companies ine	ch	proper which	debts are
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appropriat		\$10,001 to	More th
categorie	S	\$50,000	\$50,000
Banks			
Savings instit	utions		
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Insurance comp		• • • • • • • • • • • • • • • • • • • •	
	ty or other brokerage		
companies		• • • • • • • • •	• • • • •
Other business		,	
(State principate creditor.)	al business activity for	r eacn	
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Individual cre	ditors:	• • • • • • • • • • • • • • • • • • • •	
	al business or occupation	on of	
each creditor.			
	,		
		RETURN	TO ITEM
SCHEDULE C - S	ECURITIES.		
"Securities" T	NCLUDES stocks, bonds,	"Securities"	יים מודו באליו וויט איז
	money market funds,	certificates	
	rships, and commodity	annuity cont	_
futures contra		insurance po	
		-	
Identify each b	usiness or Virginia gove	ernmental entity in	which y
or a member of	your immediate family, o	directly or indirec	tly,
separately or t	ogether, own securities	valued in excess o	f \$10,00
	_		
	U.S. Bonds or other gove		
by the Commo:	nwealth of Virginia or		
	ments. Do not list organ		
local govern	-b-i-	most major business	es condu
local govern business in	this Commonwealth, but wireinia. Account for so	oguriting hold in t	ruat
local govern business in	this Commonwealth, but a Virginia. Account for so	ecurities held in t	rust.
local govern business in business in	Virginia. Account for se		rust.
local govern business in business in			rust.
local govern business in business in	Virginia. Account for se	e / /	
local govern business in business in	Virginia. Account for see securities, check here	e / / 	
local govern business in business in	Virginia. Account for see securities, check here	e / / curity	 Check on
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local government business in business in business in lift no reportable lift no reportable lift.	Virginia. Account for some securities, check here Type of Securities (stocks, bone type of money markets).	e / /	Check on Mo to th
local government business in business in business in life no reportable life no reportabl	Virginia. Account for some securities, check here Type of Securities of Securities of Securities of Type of Securities of Secur	e / /	Check on Mo: to th

1017 1018 1019 1020 1021 RETURN TO ITEM 4 1022 1023 SCHEDULE D - PAYMENTS FOR TALKS, MEETINGS, AND PUBLICATIONS. 1024 1025 List each source from which you received during the past 12 1026 months lodging, transportation, money, or any other thing of 1027 value (excluding meals or drinks coincident with a meeting) with 1028 combined value exceeding \$200 for your presentation of a single 1029 talk, participation in one meeting, or publication of a work in 1030 your capacity as a legislator. 1031 1032 List payments or reimbursements by the Commonwealth only for 1033 meetings or travel outside the Commonwealth. 1034 1035 List a payment even if you donated it to charity. 1036 1037 Do not list information about a payment if you returned it within 1038 60 days or if you received it from an employer already listed 1039 under Item 6 or from a source of income listed on Schedule F. 1040 1041 If no payment must be listed, check here / / 1042 1043 1044 1045 1046 Type of payment 1047 (e.g. honoraria, 1048 travel reimburse-1049 Payer Approximate Value Circumstances ment, etc.) 1050 . 1051 1052 1053 1054 1055 1056 1057 RETURN TO ITEM 5 1058 1059 SCHEDULE E - GIFTS. 1060 1061 List each business, governmental entity, or individual that 1062 furnished you with any gift or gifts whose total value exceeded 1063 \$200 \$100 during the past 12 months and for which you neither paid nor 1064 rendered services in exchange. Do not list business entertainment 1065 1066 related to your private profession or occupation. Do not list 1067 gifts or other things of value given by a relative or personal 1068 1069 friend for reasons clearly unrelated to your public position. 1070 not list campaign contributions publicly reported as required by 1071 Chapter 9 of Title 24.2 of the Code of Virginia.

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Name of Business					
Organization, or Individual		ity or County nd State	Annro	oximate	Value
		· · · · · · · · · · · · · · · · · · ·		 	
			RI	ETURN TO	ITEM
SCHEDULE F - BUSI	NESS INTERESTS				
	ly, separately	in which you or a or together, own			
partnership, o	r gornorato na			arrida m	020111
explain the na or operated unthe name only; Account for bu	ture of the ender a trade, postherwise, gives interes	terprise. If rentartnership, or converted the address of the second trust	tal proporate f each p	perty is e name, property	owned list
explain the na or operated un the name only; Account for bu	ture of the ender a trade, postherwise, gives interes	terprise. If rentartnership, or converted the address of the second trust	tal proporate f each p	perty is e name, property	owned
explain the na or operated un the name only; Account for bu Name of Business, Corporation, Partnership, Farm; Address of Rental Property	ture of the ender a trade, potential otherwise, gives interestants. City or County and State	Nature of Enter (farming, law, property, etc.	tal proporate feach p. erprise rental	gerty is a name, property Gross i \$50,00 or less	owned list
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explain the na or operated un the name only; Account for bu Name of Business, Corporation, Partnership, Farm; Address of Rental Property	ture of the ender a trade, potential otherwise, gives interestants. City or County and State	Nature of Enty (farming, law, property, etc.	tal proported for each proported	Gross i \$50,00 or less	owned list
explain the na or operated un the name only; Account for bu Name of Business, Corporation, Partnership, Farm; Address of Rental Property	ture of the ender a trade, posterior of the ender a trade, posterior of the ender and State	Nature of Enter (farming, law, property, etc.	tal proported for each proported	gross i	owned list
explain the na or operated un the name only; Account for bu Name of Business, Corporation, Partnership, Farm; Address of Rental Property	ture of the ender a trade, potential of the ender a trade, potential of the ender and state	Nature of Enter (farming, law, property, etc.	tal proported for each proported	Gross i	owned list
explain the na or operated un the name only; Account for bu Name of Business, Corporation, Partnership, Farm; Address of Rental Property	ture of the ender a trade, potential of the ender a trade, potential of the ender and state	Nature of Enty (farming, law, property, etc.	tal proported for each proported	Gross i	owned list
explain the na or operated un the name only; Account for bu Name of Business, Corporation, Partnership, Farm; Address of Rental Property	ture of the ender a trade, potential of the ender a trade, potential of the ender and state	Nature of Enty (farming, law, property, etc.	tal proportate feach feach proportate feach feach proportate feach f	gerty is a rame, property Gross i \$50,00 or less	owned list

papers filed by you.

1130 1131	
1132 1133	Identify each business, the nature of the representation and the amount received by dollar category from each such business. You
1134 1135	may state the type, rather than name, of the business if you are
1136 1137	required by law not to reveal the name of the business represented
1138 1139	by you.
1140 1141	
1142	
1143 1144	
1145 1146	Name Type Purpose Name \$1,001 More of of Repre- of to than
1147 1148	Busi- Busi- senta- Agency \$10,000 \$10,000
1149	ness ness tion \$1,001 \$10,001 \$50,001 \$100,001 \$250,001
1150 1151	to to to to and \$10,000 \$50,000 \$100,000 \$250,000 over
1152 1153	
1154	
1155 1156	
1160 1161 1162 1163 1164 1165 1166 1167 1168 1169 1170 1171 1172 1173 1174 1175	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.
1177 1178	
1179 1180	Type of business Name of state governmental agency
1181	
1182 1183	
1184 1185	

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1187 SCHEDULE G-3 - PAYMENTS FOR REPRESENTATION GENERALLY.
1188
1189
      Indicate below types of businesses that operate in Virginia to
1190
      which services were furnished by you or persons with whom you
1191
      have a close financial association and for which total
1192
      compensation in excess of $1,000 was received during the past 12
1193
      months.
1194
1195
      Identify opposite each category of businesses listed below (i)
1196
      the type of business, (ii) the type of service rendered and (iii)
1197
      the value by dollar category of the compensation received for all
1198
1199
      businesses falling within each category.
1200
1201 -----
1202 -----
1203
1204
                                 Value of Compensation
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               Check Type $1,001 More
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                if
                       of
                      ser-
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               ser-
                              to than
1208
                      vices $10,000 $10,000
               vices
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               were
                      ren-
1210
                     dered
1211
               ren-
1212
               dered
                             $1,001 $10,001 $50,001 $100,001 $250,001
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1214
                             $10,000 $50,000 $100,000 $250,000
                                                        over
1215
    Electric
1216 utilities
                      .....
               . . . . .
1217
   Gas util-
1218
    ities
               .....
                                          1219
    Telephone
1220 utilities
               . . . . .
                     . . . . . .
                             . . . . . .
1221
   Water util-
1222
    ities
               .....
                                          .....
1223 Cable tele-
1224 vision
1225
    companies
               . . . . .
                      ..... .... ..... ..... .....
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    Interstate
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   transporta
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     tion com-
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1231 Intrastate
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    transporta
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    tion com-
1234
    panies
               . . . . .
                      ..... ... .... .... .... ..... .....
1235
    Oil or gas
1236
     retail com-
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    panies
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    Banks
               . . . . .
                      . . . . . .
                             1239
     Savings
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     institutions ..... ..... .....
                                                1241
    Loan or fi-
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type of pro- duct, e.g., textile, fur- niture etc.) Mining com-	-						
_							
panies						• • • • • •	
Life insur- ance com- panies							
Casualty in- surance com- panies							
Other insurance com-	••••		••••	••••	••••	••••	
panies Retail com- panies							
Beer, wine or liquor companies or							
distributors Trade asso-							
ciations Professional associations							
Associations of public employees or							
officials Counties, cities or	• • • •	• • • • •	• • • • •	•••••	• • • • •	• • • • •	
towns Labor organi- zations							
Other							

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

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estate interest and governmental agency income from the person or entity, which is a party to contract, an including the type of the contract and entity, which is indicate the county of income your party to the contract. Or city where the any immediate family member has in the real estate or entity.		-	st in a business unless th nt of the total equity of	-
	List estat the p inclu entit party Descr manag the p owner you o famil the r	your real e interest and erson or entity, ding the type of y, which is to the contract. ibe any ement role and ercentage ship interest r your immediate y member has in eal estate	List each governmental agency which is a party to the contract and indicate the county or city where the real estate is	State the annincome from to contract, and amount, if an of income you any immediate family member derives annua from the
		-		

- 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.