

## BALTIMORE CITY ETHICS BOARD

626 City Hall

Baltimore, Maryland 21202

Phone: 410-396-4730 Fax: 410-396-8483

<http://ethics.baltimorecity.gov>

**PAPER FORM PROCESSING FEE: \$10**

**LATE FEE: \$2/DAY**

### FINANCIAL DISCLOSURE DIRECTIONS FOR BOARD AND COMMISSION MEMBERS

**SPECIAL NOTE TO NEW APPOINTEES: Any person newly appointed to a board or commission for which a Financial Disclosure Statement is required:**

- 1. must file an initial Financial Disclosure Statement within 30 days after appointment {see Art. 8, § 7-12 (“Persons filling vacancy”)};**
- 2. must complete a 2-hour ethics training course within 6 months after appointment {see Art. 8, § 3-20 (“Training courses”)}; and**
- 3. must file a Conflicts Affidavit within 6 months after appointment {see Art. 8, § 3-21 (“Conflicts affidavit”) and Ethics Form 321}.**

#### I. WHO MUST FILE

A Financial Disclosure Statement must be filed by every official and employee who holds a position identified in Article 8, §§ 7-6 through 7-4. This requirement encompasses the volunteer members of various boards and commissions of the City.

#### II. WHAT FORM TO FILE

This Form 716-Brds {“Financial Disclosure Statement for Board and Commission Members”} may be used by a member of a board or commission, *if that member is not otherwise an official or employee required to file* a Financial Disclosure Statement.

Ethics Form 716-Gen’l {“Financial Disclosure Statement for Officials and Employees Generally”} must be used by all other officials and employees who are required to file Financial Disclosure Statements.

### III. WHEN TO FILE; PERIOD COVERED

(a) *General.*

- (1) An individual holding a position for which a Financial Disclosure Statement is required must file the Statement on or before **April 30** of each year.
- (2) The Statement must cover all of the immediately preceding calendar year.

(b) *New appointees.*

- (1) An individual newly appointed to a position for which a Financial Disclosure Statement is required must file an Entry Statement **within 30 days after appointment**.
- (2) The Statement must cover all of the calendar year immediately preceding the appointment.
- (3) An Entry Statement need not be filed, however, if the individual already has filed a Statement for the same calendar year (as in the case, for example, of a promotion) .

(c) *Individuals vacating position.*

- (1) An individual who vacates a position for which a Financial Disclosure Statement is required must file a Departure Statement **within 60 days after vacating the position**.
- (2) The Statement must cover:
  - (i) all of the immediately preceding calendar year, unless the individual already has filed a Statement for that year; and
  - (ii) that part of the current calendar during which the individual served.
- (3) A Departure Statement need not be filed, however, if the individual is assuming another position for which a Financial Disclosure Statement for these periods will be required.

### IV. WHERE TO FILE

All Statements must be filed with:

**Baltimore City Ethics Board**  
626 City Hall  
100 North Holliday Street  
Baltimore, Maryland 21202  
410-396-4730

## **V. FORMS AND INFORMATION**

Additional copies of the forms and instructions for Financial Disclosure Statements, Conflicts Affidavits, etc., are available for downloading on the Board's Website, <http://ethics.baltimorecity.gov>.

The Department of Finance maintains lists of vendors that do *business with the City*. A copy is available for your review at the Board's office.

## **VI. NOTARIZATION**

As indicated on the Financial Disclosure Statement, all information must be given under oath or affirmation and must be notarized.

## **VII. LATE FEE**

Any person who submits a Financial Disclosure Statement after the filing deadline (*see* Part III above) will be assessed a late fee of \$2 a day, to a maximum of \$250.

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## DEFINITIONS OF TERMS

All defined terms are indicated by *bold italics*.

### “Attributable entity”.

“Attributable entity” means:

- (1) any *business entity* in which, at any time during the *reporting period*:
  - (i) you held an equity interest of 30% or more; or
  - (ii) a *family member* held an equity interest of 30% or more, if you directly or indirectly controlled that *family member*'s interest; and
- (2) any trust or estate under which, at any time during the *reporting period*, you or a *family member*:
  - (i) held a reversionary interest;
  - (ii) was a beneficiary; or
  - (iii) if a revocable trust, was a settlor.

### “Business entity”.

(a) *General*.

“Business entity” means any *person* or entity engaged in business or other organized activity, whether for-profit or not-for-profit and regardless of form.

(b) *Illustrations*.

“Business entity” includes, for example, any:

- (1) corporation.
- (2) general or limited partnership.
- (3) limited liability company.
- (4) sole proprietorship.
- (5) joint venture.
- (6) unincorporated association or firm.
- (7) real estate investment trust.
- (8) institution, trust, foundation, or other organization.

### “Business with City”.

“Business with City” means:

- (1) having or seeking 1 or a combination of contracts or other transactions with the *City* or with another *person* in connection with a contract between that other *person* and the *City*, that involves the commitment, in the *reporting period*, of \$5,000 or more; or
- (2) being regulated by or subject to the authority of the *City*, any *City* agency, or any *City* official; or
- (3) undertaking activities that require registration as a lobbyist..

### “City”.

(a) *General*.

“City” means any department, board, commission, council, authority, committee, office, or other unit of City government.

(b) *Inclusions*.

“City” includes the following entities:

- (1) Baltimore City Parking Authority.
- (2) Baltimore Development Corporation.
- (3) Baltimore Police Department.
- (4) Board of Liquor License Commissioners for Baltimore City.
- (5) Civilian Review Board of Baltimore City.
- (6) Enoch Pratt Free Library of Baltimore City.
- (7) Housing Authority of Baltimore City.
- (8) Local Development Council, South Baltimore Video Lottery Terminal.
- (9) Pimlico Community Development Authority.

**“Family member”.**

“Family member” means any:

- (1) spouse;
- (2) parent;
- (3) sibling; or
- (4) child, including an adopted child, stepchild, ward, or foster child, regardless of age.

**“Financial interest”.**

“Financial interest” means ownership of:

- (1) more than 3% of a *business entity*; or
- (2) securities of any kind that represent or are convertible into ownership of more than 3% of a *business entity*; or
- (3) an interest as a result of which the owner:
  - (i) received more than \$1,000 in any of the preceding 3 calendar years; or
  - (ii) is entitled to receive more than \$1,000 in the current or any later calendar year.

**“Gift”.**

(a) *General.*

“Gift” means, except as specified in paragraph (b), the transfer of any thing or service of economic value, regardless of the form, without adequate, identifiable, and lawful consideration.

(b) *Exception.*

“Gift” does not include political contributions that are regulated under state law.

**“Interest”.**

(a) *General.*

“Interest” means, except as specified in paragraph (a), any legal or equitable economic interest, whether or not subject to an encumbrance or a condition, that was owned or held, in whole or in part, jointly or severally, directly or indirectly, at any time during the *reporting period*.

(b) *Exceptions.*

“Interest” does not include:

- (1) an interest held in the capacity of a personal representative, agent, custodian, fiduciary, or trustee, unless the holder has an equitable interest in the subject matter;
- (2) an interest in a time or demand deposit in a financial institution (e.g., checking account, savings account, or certificate of deposit);
- (3) an interest in an insurance policy, endowment policy, or annuity contract under which an insurer promises to pay a fixed amount of money, either in a lump sum or periodically for life or some other specified period; or
- (4) an interest in a common trust fund or a trust that forms part of a pension or profit-sharing plan that:
  - (i) has more than 25 participants; and
  - (ii) has been determined by the Internal Revenue Service to be a qualified trust under § 401 or § 501 of the Internal Revenue Code.

**“Person”.**

“Person” includes any individual or *business entity*.

**“Principal residence”.**

“Principal residence” means a dwelling that:

- (1) is used as a person’s principal or primary home; and
- (2) is actually occupied by that person for more than 6 months of a 12-month period.

**“Reporting period”.**

“Reporting period” means:

- (1) January 1 through December 31; or
- (2) any additional period for which a disclosure statement is required.

**“Significant gift”.**

(a) *General.*

“Significant gift” means, except as specified in paragraph (b):

- (1) any *gift* with a value of more than \$20; and
- (2) any *gift* in a series of *gift s* with a cumulative value of \$60 or more given by or on behalf of the same *person* during the *reporting period*.

(b) *Exceptions.*

“Significant gift” does not include any of the following, regardless of value:

- (1) a *gift* from a *family member*;
- (2) a campaign contribution that is otherwise reported as required by law; or
- (3) tickets or free admission given to an elected official to attend a specific charitable, cultural, or political event, if given by the *person* sponsoring or conducting the event as a courtesy or ceremony to the office.

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**IMPORTANT:  
CAREFULLY READ  
ACCOMPANYING DIRECTIONS**

**FINANCIAL DISCLOSURE STATEMENT  
FOR  
BOARD AND COMMISSION MEMBERS**

**NOTE: *Bold-italicized terms* are defined in the accompanying Financial Disclosure Directions, which should be reviewed carefully before completing this Statement.**

**PART A. IDENTITY OF STATEMENT MAKER**

All filers:

Last Name \_\_\_\_\_ First and Middle Names \_\_\_\_\_

***Principal Residence*** \_\_\_\_\_

Residence Telephone (\_\_\_\_) \_\_\_\_\_

Board or Commission \_\_\_\_\_

Office Address \_\_\_\_\_

Office Telephone (\_\_\_\_) \_\_\_\_\_ Email Address: \_\_\_\_\_

**PART B. TYPE OF STATEMENT/REPORTING PERIOD COVERED**

All filers must check the applicable type of Statement and specify the year for which it is filed:

\_\_\_ Annual Statement \_\_\_ Entry Statement \_\_\_ Departure Statement

For Calendar Year 20\_\_.

Persons filing a Departure Statement must also complete the following {see Directions at Part III(c)(2)}:

This Statement also covers the period of January 1, 20\_\_ through \_\_\_\_\_, 20\_\_.

**PART C. RECEIPT BY ETHICS BOARD**

**NOTE: To be completed only by Ethics Board.**

This Statement and accompanying Schedules were received for filing on \_\_\_\_\_, 20\_\_.

\_\_\_\_\_  
For Board of Ethics

**PART D. DISCLOSURES**

**1. INTERESTS IN REAL PROPERTY**

During the *reporting period* covered by this Statement, did any of the following have any *interest* in any real property (*including property purchased or leased as your or their personal residence*) that (i) is located in Baltimore City, or (ii) wherever located, was purchased from or sold or leased to the *City* or was purchased from or sold or leased to an official or employee of the *City* or a *person* who does *business with the City* {or is regulated by or lobbies before the *City*}?

If you answer “yes” to any of these, complete and attach **Schedule 1**.

a. You

Yes  No

b. A *family member* (if you directly or indirectly controlled that *family member’s interest*)

Yes  No

c. An *attributable entity*

Yes  No

d. A partnership, limited liability partnership, limited liability company, or other unincorporated entity in which you, a *family member* (if you directly or indirectly controlled that *family member’s interest*), or an *attributable entity* held an interest

Yes  No

**2. FINANCIAL INTERESTS IN BUSINESS ENTITIES DOING BUSINESS WITH CITY**

During the *reporting period* covered by this Statement, did any of the following have any *financial interest* (i.e., at least 3% ownership or earnings of \$1,000/year) in any *business entity* that does *business with the City* {or is regulated by or lobbies before the *City*}?

If you answer “yes” to any of these, complete and attach **Schedule 2**.

a. You

Yes  No

b. A *family member* (if you directly or indirectly controlled that *family member’s interest*)

Yes  No

c. An *attributable entity*

Yes  No

**3. POSITIONS WITH *BUSINESS ENTITIES DOING BUSINESS WITH CITY***

During the *reporting period* covered by this Statement, did any of the following hold an office, directorship, salaried employment, or similar position with any *business entity* that does *business with the City* {or is regulated by or lobbies before the *City*}?

If you answer “yes” to any of these, complete and attach **Schedule 3**.

a. You

Yes  No

b. Your spouse or child

Yes  No

c. Your parent or sibling (to the extent known to you)

Yes  No

**4. GIFTS (INCLUDING TRAVEL EXPENSES) FROM *PERSONS DOING BUSINESS WITH CITY***

During the *reporting period* covered by this Statement, did any of the following accept, directly or indirectly, any *significant gift* (including payment of travel expenses) from any *person* that (i) does *business with the City* {or is regulated by or lobbies before the *City*} or (ii) is an owner, partner, officer, director, trustee, employee, or agent of any *person* that does *business with the City* {or that is regulated by or lobbies before the *City*}?

If you answer “yes” to any of these, complete and attach **Schedule 4**.

a. You

Yes  No

b. A *family member* or other *person* at your direction

Yes  No

**5. DEBTS TO *PERSONS DOING BUSINESS WITH CITY***

During the *reporting period* covered by this Statement, were any of the following indebted to any *person* that does *business with the City* {or is regulated by or lobbies before the *City*}?

**Note:** The following debts need not be reported: (i) utility accounts (e.g., telephone, gas, or electric accounts); or (ii) retail credit or installment sales accounts (e.g., credit card purchases or advances; car or appliance financing through dealer or established lender).

If you answer “yes” to any of these, complete and attach **Schedule 5**.

a. You

Yes  No

b. A *family member* (if you were involved in the transaction giving rise to the debt)

Yes  No

**6. FAMILY MEMBERS EMPLOYED BY CITY**

During the *reporting period* covered by this Statement, were any of the following employed by the *City*?

If you answer “yes” to any of these, complete and attach **Schedule 6**.

a. Your spouse or child

Yes       No

b. Your parent or sibling

Yes       No

**7. OTHER SOURCES OF EARNED INCOME**

During the *reporting period* covered by this Statement, were any of the following (i) a compensated employee of someone other than the *City*; (ii) the sole owner of a *business entity* from which income was earned during the reporting period; or (iii) a recipient of earned income from a *business entity* that does *business with the City* {or is regulated by or lobbies before the *City*}?

If you answer “yes” to any of these, complete and attach **Schedule 7**.

a. You

Yes       No

b. Your spouse or child

Yes       No

**8. ADDITIONAL INFORMATION**

Is there any other interest or information that you would like to disclose?

If you answer “yes”, complete and attach **Schedule 8**.

Yes       No

**PART E. SIGNATURE AND AFFIRMATION**

I, \_\_\_\_\_, solemnly affirm under the penalties of perjury that the contents of this Statement and of all accompanying Schedules are true to the best of my knowledge, information, and belief.

\_\_\_\_\_  
(Signature)

**PART F. NOTARIZATION**

STATE OF MARYLAND  
CITY/COUNTY OF \_\_\_\_\_

I CERTIFY that, on this \_\_\_\_ day of \_\_\_\_\_, 20\_\_, before me, a Notary Public in and for the City/County of \_\_\_\_\_, personally appeared \_\_\_\_\_, who acknowledged that this Statement, the accompanying Schedules, and the preceding Affirmation were all his/her act.

AS WITNESS, my hand and Notarial Seal:

\_\_\_\_\_  
(Notary Public)

My Commission Expires: \_\_\_\_\_

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**SCHEDULE 1**  
**INTERESTS IN REAL PROPERTY**

**NOTE: See Part D.1. for classes of property to be disclosed.**  
**For more than one property, make additional copies of this Schedule.**

**1. LOCATION AND TYPE OF PROPERTY**

Address or Legal Description: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Type of Property:

Improved                       Unimproved  
 Residential                       Commercial

Other (explain): \_\_\_\_\_

**2. HOLDER OF INTEREST**

Name: \_\_\_\_\_

Relationship to Statement Maker:

Self     Spouse     Child     Parent     Sibling     *Attributable Entity*  
 Unincorporated entity in which one of above held an *interest*

Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**3. NATURE OF INTEREST**

Type of *interest*:

Fee simple     Life Estate     Leasehold    Other (explain): \_\_\_\_\_

How held:

Solely held     Jointly held\*

\*If jointly held, state % of interest: \_\_\_\_\_

**4. OTHERS WITH *INTEREST* IN PROPERTY**

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**5. HOW *INTEREST* ACQUIRED**

*Person* From Whom *Interest* Acquired:

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Date Acquired: \_\_\_\_\_

Manner of Acquisition:

Purchase     Gift     Inheritance

Other (explain): \_\_\_\_\_

**6. COST OF ACQUISITION**

Check the range that represents the amount paid for the *interest* or, if it wasn't acquired by purchase, its fair market value when acquired:

Under \$25,000     \$25,000 to \$49,999     \$50,000 to \$74,999  
 \$75,000 to \$99,999     \$100,000 and over

**7. TRANSFERS**

If all or any part of the *interest* was transferred (by sale, lease, or otherwise) to another during the period covered by the Statement –

Date of transfer: \_\_\_\_\_

Percentage of the *interest* that was transferred: \_\_\_\_\_ %

If the transferee is the *City*, an official or employee of the *City*, or a *person* who does *business with the City* {or is regulated by or lobbies before the *City*}, identify that transferee:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

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**SCHEDULE 2**  
**FINANCIAL INTERESTS IN BUSINESS ENTITIES DOING BUSINESS WITH CITY**

**NOTE: For more than one *business entity*,  
make additional copies of this Schedule.**

**1. IDENTITY OF *BUSINESS ENTITY***

Name: \_\_\_\_\_  
Address of Principal Office: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**2. HOLDER OF *FINANCIAL INTEREST***

Name: \_\_\_\_\_  
Relationship to Statement Maker:  
 Self     Spouse     Child     Parent     Sibling     *Attributable Entity*  
Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**3. NATURE AND AMOUNT OF *FINANCIAL INTEREST***

Type of *financial interest*:

Sole proprietor     General Partner     Limited Partner     Joint Venturer  
 Trust Beneficiary     Trustor     Reversionary Trust Interest  
 Stockholder     Other (explain): \_\_\_\_\_

Amount of *financial interest*:

For a non-equity *interest* (e.g., notes or bonds) in any *business entity*, indicate –  
dollar value of the *interest* : \$ \_\_\_\_\_

For an equity *interest* in a publicly traded corporation, specify *either* –  
dollar value of the *interest* : \$ \_\_\_\_\_ *or*  
number of shares owned: \_\_\_\_\_

For an equity *interest* in a non-publicly traded corporation or other *business entity*, specify –

*either* –

dollar value of the *interest*: \$ \_\_\_\_\_ *or*

*both* –

number of shares/ownership units owned: \_\_\_\_\_ *and*

percentage of company ownership represented by the *interest*: \_\_\_\_\_%

#### 4. TRANSFERS

If all or any part of the *financial interest* was transferred to another during the period covered by the Statement -

*Person* to Whom Transferred:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Date of transfer: \_\_\_\_\_

Percentage of the *interest* that was transferred: \_\_\_\_\_%

#### 5. AGENCIES WITH WHICH *BUSINESS ENTITY* DOES BUSINESS

Identify each *City* agency with which the *business entity* is doing *business* and, as to each, the nature of that business, specifying, at a minimum, whether the *business entity* (i) is involved in sales or contracts with the agency; (ii) is regulated by the agency; or (ii) is a lobbyist with respect to matters before the agency:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**SCHEDULE 3**  
**POSITIONS WITH *BUSINESS ENTITIES DOING BUSINESS WITH CITY***

**NOTE: For more than one *business entity* or more than one position holder,  
make additional copies of this Schedule.**

**1. IDENTITY OF *BUSINESS ENTITY***

Name: \_\_\_\_\_  
Address of Principal Office: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**2. HOLDER OF POSITION**

Name: \_\_\_\_\_  
Relationship to Statement Maker:  
    \_\_\_ Self    \_\_\_ Spouse    \_\_\_ Child    \_\_\_ Parent    \_\_\_ Sibling  
Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**3. NATURE OF POSITION**

Title: \_\_\_\_\_  
Date Started: \_\_\_\_\_  
General Duties: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**4. AGENCIES WITH WHICH *BUSINESS ENTITY* DOES BUSINESS**

Identify each *City* agency with which the *business entity* is doing *business* and, as to each, the nature of that business, specifying, at a minimum, whether the *business entity* (i) is involved in sales or contracts with the agency; (ii) is regulated by the agency; or (ii) is a lobbyist with respect to matters before the agency:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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**SCHEDULE 4**  
**GIFTS FROM *PERSONS DOING BUSINESS WITH CITY***

**NOTE: Provide the following information for each *significant gift* or series of *gifts* from the same *person* or entity. If needed, make additional copies of this Schedule.**

**1. IDENTITY OF *PERSON* MAKING GIFT**

**NOTE:** Identify here the individual or entity by or on whose behalf, whether directly or indirectly, the *significant gift* was given.

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

**2. RECIPIENT OF *GIFT***

Name: \_\_\_\_\_

Relationship to Statement Maker:

\_\_\_ Self \_\_\_ *Family member* or other *person*, at your direction

Address: \_\_\_\_\_

\_\_\_\_\_

**3. NATURE OF *GIFT***

Describe *gift*: \_\_\_\_\_

Retail value when received: \$ \_\_\_\_\_

**4. TRAVEL EXPENSES**

If the *gift* entailed any payment for all or any part of a trip or for meals, beverages, lodging, entertainment, or other associated expenses, provide the following information for that trip:

Location: \_\_\_\_\_

Nature of Event: \_\_\_\_\_

Fair Market Value of Entire Trip: \$ \_\_\_\_\_

Amount Paid for by You: \$ \_\_\_\_\_

Amount Paid for by *Person* Identified in Section 1: \$ \_\_\_\_\_

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**SCHEDULE 5**  
**DEBTS TO PERSONS DOING BUSINESS WITH CITY**

**NOTE: For more than one person doing business with the City ,  
make additional copies of this Schedule.**

**1. IDENTITY OF CREDITOR**

Name: \_\_\_\_\_

Address of Principal Office: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**2. DEBTOR**

Name: \_\_\_\_\_

Relationship to Statement Maker:

Self       Spouse\*       Child\*       Parent\*       Sibling\*

Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\*Describe your involvement in transaction: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**3. DESCRIPTION OF DEBT**

Date Incurred: \_\_\_\_\_

Terms of Payment:

\$ \_\_\_\_\_ per

Month       Quarter       Year

Other (explain): \_\_\_\_\_

for \_\_\_\_\_ (number)

Months       Quarters       Years

Other (explain): \_\_\_\_\_

**4. SECURITY FOR DEBT**

- None
- Real Property (address): \_\_\_\_\_  
\_\_\_\_\_
- Personal Property (describe): \_\_\_\_\_  
\_\_\_\_\_
- Other (explain): \_\_\_\_\_  
\_\_\_\_\_

**5. PRINCIPAL BALANCE**

Check the range that represents the amount owed at the end of the *reporting period*:

- \$0       Under \$1,000       \$1,000 to \$9,999       \$10,000 to \$24,999
- \$25,000 to \$49,999       \$50,000 and over

**SCHEDULE 6**  
***FAMILY MEMBERS EMPLOYED BY CITY***

**1. SPOUSE**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Name of Agency: \_\_\_\_\_

Title and Nature of Position: \_\_\_\_\_

\_\_\_\_\_

**2. CHILD**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Name of Agency: \_\_\_\_\_

Title and Nature of Position: \_\_\_\_\_

\_\_\_\_\_

**3. PARENT**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Name of Agency: \_\_\_\_\_

Title and Nature of Position: \_\_\_\_\_

\_\_\_\_\_

**4. SIBLING**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Name of Agency: \_\_\_\_\_

Title and Nature of Position: \_\_\_\_\_

\_\_\_\_\_

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**SCHEDULE 7  
OTHER SOURCES OF EARNED INCOME**

**1. STATEMENT MAKER**

Name of Statement Maker: \_\_\_\_\_

*Business Entity's* Name and Address: \_\_\_\_\_

\_\_\_\_\_

Title and Nature of Position: \_\_\_\_\_

\_\_\_\_\_

**2. SPOUSE**

Name of Spouse: \_\_\_\_\_

*Business Entity's* Name and Address: \_\_\_\_\_

\_\_\_\_\_

Title and Nature of Position: \_\_\_\_\_

\_\_\_\_\_

**3. CHILD**

Name of Child: \_\_\_\_\_

*Business Entity's* Name and Address: \_\_\_\_\_

\_\_\_\_\_

Title and Nature of Position: \_\_\_\_\_

\_\_\_\_\_

**4. CHILD**

Name of Child: \_\_\_\_\_

*Business Entity's* Name and Address: \_\_\_\_\_

\_\_\_\_\_

Title and Nature of Position: \_\_\_\_\_

\_\_\_\_\_

**5. CHILD**

Name of Child: \_\_\_\_\_

***Business Entity***'s Name and Address: \_\_\_\_\_

\_\_\_\_\_

Title and Nature of Position: \_\_\_\_\_

\_\_\_\_\_

