

VIRGINIA ACTS OF ASSEMBLY — CHAPTER

An Act to amend and reenact §§ 2.2-3117 and 30-111 of the Code of Virginia, relating to the State and Local Government Conflict of Interests Act and the General Assembly Conflicts of Interests Act; disclosure of real estate parcels.

[S 430]

Approved

Be it enacted by the General Assembly of Virginia:**1. That §§ 2.2-3117 and 30-111 of the Code of Virginia are amended and reenacted as follows:**

§ 2.2-3117. Disclosure form.

The disclosure form to be used for filings required by § 2.2-3114 A and D, and § 2.2-3115 A and D shall be substantially as follows:

STATEMENT OF ECONOMIC INTERESTS.

Name
 Office or position held or sought
 Address
 Names of members of immediate family

DEFINITIONS AND EXPLANATORY MATERIAL.

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

"Close financial association" means an association in which the person filing shares significant financial involvement with an individual and the filer would reasonably be expected to be aware of the individual's business activities and would have access to the necessary records either directly or through the individual. "Close financial association" does not mean an association based on (i) the receipt of retirement benefits or deferred compensation from a business by which the person filing this statement is no longer employed, or (ii) the receipt of compensation for work performed by the person filing as an independent contractor of a business that represents an entity before any state governmental agency when the person filing has had no communications with the state governmental agency.

"Contingent liability" means a liability that is not presently fixed or determined, but may become fixed or determined in the future with the occurrence of some certain event.

"Dependent" means any person, whether or not related by blood or marriage, who receives from the officer or employee, or provides to the officer or employee, more than one-half of his financial support.

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

"Immediate family" means (i) a spouse and (ii) any other person residing in the same household as the officer or employee, who is a dependent of the officer or employee or of whom the officer or employee is a dependent.

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

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

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

You may attach additional explanatory information.

1. Offices and Directorships.

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

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

58 2. Personal Liabilities.

59 Do you or a member of your immediate family owe more than \$10,000 to any one creditor including
60 contingent liabilities? (Exclude debts to any government and loans secured by recorded liens on property
61 at least equal in value to the loan.)

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

63 3. Securities.

64 Do you or a member of your immediate family, directly or indirectly, separately or together, own
65 securities valued in excess of \$10,000 invested in one business? Account for mutual funds, limited
66 partnerships and trusts.

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

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

69 During the past 12 months did you receive lodging, transportation, money, or anything else of value
70 with a combined value exceeding \$200 for a single talk, meeting, or published work in your capacity as
71 an officer or employee of your agency?

72 EITHER check NO / / OR check YES / / and complete Schedule D.

73 5. Gifts.

74 During the past 12 months did a business, government, or individual other than a relative or personal
75 friend (i) furnish you with any gift or entertainment at a single event, and the value received by you
76 exceeded \$50 in value or (ii) furnish you with gifts or entertainment in any combination and the value
77 received by you exceeded \$100 in total value; and for which you neither paid nor rendered services in
78 exchange? Account for entertainment events only if the average value per person attending the event
79 exceeded \$50 in value. Account for all business entertainment (except if related to your private
80 profession or occupation) even if unrelated to your official duties.

81 EITHER check NO / / OR check YES / / and complete Schedule E.

82 6. Salary and Wages.

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

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

86

87

88

89 7. Business Interests.

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

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

93 8. Payments for Representation and Other Services.

94 8A. Did you represent, excluding activity defined as lobbying in § 2.2-419, any businesses before any
95 state governmental agencies, excluding courts or judges, for which you received total compensation
96 during the past 12 months in excess of \$1,000, excluding compensation for other services to such
97 businesses and representation consisting solely of the filing of mandatory papers and subsequent
98 representation regarding the mandatory papers? (Officers and employees of local governmental and
99 advisory agencies do NOT need to answer this question or complete Schedule G-1.)

100 EITHER check NO / / OR check YES / / and complete Schedule G-1.

101 8B. Subject to the same exceptions as in 8A, did persons with whom you have a close financial
102 association (partners, associates or others) represent, excluding activity defined as lobbying in § 2.2-419,
103 any businesses before any state governmental agency for which total compensation was received during
104 the past 12 months in excess of \$1,000? (Officers and employees of local governmental and advisory
105 agencies do NOT need to answer this question or complete Schedule G-2.)

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

107 8C. Did you or persons with whom you have a close financial association furnish services to
108 businesses operating in Virginia pursuant to an agreement between you and such businesses, or between
109 persons with whom you have a close financial association and such businesses for which total
110 compensation in excess of \$1,000 was received during the past 12 months?

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

112 9. Real Estate.

113 9A. State Officers and Employees.

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

117 EITHER check NO / / OR check YES / / and complete Schedule H-1.

9B. Local Officers and Employees.

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

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

10. Real Estate Contracts with Governmental Agencies.

Do you or a member of your immediate family hold an interest valued at more than \$10,000 in real estate, including a corporate, partnership, or trust interest, option, easement, or land contract, which real estate is the subject of a contract, whether pending or completed within the past 12 months, with a governmental agency? If the real estate contract provides for the leasing of the property to a governmental agency, do you or a member of your immediate family hold an interest in the real estate valued at more than \$1,000? Account for all such contracts whether or not your interest is reported in Schedule F, H-1, or H-2. This requirement to disclose an interest in a lease does not apply to an interest derived through an ownership interest in a business unless the ownership interest exceeds three percent of the total equity of the business.

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

Statements of Economic Interests are open for public inspection. AFFIRMATION BY ALL FILERS.

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

Signature

Commonwealth of Virginia

..... of to wit:

The foregoing disclosure form was acknowledged before me

This day of, 20. . . , by

Notary Public

My commission expires

(Return only if needed to complete Statement.)

SCHEDULES

to

STATEMENT OF ECONOMIC INTERESTS.

NAME

SCHEDULE A - OFFICES AND DIRECTORSHIPS.

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

-----	-----	-----
-----	-----	-----
Name of Business	Address of Business	Position Held
-----	-----	-----
-----	-----	-----
-----	-----	-----
-----	-----	-----
-----	-----	-----
-----	-----	-----

RETURN TO ITEM 2

SCHEDULE B - PERSONAL LIABILITIES.

Report personal liability by checking each category. Report only debts in excess of \$10,000. Do not report debts to any government. Do not report loans secured by recorded liens on property at least equal in value to the loan.

Report contingent liabilities below and indicate which debts are contingent.

1. My personal debts are as follows:

-----	-----	-----
-----	-----	-----
Check	Check one	
appropriate	\$10,001 to	More than
categories	\$50,000	\$50,000
Banks	_____	_____
Savings institutions	_____	_____
Other loan or finance companies	_____	_____
Insurance companies	_____	_____

177 Stock, commodity or other brokerage companies _____
 178 Other businesses: _____
 179 (State principal business activity for each
 180 creditor.) _____
 181 _____
 182 _____
 183 Individual creditors: _____
 184 (State principal business or _____
 185 occupation of each creditor.) _____
 186 _____
 187 _____
 188 -----
 189 -----

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

191 -----
 192 -----
 193 Check Check one
 194 appropriate \$10,001 to More than
 195 categories \$50,000 \$50,000
 196 Banks _____
 197 Savings institutions _____
 198 Other loan or finance companies _____
 199 Insurance companies _____
 200 Stock, commodity or other brokerage companies _____
 201 Other businesses: _____
 202 (State principal business activity for each
 203 creditor.) _____
 204 _____
 205 _____
 206 Individual creditors: _____
 207 (State principal business or _____
 208 occupation of each creditor.) _____
 209 _____
 210 _____
 211 -----
 212 -----

213 RETURN TO ITEM 3

214 SCHEDULE C - SECURITIES.

215 "Securities" INCLUDES stocks, bonds, "Securities" EXCLUDES
 216 mutual funds, limited partnerships, certificates of deposit,
 217 and commodity futures contracts. money market funds, annuity
 218 contracts, and insurance policies.

219 Identify each business or Virginia governmental entity in which you or a member of your immediate
 220 family, directly or indirectly, separately or together, own securities valued in excess of \$10,000. Name
 221 each entity and type of security individually.

222 Do not list U.S. Bonds or other government securities not issued by the Commonwealth of Virginia
 223 or its authorities, agencies, or local governments. Do not list organizations that do not do business in
 224 this Commonwealth, but most major businesses conduct business in Virginia. Account for securities held
 225 in trust.

226 If no reportable securities, check here / /.

227 -----
 228 -----
 229 Check one
 230 Type of Security \$10,001 \$50,001 More
 231 Type of (stocks, bonds, mutual to to than
 232 Name of Issuer Entity funds, etc.) \$50,000 \$250,000 \$250,000
 233 -----

RETURN TO ITEM 4

SCHEDULE D - PAYMENTS FOR TALKS, MEETINGS, AND PUBLICATIONS.

List each source from which you received during the past 12 months lodging, transportation, money, or any other thing of value (excluding meals or drinks coincident with a meeting) with combined value exceeding \$200 for your presentation of a single talk, participation in one meeting, or publication of a work in your capacity as an officer or employee of your agency.

List payments or reimbursements by an advisory or governmental agency only for meetings or travel outside the Commonwealth.

List a payment even if you donated it to charity.

Do not list information about a payment if you returned it within 60 days or if you received it from an employer already listed under Item 6 or from a source of income listed on Schedule F.

If no payment must be listed, check here / /.

Payer	Approximate Value	Circumstances	Type of payment (e.g. honoraria, travel reimburse- ment, etc.)
-----	-----	-----	-----
-----	-----	-----	-----
-----	-----	-----	-----
-----	-----	-----	-----
-----	-----	-----	-----

RETURN TO ITEM 5

SCHEDULE E - GIFTS.

List each business, governmental entity, or individual that, during the past 12 months, (i) furnished you with any gift or entertainment at a single event and the value received by you exceeded \$50 in value, or (ii) furnished you with gifts or entertainment in any combination and the value received by you exceeded \$100 in total value; and for which you neither paid nor rendered services in exchange. List each such gift or event. Do not list entertainment events unless the average value per person attending the event exceeded \$50 in value. Do not list business entertainment related to your private profession or occupation. Do not list gifts or other things of value given by a relative or personal friend for reasons clearly unrelated to your public position. Do not list campaign contributions publicly reported as required by Chapter 9.3 (§ 24.2-945 et seq.) of Title 24.2 of the Code of Virginia.

Name of Business, Organization, or Individual	City or County and State	Gift or Event	Approximate Value
-----	-----	-----	-----
-----	-----	-----	-----
-----	-----	-----	-----
-----	-----	-----	-----
-----	-----	-----	-----

RETURN TO ITEM 6

SCHEDULE F - BUSINESS INTERESTS.

Complete this Schedule for each self-owned or family-owned business (including rental property, a farm, or consulting work), partnership, or corporation in which you or a member of your immediate family, separately or together, own an interest having a value in excess of \$10,000.

If the enterprise is owned or operated under a trade, partnership, or corporate name, list that name; otherwise, merely explain the nature of the enterprise. If rental property is owned or operated under a trade, partnership, or corporate name, list the name only; otherwise, give the address of each property.

293 Account for business interests held in trust.

294	-----	-----	-----	-----	-----	-----
295	-----	-----	-----	-----	-----	-----
296	Name of Business,			Gross Income		
297	Corporation,					
298	Partnership,	City or	Nature of Enterprise	\$50,001	More	
299	Farm; Address of	County	(farming, law, rental	\$50,000	to	than
300	Rental Property	and State	property, etc.)	or less	\$250,000	\$250,000
301	-----	-----	-----	-----	-----	-----
302	-----	-----	-----	-----	-----	-----
303	-----	-----	-----	-----	-----	-----
304	-----	-----	-----	-----	-----	-----
305	-----	-----	-----	-----	-----	-----
306	-----	-----	-----	-----	-----	-----

307 RETURN TO ITEM 8

308 SCHEDULE G-1 - PAYMENTS FOR REPRESENTATION BY YOU.

309 List the businesses you represented, excluding activity defined as lobbying in § 2.2-419, before any
 310 state governmental agency, excluding any court or judge, for which you received total compensation
 311 during the past 12 months in excess of \$1,000, excluding compensation for other services to such
 312 businesses and representation consisting solely of the filing of mandatory papers and subsequent
 313 representation regarding the mandatory papers filed by you.

314 Identify each business, the nature of the representation and the amount received by dollar category
 315 from each such business. You may state the type, rather than name, of the business if you are required
 316 by law not to reveal the name of the business represented by you.

317 Only STATE officers and employees should complete this Schedule.

318	-----									
319	-----									
320			Pur-		Amount Received					
321			pose							
322	Name	Type	of	Name						
323	of	of	Repre-	of	\$1,001	\$10,001	\$50,001	\$100,001	\$250,001	
324	Busi-	Busi-	senta-	Agen-	to	to	to	to	and	
325	ness	ness	tion	cy	\$10,000	\$50,000	\$100,000	\$250,000	over	
326	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----
327	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----
328	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----
329	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----
330	-----									
331	-----									

332 If you have received \$250,001 or more from a single business within the reporting period, indicate
 333 the amount received, rounded to the nearest \$10,000.

334 Amount Received:_____.

335 SCHEDULE G-2 - PAYMENTS FOR REPRESENTATION BY ASSOCIATES.

336 List the businesses that have been represented, excluding activity defined as lobbying in § 2.2-419,
 337 before any state governmental agency, excluding any court or judge, by persons who are your partners,
 338 associates or others with whom you have a close financial association and who received total
 339 compensation in excess of \$1,000 for such representation during the past 12 months, excluding
 340 representation consisting solely of the filing of mandatory papers and subsequent representation
 341 regarding the mandatory papers filed by your partners, associates or others with whom you have a close
 342 financial association.

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

345 Only STATE officers and employees should complete this Schedule.

346	-----	-----
347	-----	-----
348	Type of business	Name of state governmental agency
349	-----	-----
350	-----	-----

SCHEDULE G-3 - PAYMENTS FOR SERVICES 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 pursuant to an agreement between you and such businesses, or between persons with whom you have a close financial association and such businesses and for which total compensation in excess of \$1,000 was received during the past 12 months.

Identify opposite each category of businesses listed below (i) the type of business, (ii) the type of service rendered and (iii) the value by dollar category of the compensation received for all businesses falling within each category.

	Check if ser- vices were ren- dered	Type of ser- vice ren- dered	\$1,001 to \$10,000	\$10,001 to \$50,000	\$50,001 to \$100,000	\$100,001 to \$250,000	\$250,001 and over
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							

408 Professional
 409 associations _____
 410 Associations of
 411 public employees
 412 or officials _____
 413 Counties, cities
 414 or towns _____
 415 Labor organizations _____
 416 Other _____
 417 -----
 418 -----

RETURN TO ITEM 9

420 SCHEDULE H-1 - REAL ESTATE - STATE OFFICERS AND EMPLOYEES.

421 List real estate other than your principal residence in which you or a member of your immediate
 422 family holds an interest, including a partnership interest, option, easement, or land contract, valued at
 423 \$10,000 or more. ~~You may list each parcel of real estate individually if you wish~~ Each parcel must be
 424 listed individually.

425	426	427	428	429	430	431	432	433	434	435	436	437
		List each location	Describe the type of real	If the real estate is								
		(state, and county	estate you own in each	owned or recorded in								
		or city) where you	location (business, recre-	a name other than your								
		own real estate.	ational, apartment, com-	own, list that name.								
			mercial, open land, etc.).									
		-----	-----	-----								
		-----	-----	-----								
		-----	-----	-----								
		-----	-----	-----								
		-----	-----	-----								
		-----	-----	-----								

439 SCHEDULE H-2 - REAL ESTATE - LOCAL OFFICERS AND EMPLOYEES.

440 List real estate other than your principal residence in which you or a member of your immediate
 441 family holds an interest, including a partnership interest or option, easement, or land contract, valued at
 442 \$10,000 or more. ~~You may list each parcel of real estate individually if you wish~~ Each parcel must be
 443 listed individually. Also list the names of any co-owners of such property, if applicable.

444	445	446	447	448	449	450	451	452	453	454	455	456	457	458	459	460	461
			Describe the type														
			of real estate														
			you own in														
			each location	If the real estate													
		List each location	(business,	is owned or rec-													
		(state, and county	recreational,	orded in a name													
		or city) where	apartment, com-	other than your	List the names												
		you own real	mercial, open	own, list that	of any co-owners,												
		estate.	land, etc.).	name.	if applicable.												
		-----	-----	-----	-----												
		-----	-----	-----	-----												
		-----	-----	-----	-----												
		-----	-----	-----	-----												
		-----	-----	-----	-----												
		-----	-----	-----	-----												

462 SCHEDULE I - REAL ESTATE CONTRACTS WITH GOVERNMENTAL AGENCIES.

463 List all contracts, whether pending or completed within the past 12 months, with a governmental
 464 agency for the sale or exchange of real estate in which you or a member of your immediate family

expense has been incurred. "Gift" shall not include any offer of a ticket or other admission or pass unless the ticket, admission, or pass is used. "Gift" shall not include honorary degrees and presents from relatives. "Relative" means the donee's spouse, child, uncle, aunt, niece, or nephew; a person to whom the donee is engaged to be married; the donee's or his spouse's parent, grandparent, grandchild, brother, or sister; or the donee's brother's or sister's spouse.

"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.

"Lobbyist relationship" means (i) an engagement, agreement, or representation that relates to legal services, consulting services, or public relations services, whether gratuitous or for compensation, between a member or member-elect and any person who is, or has been within the prior calendar year, registered as a lobbyist with the Secretary of the Commonwealth, or (ii) a greater than three percent ownership interest by a member or member-elect in a business that employs, or engages as an independent contractor, any person who is, or has been within the prior calendar year, registered as a lobbyist with the Secretary of the Commonwealth. The disclosure of a lobbyist relationship shall not (i) constitute a waiver of any attorney-client or other privilege, (ii) require a waiver of any attorney-client or other privilege for a third party, or (iii) be required where a member or member-elect is employed or engaged by a person and such person also employs or engages a person in a lobbyist relationship so long as the member or member-elect has no financial interest in the lobbyist relationship.

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

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

COMPLETE ITEMS 1 THROUGH 11. REFER TO SCHEDULES ONLY IF DIRECTED.

You may attach additional explanatory information.

1. Offices and Directorships.

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

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

2. Personal Liabilities.

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

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

3. Securities.

Do you or a member of your immediate family, directly or indirectly, separately or together, own securities valued in excess of \$10,000 invested in one business? Account for mutual funds, limited partnerships and trusts.

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

4. Payments for Talks, Meetings, and Publications.

During the past 12 months did you receive lodging, transportation, money, or anything else of value with a combined value exceeding \$200 for a single talk, meeting, or published work in your capacity as a legislator? Do not include payments and reimbursements from the Commonwealth for meetings attended in your capacity as a legislator; see Question 11 and Schedule D2 to report such meetings.

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

5. Gifts.

During the past 12 months did a business, government, or individual other than a relative or personal friend (i) furnish you with any gift or entertainment at a single event, and the value received by you exceeded \$50 in value or (ii) furnish you with gifts or entertainment in any combination and the value received by you exceeded \$100 in total value; and for which you neither paid nor rendered services in exchange? Account for entertainment events only if the average value per person attending the event exceeded \$50 in value. Account for all business entertainment (except if related to your private profession or occupation) even if unrelated to your official duties.

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

6. Salary and Wages.

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

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

7. Business Interests and Lobbyist Relationships.

7A. 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-1.

7B. Do you have a lobbyist relationship as that term is defined above?

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

8. Payments for Representation and Other Services.

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

EITHER check NO / / OR check YES / / and complete Schedule G-1.

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

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

8C. Did you or persons with whom you have a close financial association furnish services to businesses operating in Virginia, pursuant to an agreement between you and such businesses, or between persons with whom you have a close financial association and such businesses for which total compensation in excess of \$1,000 was received during the past 12 months? Services reported under this provision shall not include services involving the representation of businesses that are reported under question 8A or 8B above.

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

9. Real Estate.

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

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

10. Real Estate Contracts with State Governmental Agencies.

Do you or a member of your immediate family hold an interest valued at more than \$10,000 in real estate, including a corporate, partnership, or trust interest, option, easement, or land contract, which real estate is the subject of a contract, whether pending or completed within the past 12 months, with a state governmental agency?

If the real estate contract provides for the leasing of the property to a state governmental agency, do you or a member of your immediate family hold an interest in the real estate, including a corporate, partnership, or trust interest, option, easement, or land contract valued at more than \$1,000? Account for all such contracts whether or not your interest is reported in Schedule F or H. This requirement to disclose an interest in a lease does not apply to an interest derived through an ownership interest in a business unless the ownership interest exceeds three percent of the total equity of the business.

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

11. Payments by the Commonwealth for Meetings.

During the past 12 months did you receive lodging, transportation, money, or anything else of value with a combined value exceeding \$200 from the Commonwealth for a single meeting attended out-of-state in your capacity as a legislator? Do not include reimbursements from the Commonwealth for meetings attended in the Commonwealth.

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

Statements of Economic Interests are open for public inspection.

AFFIRMATION.

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

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

Signature _____

Commonwealth of Virginia

_____ of _____ to wit:

The foregoing disclosure form was acknowledged before me

This _____ day of _____, 20____, by _____

Notary Public
 My commission expires _____
 (Return only if needed to complete Statement.)

SCHEDULES
 TO
 STATEMENT OF ECONOMIC INTERESTS.

NAME _____
 SCHEDULE A - OFFICES AND DIRECTORSHIPS.

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

Name of Business	Address of Business	Position Held
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

RETURN TO ITEM 2

SCHEDULE B - PERSONAL LIABILITIES.

Report personal liability by checking each category. Report only debts in excess of \$10,000. Do not report debts to any government. Do not report loans secured by recorded liens on property at least equal in value to the loan.

Report contingent liabilities below and indicate which debts are contingent.

1. My personal debts are as follows:

Check appropriate categories	Check one \$10,001 to \$50,000	Check one More than \$50,000
Banks	_____	_____
Savings institutions	_____	_____
Other loan or finance companies	_____	_____
Insurance companies	_____	_____
Stock, commodity or other brokerage companies	_____	_____
Other businesses: (State principal business activity for each creditor.)	_____	_____
_____	_____	_____
_____	_____	_____
Individual creditors: (State principal business or occupation of each creditor.)	_____	_____
_____	_____	_____
_____	_____	_____

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

Check appropriate categories	Check one \$10,001 to \$50,000	Check one More than \$50,000
Banks	_____	_____
Savings institutions	_____	_____
Other loan or finance companies	_____	_____

704	Insurance companies	_____	_____
705	Stock, commodity or other brokerage	_____	_____
706	companies	_____	_____
707	Other businesses:		
708	(State principal business activity for each		
709	creditor.)	_____	_____
710	_____	_____	_____
711	_____	_____	_____
712	Individual creditors:		
713	(State principal business or occupation of		
714	each creditor.)	_____	_____
715	_____	_____	_____
716	_____	_____	_____
717	-----	-----	-----
718	-----	-----	-----

RETURN TO ITEM 3

SCHEDULE C - SECURITIES.

721 "Securities" INCLUDES stocks, bonds, "Securities" EXCLUDES
 722 mutual funds, limited partnerships, certificates of deposit,
 723 and commodity futures contracts. money market funds, annuity
 724 contracts, and insurance policies.

725 Identify each business or Virginia governmental entity in which you or a member of your immediate
 726 family, directly or indirectly, separately or together, own securities valued in excess of \$10,000. Name
 727 each entity and type of security individually.

728 Do not list U.S. Bonds or other government securities not issued by the Commonwealth of Virginia
 729 or its authorities, agencies, or local governments. Do not list organizations that do not do business in
 730 this Commonwealth, but most major businesses conduct business in Virginia. Account for securities held
 731 in trust.

732 If no reportable securities, check here / / .

733 -----
 734 -----

			Check one		
	Type of	Type of Security	\$10,001	\$50,001	More
	Entity	(stocks, bonds,	to	to	than
736	Name of Issuer	mutual funds, etc.)	\$50,000	\$250,000	\$250,000
737	_____	_____	_____	_____	_____
738	_____	_____	_____	_____	_____
739	_____	_____	_____	_____	_____
740	_____	_____	_____	_____	_____
741	_____	_____	_____	_____	_____
742	_____	_____	_____	_____	_____
743	-----	-----	-----	-----	-----
744	-----	-----	-----	-----	-----

RETURN TO ITEM 4

SCHEDULE D-1 - PAYMENTS FOR TALKS, MEETINGS, AND PUBLICATIONS.

747 List each source from which you received during the past 12 months lodging, transportation, money,
 748 or any other thing of value (excluding meals or drinks coincident with a meeting) with a combined
 749 value exceeding \$200 for your presentation of a single talk, participation in one meeting, or publication
 750 of a work in your capacity as a legislator. Do not list payments or reimbursements by the
 751 Commonwealth. (See Schedule D-2 for such payments or reimbursements.) List a payment even if you
 752 donated it to charity. Do not list information about a payment if you returned it within 60 days or if you
 753 received it from an employer already listed under Item 6 or from a source of income listed on Schedule
 754 F.

755 If no payment must be listed, check here / / .

756 -----
 757 -----

			Type of Payment
			(e.g., Honoraria,
			Travel reimburse-
758			ment, etc.)
759	Payer	Approximate Value	Circumstances
760	_____	_____	_____
761	_____	_____	_____

RETURN TO ITEM 5

SCHEDULE D-2 - PAYMENTS BY THE COMMONWEALTH FOR MEETINGS.

List each meeting for which the Commonwealth provided payments or reimbursements during the past 12 months to you for lodging, transportation, money, or any other thing of value (excluding meals or drinks coincident with a meeting) with a combined value exceeding \$200 for your participation in your capacity as a legislator. Do not list payments or reimbursements by the Commonwealth for meetings or travel within the Commonwealth.

If no payment must be listed, check here / / .

Payer	Approximate Value	Circumstances	Type of Payment (e.g., Travel reimbursement, etc.)

SCHEDULE E - GIFTS.

List each business, governmental entity, or individual that, during the past 12 months, (i) furnished you with any gift or entertainment at a single event and the value received by you exceeded \$50 in value, or (ii) furnished you with gifts or entertainment in any combination and the value received by you exceeded \$100 in total value; and for which you neither paid nor rendered services in exchange. List each such gift or event.

Do not list entertainment events unless the average value per person attending the event exceeded \$50 in value. Do not list business entertainment related to your private profession or occupation. Do not list gifts or other things of value given by a relative or personal friend for reasons clearly unrelated to your public position. Do not list campaign contributions publicly reported as required by Chapter 9.3 (§ 24.2-945 et seq.) of Title 24.2 of the Code of Virginia.

Name of Business, Organization, or Individual	City or County and State	Gift or Event	Approximate Value

RETURN TO ITEM 6

SCHEDULE F-1 - BUSINESS INTERESTS.

Complete this Schedule for each self-owned or family-owned business (including rental property, a farm, or consulting work), partnership, or corporation in which you or a member of your immediate family, separately or together, own an interest having a value in excess of \$10,000.

If the enterprise is owned or operated under a trade, partnership, or corporate name, list that name; otherwise, merely explain the nature of the enterprise. If rental property is owned or operated under a trade, partnership, or corporate name, list the name only; otherwise, give the address of each property. Account for business interests held in trust.

--

Name of Business Corporation, Partnership, Farm; Address of Rental Property	City or County and State	Nature of Enterprise (farming, law, rental property, etc.)	Gross income \$50,001 to \$250,000 More than \$250,000

RETURN TO ITEM 8

SCHEDULE F-2 - LOBBYIST RELATIONSHIPS AND PAYMENTS.

Complete this Schedule for each lobbyist relationship with the following:

- (i) any person who is, or has been within the prior calendar year, registered as a lobbyist with the Secretary of the Commonwealth, or
- (ii) any business in which you have a greater than three percent ownership interest and that business employs, or engages as an independent contractor, any person who is, or has been within the prior calendar year, registered as a lobbyist with the Secretary of the Commonwealth.

List each person or business	Describe each relationship	Dates of relationship	Payments to Lobbyist \$10,000 or less More than \$10,001

THE DISCLOSURE OF A LOBBYIST RELATIONSHIP SHALL NOT (I) CONSTITUTE A WAIVER OF ANY ATTORNEY-CLIENT OR OTHER PRIVILEGE, (II) REQUIRE A WAIVER OF ANY ATTORNEY-CLIENT OR OTHER PRIVILEGE FOR A THIRD PARTY, OR (III) BE REQUIRED WHERE A MEMBER OR MEMBER-ELECT IS EMPLOYED OR ENGAGED BY A PERSON AND SUCH PERSON ALSO EMPLOYS OR ENGAGES A PERSON IN A LOBBYIST RELATIONSHIP SO LONG AS THE MEMBER OR MEMBER-ELECT HAS NO FINANCIAL INTEREST IN THE LOBBYIST RELATIONSHIP.

SCHEDULE G-1 - PAYMENTS FOR REPRESENTATION BY YOU.

List the businesses you represented before any state governmental agency, excluding any court or judge, for which you received total compensation during the past 12 months in excess of \$1,000, excluding compensation for other services to such businesses and representation consisting solely of the filing of mandatory papers and subsequent representation regarding the mandatory papers filed by you.

Identify each business, the nature of the representation and the amount received by dollar category from each such business. You may state the type, rather than name, of the business if you are required by law not to reveal the name of the business represented by you.

Name of Busi-	Type of Busi-	Pur- pose of Repre- senta-	Name of	\$1,001 to	\$10,001 to	\$50,001 to	\$100,001 to	\$250,001

	ness	ness	tion	Agency	\$10,000	\$50,000	\$100,000	\$250,000	and over
878									
879									
880									
881									
882									
883									

884 -----

885 If you have received \$250,001 or more from a single business within the reporting period, indicate

886 the amount received, rounded to the nearest \$10,000.

887 Amount Received: _____.

888 SCHEDULE G-2 - PAYMENTS FOR REPRESENTATION BY ASSOCIATES.

889 List the businesses that have been represented before any state governmental agency, excluding any

890 court or judge, by persons who are your partners, associates or others with whom you have a close

891 financial association and who received total compensation in excess of \$1,000 for such representation

892 during the past 12 months, excluding representation consisting solely of the filing of mandatory papers

893 and subsequent representation regarding the mandatory papers filed by your partners, associates or others

894 with whom you have a close financial association.

895 Identify such businesses by type and also name the state governmental agencies before which such

896 person appeared on behalf of such businesses.

897 -----

898 -----

Type of Business	Name of State Governmental Agency
899	
900	
901	
902	
903	
904	
905	

906 SCHEDULE G-3 - PAYMENTS FOR OTHER SERVICES GENERALLY.

907 Indicate below types of businesses that operate in Virginia to which services were furnished by you

908 or persons with whom you have a close financial association pursuant to an agreement between you and

909 such businesses, or between persons with whom you have a close financial association and such

910 businesses and for which total compensation in excess of \$1,000 was received during the past 12

911 months. Services reported in this Schedule shall not include services involving the representation of

912 businesses that are reported in Schedule G-1 or G-2 above.

913 Identify opposite each category of businesses listed below (i) the type of business, (ii) the type of

914 service rendered and (iii) the value by dollar category of the compensation received for all businesses

915 falling within each category.

916 -----

917 -----

	Check if Type ser- of vices ser- were vice ren- ren- dered dered	\$1,001 to \$10,000	\$10,001 to \$50,000	\$50,001 to \$100,000	\$100,001 to \$250,000	\$250,001 and over
925	Electric utilities					
926	Gas utilities					
927	Telephone utilities					
928	Water utilities					
929	Cable television					
930	companies					
931	Interstate					
932	transportation					
933	companies					
934	Intrastate					
935	transportation					

936	companies	_____	_____	_____	_____	_____	_____
937	Oil or gas retail	_____	_____	_____	_____	_____	_____
938	companies	_____	_____	_____	_____	_____	_____
939	Banks	_____	_____	_____	_____	_____	_____
940	Savings	_____	_____	_____	_____	_____	_____
941	institutions	_____	_____	_____	_____	_____	_____
942	Loan or finance	_____	_____	_____	_____	_____	_____
943	companies	_____	_____	_____	_____	_____	_____
944	Manufacturing	_____	_____	_____	_____	_____	_____
945	companies (state	_____	_____	_____	_____	_____	_____
946	type of product,	_____	_____	_____	_____	_____	_____
947	e.g., textile,	_____	_____	_____	_____	_____	_____
948	furniture, etc.)	_____	_____	_____	_____	_____	_____
949	Mining companies	_____	_____	_____	_____	_____	_____
950	Life insurance	_____	_____	_____	_____	_____	_____
951	companies	_____	_____	_____	_____	_____	_____
952	Casualty insurance	_____	_____	_____	_____	_____	_____
953	companies	_____	_____	_____	_____	_____	_____
954	Other insurance	_____	_____	_____	_____	_____	_____
955	companies	_____	_____	_____	_____	_____	_____
956	Retail companies	_____	_____	_____	_____	_____	_____
957	Beer, wine or	_____	_____	_____	_____	_____	_____
958	liquor companies	_____	_____	_____	_____	_____	_____
959	or distributors	_____	_____	_____	_____	_____	_____
960	Trade associations	_____	_____	_____	_____	_____	_____
961	Professional	_____	_____	_____	_____	_____	_____
962	associations	_____	_____	_____	_____	_____	_____
963	Associations of	_____	_____	_____	_____	_____	_____
964	public employees	_____	_____	_____	_____	_____	_____
965	or officials	_____	_____	_____	_____	_____	_____
966	Counties, cities	_____	_____	_____	_____	_____	_____
967	or towns	_____	_____	_____	_____	_____	_____
968	Labor organizations	_____	_____	_____	_____	_____	_____
969	Other	_____	_____	_____	_____	_____	_____
970	-----	-----	-----	-----	-----	-----	-----
971	-----	-----	-----	-----	-----	-----	-----

RETURN TO ITEM 9

SCHEDULE H - REAL ESTATE.

List real estate other than your principal residence in which you or a member of your immediate family holds an interest, including a partnership interest, option, easement, or land contract, valued at \$10,000 or more. ~~You may list each parcel of real estate individually if you wish.~~ Each parcel must be listed individually.

978	-----	-----	-----
979	-----	-----	-----
980		Describe the type of real	
981		estate you own in each	
982	List the location	location (business,	If the real estate is
983	(state, and county	recreational, apartment,	owned or recorded in
984	or city) where you	commercial, open land,	a name other than your
985	own real estate.	etc.).	own, list that name.
986	_____	_____	_____
987	_____	_____	_____
988	_____	_____	_____
989	_____	_____	_____
990	_____	_____	_____
991	-----	-----	-----
992	-----	-----	-----

RETURN TO ITEM 10

SCHEDULE I - REAL ESTATE CONTRACTS WITH STATE GOVERNMENTAL AGENCIES.

List all contracts, whether pending or completed within the past 12 months, with a state governmental agency for the sale or exchange of real estate in which you or a member of your immediate family holds an interest, including a corporate, partnership or trust interest, option, easement, or land contract, valued at \$10,000 or more. List all contracts with a state governmental agency for the lease of real estate in which you or a member of your immediate family holds such an interest valued at \$1,000 or more. This requirement to disclose an interest in a lease does not apply to an interest derived through an ownership interest in a business unless the ownership interest exceeds three percent of the total equity of the business.

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

Describe any
 management role and
 the percentage
 ownership interest
 you or your immediate
 family member has in
 the real estate
 or entity.

List each
 governmental agency
 which is a party to
 the contract and
 indicate the county
 or city where the
 real estate is located.

State the annual
 income from the
 contract, and the
 amount, if any, of
 income you or any
 immediate family
 member derives
 annually from
 the contract.

-----	-----	-----
-----	-----	-----
-----	-----	-----
-----	-----	-----
-----	-----	-----

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

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