

SCHENECTADY COUNTY BOARD OF ETHICS

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2021 ANNUAL STATEMENT OF FINANCIAL DISCLOSURE FOR THE YEAR ENDING 2020
Deadline: April 15th, 2021

Please answer all questions or the form will be returned to you for completion. If the question does not apply, check "None". Every question answered must have a 'Reporting Category' letter as well. File the completed form by scanning and emailing it with your electronic signature. If necessary, you may mail or drop off to the above address. **All information will be kept confidential.**

No exact dollar amounts are to be listed anywhere on this form. Use the following "Reporting Categories letters".

"A"	\$0 -	No Compensation	"D"	\$15,001 -	\$ 50,000	"G"	Over \$200,001
"B"	\$1 -	\$ 7,500	"E"	\$50,001 -	\$100,000		
"C"	\$7,501 -	\$15,000	"F"	\$100,001 -	\$200,000		

Circle One: County Employee County Legislature Ethics Metroplex SCCC Employees SCCC Trustees Library Trustees

Name _____ Office Phone _____

Home Address _____ Mobile Phone _____

Email: _____

Ethics Law allows sanctions for failure to file, including, but not limited to, a civil penalty not to exceed \$10,000, prosecution for a Class "A" misdemeanor, and public disclosure. In addition, the County may impose disciplinary action, as otherwise provided by law. I hereby certify under penalty of perjury that the information disclosed on this form is true and complete.

Signature _____ Date _____

Last Name: _____

2021 for the Year Ending 2020

REPORTING CATEGORY

1a). Your Primary Position/Employment:

Department/
Agency/Authority _____

Title & Phone &
Business Address _____

1b). Your secondary Position/Employment:
(Any office, trusteeship, directorship, partnership, not-for profit, employment, profession)

NONE

Organization _____

Title & Business Address _____

Is there any involvement with the County in any manner? Yes No

If yes, please explain _____

1c). Your Spouse's Primary Position/Employment:

Spouse's Name: _____

NONE Retired Disabled Other _____

Department/
Agency/Authority _____

Title & Business Address _____

Is there any involvement with the County in any manner? Yes No

If yes, please explain _____

Last Name: _____

2021 for the Year Ending 2020

REPORTING CATEGORY

1d). Your Spouse's Secondary Position/Employment:
(Any office, trusteeship, directorship, partnership, not-for profit, employment, profession)

NONE

Organization _____

Title & Business Address _____

Is there any involvement with the County in any manner? Yes No

If yes, please explain _____

2a). Please list your dependent children as filed on your 1040 IRS form:

NONE Circle the minors who are under age and/or not employed: a , b, c, d

Name	Age	Name	Age
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a). _____		c). _____	
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b). _____		d). _____	
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2b). Your **Dependent Child's** Primary Position/Employment:

Organization _____

Title & Business Address _____

Is there any County involvement in any manner? Yes No

If yes, please explain _____

REPORTING CATEGORY

3a). Identify any other source of Income & Investment for Yourself:

(Retirement, pension, child support, consultant fees, teaching fees, investments or capital stock above a 5% share, gifts in excess of \$250. (excluding gifts from relatives), and third party reimbursements for travel related expenditures.)

NONE

Source _____

Description _____

3b). Identify any other source of Income & Investment for your Spouse:

(Retirement, pension, child support, consultant fees, teaching fees, investments or capital stock above a 5% share, gifts in excess of \$250. (excluding gifts from relatives), and third party reimbursements for travel related expenditures.)

NONE

Source _____

Description _____

3c). Identify any other source of Income & Investment for your Dependent Child:

(Retirement, pension, child support, consultant fees, teaching fees, investments or capital stock above a 5% share, gifts in excess of \$250. (excluding gifts from relatives), and third party reimbursements for travel related expenditures.)

NONE

Source _____

Description _____

Last Name: _____

2021 for the Year Ending 2020

REPORTING CATEGORY

4a). Real Estate Holdings within the County or within 5 miles of the County that you hold:

NONE { } I rent { } Property located outside 5 mile range of County { }

Address _____
Description Residence Rental Business Other

Joint Holdings with Spouse { }

4b). Real Estate Holdings within the County or within 5 miles of the County that your **Spouse holds:**

NONE { } I rent { } Property located outside 5 mile range of County { }

Address _____
Description Residence Rental Business Other

4c). Real Estate Holdings within the County or within 5 miles of the County that your **Dependent Child holds:**

NONE { } I rent { } Property located outside 5 mile range { }

Address _____
Description Residence Rental Business Other

5a). Describe all of your debts in excess of \$5,000. each. (Mortgages, personal, car & student loans, credit cards, etc.)

NONE over \$5,000. { }

Last Name: _____

2021 for the Year Ending 2020

REPORTING CATEGORY

5b). Describe all of your **spouse's** debts in excess of \$5,000. each. (Mortgages, personal, car & student loans, credit cards, etc.)

NONE over \$5,000. { }

5c). Describe all of your **dependent child's** debts in excess of \$5,000. each. (Mortgages, personal, car & student loans, credit cards, etc.)

NONE over \$5,000. { }

6a). Political Parties. (List any position held within the last five 5 years as an officer of any party, committee or organization of a political party.)

Yourself	_____	None
6b). Spouse	_____	None
6c). Dependent Child	_____	None

Thank you.