THIS SPACE FOR ETHICS BOARD OFFICE USE ONLY

STATEMENT OF ECONOMIC INTEREST

Milwaukee County Ethics Board
Courthouse Room 212
901 North 9th Street
Milwaukee, WI 53233
Telephone – 278-5332 * Fax – 223-1897

CURRENT INFORMATION: All information given below must be current; that is, not prior to the 15th day of the month preceding the month this statement is prepared.

TYPE OR PRINT: Additional directions, definitions and other pertinent information are contained in the Instruction Sheet (yellow insert). Please read it carefully BEFORE completing the Statement. If more space is needed, please use additional sheets.

DATE PREPARED: _____
(Month) (Day) (Year)

NAME: _____
(Last) (First) (Middle Initial)

POSITION SOUGHT/HELD w/COUNTY GOVERNMENT: _____

SPOUSE'S NAME: _____
(Last) (First) (Middle Initial)

1. OFFICES, DIRECTORSHIPS & POSITIONS

* In this section, "Organization" means any corporation, partnership, proprietorship, firm, enterprise, franchise, association, trust, Board, Commission or other legal entity other than an individual or body politic.

1A: As of the dated cited above, were you or your spouse an officer, partner, sole proprietor, director or trustee of any business or other organization? ☐ Yes ☐ No

1B: As of the date cited above, were you or your spouse an officer of or did you or your spouse hold a position with any organization doing business with Milwaukee County or receiving funds from Milwaukee County? (9.04(1)(a) and (f)). ☐ Yes ☐ No

If you have answered no to both above items, please check here: ☐ Proceed to Item #2

If you have answered yes to either 1A or 1B above, identify each business or organization and position held:

Name of Business or Corporation	City & State	Position Held

2. SIGNIFICANT FIDUCIARY RELATIONSHIPS

As of the date cited on the first page, did you or your spouse own or control any of the following directly or indirectly:

A) At least ten (10) percent of the outstanding stock of any business corporation; or

B) Stock having a value of at least $5,000 ;or

C) An interest of at least ten (10) percent or $5,000 of any business? (9.04(1)(a) and (18))

If no to all of the above items, please check here: ☐ Proceed to Item #3

If yes to any of the above items, please identify the business and the type of ownership:

****Note: You need not report the actual dollar values or number of shares, etc.**

Business Entity	City & State of its principal office	Type of Ownership (e.g. Common Stock, Limited Partnership)

3. BOND, DEBENTURES & DEBT OBLIGATIONS

As of the date cited on the first page, did you or your spouse hold any bonds, debentures or debt obligations of a municipal corporation or other corporation in excess of $5,000? (9.04(1)(b))

If no, please check here: ☐ Proceed to Item #4

If yes, please identify each Issue and place a checkmark in the proper column below to indicate the value.

Issuer Name, City & State	Value Under $50,000	Value Over $50,000

4. CREDITORS

As of the date cited on the first page, did you or your spouse owe, separately or together with another person, to any creditor $5,000 or more? (9.04(1)(c))

If no, please check here: ☐ Proceed to Item #5

If yes, please identify each creditor. Place a checkmark in the appropriate column to indicate the value owed.

Creditor's Name, City & State	Value Under $50,000	Value Over $50,000

5. REAL PROPERTY

As of the date cited on the first page, did you or your spouse hold an interest valued at $5,000 or more in real property other than your principal residence or other than property in which the pro rata share held is less than 10% of the outstanding shares? (9.04(1)(c))

**** Report only on properties located in the counties of Milwaukee, Ozaukee, Washington, Waukesha and Racine.***

If no, please check here: ☐ Proceed to Item #6

If yes, please identify the property and nature of interest held.

Location of Real Property (street/rural route address; fire number & municipality)	Type of property (farm, commercial property or recreational home)	Nature of Interest (own, lease, option land contract, partnership)

6. TRANSFERS

As of two calendar years preceding the filing of this statement, have you or your spouse transferred to any member of your immediate family any significant fiduciary relationship (as defined in the instruction sheet) or any real property or any bonds, debentures or debt obligations of municipal corporation or other corporation which is in excess of $5,000? (9.04(1)(d))

If no, please check here: ☐ Proceed to Item #7

If yes, please identify each significant fiduciary relationship bond, debenture, or debt obligation of a municipal corporation or other corporation, which is in excess of $5,000.

Business, Issuer, Real Property, Creditor	Address	Description of Interest

- **INCUMBENTS now in elective public office and current County employees are to *SKIP* Item #8.**

- **CANDIDATES for elective public office are to *SKIP* Item #7.**

7. GIFTS, HONORARIA, FEES & EXPENSES

List each individual and organization from which you or your spouse received a GIFT, HONORARIUM, FEE and EXPENSES during the preceding taxable year (9.14). For a full understanding of this reporting requirement, it is important that you read Section 9.14, Code of Ethics, in its entirety.

7A: **GIFTS** including **ENTERTAINMENT**. A "gift" is the receipt of anything of value (9.02(1)), which is furnished without valuable consideration. Do not include anything received which was made for a purpose unrelated to duties or responsibilities of the position of the official or employee. List all individuals and organizations from which you received in the past year entertainment or gifts having a total value of $50 or more, not including the value of food or beverage offered coincidentally with a talk or meeting related to the business of the County. Include tickets to sporting or theatrical events, golfing fees, prizes, samples of promotional items from sales representatives or as part of business promotions and similar items.

7B: **HONORARIA**, **FEES** AND **EXPENSES** FOR TALKS AND PUBLICATIONS RELATED TO PUBLIC OFFICE. List each individual or organization from which you or your spouse received, in the past year, lodging, transportation, money or other things having a total value of $50 or more, not including the value of food or beverage offered coincidentally with a talk or meeting where the subject matter of which was related to your duties or responsibilities of your position with the County. You do not have to list information about a payment: **(1)** if you returned it within 30 days; **(2)** If you received it from the County; or **(3)** If you have previously reported the payment to the Ethics Board as a matter of public record. (9.14(2)(a) and (b) and 9.14(3))

If you or your spouse has no reporting(s), please check here: ☐ Proceed to signature section

If you or your spouse has reporting(s) for Item #7, please use the enclosed form titled for this purpose and submit with your Statement.

8. CANDIDATES ONLY for elective public office are to furnish the following information:

Name of present employer and position you hold:

_____

(Employer) (Position)

NOTES:

- **Chapter 9, County General Ordinances, authorizes this form and prescribes penalties for the failure of a County Officer or employee and candidate for County Public Office to file this form in a timely manner. Penalties may include withholding County salaries. (S. 9.03 & 9.04, Code of Ethics, C.G.O.)**

- **In all cases when the Statement is submitted by a County elected officer, Candidate for elected office or a County employee, it is to be accompanied by the completed form titled "Appendix A Affidavit", (form enclosed) pursuant to S. 0.03(5) and Appendix A of Chapter 9, Code of Ethics, C.G.O.**

By signing this form, I certify that the information contained in this Statement of Economic Interests is true, correct and complete to the best of my knowledge, information and belief.

X_____ _____

Signature of person filing Statement Date of Signature

Optional: _____

Telephone number where you can be reached normal business hours.

For Ethics Board Use	

STATEMENT OF ECONOMIC INTERESTS – REPORT FORM FOR ITEM #7

Your Name: _____ Date Prepared: _____
(Last Name) (First Name & Middle Initial)

7A: GIFTS including ENTERTAINMENT ***Please type or Print***

A. Name of Giver & Organization	B. Date of Gift	C. Approx Value	D. Circumstances

You may duplicate this form if you need additional space.

STATEMENT OF ECONOMIC INTERESTS – REPORT FORM FOR ITEM #7

Your Name: _____ Date Prepared: _____
(Last Name) (First Name & Middle Initial)

7B: HONORARIA, FEES & EXPENSES for TALKS & MEETINGS related to public office: ***Please type or Print***

A. Name of Payer & Organization	B. Approx Cost/Expense	C. Amount of Honorarium or Payment	D. Date & Circumstances

You may duplicate this form if you need additional space.

APPENDIX A

AFFIDAVIT

Please check the appropriate boxes below and sign this form in front of a valid Notary Public for the State of Wisconsin.

STATE OF WISCONSIN)
) ss.
MILWAUKEE COUNTY)

The undersigned, being duly sworn on oath, deposes and says that ☐ ***he*** / ☐ ***she*** is a County ☐ ***employee*** / ☐ ***appointed official*** / ☐ ***elected official*** / ☐ ***candidate*** of Milwaukee County; that ☐ ***he*** / ☐ ***she*** has read and understands and to the best of ☐ ***his*** / ☐ ***her*** knowledge and belief, ☐ ***he*** / ☐ ***she*** has complied with the provisions of Chapter 9 of the General Code of Ordinances of Milwaukee County relating to a Code of Ethics.

_____
Signature of Affiant

_____
Title of Affiant

Subscribed and sworn to before me

This _____ day of _____, 20___

_____
Signature of Notary

My commission expires on _____

(Affidavit is pursuant to S. 9.03(5) of Chapter 9 – Code of Ethics, C.G.O.)