

## Annual Statement of Financial Disclosure For City of Buffalo 2018

If you fill in information electronically on this form, you must print out the form and sign. Please bring all signed forms to the City Clerk's office.

### CITY POSITION

City  
Position(s)

Boards/  
Committees

Paid/ Unpaid	
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Please indicate if the answer to any of the following questions is "none".

"Close Relative" means your spouse, child, stepchild, brother, sister, parent or a person you claimed as a dependent on your latest state or federal income tax return.

### Name and Address

Last Name:	First:	M.I.:
Title:		
Dept./ Agency:		
Dept./ Agency Address:	Department Telephone No.	
Principal Residence:	Personal Telephone No.	
Email		

### Spouse and Children

Please provide the name of your spouse (if married) and the names of any dependent children.

Spouse:

Child/ Age:

Child/ Age:

Child/ Age:

**Interest in Contracts**

Describe any interest of yours or a close relative in any contract involving the City of Buffalo or any municipal corporation located within the City of Buffalo.

Name of Family Member	Contract	Description

**Political Parties**

List any positions you held within the last five (5) years as an officer of any political committee or political organization. The term “political organization” includes any independent body or organization that is affiliated with or a subsidiary of a political party.

Party/ Organization	Position

**Gifts and Honorariums**

List the source of all gifts received in the past year from the same or affiliated source aggregating in excess of \$100.00 received during the last year by you or a close relative, from any person or organization having had a regulatory or financial relationship with the City of Buffalo.

Source(s)

**Real Estate**

List the address of each piece of real property you or a close relative own or have a financial interest in (including an interest through a family trust or business organization). List only real estate that is in the City of Buffalo or within five (5) miles of the boundary of the City of Buffalo.

Name of Family Member	Relationship to You	Address of Real Estate	Type of Investment

**Your Employment or Business**

List the name of any employer or business from which you receive compensation for services rendered or goods sold or produced or of which you are a member, officer or employee.

Name of Employer or Business	Nature of Business	Your position

**Your Spouse's Employment or Business**

List the employment information for your spouse

Name of Employer or Business	Nature of Business	Spouse's Position

**Investments**

List your interest in business entities or trusts in which you or a close relative has had financial or regulatory activity with either the City or City Development Agency within the last year or is expected to have such activity in the next year, except for a publicly traded corporation of which you own less than five percent of the outstanding stock and except for a personal savings or retirement account.

Name of Employer or Business	Nature of Business	Type of Business

Signature:		Date:	
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Please keep this booklet, the copy of your completed statement and receipt for your records.

**Other Financial Interest****A. Outside Employment.**

Describe any outside occupation, employment, trade, business or profession providing more than \$1,000/ year for you or a close relative, if any, and indicate whether such activities are regulated by any state or local agency.

Name of Family Member	Position	Name and Address of Organization	State/ Local

**B. Future Employment.**

Describe any contract, promise or other agreement between you and anyone else with respect to your employment after leaving your City office or position.

Name of Family Member	Position	Name and Address of Organization	State/ Local

**C. Past Employment.**

Identify the source and nature of any income in excess of \$1,000/ year from any prior employer, including deferred income, contributions to a pension or retirement fund, profit sharing plan, severance pay or payments under a buyout agreement.

Name and Address of Income Source:	Description of Income (Pension, deferred, etc.)

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**Third-Party Reimbursements**

Identify and describe the source of any third-party payment or reimbursement for City of Buffalo travel-related expenditures in excess of \$250.00 for any matter that relates to your official duties. The term “reimbursement” includes any travel-related expenses provided by anyone other than the City for speaking engagements, conference or fact-finding events that relate to your official duties.

Source	Description

**Loans and Debts**

Describe all loans and debts of you or a close relative in excess of \$5,000 (excluding retail accommodations such as primary mortgages, home equity loans, charge accounts, lines of credit and credit cards extended in the normal course of business which are ordinarily available to the general public by financial institutions or merchants and which are not extended in circumstances in which it might be reasonably inferred that they were extended with the intention to influence or reward you in relation to the performance of your duties)

Name of Family Member	Name and Address of Creditor

Signature:		Date:	
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Please keep this booklet, the copy of your completed statement and receipt for your records.

Receipt

Date/ Time:

Received By:

Mail

Hand Delivery to Clerk

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Receipt

Date/ Time:

Received By:

Mail

Hand Delivery to Clerk