2012
CODE OF CONDUCT
STATEMENT OF FINANCIAL INTEREST

THIS FINANCIAL INTEREST STATEMENT IS REQUIRED UNDER THE GOVERNOR'S CODE OF CONDUCT PROMULGATED BY EXECUTIVE ORDER 1980-18 DATED MAY 16, 1984, AS AMENDED SEPTEMBER 28, 1987. IT IS NOT TO BE CONFUSED WITH ANY FINANCIAL INTEREST STATEMENT COMPLETED AND SUBMITTED UNDER THE PUBLIC OFFICIAL AND EMPLOYEE ETHICS ACT.

LAST NAME_____ **FIRST**_____ **MI** _____

NAME OF AGENCY, BOARD OR COMMISSION _____

POLICY

1. ***Statements of Financial Interest***. *The following officials, appointees and employees of the Commonwealth shall file a statement of financial interest with the personnel office of the respective department, agency, board or commission or other office as designated hereafter:*

- ***a***. *Governor*
- ***b***. *Lieutenant Governor*
- ***c***. *Heads of agencies and departments, their respective deputy secretaries, all Commonwealth officials or employees at the level of division chief and above, and all attorneys, press secretaries, legislative liaisons, and executive and special assistants.*
- ***d***. *Chairpersons and compensated members of boards, councils, and commissions or the like under the Governor's jurisdiction.*
- ***e***. *Executive directors, counsel, and administrative secretaries of compensated boards and commissions under the Governor's jurisdiction.*
- ***f***. *Employees of all classes required by the Office of Administration to file financial disclosure under The Public Official and Employee Ethics Act.*

2. ***Additional Filings***. *The Governor may require other officials, appointees and employees in the Executive Branch to file financial interest statements.*

Officials, appointees and employees required to file this financial interest statement shall do so within 30 days of the date they assume office and shall file a financial interest statement on May 1 of each year thereafter for the duration of their employment or term of office. **All financial interest statements must cover the preceding calendar year (January 1 through December 31)**. Persons who are required to file this financial interest statement and fail to do so will be subject to disciplinary action including discharge or removal from office.

Financial disclosure is required only of the individual completing this statement.

INSTRUCTIONS FOR COMPLETING THIS STATEMENT

1. Review entire form before completing any items.
2. Complete all sections, indicating NONE or N/A where applicable. The information is to be typewritten or completed in print, using a ballpoint pen.
3. If additional space is necessary, provide information in same format on 8½ X 11 sheet(s) and securely attach to this form.
4. Make and retain a completed copy of this statement.
5. FILING PERIODS: Information requested is to cover the preceding calendar year.
6. Individuals required to complete this form are to file as follows: **a.)** Heads of agencies are to file with the Secretary of Administration, Room 207 Finance Building, Harrisburg, PA 17120. **b.)** Chairpersons and Members of Boards and Commissions are to file with the Governor's Office 508 E Floor, Main Capitol Building, Harrisburg PA 17120. **c.)** All other officials, appointees, and employees are to file with their central agency Human Resource Office.

A. To be completed by
Chairpersons and Members of Boards and Commissions
under the Governor's jurisdiction:

Name of Board or Commission _____
Principal Occupation or Profession _____
Principal Work Address _____
_____

Business Telephone Number ( ) _____ Home Telephone Number ( ) _____

B. To be completed by
Heads of Agencies and all other officials, appointees and employees
required to file this statement

Agency in which employed _____
Position Title _____
Work Address _____
_____
Work Telephone Number ( ) _____

PERSONAL ECONOMIC INTEREST

List all investments (including but not limited to stocks, notes, bonds, consulting arrangements, etc.) in any in-state or out-of-state business entity held during the preceding calendar year, whether or not such entity is involved in any transaction involving the Commonwealth. Exclude any items reported under Real Property Interests.

Name/Address of principal office of the business entity(ies) _____
Nature/description of interest(s), including conditions and encumbrances _____
TRANSFERS:
Nature/description of transferred interest(s) _____
_____
_____

Name/Address of person(s)/entity(ies) to whom transferred _____
_____

BUSINESS INTERESTS

List all interests (including but not limited to stocks, notes, bonds, partnerships, sole and/or joint proprietorship/ownership, etc.) in any business entity or not-for-profit entity held during the preceding calendar year and doing business with the Commonwealth (if known). "Interests" shall include not only personal financial interest, but also non-paid memberships on boards or directors of business entities or not-for-profit entities.

Name/Address of the principal office of the business(es) and/or non-profit entity(ies) _____

_____

Nature and dollar value of interest(s), including any liens, encumbrances, etc.

_____

TRANSFERS:

Nature/description of transferred interest(s)_____

_____

Name/Address of person(s)/entity(ies) to whom transferred _____

_____

LIABILITIES

List all liabilities or debts owed to any person, entity, or institution during the preceding calendar year. Exclude retail credit accounts, commercial banks, savings and loans and finance company loans.

Name/Address of person(s), entity(ies), institution(s) to whom liability or debt was owed _____

_____

Manner in which debt/liability was secured _____

_____

Amount of debt(s)/liability(ies) and terms of payment _____

_____

EMPLOYMENT

List all payments, compensation, or consideration of any nature (including but not limited to salaried employment, consultant fees, offices, directorships, honoraria, travel/related expenses and other fees, etc.) earned during the preceding calendar year. Exclude Commonwealth employment listed on Page 2.

Name/Address of person(s), entity(ies), for whom service(s) were, are or will be rendered _____

_____

Title/Description of service(s) _____

_____

Period(s) of time during which services were, are or will be rendered _____

_____

Total amount of monies, compensation, consideration received _____

_____

REAL PROPERTY INTERESTS

List all in-state and out-of-state real estate property interests including revenue producing leased facilities and interests in gas, oil, coal or other miner royalty producing interest held during the preceding calendar year. Exclude home or principal residence.

Name, nature/description and mailing address of real estate property interest(s) _____

_____

Nature and extent of interest(s), including any conditions or encumbrances, and any partners in the interest _____

_____

Acquisition:

Date(s) Acquired _____

Name/Address of person(s)/entity(ies) from whom acquired _____

_____

Manner of transfer or conveyance (Purchase, inheritance, etc.) _____

Transfers:

Name, nature/description and mailing address of property interest(s) _____

_____

Consideration or amount received (Dollar value or payment in kind) _____

_____

Name and address of person(s)/entity(ies) to whom transferred _____

_____

SEVERANCE PAYMENTS

List any severance payments received or to be received, or any proceeds received or to be received from the sale or redemption of interest in any corporation (which represents 5% or more of the common stock or assets of the corporation), professional corporation, partnership, or other entity, which payments or proceeds result from the termination of employment or withdrawal from a corporation, professional corporation, partnership, or other entity upon the assumption of public office. Attach to this statement a copy(ies) of any agreement(s) relating to receipt of such severance payments or proceeds.

Source(s) of any severance payments or proceeds _____

_____

Nature/description of payments or proceeds (ATTACH COPIES) _____

_____

In the event that a severance arrangement or sale or redemption of any interest specified above is concluded more than 30 days following the date of assuming office or position, a supplement to this statement shall be filed within 10 calendar days following the conclusion of the transaction. Such supplement shall disclose any payments or proceeds received or to be received and the filing of any agreements relating to such payments or proceeds.

GIFTS

List all gifts of value in excess of $100, including the forgiveness of a debt received during the preceding calendar year. For the purpose of this section, gifts received from family members need not be disclosed.

_____

Name/Address of the person(s)/entity(ies) from whom or on behalf of whom the gift was directly or indirectly received _____

_____

Nature and value of gift(s) _____

_____

I HEREBY CERTIFY THAT THE INFORMATION PRESENTED HEREIN IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE, AND IS PROVIDED IN COMPLIANCE WITH THE GOVERNOR'S CODE OF CONDUCT PROMULGATED BY EXECUTIVE ORDER 1980-18 DATED MAY 16, 1984, AS AMENDED SEPTEMBER 28, 1987.

_____ _____

SIGNATURE DATE