

BERKELEY COUNTY COUNCIL

ANNUAL FINANCIAL DISCLOSURE STATEMENT

Due at the time of application for appointment to a Board, Commission and/or Authority and annually thereafter. The information provided on this form should cover the twelve (12) month period prior to the month of application or your appointment.

Your Name and Address:

Name: _____ Home Phone #: _____

Home Address: _____

City, State/Zip: _____

Business Address: _____

City, State/Zip: _____

Business Names: List all names, if any, under which you do business. For example, Tom Smith Construction, Acme Video Rentals, etc. If no business, please mark "N/A".

Your Employment: For purposes of this report, an employer is anyone that you worked for during the past twelve (12) months who provides you with a W-2 form. List the name and address of each of your employers, including City, County or State government. If none, please mark "N/A". If you are self-employed, please indicate so and provide additional information under "Business Interests" and "Sources of Income".

Appointed Positions on Boards, Commissions, Authorities or Agencies: List all Boards, Commissions, Authorities and/or Agencies which you now serve on by appointment of City, County, or State authority.

Officeholder/Candidate Information: (complete below as appropriate)

Do you currently hold a City, County, Circuit or State elected office? Yes ___ No ___ If yes, title of Office: _____

Have you filed candidacy papers for public office in the next election? Yes ___ No ___ N/A ___ If yes, what office? _____

Date you filed your candidacy papers? _____

Sales or Contracts with Governmental Agencies: List all sales of goods, or professional or other services or contracts provided to any State, County, Municipal or other local governmental agency made in the past twelve (12) months in your name or through a partnership, corporation or association in which you owned or controlled an interest of ten percent (10%) or more. If none mark "N/A".

20 % Gross Income Categories: Did you receive more than twenty percent (20%) of your gross income during the past twelve (12) months from any one or more of the categories listed below? Yes ____ No ____ N/A ____ . Please circle all categories that apply.

Manufacturing Surface Mining Chemical Deep Mining Insurance Mining Equipment Retail Sales

Timbering Wholesale Sales Waste Disposal Race Tracks Intrastate Transportation Interstate Transportation

Trade Associations Recreation Related Labor Organizations Counties Towns Cities or Towns Banks

Banks Savings & Loans Loan or Finance Companies Electric Utilities Professional Associations Water Utilities

Gas Utilities Telephone Utilities Advertising Cable TV Promotional Companies Media Real Estate

Groups or Associations promoting gaming or lotteries Beer, wine or liquor companies or distributors

Associations of public employees or public officials Other: _____

Gifts: List the name of any person with a direct and immediate interest in an activity over which you exercise any formal influence who gave you or any member of your family a gift, including meals and beverages, during the past twelve (12) months, if the total value of such gift (s) when added together, has a value in excess of \$100.00. If none, please mark "N/A".

This is meant to include the position for which you have been appointed or to which you seek appointment.

Do not list gifts from:

- Your spouse, child, grandchild, parent or grandparent.
- A trust established by your spouse, child, grandchild or any ancestor.
- A bequest, by will , from a deceased member of your immediate family.

Debts: List all debts, of any amount, which debts are owed to you or by you from or to any person or entity over whom you may exercise any influence as a result of the appointment you hold or which you seek. If none, please mark "N/A".

Signature: I hereby acknowledge that the information contained herein and on any attached pages is true, correct and complete to the best of my knowledge.

Signature

Date: _____

Printed Name
