	LACT	IAME				-	-	-			-			FIG	ST NA	ME			-	-	-	-		-		0110	EIN
ſ	LASTI	AME	V	01		T	T	T	T	T	T	T	٦	n	I	0	0			T	T	Т		٦٢	MI	SUF	FIX
1	VE	19	Y	OY	1			1	1	-		1	_		1	7	a	•			-	-	_			<u> </u>	-
	ADDRÉ		O(0)	E.	rgov	ernme SFU	ntal)	or hom	ne			B	off	1/0	len	n		P	State	Zip	Code		Area C		76	Phon 2:	54
)1	E: IF YO			DING A	TTACI	HMEN	TS, DO	O NOT	INCL	UDE	ANYT	HING	THAT	BEAR	YOU	R SC	OCIAL	SECUR	RITY NU	MBER	-	_	141		DUNT	NUN	BERS
	STATUS	1		olicable ( (includin			ks, mo C			block Officia			irked. D					e 2) Current)	E		Check				blo	eck th ck if y	
-	вЦ	Non	ninee	_	-		С	L P	Public	Officia	al (Fo	rmer)	D	L P	ublic E	mple	oyee (F	ormer)	_		f you a is a so				an	origir	hal filir
	PUBLIC	POSIT	ION O	RPUBL	IC OF	FICE (	admin	nistrato	r, mer	mber,	Com	missio	ner, jo	b title, e	tc.)	se	eeking			hold			held	_	-	_	-
	$\frac{1}{2}$ i	H	Y	C	0	u	n	C	i	(		M	e	m	be	2	V										
			1					_					_			s	eeking			hold			held			_	
	GOVER	NMENT	AL ENT	TTY in w	hich yo	ou are/v	vere a	n Officia	al, Em	ployee	, Can	didate	or Non	ninee (e.	g., dept	, ag	ency, a	uthority.	boroual	h, board	, com	missio	on, cou	nty, so	hool	listrict	twp. e
1	PI		10	ni	In	T	T	0	0	m	ha	Ĭ	5	S	-	2	n			T						T	1
	11	IN	N	111	Iri	y			0	IN	in	11	10	-3		-	. 1	1			-		-	-	-	-	-
																		-									
	QCCUP	ATION	OR PR	OFESS	ION (	This ma	ay be	the sa	me as	s block	(4)			07 YE	AR Inc	licat	te cale	ndar ye	ar for w	hich fo	rm is	being	filed.	SEE	INST	RUCT	IONS
	LI.	11	C			7	-	1.			. 1	31	P1								ſ	2	1)	1	4		
l	nuu	110	L	IVI	es	. 1	ec	VIY	11 0	ar	1 -	-15	V		-	_					6	_	VI	(	1		
	CREDIT Name:	TORS (S	See ins	tructions	s on pa	age 2).	Credi	itor (Na				i) If I		, check	this b	ox.	Ŕ					_	Inte	rest R	ate		
									ame a	ind Ad	dress	i) If I Ade	NONE dress:	r, check			r	pg. 2)	ONLY II check t	F NONE	Ę, kck.	¥				SE OI	NLY)
	Name:								ame a	ind Ad	dress	i) If N Add b) all en	NONE dress:	r, check			r	pg. 2)	ONLY II check t	• NONE	E, ick.	×				SE OI	NLY)
	Name: DIRECT Name:	OR INE	DIRECT		ES OI	FINCO	ME in		ame a	not lim	dress	i) If N Add b) all en	dress:	r, check			r	pg. 2)	ONLY II check t	<sup>=</sup> NONE his blo	., .ck. 1	×	(0		AL U	SE OI	NLY)
	Name: DIRECT Name: GIFTS	OR INE	DIRECT	SOURC	ES OI	FINCO	ME in	cluding	ame a	not lim	dress	i) If N Add b) all en	dress:	r, check			r	pg. 2)	ONLY II check t	F NONE	:, ck.	¥	(0	FFICI	AL U	SE OI	NLY)
	Name: DIRECT Name: GIFTS	OR INE	DIRECT	SOURC	ES OI	FINCO	ME in	cluding	ame a	not lim	dress	i) If N Add b) all en	dress:	r, check			ons on	pg. 2)	check t	his blo	ck. []		(O Va	FFICI	AL U	SE OI	NLY)
	Name: DIRECT Name: GIFTS Source of Address of TRANS	OR INE	DIRECT structic	SOURC	age 2)		ONE,	check	ame a	not lim	ited to	Add	NONE dress: mployr	nent. (S	ee instr	ructio	ons on Circurr	Istances	check t	his blo	ck. []		(O Va	FFICI	AL U	SE OI	NLY)
	Name: DIRECT Name: GIFTS Source of Address of	OR INE	DIRECT structic	SOURC	age 2)		ONE,	check	ame a	not lim	ited to	Add	NONE dress: mployr	nent. (S	ee instr	ructio	ons on Circurr	Istances	check t	his blo	ck. []		(O Va	FFICI	AL U	SE OI	NLY)
	Name: DIRECT Name: GIFTS Source o Address of TRANS Source (	OR INE	of Gift	SOURC	ege 2)	If NO	ME in	check	this I	not lim	dress ited to s on p	Add	NONE dress: dress:	inent. (S	ee instr	ruction	ons on Circum	istances	(includir	ng descr	ck. []		(O Va	FFICI	AL U	SE OI	NLY)
	Name: DIRECT Name: GIFTS Source of Address of TRANS Source ( Source ( Busines	OR INE	of Gift	SOURC	age 2)	If NO	ME in	check	this I	not lim	dress ited to s on p	b) If I Add all er Add Add analysis angle 2 angle 3 angle 3 an	NONE dress: dress: ) If I	inent. (S	ee instr	ruction	ons on Circum	istances	(includir	ng descr	ck. []		(O Va t Value	FFICI	Gift	SE OI	NLY)
	Name: DIRECT Name: GIFTS Source of Address of TRANS Source ( DFFICI Busine: Name:	OR INE	of Gift ATION, d Addre	SOURC	age 2)			check	this I	box.	ited to	Add     Add     Add     Add     Add	NONE dress: mployr dress: ) If M truction	None, of the second sec	ee instruction	this If N	Circum box.	istances	(includir	his blo	iption)	of Giff	(O Va Value	Ilue of	Gift	SEO	NLY)
	Name: DIRECT Name: GIFTS Source of Address of TRANS Source ( OFFICI Busines Name at Name at BuSIN Busines	OR INE (See In f Gift Gift Source FORT/ Name ar CIAL IN CIAL IN CIAL IN Addre ESS IN s (Name	of Gift ATION, d Addre (Name DTERES ss of Bu DTERES and Add	SOURC	RES OF	If NO OSPIT		check	ame a (but n this l binstru bi	not lim	s on p s (S)	i) If I Add all er Add bage 2 bage 2 bage 2 cee inst Add	NONE dress: dress: ) If I pruction ress: r (See	Check nent. (S NONE, o has on pa	ee instructions of tions of ti	this If N	Circum box. 1	nstances	(includir ) this bo	ng descr	s box	of Giff	(O Va Value Value	Ilue of i	Gift		NLY)
e	Name: DIRECT Name: GIFTS Source of Address of TRANS Source ( DFFICI Busine: Name at Busines Transfer undersig	OR INE (See in f Gift Gift Source FORT/ Name ar F, DIRE SS Entity CIAL IN d Addre ESS IN s (Name ree (Name ree (Name	of Gift ATION, d Addre CTORS y (Name DTERES and Add e and Add reby af	SOURC	RES OF	If NO OSPIT		check	ame a (but n this l binstru bi	not lim	s on p s (S)	i) If I Add all er Add bage 2 bage 2 bage 2 cee inst Add	NONE dress: dress: ) If I pruction ress: r (See	Check nent. (S NONE, o has on pa	ee instructions of tions of ti	this If N	Circum box. 1 NONE, age 2)	check If NO If NO	(includir (includir ) this bo	ng descr x. X.	s box	x. the ionshi f; sai	(O Va Value Positi Intere	FFICI	AL U		
e	Name: DIRECT Name: GIFTS Source of Address of TRANS Source ( OFFICI Busines: Name at Name at Busines: Transfet	OR INE (See in f Gift Gift Source FORT/ Name ar F, DIRE SS Entity CIAL IN d Addre ESS IN s (Name ree (Name ree (Name	of Gift ATION, d Addre CTORS y (Name DTERES and Add e and Add reby af	SOURC	RES OF	If NO OSPIT		check	ame a (but n this l binstru bi	not lim	s on p s (S)	i) If I Add  o) all er Add  coage 2  coage 2  coage 2  coage 2  coage 7  c	NONE dress: dress: ) If I pruction ress: r (See	Check nent. (S NONE, o has on pa	ee instructions of tions of ti	this If N	Circum box. 1 NONE, age 2)	istances Check If NO	(includir (includir ) this bo	ng descr x. X.	s box	x. the ionshi f; sai	(O Va Value Positi Intere	FFICI	AL U		

(5 01 4)