

FRANKLIN COUNTY ETHICS COMMISSION

P.O. BOX 4514
FRANKFORT, KENTUCKY 40602-4514

STATEMENT OF FINANCIAL DISCLOSURE

File Date

For Office Use Only

Date Received: _____ Date Reviewed: _____ Action: _____

TO BE FILED NO LATER THAN JULY 1 OF EACH YEAR
REPORTING PERIOD IS JANUARY 1 - DECEMBER 31 OF THE PREVIOUS YEAR

**ALL QUESTIONS MUST BE ANSWERED
DO NOT LEAVE ANY BLANKS**

(Attach additional sheets if necessary to complete the following questions)

1. Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Work Phone: _____

2. Official Title: _____

Business Address: _____

City: _____ State: _____ Zip: _____

3. Other Occupations of Filer:

a. _____

b. _____

4. Occupation of Spouse: _____

5. Positions held by filer in any business, partnership, corporation for profit, or corporation not for profit from which the filer receives compensation, and the name of the business, partnership, or corporation.

Position and Business, Partnership or Corporation Name:

Business Address: _____

City: _____ State: _____ Zip: _____

6. Positions held by filer's spouse in any business, partnership, corporation for profit, or corporation not for profit from which the filer or filer's spouse receives compensation and the name of the business, partnership, or corporation:

Position & Business, Partnership or Corporation Name: _____

Business Address: _____

City: _____ State: _____ Zip: _____

7. Names and addresses of all businesses, investments, or securities in which the filer, filer's spouse, or filer's minor children had at any time during the year an interest of \$5,000 at fair market value, or 5% ownership interest or more.

Business, Partnership or Corporation Name: _____

Business Address: _____

City: _____ State: _____ Zip: _____

Business, Partnership or Corporation Name: _____

Business Address: _____

City: _____ State: _____ Zip: _____

8. Sources and form of gross income of the filer (list sources by name; amounts not required)

- 1) _____
- 2) _____
- 3) _____
- 4) _____
- 5) _____
- 6) _____
- 7) _____

9. Sources and form of gross income of filer's spouse (list sources by name; amounts not required)

- 1) _____
- 2) _____
- 3) _____
- 4) _____

10. A designation as commercial, residential or rural, and the location of all real property *other than the filer's primary residence*, in which there is an interest of \$5,000 or more held by the filer, filer's spouse, or filer's minor children.

Property type: _____

Location: _____

11. Do you or any member of your immediate family have any private financial interest, directly or indirectly, in any contract or matter pending before or within any department or agency of the county government or independent agency or special district?

_____ YES _____ NO

If YES, please explain:

Signature

Date

PLEASE MAIL COMPLETED FINANCIAL DISCLOSURE STATEMENT TO:

Franklin County Ethics Commission
P.O. Box 4514
Frankfort, KY 40602-4514