

**ANNUAL STATEMENT OF FINANCIAL DISCLOSURE
COUNTY OF TIOGA
FOR 2025**

DUE MAY 15, 2026

PERSONAL INFORMATION

DO NOT leave any section blank. If inapplicable, write N/A.

NAME

STREET ADDRESS

PO BOX

CITY, STATE, ZIP CODE

TITLE / COUNTY DEPARTMENT OR BOARD

SPOUSE/PARTNER FULL NAME

**List below the names & ages of all dependent children
DO NOT leave any section blank. If inapplicable, write N/A.**

CHILD'S NAME	AGE

FINANCIAL INFORMATION

“REPORTING CATEGORY”.

For the purposes of completing this section of the financial disclosure affidavit, use the following categories. Do not insert actual dollar amounts. Indicate all amounts by the Letter Category (“A”, “B”, etc.) which they fall under.

- “A” \$ 0 - \$ 5,000
- “B” \$ 5,001 - \$ 10,000
- “C” \$10,001 - \$ 25,000
- “D” \$25,001 - \$ 50,000
- “E” \$50,001 - \$100,000
- “F” Over \$100,001

OUTSIDE EMPLOYMENT

Describe any outside occupation, employment, trade, business or profession held by you, your spouse and your dependent children, and indicate whether there is any contract, promise or agreement for past or future employment that affects your current position with Tioga County. Also, indicate whether any listed employment is regulated by a State or local agency.

DO NOT leave any section blank. If inapplicable, write N/A.

FAMILY MEMBER	POSITION	ORGANIZATION	NATURE OF CO. INVOLVEMENT	REPORTING CATEGORY

BUSINESS POSITIONS

List below any office, trusteeship, directorship, partnership or other position you, your spouse or dependent children hold in any business, association, proprietary or non-profit organization. Indicate whether any businesses listed are currently or in the past have been involved with the County of Tioga in any manner.

DO NOT leave any section blank. If inapplicable, write N/A.

FAMILY MEMBER	POSITION	ORGANIZATION	NATURE OF CO. INVOLVEMENT	REPORTING CATEGORY

INVESTMENTS

Itemize and describe all investments or capital stock above a 5% share of ownership you, your spouse or your dependent children may have in any business, corporation or partnership.

DO NOT leave any section blank. If inapplicable, write N/A.

Investment / Stock	Company

REAL ESTATE

Excluding your residence, list the location of all real estate within the County or within five (5) miles of the County in which you, your spouse or your dependent children have an interest.

DO NOT leave any section blank. If inapplicable, write N/A.

OTHER INCOME

Identify the source and nature of any income not above-listed including but not limited to teaching income, lecture fees, consultant fees, contractual income or income which you continue to receive from past employment received by you, your spouse or your dependent children

DO NOT leave any section blank. If inapplicable, write N/A.

FAMILY MEMBER	NAME & ADDRESS OF INCOME SOURCE	NATURE OF INCOME	REPORTING CATEGORY

THIRD-PARTY REIMBURSEMENTS

List below the following:

- Identify the source of any third-party reimbursement for travel-related expenditures in excess of \$250 for any matter that relates to your official duties..**(Reimbursement means any travel-related expenses provided by anyone other than the County).**
- Identify the source of all gifts aggregating in excess of \$250.00 received during the last year by you, your spouse or your dependent children (excluding gifts from a relative). **(Gifts include cash, property, personal items, honoraria, forgiveness of debt and any other payments not reportable as income.)**

DO NOT leave any section blank. If inapplicable, write N/A.

SOURCE	DESCRIPTION

INTEREST IN CONTRACTS

Describe any interest you, your spouse or your dependent children have in any contract involving the County or any municipality within the County.

DO NOT leave any section blank. If inapplicable, write N/A.

FAMILY MEMBER	CONTRACT DESCRIPTION	REPORTING CATEGORY

DEBTS

Excluding a mortgage and/or home equity loan on your residence, describe all debts incurred by you, your spouse and dependent children in excess of \$5,000.00.

DO NOT leave any section blank. If inapplicable, write N/A.

NAME OF DEBTOR	NAME OF CREDITOR	CATEGORY OF AMOUNT

POLITICAL PARTIES

Describe any position you have held within the past 5 years as an officer of a political party, committee or organization. (The term "political organization" includes an independent body or any organization that is affiliated with or a subsidiary of a political party).

DO NOT leave any section blank. If inapplicable, write N/A.

I hereby certify, under penalty of perjury, that the information disclosed on this form is true and complete.

Signature

Date