



**STATE ETHICS COMMISSION**  
**2022 STATEMENT OF ECONOMIC INTEREST**

**Contact Information**

This contact information page *will not* be available on the Commission's website, but it is a public record.

919-814-3600

<https://ethics.nc.gov>

**SEND YOUR SIGNED ORIGINAL TO:**

*BY MAIL:*

State Ethics Commission  
 Post Office Box 27685  
 Raleigh, NC 27611

*HAND DELIVERY:*

**By Appointment Only**

FOR STAFF USE ONLY

Date Received: \_\_\_\_\_

Checked for completion \_\_\_\_\_

Scanned \_\_\_\_\_ Date \_\_\_\_\_

**This entire form must be completed to fulfill your SEI filing obligation.**

Filer's Name (First, Middle, Last)

Prefix	First Name	Middle Name	Last Name	Suffix

Mailing Address (Required)

Address	City	State	Zip

Daytime Phone Number (Required)

Alternate Phone Number

E-Mail Address (Required)

Date of Birth (MM/DD/YYYY)

**\*\*Important notifications will be sent to email address provided above. They *will not be sent by regular mail*. To receive Commission notifications in a timely manner, please add [SEI@ethics.nc.gov](mailto:SEI@ethics.nc.gov) to your list of e-mail contacts.\*\***

Home Address (Only required if holding, being appointed to, or seeking an elected office with a residency requirement)

**\*\*Home address not required if filing as a Judicial Officer (Justice or Judge of the General Court of Justice, District Attorney, Clerk of Court), a candidate for that office, or if elected or appointed to that office prior to taking office.\*\***

Same as mailing address

Address	City	State	Zip



**STATE ETHICS COMMISSION**  
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**No Change Form**

FOR STAFF USE ONLY  
 Date Received:

**This entire form must be completed to fulfill  
 your SEI filing obligation.**

Filer's Name (First, Middle, Last)				
Prefix	First Name	Middle Name	Last Name	Suffix

Reason for Filing (Complete all that apply)	
State Government Job (Specify agency and position.)	Board/Commission (List the complete names of all State boards on which you are serving or are being considered.)
Currently Serving as a Judicial Officer (Specify office.)	Currently Serving as a Legislator (Specify House or Senate.)
Are you a <b>CANDIDATE</b> for a covered elected office? (District, Superior, or Supreme Court, Court of Clerk of Court, District Attorney, General Assembly) <input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b>	If <b>Yes</b> , specify office and District/County if, applicable:

**AFFIRMATION**

I have carefully reviewed my most recently filed Statement of Economic Interest Long Form and my responses continue to be true, correct, and complete to the best of my knowledge and belief.

I have not transferred, and will not transfer, any asset, interest, or property for the purpose of concealing it from disclosure while retaining an equitable interest.

I understand that my No Change Form is a public record.

I have read and understand the following statutes:

N.C.G.S. § 138A-26. Concealing or failing to disclose material information.  
 A filing person who knowingly conceals or knowingly fails to disclose information that is required to be disclosed on a statement of economic interest . . . shall be guilty of a Class 1 misdemeanor and . . . subject to disciplinary action under G.S. 138A-45.

N.C.G.S. § 138A-27. Penalty for false information.  
 A filing person who provides false information on a statement of economic interest . . . knowing that the information is false is guilty of a Class H felony and shall be subject to disciplinary action under G.S. 138A-45.

**I affirm under penalty of perjury that the foregoing is true and correct.**

\_\_\_\_\_  
**Signature** \_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Printed Name**

**Submit signed, original documents only. Do not fax or e-mail this form.**

*This document is a public record*