



**STATE OF NEW JERSEY**  
Department of Education  
P.O. Box 500  
Trenton, New Jersey 08625-0500

**SCHOOL ETHICS COMMISSION**

**2022 PERSONAL/RELATIVE DISCLOSURE STATEMENT**

This Personal/Relative Disclosure Statement is required annually of all school officials in accordance with *N.J.S.A. 18A:12-21 et seq.*, the School Ethics Act (the Act). The Personal/Relative Disclosure Statement must be filed by April 30th of each year, or within thirty (30) days of assuming office or position if newly elected or appointed. This statement is a public record.

**SECTION I. Personal Information**

Role of School Official:

First Name:

Middle Initial:

Last Name:

**Name and Business Address** of the Local School District or Charter School (Street, City, State, Zip):

County of Local School District or Charter School:

**Spouse Information** (if applicable):

I do not have a spouse.

First Name:

Middle Initial:

Last Name:

**SECTION II. Relative Information**

1. Do you have a relative, or a person related to you by marriage, who is employed by the local school district or charter school with which you hold office or are employed? For officers or employees of the NJSBA, do you have a relative, or a person related to you by marriage, who is employed by *any* local school district or charter school?

**YES**

**NO**

If **YES**, please provide the following information:

| FULL NAME OF THE INDIVIDUAL | RELATIONSHIP TO THE SCHOOL OFFICIAL | NAME OF THE LOCAL SCHOOL DISTRICT OR CHARTER SCHOOL AT WHICH THE INDIVIDUAL IS EMPLOYED | POSITION HELD BY THE INDIVIDUAL |
|-----------------------------|-------------------------------------|---|---------------------------------|
|                             |                                     |   |                                 |
|                             |                                     |   |                                 |
|                             |                                     |   |                                 |
|                             |                                     |   |                                 |
|                             |                                     |   |                                 |
|                             |                                     |   |                                 |
|                             |                                     |   |                                 |
|                             |                                     |   |                                 |
|                             |                                     |   |                                 |
|                             |                                     |   |                                 |
|                             |                                     |   |                                 |
|                             |                                     |   |                                 |
|                             |                                     |   |                                 |
|                             |                                     |   |                                 |
|                             |                                     |   |                                 |
|                             |                                     |   |                                 |
|                             |                                     |   |                                 |
|                             |                                     |   |                                 |
|                             |                                     |   |                                 |

2. Are you or a [relative](#) a party to a contract with the [local school district](#) or charter school with which you hold office or are employed? For officers or employees of the NJSBA, are you, or a [relative](#), a party to a contract with *any* [local school district](#) or charter school?

**YES**

**NO**

If **YES**, please provide the following information:

| FULL NAME OF THE INDIVIDUAL | RELATIONSHIP TO THE SCHOOL OFFICIAL | NAME OF THE LOCAL SCHOOL DISTRICT OR CHARTER SCHOOL | THE NATURE OF THE CONTRACT |
|-----------------------------|-------------------------------------|---|----------------------------|
|                             |                                     |   |                            |
|                             |                                     |   |                            |
|                             |                                     |   |                            |
|                             |                                     |   |                            |
|                             |                                     |   |                            |
|                             |                                     |   |                            |
|                             |                                     |   |                            |
|                             |                                     |   |                            |
|                             |                                     |   |                            |
|                             |                                     |   |                            |
|                             |                                     |   |                            |
|                             |                                     |   |                            |
|                             |                                     |   |                            |
|                             |                                     |   |                            |
|                             |                                     |   |                            |

3. Are you or a [relative](#) employed by, or do you or a [relative](#) receive compensation from or have an [interest](#) in, any business which is a party to a contract with the [local school district](#) or charter school with which you hold office or are employed? For officers and employees of the NJSBA, are you, or a [relative](#), employed by, receive compensation from, or have an [interest](#) in any business which is a party to a contract with *any* [local school district](#) or charter school?

**YES**

**NO**

If **YES**, please provide the following information:

| FULL NAME OF BUSINESS | NAME OF THE LOCAL SCHOOL DISTRICT OR CHARTER SCHOOL | THE NATURE OF THE CONTRACT |
|-----------------------|---|----------------------------|
|                       |   |                            |
|                       |   |                            |
|                       |   |                            |
|                       |   |                            |
|                       |   |                            |
|                       |   |                            |
|                       |   |                            |
|                       |   |                            |
|                       |   |                            |
|                       |   |                            |
|                       |   |                            |
|                       |   |                            |
|                       |   |                            |
|                       |   |                            |

## 2022 FINANCIAL DISCLOSURE STATEMENT

This Financial Disclosure Statement is required annually of all school officials in accordance with the Act. The Act requires that the financial information provided by a school official relates to the **preceding calendar year**. The Financial Disclosure Statement must be filed by April 30th of each year, or within thirty (30) days of assuming office or position if newly elected or appointed. This statement is a public record.

### SECTION III. Financial Information

If the information has changed from the preceding calendar year, it is recommended that the official also provide financial information which is current as of five days prior to the date of this filing.

1. In the preceding calendar year, did you or a [member of your immediate family](#) receive income, earned or unearned, in excess of \$2,000.00?

**YES**

**NO**

Before providing responsive information below, please note that:

- Individual client fees, customer receipts, or commissions on transactions received through a business organization do not need to be separately reported as sources of income; and
- If a publicly traded security or interest derived from a financial institution is the source of income, the security or interest derived from a financial institution does not need to be reported *unless* the school official or a member of their immediate family has an interest in the business organization or financial institution.

If **YES**, please provide the following information:

| NAME OF SOURCE OF INCOME | ADDRESS FOR SOURCE OF INCOME (STREET, CITY, STATE, AND ZIP) | RECIPIENT OF SOURCE OF INCOME | RELATIONSHIP TO SCHOOL OFFICIAL |
|--------------------------|---|-------------------------------|---------------------------------|
|                          |   |                               |                                 |
|                          |   |                               |                                 |

| <b>NAME OF SOURCE<br/>OF INCOME</b> | <b>ADDRESS FOR<br/>SOURCE OF INCOME<br/>(STREET, CITY, STATE, AND ZIP)</b> | <b>RECIPIENT OF<br/>SOURCE OF<br/>INCOME</b> | <b>RELATIONSHIP<br/>TO<br/>SCHOOL<br/>OFFICIAL</b> |
|-------------------------------------|--|--|--|
|                                     |  |  |  |
|                                     |  |  |  |
|                                     |  |  |  |
|                                     |  |  |  |
|                                     |  |  |  |
|                                     |  |  |  |
|                                     |  |  |  |
|                                     |  |  |  |
|                                     |  |  |  |
|                                     |  |  |  |
|                                     |  |  |  |
|                                     |  |  |  |
|                                     |  |  |  |
|                                     |  |  |  |
|                                     |  |  |  |

2. In the preceding calendar year, did you or a [member of your immediate family](#) receive a fee or honorarium having an aggregate amount exceeding \$250.00 from any single source for personal appearances, speeches, or writings?

**YES**

**NO**

If **YES**, please provide the following information:

| NAME OF SOURCE | ADDRESS FOR SOURCE OF INCOME (STREET, CITY, STATE, AND ZIP) | RECIPIENT OF SOURCE OF INCOME | RELATIONSHIP OF RECIPIENT TO SCHOOL OFFICIAL |
|----------------|---|-------------------------------|--|
|                |   |                               |  |
|                |   |                               |  |
|                |   |                               |  |
|                |   |                               |  |
|                |   |                               |  |
|                |   |                               |  |
|                |   |                               |  |
|                |   |                               |  |
|                |   |                               |  |
|                |   |                               |  |
|                |   |                               |  |
|                |   |                               |  |
|                |   |                               |  |
|                |   |                               |  |

3. In the preceding calendar year, did you or a [member of your immediate family](#) receive a gift, reimbursement, or prepaid expense having an aggregate value exceeding \$250.00 from any single source, excluding relatives?

**YES**

**NO**

If **YES**, please provide the following information:

| NAME OF SOURCE | ADDRESS FOR SOURCE OF INCOME (STREET, CITY, STATE, AND ZIP) | RECIPIENT OF SOURCE OF INCOME | RELATIONSHIP OF RECIPIENT TO SCHOOL OFFICIAL |
|----------------|---|-------------------------------|--|
|                |   |                               |  |
|                |   |                               |  |
|                |   |                               |  |
|                |   |                               |  |
|                |   |                               |  |
|                |   |                               |  |
|                |   |                               |  |
|                |   |                               |  |
|                |   |                               |  |
|                |   |                               |  |
|                |   |                               |  |
|                |   |                               |  |
|                |   |                               |  |
|                |   |                               |  |



4. In the preceding calendar year, did you or a [member of your immediate family](#) have an [interest](#) in a business organization?

YES

NO

If YES, please provide the following information:

| <b>NAME OF BUSINESS ORGANIZATION</b> | <b>ADDRESS FOR BUSINESS ORGANIZATION (STREET, CITY, STATE, AND ZIP)</b> |
|--------------------------------------|---|
|                                      |   |
|                                      |   |
|                                      |   |
|                                      |   |
|                                      |   |
|                                      |   |
|                                      |   |
|                                      |   |
|                                      |   |
|                                      |   |
|                                      |   |
|                                      |   |
|                                      |   |
|                                      |   |
|                                      |   |
|                                      |   |
|                                      |   |
|                                      |   |
|                                      |   |
|                                      |   |
|                                      |   |
|                                      |   |

## **CERTIFICATION**

I understand that this Certification constitutes my representation of the accuracy of my Personal/Relative and Financial Disclosure Statements. I hereby certify that the within Personal/Relative and Financial Disclosure Statements contain no willful misstatement or omission of material fact, and constitute a full disclosure with respect to all matters required by *N.J.S.A. 18A:12-21 et seq.* I am aware that if I fail to file my Personal/Relative and Financial Disclosure Statements, or I file Personal/Relative and Financial Disclosure Statements containing information that I know to be false, I shall be subject to disciplinary action up to and including removal pursuant to *N.J.S.A. 18A:12-29.*

Certified by:

Date of Certification:

## DEFINITIONS

### [N.J.S.A. 18A:12-23. Definitions](#)

For the purposes of the School Ethics Act, unless the context clearly requires a different meaning:

“**Administrator**” means any officer, other than a board member, or employee of a local school district who (i) holds a position which requires a certificate that authorizes the holder to serve as school administrator, principal, or school business administrator; or (ii) holds a position which does not require that the person hold any type of certificate but is responsible for making recommendations regarding hiring or the purchase or acquisition of any property or services by the local school district; or (iii) holds a position which requires a certificate that authorizes the holder to serve as supervisor and who is responsible for making recommendations regarding hiring or the purchase or acquisition of any property or services by the local school district;

“**Board member**” means any person holding membership, whether by election or appointment, on any board of education other than the State Board of Education;

“**Business**” means any corporation, partnership, firm, enterprise, franchise, association, trust, sole proprietorship, union, political organization, or other legal entity but shall not include a local school district or any other public entity;

“**Interest**” means the ownership or control of more than 10% of the profits, assets, or stock of a business but shall not include the control of assets in a labor union;

“**Local school district**” means any local or regional school district established pursuant to chapter 8 or chapter 13 of Title 18A of the New Jersey Statutes and any jointure commission, county vocational school, county special services district, educational services commission, educational research and demonstration center, environmental education center, and educational information and resource center;

“**Member of immediate family**” means the spouse or dependent child of a school official residing in the same household;

“**Relative**” means the spouse, natural or adopted child, parent, or sibling of a school official;

“**School official**” means a board member, an employee or officer of the New Jersey School Boards Association, but not including any member of the secretarial, clerical or maintenance staff of the association, or an administrator; and

“**Spouse**” means the person to whom a school official is legally married under New Jersey law.

[Return to Personal/Relative Disclosure Statement, Section I, Personal Information](#)

[Return to Personal/Relative Disclosure Statement, Section II, Relative Information](#)

[Return to Financial Disclosure Statement, Section III, Financial Information](#)