

**WORCESTER COUNTY ETHICS BOARD**  
**One W. Market Street, Room 1103**  
**Snow Hill, Maryland 21863**  
**410-632-1194**

**BOARD AND COMMISSION MEMBER**  
**DISCLOSURE STATEMENT**

Regular Reporting Period: January 1 through December 31, \_\_\_\_\_  
or

*Termination Report: January 1 through \_\_\_\_\_, \_\_\_\_\_*

**PART I. IDENTIFYING INFORMATION**

FIRST NAME	INITIAL	LAST NAME
TITLE		
DEPARTMENT (IF APPLICABLE)		
ADDRESS OF DEPARTMENT		
E-MAIL ADDRESS		
<p><b>Schedule A – Gifts</b></p> <p>During the reporting period, did you receive a gift in excess of a value of \$20 from a person that is doing business with or seeking to do business with the Worcester County office, agency, board, or commission with which you are affiliated; has financial interests that may be substantially and materially affected, in a manner distinguishable from the public generally, by the performance or nonperformance of the official duties of you as an employee; is engaged in an activity regulated or controlled by the governmental unit you work for; or is a lobbyist with respect to matters within the jurisdiction of you as an employee?</p> <p>You need not report the following gifts: 1) from your spouse, children or parents or 2) campaign contributions.</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No (Go to Schedule B)</p>		

**If yes; (Answer each question below. A separate Schedule A will be required for each gift you need to disclose.)**

1. Who gave you the gift? \_\_\_\_\_

2. What was the nature of the gift? (Example: cash, restaurant meal, theater tickets, book, etc.)

\_\_\_\_\_

3. What was the value of the gift? \$ \_\_\_\_\_

4. If the gift was given to someone else at your direction, the identity of the recipient of the gift:

\_\_\_\_\_

**Please use additional sheet(s), if necessary, for any additional entries.**

### **Schedule B – Other**

Is there any additional information or interest you would like to include?

### **PART II. SIGNATURE AND NOTARIZATION**

This financial disclosure statement describes all interests and related transactions and matters required to be disclosed by Title CG-5, Subtitle 1 of the Worcester County Ethics Law with respect to the period indicated and pertaining to the person filing the statement.

#### Privacy Notice

The Worcester County Ethics Law requires the collection of this information, which will be used primarily for public disclosure and to determine compliance with the Law. The information may be disclosed to any requesting person, including officials of State, local or federal government, who records their name and address, and this record will be provided to the filer upon request. The subject has the right to review, correct and amend the record as set forth in the Worcester County Ethics Law. Failure to file or to report information required can subject you to civil and administrative penalties including termination or other disciplinary action, suspension of pay, a late filing fee up to \$250, and a civil fine of up to \$5,000 per day. Willful and false filing is subject to criminal penalty for perjury pursuant to Criminal Law Article §9-101, Annotated Code of Maryland.

**STANDARDS OF CONDUCT**

The Worcester County Ethics Law includes standards of conduct applicable to County employees. The standards address conflicts of interest, disqualification from participation, prohibited secondary employment, prohibited ownership interests, misuse of position, prohibited solicitation and acceptance of gifts, misuse of confidential information, post-employment limitations, prohibited dealings with the County, and procurement specifications assistance restrictions. The Law provides for exceptions and exemptions under certain circumstances.

Filers wanting more detailed information about these requirements should contact the office of the County Ethics Board and review the County Ethics Law.

**NO REPORTABLE GIFTS.**

Complete this certification only if you have carefully reviewed this Statement.

I have thoroughly reviewed Schedules A through B of this Statement and the accompanying instructions and hereby certify that I have received no gifts required to be reported on any Schedules.

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Signature of Person Filing\*\*\*

\*\*\*By selecting the "I agree" button, I am signing this document electronically. I agree that my electronic signature is the legal equivalent of my manual/handwritten signature on this document. By selecting "I agree" using any device, means, or action, I consent to the legally binding terms and conditions of this document. I further agree that my signature on this document is as valid as if I signed the document in writing. I am also confirming that I am authorized to enter into this Agreement.

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