

LAST NAME

FIRST NAME

MI

SUFFIX

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9. INCOME FROM PROPERTY, BUSINESS, PARTNERSHIP OR OTHER ENTITY: List sources from which \$500 or more was received by you, your spouse, or your minor dependent children during the previous calendar year, as described in attached **Instructions**. If none, check this box:

CHECK (✓)			SOURCE AND ADDRESS	NATURE OF BUSINESS	AMOUNT
YOU	SPOUSE	CHILD			

10. GAINS ON PROPERTY OR INVESTMENTS; List gains (*sale prices minus purchase price*) which equal or exceed **both \$500 and 5%** of the purchase price, received by you, your spouse, or your minor dependent children during the previous calendar year, See **Instructions**. If none, check this box:

CHECK (✓)			PROPERTY OR INVESTMENT	AMOUNT OF GAIN
YOU	SPOUSE	CHILD		

11. GIFTS AND HONORARIA: **Do not** list gifts exchanged among certain family members (see **Instructions**). **Do list** all other sources of \$100 or more (*in the aggregate during the previous calendar year.*) in gifts or honoraria received by you, your spouse, or your minor dependent children. Gifts include transactions in which you received at least \$100 more in money or property value compared to what you paid or exchanged. See **Instructions**. If none, check this box:

CHECK (✓)			NAME AND ADDRESS OF SOURCE	DESCRIPTION GIFTS OR HONORARIA	AMOUNT OR VALUE
YOU	SPOUSE	CHILD			

LAST NAME

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MI

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12. OFFICE AND DIRECTORSHIPS: List all such positions in any entity or association, whether for profit or not for profit, held by you, your spouse, or your minor dependent children during the previous calendar year.

See **Instructions**. If none, check this box:

CHECK (✓)			NAME AND ADDRESS OR ENTITY/ASSOCIATION	NATURE OF ENTITY/ASSOCIATION	POSITION HELD
YOU	SPOUSE	CHILD			

13. COMPLETE ONE AND ONLY ONE OF THE FOLLOWING CERTIFICATIONS. See **Instructions**.

A. CERTIFICATION

Information on this form represents disclosure for previous calendar year 20 ____ .

I HEREBY CERTIFY that to the best of my knowledge that all statements contained herein are true and correct. The financial interests reported include, where applicable, those held by my spouse living in my household and by my minor dependent children. I FURTHER CERTIFY that during the previous calendar year, no financial interest held by me, or if applicable, by my spouse living with me in my household or by my minor dependent children, was the subject of any decision made by me in my official capacity.

Signature _____ Date _____

B. CERTIFICATION

Information on this form represents disclosure for previous calendar year 20 ____ .

I HEREBY CERTIFY that to the best of my knowledge that all statements contained herein are true and correct. Despite my best efforts, I have been unable to provide complete information as to financial interests held by my spouse living in my household and/or by my minor dependent children. I FURTHER CERTIFY that during the previous calendar year, no financial interest held by me, or, to the best of my knowledge, by my spouse living in my household or by my minor dependent children, was the subject of any decision made by me in my official capacity.

Signature _____ Date _____

NOTE: A willful failure to disclose properly the financial interest of you and your immediate family, as required by the Mayor's Executive Order, may result in removal from your City position.