

**FINANCIAL REPORTING CATEGORIES**

<b>A = \$0 (None)</b>	<b>B = Under &lt; \$5000</b>	<b>C = \$5,001 to \$20,000</b>	<b>D = \$20,001 to \$60,000</b>	<b>E = \$60,001 to \$100,000</b>	<b>F = \$100,001 to \$250,000</b>	<b>G = Over \$250,000</b>
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**2024 SCHENECTADY COUNTY FINANCIAL DISCLOSURE FORM**

**(For the Period January 1, 2024, to December 31, 2024)**

**PART B SUPPLEMENT: OUTSIDE EMPLOYMENT/ ADDITIONAL POSITIONS**

*\*Note: For Part B "Reporting Category" Equals Annual Income Received*

(Use only if additional space is needed- and only complete applicable questions)

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Email Address: \_\_\_\_\_ Phone #: \_\_\_\_\_

**(B-1)** List any ADDITIONAL SOURCES of income YOU received (not included on the original Form) greater than \$1,000 during the reporting period, from any outside (*non- County*) occupation, employment, trade, business, or profession? INCLUDE any deferred income from payments under a buy-out agreement.

**\*Entity Name & Address:** \_\_\_\_\_ **Reporting Category:** \_\_\_\_\_

Does this entity have a contractual, regulatory, or other business relationship with Schenectady County?

YES  NO If YES, please describe:

**\*Entity Name & Address:** \_\_\_\_\_ **Reporting Category:** \_\_\_\_\_

Does this entity have a contractual, regulatory, or other business relationship with Schenectady County?

YES  NO If YES, please describe:

**\*Entity Name & Address:** \_\_\_\_\_ **Reporting Category:** \_\_\_\_\_

Does this entity have a contractual, regulatory, or other business relationship with Schenectady County?

YES  NO If YES, please describe:

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**(B-2)** List any ADDITIONAL income (not included on original form) received by any FAMILY MEMBER greater than \$1,000 during the reporting period, from any occupation, employment, trade, business, or profession **which has a contractual, regulatory, or other business relationship with Schenectady County?**

**\*Name of Family Member:** \_\_\_\_\_ **Reporting Category** \_\_\_\_\_

Entity Name & Address: \_\_\_\_\_

Please describe source of income and entity's relationship to Schenectady County.

**\*Name of Family Member:** \_\_\_\_\_ **Reporting Category** \_\_\_\_\_

Entity Name & Address: \_\_\_\_\_

Please describe source of income and entity's relationship to Schenectady County.

**\*Name of Family Member:** \_\_\_\_\_ **Reporting Category** \_\_\_\_\_

Entity Name & Address: \_\_\_\_\_

Please describe source of income and entity's relationship to Schenectady County.

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**(B-3)** List any contract or agreement YOU have for future employment (not included on original form).

**\*Position:** \_\_\_\_\_ **Reporting Category** \_\_\_\_\_

Entity Name & Address: \_\_\_\_\_

Please describe your future employment agreement and any relationship to Schenectady County.

**(B-4)** List any additional positions, offices, trusteeships, directorships, partnerships, or other positions YOU held in any business, association, proprietary, government, not-for-profit or other organization/ entity **that has a financial, contractual, or regulatory relationship with Schenectady County** (not already reported in Question A-3 or B-1)?

**\*Position Held:** \_\_\_\_\_ **Reporting Category** \_\_\_\_\_

Entity Name & Address: \_\_\_\_\_

Please describe the specific nature of this position and the entity's relationship to Schenectady County.

**\*Position Held:** \_\_\_\_\_ **Reporting Category** \_\_\_\_\_

Entity Name & Address: \_\_\_\_\_

Please describe the specific nature of this position and relationship to Schenectady County.

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**(B-5)** List any additional offices, trusteeships, directorships, partnerships, or other positions held by any FAMILY MEMBER in any business, association, proprietary, government, not-for-profit, or other organization/entity **that has a financial, contractual, or regulatory relationship with Schenectady County** (not already reported in Question B-2)?

\*Name of Family Member: \_\_\_\_\_

Position Held \_\_\_\_\_ Reporting Category \_\_\_\_\_

Entity Name & Address: \_\_\_\_\_

Please describe the specific nature of this position and the entity's relationship to Schenectady County.

\*Name of Family Member: \_\_\_\_\_

Position Held \_\_\_\_\_ Reporting Category \_\_\_\_\_

Entity Name & Address: \_\_\_\_\_

Please describe the specific nature of this position and the entity's relationship to Schenectady County.

**(B-6)** List any additional political committee or organizations YOU were a member of in 2024 (not included on original form).

\*Name of Organization/Committee \_\_\_\_\_ Reporting Category \_\_\_\_\_

Position/s Held: \_\_\_\_\_

\*Name of Organization/Committee \_\_\_\_\_ Reporting Category \_\_\_\_\_

Position/s Held: \_\_\_\_\_

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**(B-7) List any additional** political committee or organizations any FAMILY MEMBERS were a member of in 2024 (not included on original form).

**\*Name of Family Member** \_\_\_\_\_

**Name of Organization/Committee** \_\_\_\_\_ **Reporting Category** \_\_\_\_\_

**Position/s Held:** \_\_\_\_\_

**\*Name of Family Member** \_\_\_\_\_

**Name of Organization/Committee** \_\_\_\_\_ **Reporting Category** \_\_\_\_\_

**Position/s Held:** \_\_\_\_\_

**END OF PART B SUPPLEMENT**