

**Financial Disclosure Form**  
**Town of New Paltz**  
**For the calendar year \_\_\_\_\_**

*PLEASE COMPLETE THIS FORM IN FULL. LEAVE NO BLANKS. IF ANY SECTION OR PART DOES NOT APPLY TO YOU, SO STATE BY INSERTING THE WORDS "NOT APPLICABLE" OR "NONE."*

1. Name: \_\_\_\_\_
2. (a) Title of Position: \_\_\_\_\_  
(b) Department, Board or Other Body: \_\_\_\_\_  
(c) Address of Present Office/Home: \_\_\_\_\_  
(d) Office Telephone/Home Telephone: \_\_\_\_\_  
(e) Email Address: \_\_\_\_\_
3. (a) Marital Status: Married \_\_\_\_\_ Not Married \_\_\_\_\_

If married, please give spouse's full name, including maiden name where applicable:

\_\_\_\_\_.

4. List name(s) of all dependents:

\_\_\_\_\_  
\_\_\_\_\_

5. **Business Position:** List any office, trusteeship, directorship, partnership or other position in any business, association, property or not-for-profit organization held by you, your spouse and/or your dependent(s), if any, as of the date of filing this statement, and indicate whether these entities are involved with the Town of New Paltz in any manner. All such positions described above which are acquired after the filing of this statement must be disclosed within thirty (30) days of acquiring such position by the filing of an amended statement.

<u>NAME OF</u> <u>FAMILY MEMBER</u>	<u>POSITION</u>	<u>ORGANIZATION</u>	<u>NATURE</u> <u>OF INVOLVEMENT</u>
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_____	_____	_____	_____
_____	_____	_____	_____

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6. **Investments**: Itemize and describe all investments which represent five (5%) percent or more of the value in any business, corporation or partnership, if any, owned by you, your spouse and/or your dependent(s) as of the filing date of this statement. All such investments acquired after the filing of this statement must be disclosed within thirty (30) days of such acquisition by the filing of an amended statement.

<u>NAME OF FAMILY MEMBER</u>	<u>NAME AND ADDRESS OF BUSINESS</u>	<u>DESCRIPTION OF INVESTMENT</u>
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7. **Real Estate**: List the location and description of all real estate within the Town of New Paltz including the Village of New Paltz, if any, in which you, your spouse and/or dependent(s) have an interest, regardless of value, as of the filing of this statement. Your primary residence need not be listed. Any real estate described above which is acquired after the filing of this statement must be disclosed within thirty (30) days of such acquisition by the filing of an amended statement.

<u>NAME OF FAMILY MEMBER</u>	<u>ADDRESS OF PROPERTY</u>	<u>DESCRIPTION OF PROPERTY</u>
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8. **Interest in Contracts**: Describe any interest you, your spouse and/or your dependent(s) have in any contract involving the Town of New Paltz as of the filing of this statement. Any interest in any contract involving the Town acquired after the filing of this statement must be disclosed within thirty (30) days of such acquisition by the filing of an amended statement.

<u>NAME OF FAMILY MEMBER</u>	<u>CONTRACT DESCRIPTION</u>
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**ATTESTATION:**

I hereby certify under penalty of perjury that I have read the foregoing Financial Disclosure Statement and that to the best of my knowledge and belief, it is true, correct and complete and that I have not and will not transfer any asset, interest or property for the purpose of concealing it from disclosure while retaining an equitable interest therein.

\_\_\_\_\_  
Signature

Date: \_\_\_\_\_  
New Paltz, NY

**Completed forms must be sent to/dropped off or emailed to:**

**Town Clerk, Town of New Paltz  
P.O. Box 550  
1 Clearwater Road  
New Paltz, NY 12561  
Phone: (845) 255-0100  
[clerk@townofnewpaltz.org](mailto:clerk@townofnewpaltz.org)**