# **Town of Lansing, New York**

#### **Annual Disclosure Statement and Ethics Code Acknowledgement**

The Code of Ethics of the Town of Lansing, NY, requires that municipal officers and employees, as defined in the code, complete and file this Annual Disclosure Statement.

the code, complete and me this African Disclosure Statement.			
Form must be completed and filed with the Town Clerk by			
YOUR NAME:			
COMPLETE HOME ADDRESS:	<del></del>		
PLACE of USUAL EMPLOYMENT with TITLE:			
BOARD or DEPARTMENT of the Town:			
Instructions:			
Do not leave any area blank.			
<ul> <li>If there is nothing to list, please write "NONE."</li> </ul>			
<ul> <li>If an error is made, draw a single line through it and initial.</li> </ul>			

# Definitions:

1. **Household** means your spouse or equivalent member of a household sharing living expenses with you and any of the following if residing with you: child, stepchild, brother, sister, parent, or person you claimed as a dependent on your latest state income tax return.

The answers must cover the 12 months before the date you file this form.

Updated forms should be submitted within 30 days of any significant change in information.

Please attach additional pages if needed to respond to any section and sign and date all attachments.

2. **Significant Financial Interest** shall mean an ownership interest of more than ten percent (10%). It shall also mean a security interest of more than \$1,000,000.00 in property (such as a mortgage holder).

### A. REAL ESTATE OWNERSHIP

List the address of each piece of property that you or any member of your "Household" own or have a "Significant Financial Interest" in that is located in the Town of Lansing.

Name of Family Member	Relationship	Property Address	Nature of Property

## **B. OUTSIDE INTERESTS**

### **Partnerships or Unincorporated Businesses**

List any partnership, unincorporated business (located or doing business in the State of New York), or unincorporated association (which does business with the Town of Lansing) of which you or any member of your "Household" is a member, partner, officer, or employee or has a "Significant Financial Interest."

Member	Business/ Organization	Nature & Type of Business	Nature of Affiliation

### **Corporations**

List any corporation organized for profit (located or doing business in the State of New York) or not-for-profit (which does business with the Town of Lansing) of which you or any member of your "Household" is an officer, director, employee, or owns or controls a "Significant Financial Interest."

Name of Family Member	Business/Organization	Nature & Type of Business	Affiliation

#### **Self-Employment**

List any self-employment from which you or a member of your "Household" has derived a gross income of \$5,000.00 or more during the previous twelve months.

Name of Family Member	Name of Business/Organization	Nature & Type of Business	Affiliation

# C. LICENSED PROFESSIONS

If you practice law, are a licensed real estate broker or agent, or practice a profession licensed by the NYS Department of Education, please include a general description of the principle subject matters undertaken in the stated practice.

Your Profession	Specialty	Name of Employer or Business	Description of Business Activities

# **D. INTEREST IN CONTRACTS**

Describe any interest you or anyone in your "Household" have in any contract involving the Town of Lansing.

Contractor	Contract with Town	Nature of Business with the Town

## **CERTIFICATION**

By signing below, you acknowledge the accuracy and completeness of the above disclosures.

I certify, under penalty of perjury, that to the best of my knowledge and belief, the information contained herein is true, correct, and complete.

Signature:	Date:

### **CODE OF ETHICS ACKNOWLEDGMENT**

By signing below, I	acknowledge that I have	received a copy o	f and agree to com	nply with the Code of	Ethics of the To	wn
of Lansing.						

Signature:	Date:
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