

# FINANCIAL DISCLOSURE STATEMENT

Name of Public Officer or Candidate:

John Paul Plante

Address: (Please not: this address is public information and not subject to redaction)

1145 W 37th PI Yuma AZ 85365

Public Office Held or Sought:

Superior Court Judge

District / Division Number (if applicable):

Div 2, Yuma County

Please check the appropriate box that reflects your service for this filing year:

- I am a public officer filing this Financial Disclosure Statement covering the 12 months of calendar year 2019.
- I have been appointed to fill a vacancy in a public office within the last 60 days and am filing this Financial Disclosure Statement covering the 12 month period ending with the last full month prior to the date I took office.
- I am a public officer who has served in the last full year of my final term, which expires less than thirty-one days into calendar year 2020. This is my final Financial Disclosure Statement covering the last 12 months plus the final days of my term for the current year.
- I am a candidate for a public office, and am filing this Financial Disclosure Statement covering the 12 months preceding the date of this statement, from the month of January, 2019, to the month of January, 2020.

## **VERIFICATION**

- I verify under penalty of perjury that the information provided in this Financial Disclosure Statement is true and correct.

**/S/ John Paul Plante 1/10/2020**

Signature of Public Officer or Candidate

## A. PERSONAL FINANCIAL INTERESTS

This section requires disclosure of your financial interests and/or the financial interests of the member(s) of your household.

### 1. Identification of Household Members and Business Interests

**What to disclose:** If you are married, is your spouse a member of your household?  Yes  No  N/A (If not married/widowed, select N/A)

Are any minor children members of your household?  Yes (if yes, disclose how many)   No

For the remaining questions in this Financial Disclosure Statement, the term "member of your household" or "household member" will be defined as the person (s) who correspond to your "yes" answers above.

## 2. Sources of Personal Compensation

**What to disclose in subsection (2)(a):** Provide the name and address of each employer who paid you or any member of your household more than \$1,000 in salary, wages, commissions, tips or other forms of compensation (other than "gifts") during the period covered by this report. Describe the nature of each employer's business and the type of services for which you or a member of your household were compensated.

**What to disclose in in subsection (2)(b):** List anything of value that any other person (outside your household) received for your or a member of your household's use or benefit. For example, if a person was paid by a third-party to be your personal housekeeper, identify that person, describe the nature of that person's services that benefited you, and provide information about the third-party who paid for the services on your behalf.

**You need not disclose** income of a business, including money you or any member of your household received that constitutes income paid to a business that you or your household member owns or does business as. This type of business income will be disclosed in Question 12.

### Subsection (2)(a):

PUBLIC OFFICER OR HOUSEHOLD MEMBER BENEFITED	NAME AND ADDRESS OF EMPLOYER WHO PROVIDED COMPENSATION > \$1,000	NATURE OF EMPLOYER'S BUSINESS	NATURE OF SERVICES PROVIDED BY PUBLIC OFFICER OR HOUSEHOLD MEMBER FOR EMPLOYER
John Paul Plante	State of Arizona/County of Yuma 198 S Main St, Yuma, AZ 85364	court business	Court services/Judge
John Paul Plante	Yuma Regional Medical Center 2400 S Ave A, Yuma, AZ 85364	medical services	pension of deceased former wife from her employment at Yuma Regional Medical Center
John Paul Plante	Elected Officials Retirement Plan 3010 E Camelback Rd, #200,Phoenix, AZ 85016-4416	state retirement plan	judge retirement
John Paul Plante	Social Security Administration Office of Public Inquiries, 1100 West High Rise, 6401 Security Blvd, Baltimore, MD 21235	United States government	old age pension
Spouse	Social Security Administration Office of Public Inquiries, 1100 West High Rise, 6401 Security Blvd, Baltimore, MD 21235	United States Governement	old age pension

### Subsection (2)(b) (if applicable):

## 2. Sources of Personal Compensation

<b>PUBLIC OFFICER OR HOUSEHOLD MEMBER BENEFITED</b>	<b>NAME AND ADDRESS OF PERSON WHO PROVIDED SERVICES VALUED OVER \$1,000 FOR YOUR OR YOUR HOUSEHOLD MEMBER'S USE OR BENEFIT</b>	<b>NATURE OF SERVICES PROVIDED BY PERSON FOR YOUR OR YOUR HOUSEHOLD MEMBER'S USE OR BENEFIT</b>	<b>NAME AND ADDRESS OF THIRD PARTY WHO PAID FOR PERSON'S SERVICES ON YOUR OR YOUR HOUSEHOLD MEMBER'S BEHALF</b>
N/A	N/A	N/A	N/A

### 3. Professional, Occupational and Business Licenses

**What to disclose:** List all professional, occupational or business licenses held by you or any member of your household at any time during the period covered by this Financial Disclosure Statement.

This includes licenses in which you or a member of your household had an "interest," which includes (but is not limited to) any business license held by a "controlled" or "dependent" business as defined in Question 12.

<b>PUBLIC OFFICER OR HOUSEHOLD MEMBER</b>	<b>TYPE OF LICENSE</b>	<b>PERSON OR ENTITY HOLDING THE LICENSE</b>	<b>JURISDICTION OR ENTITY THAT ISSUED LICENSE</b>
John Paul Plante	license to practice law	John Paul Plante	Arizona courts and Federal district courts

#### 4. Personal Creditors

**What to disclose:** The name and address of each creditor to whom you or a member of your household owed a qualifying personal debt over \$1,000 during any point during the period covered by this Financial Disclosure Statement.

Additionally, if the qualifying personal debt was either incurred for the first time or completely discharged (paid in full) during this period, list the date and check the applicable box to indicate whether it was incurred or discharged. Otherwise, check the box for "N/A" if the debt was not first incurred or fully discharged during the period covered by this Financial Disclosure Statement.

You need not disclose the following, which do not qualify as "personal debt":

- Debts resulting from the ordinary conduct of a business (these will be disclosed in Section B);
- Debts on any personal residence or recreational property;
- Debts on motor vehicles used primarily for personal purposes (not commercial purposes);
- Debts secured by cash values on life insurance;
- Debts owed to relatives;
- Personal credit card transactions or the value of any retail installment contracts you or your household member entered into.

PUBLIC OFFICER OR HOUSEHOLD MEMBER OWING THE DEBT	NAME AND ADDRESS OF CREDITOR (OR PERSON TO WHOME PAYMENTS ARE MADE)	DISCLOSE IF THE DEBT WAS FIRST INCURRED OR COMPLETELY DISCHARGED DURING THIS REPORTING PERIOD
John Paul Plante Spouse	Arizona Steel & Fabrication 144 N 22nd Ave, Yuma, AZ 85364	Discharged 08/16/2019
John Paul Plante Spouse	Upgrade Plumbing PO Box 7862, San Luis, AZ 85349	Discharged 07/24/2019
John Paul Plante Spouse	Carlos Anchando 15287 S Ave A, Somerton, Arizona	Discharged 07/25/2019
John Paul Plante Spouse	Jose Mendoza 9317 Stetson St, Yuma, AZ 85365	Discharged 09/28/2019
John Paul Plante Spouse	Alejandro Lopez 514 Fuente Dr, San Luis, Arizona	Discharged 07/25/2019
John Paul Plante Spouse	United States Treasury/Internal Revenue Service PO Box 7704, San Francisco, CA 94120-7704	Discharged 04/11/2019
John Paul Plante	Sam Carroll, DMD 550 E 32nd St, Yuma, AZ 85365	Discharged 05/28/2019

## 5. Personal Debtors

**What to disclose:** The name of each debtor who owed you or a member of your household a debt over \$1,000 at any time during the period covered by this Financial Disclosure Statement, along with the approximate value of the debt by financial category.

Additionally, if the debt was either incurred for the first time or completely discharged (paid in full) during this period, list the date and check the box to indicate whether it was incurred or discharged. Otherwise, select "N/A" (for "not applicable") if the debt was not first incurred or fully discharged during the period covered by this Financial Disclosure Statement.

<b>PUBLIC OFFICER OR HOUSEHOLD MEMBER OWED THE DEBT</b>	<b>NAME OF DEBTOR</b>	<b>APPROXIMATE VALUE OF DEBT</b>	<b>DISCLOSE IF THE DEBT WAS FIRST INCURRED OR COMPLETELY DISCHARGED DURING THIS REPORTING PERIOD</b>
N/A	N/A	N/A	N/A

## 6. Gifts

**What to disclose:** The name of the donor who gave you or a member of your household a single gift or an accumulation of gifts during the preceding calendar year with a cumulative value over \$500, subject to the exceptions listed in the below "You need not disclose" paragraph. A "gift" means a gratuity (tip), special discount, favor, hospitality, service, economic opportunity, loan or other benefit received without adequate consideration (reciprocal value) and not provided to members of the public at large (in other words, a personal benefit you or your household member received without providing an equivalent benefit in return).

**Please note:** the concept of a "gift" for purposes of this Financial Disclosure Statement is separate and distinct from the gift restrictions outlined in Arizona's lobbying statutes. Thus, disclosure in a lobbying report does not relieve you or a member of your household's duty to disclose gifts in this Financial Disclosure Statement.

You need not disclose the following, which do not qualify as "gifts":

- Gifts received by will;
- Gift received by intestate succession (in other words, gifts distributed to you or a household member according to Arizona's intestate succession laws, not by will);
- Gift distributed from an *inter vivos* (living) or testamentary (by will) trust established by a spouse or family member;
- Gifts received from any other member of the household;
- Gifts received from parents, grandparents, siblings, children and grandchildren; or
- Political campaign contributions reported on campaign finance reports.

PUBLIC OFFICER OR HOUSEHOLD MEMBER WHO RECEIVED GIFT(S) OVER \$500	NAME OF GIFT DONOR
N/A	N/A

## 7. Office, Position or Fiduciary Relationship in Businesses, Nonprofit Organizations or Trusts

**What to disclose:** The name and address of each business, organization, trust or nonprofit organization or association in which you or any member of your household held any office, position, or fiduciary relationship during the period covered by this Financial Disclosure Statement, including a description of the office, position or relationship.

PUBLIC OFFICER OR HOUSEHOLD MEMBER HAVING THE REPORTABLE RELATIONSHIP	NAME AND ADDRESS OF BUSINESS, ORGANIZATION, TRUST, OR NONPROFIT ORGANIZATION OR ASSOCIATION	DESCRIPTION OF OFFICE, POSITION OR FIDUCIARY RELATIONSHIP HELD BY THE PUBLIC OFFICER OR HOUSEHOLD MEMBER
John Paul Plante	Yuma Community Theater PO Box 5658, Yuma, AZ 85366	house manager for various shows
John Paul Plante	Arizona Swimming 1212 E Osborn Rd #101, Phoenix, AZ	Referee
Spouse	St. Francis Church Catholic Daughters St. Francis Church, 1815 S 8th Ave, Yuma, AZ 85364	financial secretary
Spouse	Rio Colorado Republican Women c/o Yuma County Republican Party, 1185 S 4th Ave, #N, Yuma, AZ 85364	Care for America, Historian, Ways and Means
Spouse	WelcomeNeighbors Newcomers c/o Rose Ostendorf, 1129 Ocotillo Ln, Yuma, AZ 85367	First Vice President
Spouse	Edith's House Trust 1145 W 37th Pl, Yuma, AZ 85365	trustee
Spouse	Fernando A Correa Supplemental Needs Trust 1145 W 37th Pl, Yuma, AZ 85365	trustee

## 8. Ownership or Financial Interests in Businesses, Trusts or Investment Funds

**What to disclose:** The name and address of each business, trust, or investment fund in which you or any member of your household had an ownership or beneficial interest of over \$1,000 during the period covered by this Financial Disclosure Statement. This includes stocks, annuities, mutual funds, or retirement funds. It also includes any financial interest in a limited liability company, partnership, joint venture, or sole proprietorship. Also, check the box to indicate the value of the interest.

PUBLIC OFFICER OR HOUSEHOLD MEMBER HAVING THE INTEREST	NAME AND ADDRESS OF BUSINESS, TRUST OR INVESTMENT FUND	DESCRIPTION OF THE BUSINESS, TRUST OR INVESTMENT FUND	APPROXIMATE EQUITY VALUE OF THE INTEREST
John Paul Plante	Fidelity Investments PO BAox 77001, Cincinnati, OH 45277	Fidelity Enhanced International Index Fund (FIENX), in an IRA account, acquired 9/2108	\$1,000 - \$25,000
John Paul Plante	Fidelity Investments PO Box 77001, Cincinnati OH 45277	Fidelity US Bond Index Fund (FXNAX), merged with FSITX 11/2018, in an IRA account; acquired 1/2015, partially sold 2/2015, 1/2016, 9/2017-3/2018, 5/2018-7/2018, 9/2018, 5/2019	\$100,001 +
John Paul Plante	Fidelity Investments PO Box 77001, Cincinnati, OH 45277	Fidelity Total Market Index Fund (FSKAX), merged with FSTVX 11/2018, in an IRA account; acquired 2/2016, 3/2016, 11/2016, 9/2017-3/2018, 5/2018-7/2018	\$100,001 +
John Paul Plante	Fidelity Investments PO Box 77001, Cincinnati, OH 45277	Fidelity US Bond Index Fund (FXNAX), merged with FSITX 11/2018, in a Roth IRA account; acquired 1/2015, partially sold 3/2016, 7/2017	\$1,000 - \$25,000
John Paul Plante	Fidelity Investments PO Box 77001, Cincinnati, OH 45277	Fidelity Total Market Index Fund (FSKAX) merged with FSTVX 11/2018, in a Roth IRA; acquired 3/2016, 7/2017	\$25,001 - \$100,000
Spouse	Ave Maria Mutual Funds PO Box 46707, Cincinnati, OH 45246	Ave Maria Growth Fund (AVEGX) in an IRA Account, acquired 10/2018	\$1,000 - \$25,000
Spouse	Ave Maria Mutual Funds PO Box 46707, Cincinnati, OH 45246	Ave Maria Value Fund (AVEMX) in an IRA account, acquired 10/2018	\$1,000 - \$25,000
Spouse	Ave Maria Mutual Funds PO Box 46707, Cincinnati, OH 46707	Ave Maria Bond Fund (AVEFX), in an IRA account, acquired 10/2018	\$1,000 - \$25,000
Spouse	Ave Maria Mutual Funds PO Box 46707, Cincinnati, OH 45246	Ave Maria Growth Fund (AVEGX) in a Roth IRA, acquired 10/2018	\$1,000 - \$25,000

## 8. Ownership or Financial Interests in Businesses, Trusts or Investment Funds

Spouse	Ave Maria Mutual Funds PO Box 46707, Cincinnati, OH 45246	Ave Maria Bond Fund (AVEFX), in a Roth IRA, acquired 10/2018	\$1,000 - \$25,000
Spouse	Ave Maria Mutual Funds PO Box 46707, Cincinnati, OH 45246	Ave Maria Rising Dividend Fund (AVEDX), in a Roth IRA account, acquired 3/2019 and 4/2019	\$1,000 - \$25,000
John Paul Plante	Elected Officials Retirement Plan 3010 E Camelback Rd, #200, Phoenix, AZ 85016	retirement plan	\$100,001 +
John Paul Plante	Nationwide Retirement Solutions PO Box 182797, Columbus, OH 43218-2797	Vanguard Institutional Index Fund in 401(a) plan; acquired 12/2014-5/2015 and 8/2017-3/2019; partially sold 4/2019; exchanged in full 11/2019 for Fidelity 500 Index Fund	\$100,001 +
John Paul Plante	Nationwide Retirement Solutions PO Box 182797, Columbus, OH 43218-2797	Vanguard MdCap Indx Inst in 401(a) plan; acquired 2/2014-5/2015 and 8/2017-3/2019; partially sold 4/2019; exchanged in full in 11/2019 for Fidelity Midcap Index Fund	\$25,001 - \$100,000
John Paul Plante	Nationwide Retirement Solutions PO Box 182797, Columbus, OH	Fidelity 500 Index Fund in a 401(a) plan acquired 11/2019 in exchange for Vanguard Institutional Index Fund	\$100,001 +
John Paul Plante	Nationwide Retirement Solutions PO Box 182797, Columbus, OH	Fidelity Midcap Index Fund in a 401(a) plan; acquired in exchange for Vanguard MdCap Inst in 11/2019	\$25,001 - \$100,000
John Paul Plante	Nationwide Retirement Solutions PO Box 182797, Columbus, OH 43218-27987	Fidelity Small Cap Index Fund in a 401(a) plan acquired 11/2019 in exchange for Vanguard Small Cap Index Fund Institutional shares	\$25,001 - \$100,000
John Paul Plante	Nationwide Retirement Solutions PO Box 182797, Columbus, OH 43218-2797	Fidelity International Index Fund in a 401(a) plan, acquired in exchange for Vanguard International Index Fund in 11/2019; further purchases in 11/2019	\$25,001 - \$100,000
John Paul Plante	Nationwide Retirement Solutions PO Box 182797, Columbus, OH 43218-2797	Vanguard Small-Cap Index Fund Institutional Shares in a 401(a) plan; acquired 12/2014-5/2015 and 8/2017-3/2019, partially sold 4/2019; exchanged for Fidelity Small Cap Index Fund 11/2019	\$25,001 - \$100,000

## 8. Ownership or Financial Interests in Businesses, Trusts or Investment Funds

John Paul Plante	Nationwide Retirement Solutions PO Box 182797, columbus, OH 43218-2797	Vanguard Total International Stock Index Fund Institutional Shares in a 401(a) plan; acquired 6/2017-8/2017, partially sold 4/2019; sold in full in exchange for Fidelity Internatinal Index Fund in 11/2019	\$25,001 - \$100,000
John Paul Plante	Nationwide Retirement Solutions PO Box 182797, Columbus, OH 43218-2797	NW Fixed in 401(a) plan; acquired 1/2013-12/2014, 5/2015-5/2017; partially sold 4/2019, 9/2019, 11/2019	\$100,001 +
John Paul Plante	Nationwide Retirement Solutions PO Box 182797, Columbus, OH 43218-2797	Income Fund of America (R), Class R6, in a 401(a) account, acquired 10/2013-12/2013; partially sold 4/2019; remainder sold 11/2019	\$1,000 - \$25,000
John Paul Plante	Nationwide Retirement Solutions PO Box 182797, Columbus, OH 43218-2797	Drayfus Structured Midcap Fund, class 1, in 457(b) plan; acquired 10/2018; converted to BNYMellon Structured Midcap 4/2019	\$1,000 - \$25,000
John Paul Plante	Nationwide Retirement Solutions PO Box 182797, Columbus, OH 43218-2797	Fidelity 500 Index Fund in 457(b) plan; acquired 11/2018, 12/2018, 2/2019	\$25,001 - \$100,000
John Paul Plante	Nationwide Retirement Solutions PO Box 182797, Columbus, OH 43218-2797	Fidelity Global ex US Index Fund in 457(b) plan; acquired 11/2018 in involuntary exchange for Fidelity Global ex US Index Fund-Premium class, further purchases 1/2019, exchanged for Fidelity Intl Index in 3/2019	\$1,000 - \$25,000
John Paul Plante	Nationwide Retirement Solutions PO Box 182797, Columbus, OH 43218-2797	Fidelity Mid Cap Index Fund in 457 (b) plan; acquired 11/2018 in involuntary exchange for Fidelity Mid Cap Index Fund- Premium Class and in exchange for BNY Mellon Structured Midcap Fund, Class 1 in 10/2019	\$1,000 - \$25,000
John Paul Plante	Nationwide Retirement Solutions PO Box 182797, Columbus, OH 43218-2797	Fidelity Small Cap Index Fund in 457 (b) plan; acquired 11/2018 in involuntary exchange for Fidelity Small Cap Index Premium	\$1,000 - \$25,000

## 8. Ownership or Financial Interests in Businesses, Trusts or Investment Funds

John Paul Plante	Nationwide Retirement Solutions PO Box 182797, Columbus, OH 43218-2797	Fidelity US Bond Index Fund in 457 (b) plan; acquired on 11/2018 in involuntary exchange for Fidelity Bond Index Fund, Premium class and partially sold 11/2018- 2/2019 and 4/2019	\$25,001 - \$100,000
John Paul Plante	Nationwide Retirement Solutions PO Box 182797, Columbus, OH 43218-2797	BNY Mellon Structured MidCap Fund -Class 1, in 457(b) plan, acquired through conversion of Drayfus Structured Midcap Fund, class 1 in 4/2019; exchanged for Fidelity Midcap Index fund 10/2019	\$1,000 - \$25,000
John Paul Plante	Nationwide Retirement Solutions PO Box 182797, Columbus, OH 43218-2797	Fid Intl Index in a 457(b) plan, acquired through exchange of Fidelity Global ex US Index Fund in 3/2019	\$1,000 - \$25,000
John Paul Plante	Prudential Financial, Inc 751 Broad St., Newark, NJ 07102-3777	Prudential Financial, Inc. common stock	\$1,000 - \$25,000
John Paul Plante	Vanguard PO Box 1120, Valley Forge, PA 19482-1120	Vanguard Total Bond Market Index, Admiral CI (VBTLX) in an IRA account; acquired 1/2015, partially sold 5/2017, 12/2017, 2/2018, 4/2018, 8/2018, 3/2019-5/2019, 7/2019	\$100,001 +
John Paul Plante	Vanguard PO Box 1120, Valley Forge, PA 19482-1120	Vanguard Wellesley Income, Admiral Class (VWIAX) in an IRA account; acquired 1/2015-2/2015 and 5/2017, partially sold 7/2019-8/2019, 12/2019	\$100,001 +
John Paul Plante	Vanguard PO Box 1120, Valley Forge, PA 19482-1120	Vanguard Total Intl Stock Index Admiral CI (VTIAX) in an IRA account; acquired 6/2017, 12/2017, 2/2018, 4/2018	\$25,001 - \$100,000
John Paul Plante	Vanguard PO Box 1120, Valley Forge, PA 19482-1120	Vanguard Total Stock Market Index Admiral CI (VTSAX) in an IRA account, acquired 8/2018, 3/2019-5/2019, 7/2019-8/2019, 12/2019	\$100,001 +
John Paul Plante	Vanguard PO Box 1120, Valley Forge, Pa 19482-1120	Vanguard Total Bond Market Index, Admiral CI (VBTLX) in a Roth IRA; acquired 1/2015 and 8/2018, partially sold 12/2015-2/2016 and 8/2017	\$1,000 - \$25,000

### 8. Ownership or Financial Interests in Businesses, Trusts or Investment Funds

John Paul Plante	Vanguard PO Box 1120, Valley Forge, PA 19482-1120	Vanguard Total Stock Market Index Admiral CI (VTSAX) in a Roth IRA; acquired 1/2016-2/2016, 11/2016	\$25,001 - \$100,000
John Paul Plante	Vanguard PO Box 1120, Valley Forge, PA 19482-1120	Vanguard Developed Markets Index Admiral CI (VTMGX) in a Roth IRA; acquired 8/2017 and 2/2018	\$25,001 - \$100,000
John Paul Plante	Vanguard PO Box 1120, Valley Forge, PA 19482-1120	Total Bond Mkt Ix in a variable annuity account, acquired 4/2015, partially sold 9/2015, 4/2015-5/2016, 10/2016, 2/2017, 4/2017, 9/2017, 4/2018; remainder sold 4/2019	\$25,001 - \$100,000
John Paul Plante	Yuma Regional Medical Center 2400 S Ave A, Yuma, AZ 85364	Yuma Regional Medical Center Pension Plan of former spouse, deceased, for benefit of survivor, John Paul Plante	\$100,001 +

## 9. Ownership of Bonds

**What to disclose:** Bonds issued by a state or local government agency worth more than \$1,000 that you or a member of your household held during the period covered by this Financial Disclosure Statement. Also, check the box to indicate the approximate value of the bonds.

Additionally, if the bonds were either acquired for the first time or completely divested (sold in full) during this period, list the date and check the box whether the bonds were acquired or divested. Otherwise, check "N/A" (for "not applicable") if the bonds were not first acquired or fully divested during the period covered by this Financial Disclosure Statement.

<b>PUBLIC OFFICER OR HOUSEHOLD MEMBER ISSUED BONDS</b>	<b>ISSUING STATE OR LOCAL GOVERNMENT AGENCY</b>	<b>APPROXIMATE VALUE OF BONDS</b>	<b>DISCLOSE IF THE BONDS WERE FIRST ACQUIRED OR COMPLETELY DISCHARGED DURING THIS REPORTING PERIOD</b>
N/A	N/A	N/A	N/A

## 10. Real Property Ownership

**What to disclose:** Arizona real property (land) and improvements which was owned by you or a member of your household during the period covered by this Financial Disclosure Statement, other than your primary residence or property you use for personal recreation. Also describe the property's location (city and state) and approximate size (acreage or square footage), and check the box to indicate the approximate value of the land.

Additionally, if the land was either acquired for the first time or completely divested (sold in full) during this period, list the date and check the box to indicate whether the land was acquired or divested. Otherwise, check "N/A" (for "not applicable") if the land was not first acquired or fully divested during the period covered by this Financial Disclosure Statement.

**You need not disclose:** Your primary residence or property you use for personal recreation.

<b>PUBLIC OFFICER OR HOUSEHOLD MEMBER THAT OWNS LAND</b>	<b>LOCATION AND APPROXIMATE SIZE</b>	<b>APPROXIMATE VALUE OF LAND</b>	<b>DISCLOSE IF THE LAND WAS FIRST ACQUIRED OR COMPLETELY DISCHARGED DURING THIS REPORTING PERIOD</b>
N/A	N/A	N/A	N/A

## 11. Travel Expenses

**What to disclose:** Each meeting, conference or other event during the period covered in this Financial Disclosure Statement where you participated in your official capacity and travel-related expenses of \$1,000 or more were paid on your behalf (or for which you were reimbursed) for that meeting, conference, or other event. "Travel-related expenses" include, but are not limited to, the value of transportation, meals, and lodging to attend the meeting, conference, or other event.

**You need not disclose:** Any meeting, conference, or other event where paid or reimbursed travel-related expenses were less than \$1,000 or your personal monies were expended related to the travel.

NAME OF MEETING, CONFERENCE, OR EVENT ATTENDED IN OFFICIAL CAPACITY AS PUBLIC OFFICER	LOCATION	AMOUNT OR VALUE OF TRAVEL COSTS
N/A	N/A	N/A

## B. BUSINESS FINANCIAL INTERESTS

This section requires disclosure of any financial interests of a business owned by you or a member of your household.

### 12. Business Names

**What to disclose:** The name of any business under which you or any member of your household owns or did business under (in other words, if you or your household member were self-employed) during the period covered by this Financial Disclosure Statement, which include any corporations, limited liability companies, partnerships, sole proprietorships or any other type of business conducted under a trade name.

Also disclose if the named business is controlled or dependent. A business is "controlled" if you or any member of your household (individually or combined) had an ownership interest that amounts to more than 50%. A business is classified as "dependent," on the other hand, if: (1) you or any household member (individually or combined) had an ownership interest that amounts more than 10%; *and* (2) the business received more than \$10,000 from a single source during the period covered by this Financial Disclosure Statement, which amounted to more than 50% of the business' gross income for the period.

**Please note:** If the business was either controlled or dependent, check the box to indicate whether it was controlled or dependent. If the business was both controlled *and* dependent during the period covered by this Financial Disclosure Statement, check *both* boxes. Otherwise, leave the boxes blank.

**Please note:** If a business listed in the foregoing Question 12 was neither "controlled" nor "dependent" during the period covered by this Financial Disclosure Statement, you need not complete the remainder of this Financial Disclosure Statement with respect to that business. If none of the businesses listed in Question 12 were "controlled" or "dependent," you need not complete the remainder of this Financial Disclosure Statement.

PUBLIC OFFICER OR HOUSEHOLD MEMBER OWNING THE BUSINESS	NAME AND ADDRESS OF BUSINESS	DISCLOSE IF THE BUSINESS IS "CONTROLLED" BY OR "DEPENDENT" ON YOU OR A HOUSEHOLD MEMBER
N/A	N/A	N/A

### 13. Controlled Business Information

**What to disclose:** The name of each controlled business listed in Question 12, and the goods or services provided by the business.

If a single client or customer (whether a person or business) accounts for more than \$10,000 and 25% of the business' gross income during the period covered by this Financial Disclosure Statement, the client or customer is deemed a "major client" and therefore you must describe what your business provided to this major client in the third column. Also, if the major client is a business, please describe the client's type of business activities in the final column (but if the major client is an individual, write "N/A" for "not applicable".)

If the business does not have a major client, write "N/A" for "not applicable."

**You need not disclose:** The name of any major client, or the activities of any major client that is an individual.

If you or your household member does not own a business, or if your or your household member's business is not a controlled business, you may leave this question blank.

NAME OF YOUR OR YOUR HOUSEHOLD MEMBER'S CONTROLLED BUSINESS	GOODS OR SERVICES PROVIDED BY THE CONTROLLED BUSINESS	DESCRIBE WHAT YOUR BUSINESS PROVIDES TO ITS MAJOR CLIENT	TYPE OF BUSINESS ACTIVITIES OF THE MAJOR CLIENT (IF A BUSINESS)
N/A	N/A	N/A	N/A

## 14. Dependent Business Information

**What to disclose:** The name of each dependent business listed in Question 12, and the goods or services provided by the business.

If a single client or customer (whether a person or business) accounts for more than \$10,000 and 25% of the business' gross income during the period covered by this Financial Disclosure Statement, the client or customer is deemed a "major client" and therefore you must describe what your business provided to this major client in the third column. Also, if the major client is a business, please describe the client's type of business activities (but if the major client is an individual, write "N/A" for "not applicable".)

If the business does not have a major client, write "N/A" for "not applicable."

**You need not disclose:** The name of any major client, or the activities of any major client that is an individual.

If you or your household member does not own a business, or if your or your household member's business is not a dependent business, you may leave this question blank.

NAME OF YOUR OR YOUR HOUSEHOLD MEMBER'S DEPENDENT BUSINESS	GOODS OR SERVICES PROVIDED BY THE DEPENDENT BUSINESS	DESCRIBE WHAT YOUR BUSINESS PROVIDES TO ITS MAJOR CUSTOMER	TYPE OF BUSINESS ACTIVITIES OF THE MAJOR CUSTOMER (IF A BUSINESS)
N/A	N/A	N/A	N/A

## 15. Real Property Owned by a Controlled or Dependent Business

**What to disclose:** Arizona real property (land) and improvements which was owned by a controlled or dependent business during the period covered by this Financial Disclosure Statement. Also describe the property's location (city and state) and approximate size (acreage or square footage), and check the box to indicate the approximate value of the land. If the business is one that deals in real property and improvements, check the box that corresponds to the aggregate value of all parcels held by the business during the period covered by this Financial Disclosure Statement.

Additionally, if the land was either acquired for the first time or completely divested (sold in full) during this period, list the date and check whether the land was acquired or divested. Otherwise, check "N/A" (for "not applicable") if the land was not first acquired or fully divested during the period covered by this Financial Disclosure Statement.

**You need not disclose:** If you or your household member does not own a business, or if your or your household member's business is not a dependent business, you may leave this question blank.

NAME OF CONTROLLED OR DEPENDENT BUSINESS THAT OWNS LAND	LOCATION AND APPROXIMATE SIZE	APPROXIMATE VALUE OF LAND	DISCLOSE IF THE LAND WAS FIRST ACQUIRED OR COMPLETELY DISCHARGED DURING THIS REPORTING PERIOD
N/A	N/A	N/A	N/A

## 16. Controlled or Dependent Business' Creditors

**What to disclose:** The name and address of each creditor to which a controlled or dependent business owed more than \$10,000, if that amount was also more than 30% of the business' total indebtedness at any time during the period covered by this Financial Disclosure Statement ("qualifying business debt".)

Additionally, if the qualifying business debt was either incurred for the first time or completely discharged (paid in full) during this period, list the date and check the box to indicate whether it was incurred or discharged. Otherwise, check "N/A" (for "not applicable") if the business debt was not first incurred or fully discharged during the period covered by this Financial Disclosure Statement.

**You need not disclose:** If you or your household member does not own a business, or if your or your household member's business is not a controlled or dependent business, you may leave this question blank.

NAME OF CONTROLLED OR DEPENDENT BUSINESS OWING THE QUALIFYING DEBT	NAME AND ADDRESS OF CREDITOR (OR PERSON TO WHOM THE PAYMENTS ARE MADE)	DISCLOSE IF THE DEBT WAS FIRST INCURRED OR COMPLETELY DISCHARGED DURING THIS REPORTING PERIOD
N/A	N/A	N/A

## 17. Controlled or Dependent Business' Debtors

**What to disclose:** The name of each debtor who owed more than \$10,000 to a controlled or dependent business, if that amount was also more than 30% of the total indebtedness owed to the controlled or dependent business at any time during the period covered by this Financial Disclosure Statement ("qualifying business debt".) Also check the box to indicate the approximate value of the debt by financial category.

Additionally, if the qualifying business debt was either incurred for the first time or completely discharged (paid in full) during this period, list the date and check the box to indicate whether it was incurred or discharged. Otherwise, check "N/A" (for "not applicable") if the business debt was not first incurred or fully discharged during the period covered by this Financial Disclosure Statement.

**You need not disclose:** If you or your household member does not own a business, or if your or your household member's business is not a controlled or dependent business, you may leave this question blank.

NAME OF CONTROLLED OR DEPENDENT BUSINESS OWED THE DEBT	NAME OF DEBTOR	APPROXIMATE VALUE OF DEBT	DISCLOSE IF THE DEBT WAS FIRST INCURRED OR COMPLETELY DISCHARGED DURING THIS REPORTING PERIOD
N/A	N/A	N/A	N/A