

**CHARLES COUNTY ETHICS COMMISSION**

c/o Office of the County Attorney  
200 Baltimore Street  
La Plata, Maryland 20646  
301-645-0555

**FINANCIAL DISCLOSURE STATEMENT – Form 2**

Qualifying Employees & Appointed Members of Boards and Commissions, other than those required by  
Financial Disclosure Statement – Form 1

**INSTRUCTIONS**

This statement of 8 pages plus this cover sheet includes all interests and related matters required to be disclosed pursuant to Chapter 170 of the Charles County Code, the Ethics Law, for the calendar year 2024 pertaining to the person filing the statement. The statement consists of this cover sheet together with Schedules A - E. **The Statement must be completely filled out before it will be accepted. Failure to file, or to file a fully completed statement, constitutes a violation of Title 10 of the Ethics Law.**

- If a section does not apply to you please indicate by marking N/A.
- Please type or print **legibly**, or the form will not be accepted

**WHEN COMPLETE PLEASE RETURN THE ORIGINAL SIGNED FORM TO:  
MELODY WESCHLER, ACTING CLERK, CHARLES COUNTY ETHICS COMMISSION  
200 BALTIMORE STREET, LA PLATA, MD 20646**

**DEFINITIONS**

**“Attributable interest”** means having direct or indirect control over a property or business interest held or owned by a family member or legal entity.

**“Business entity”** means a corporation, general or limited partnership, sole proprietorship, joint venture unincorporated association or firm, institution, trust, Foundation, or other organization, whether or not operated for profit. Business entity does not include a governmental entity.

**“Commission”** means the Charles County Ethics Commission established under §170.04(a) of this County Code.

**“Compensation”** means any money or thing of value, regardless of form, received or to be received by any individual covered by this chapter from an employer for service rendered. For the purposes of §170.08 of the County Code, if lobbying is only a portion of a person's employment, **“compensation”** means a prorated amount based on the time devoted to lobbying compared to the time devoted to other employment duties.

**“County”** means Charles County, Maryland.

**“Doing Business With”** means:

- (1) having or negotiating a contract that involves the commitment, either in a single or combination of transactions, of \$5,000 or more of county government controlled funds; (2) being regulated by or otherwise subject to the authority of the county; or
- (3) being registered as a lobbyist under §170.08 of the County Code.

**“Elected Official”** means any individual who holds an elective office of Charles County. “Elected official” does not include the sheriff, state’s attorney, register of wills, or clerk of the court.

**“Employee”** means an individual who is employed by the county. “Employee” does not include an elected local official.

“Employee” does not include an employee of:

- (a) the offices of the sheriff, state’s attorney, register of wills, or clerk of the court;
- (b) the county health department; or
- (c) the county department of social services.

**“Financial Interest”** means:

- (1) ownership of any interest as the result of which the owner has received, within the past 3 years, or is presently receiving, or in the future is entitled to receive, more than \$1,000 per year; or
- (2) ownership, or the ownership of securities of any kind representing or convertible into ownership, of more than 3 percent of a business entity by a county official or employee, or the spouse of an official or employee.

**“Gift”** means the transfer of anything of economic value, regardless of the form, without adequate and lawful consideration. “Gift” does not include a political campaign contribution regulated under election law article, annotated code of Maryland, or any other provision of state or local law regulating the conduct of elections or the receipt of political campaign contributions.

**“Immediate Family”** means a spouse and dependent children.

**“Interest”** means a legal or equitable economic interest, whether or not subject to an encumbrance or a condition, that is owned or held, in whole or in part, jointly or severally, directly or indirectly. For purposes of §170.06 of the County Code, “interest” includes any interest held at any time during the reporting period.

“Interest” does not include:

- (a) an interest held in the capacity of a personal agent, custodian, fiduciary, personal representative, or trustee, unless the holder has an equitable interest in the subject matter;
- (b) an interest in a time or demand deposit in a financial institution;
- (c) an interest in an insurance policy, endowment policy, or annuity contract under which an insurer promises to pay a fixed amount of money either in a lump sum or periodically for life or a specified period;
- (d) a common trust fund or a trust which forms part of a pension or profit sharing plan which has more than 25 participants and which has been determined by the internal revenue service to be a qualified trust under the internal revenue code; or
- (e) a college savings plan under the internal revenue code.

**“Official”** means an elected official, an employee of the county government, or a person appointed to or employed by the county or any county agency, board, commission, or similar entity: (1) whether or not paid in whole or in part with county government funds; and (2) whether or not compensated.

**“Person”** includes an individual or business entity.

**“Qualified Relative”** means a spouse, parent, child, brother, or sister.

## CHARLES COUNTY ETHICS COMMISSION

### FINANCIAL DISCLOSURE STATEMENT – Form 2

**Regular Reporting Period: January 1 through December 31, 2024**

(or, if filing as a candidate in a year prior to the election year, the period ending as of signature date)  
**(Note: Please type or print legibly, or the form will not be accepted.) PLEASE ANSWER EVERY QUESTION, IF NOT APPLICABLE, PLEASE PUT N/A.**

#### PART I. Identifying Information

First Name	Initial	Last Name
Mailing Address (work or home) (Home address will not be disclosed to the public.)		
Telephone Number (work or home)	Alternate Number (work or cell)	
Current Position, Office or Board/Commission Held With Charles County:		

#### Privacy Notice

The Charles County Ethics Law (Ch. 170 of the Charles County Code) requires collection of this information, which will be used primarily for public disclosure and to determine compliance with the Charles County Code. The information may be presented for review or for copying, at public expenses, upon request to any person, including officials of State, local, or Federal government, who, upon presenting proof identification, registers their name and address, along with the name of the person whose statement is being reviewed. The subject has the right to review, correct, and amend the record, and the right to know who has reviewed their disclosure statement.

#### Standards of Conduct

The Charles County Public Ethics Law (Ch. 170 of the Charles County Code) includes standards of conduct applicable to all financial disclosure filers including employees and elected appointed officials. The standards address disqualification from participation, prohibited secondary employment, prohibited ownership interest, misuse of position, prohibited solicitations and acceptance of gifts, misuse of confidential information, post-employment limitations, prohibited dealing with the County, procurement specifications assistance restriction, and other matters. The law provides for exceptions and exemptions under certain circumstances. If you have any questions about the application of the law, please contact the County Ethics Commission.

#### Enforcement Provisions

Failure to file or report information required by Ch. 170.10 off the Charles County Code by due date could subject filer to administrative penalties of up to \$250 and other disciplinary action per Ch. 170.10.2, including a civil fine of up to \$5,000 per day by the Circuit Court of Charles County, or any other court having proper venue for the purpose of enforcing compliance. Willful and false filing is subject to penalty for perjury pursuant to Ch. 170.10.2(c).

#### **PART II. SIGNATURE AND AFFIRMATION**

This Financial Disclosure Statement describes all interests and related transactions and matters required to be disclosed by the Charles County Ethics Law, with respect to the period indicated, and pertaining to me.

I have thoroughly reviewed Schedules A through E of this Financial Disclosure Statement and the instructions, and hereby certify under penalty of perjury that the contents of this Financial Disclosure Statement are true, complete, and correct to the best of my knowledge and belief.

Signature of Person Filing

Date:

YOUR NAME: \_\_\_\_\_

REPORTING YEAR: 2024

**You must check either “Yes” or “No” to the initial questions in Schedules A & C. If “Yes” provide further detail. Also, you must answer all questions in Schedule B. Please print legibly. Incomplete forms will be returned to you. PLEASE PUT N/A IF IT DOES NOT APPLY.**

**SCHEDULE A**

**Ownership of financial interest in, or liabilities to, corporations, partnerships, limited liability companies, limited liability partnerships, sole proprietorships, or other business entities.**

To your knowledge, during the reporting period, did you or a qualified relative have a financial interest of greater than 3 percent in, or annual income of more than \$1,000\* from, or a financial obligation\*\* to, a business entity (corporation, partnership, limited liability company (LLC), limited liability partnership (LLP), sole proprietorship, other) that:

*\*\*Qualified Relative means your spouse, parent, child, brother, or sister.*

- A. Was regulated, licensed by, or doing business with, your Charles County Government Department, board, or commission; **OR**
- B. Had, or was negotiating, a contract of at least \$5,000 with the Charles County Government or with your department, board, or commission.

*\*in the current year, three prior years, or entitled to in a future year*

*\*\*excluding consumer credit accounts, e.g. “credit cards”*

Yes       No (Go to Schedule B)

**If Yes, answer each question below. (A separate Schedule “A” will be required for each interest you need to disclose, or you may attach a summary sheet.) If No, go to Schedule B.**

1. State the name, the type of entity, and principal place of business of the entity where interest or debt\* was held: (\*You need not report retail credit accounts.)

Name/Type Entity: \_\_\_\_\_

Principal Place of Business: \_\_\_\_\_

2. Name of Person Holding Interest: \_\_\_\_\_

Relationship to Filer: \_\_\_\_\_

3. If a liability or other debt (excluding retail credit account), indicate any collateral or other security held by creditor: \_\_\_\_\_

YOUR NAME: \_\_\_\_\_

REPORTING YEAR: 2024

4. If a non-publicly traded corporation, partnership, limited liability company (LLC), limited liability partnership (LLP), sole proprietorship or other business entity, indicate the range of value of the interest held (or if a liability, the amount owed):

N/A

Under \$1,000       \$1,000 to \$9,999       \$10,000 to \$24,999  
 \$25,000 to \$49,999       \$50,000 and over

**OR**, if the dollar value of the interest held is not reasonably estimable, then state the percentage of ownership held in the entity:

Percentage of Ownership: \_\_\_\_\_ %

5. If in a publicly traded entity, indicate either the number of shares or the range of the value of the interest:

N/A

Number of Shares: \_\_\_\_\_ **OR**

Value of Shares

Under \$1,000       \$1,000 to \$9,999       \$10,000 to \$24,999  
 \$25,000 to \$49,999       \$50,000 and over

6. Did you transfer all or part of your holdings during the reporting period?  Yes  No

If Yes:

6a. What portion of the interest was transferred? \_\_\_\_\_

6b. Date (Month/Year the interest was transferred): \_\_\_\_\_

**SCHEDULE B****Employment, Officers, Directorships, or Similar Interests**

*\*\*Qualified Relative means your spouse, parent, child, brother, or sister.*

**Please list below:**

1. **Your employer (including Charles County Government/Department), any secondary employment or business. Please print or type legibly.**

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2. To your knowledge, whether you or a qualified relative is employed by, or has an interest in, or is an officer, director, or trustee in, or is negotiating a contract or prospective employment with, an entity that has or is negotiating a contract of at least \$5,000 with the Charles County Government, or was regulated by your department, agency, board or commission.

No, none of these apply to me.

Yes, one or more of these apply to me. Complete information below. (Please print additional Schedule B's if necessary or you may attach a summary sheet.)

A. Name of Person holding position: \_\_\_\_\_

B. Relationship to Filer: \_\_\_\_\_

C. Title of position: \_\_\_\_\_

3. Any other immediate family member (spouse, child) employed by Charles County Government.

No, none of these apply to me. (Go to Schedule C)

Yes, one or more of these apply to me. Complete information below. (Please print additional Schedule B's if necessary or you may attach a summary sheet.)

A. Name of Person holding position: \_\_\_\_\_

B. Relationship to Filer: \_\_\_\_\_

C. Title of position: \_\_\_\_\_

YOUR NAME: \_\_\_\_\_

REPORTING YEAR: 2024

**SCHEDULE C**

**During the reporting period, were you or your spouse engaged as a regulated lobbyist?**  
**Please print/type legibly. You must answer both questions.**

Self:

No       Yes

If yes:

Entity in which you are engaged as a lobbyist: \_\_\_\_\_

Spouse:

No/Not applicable       Yes

If yes:

Entity in which your spouse is engaged as a lobbyist: \_\_\_\_\_

**SCHEDULE D****Gifts**

**Answer each question below. A separate Schedule D will be required for each gift, or you may attach a summary worksheet.**

**To your knowledge, did you, or someone on your behalf, receive any gift(s), in excess of a value of \$20 or a series of gifts from the same donor with a cumulative value of \$100 or more, from or on behalf of, directly or indirectly, a person or entity who does business with, or is regulated by, Charles County Government or your department within Charles County Government, board, or commission, or who is registered or required to register before the County under the lobbying section of the Charles County Code?**

**Please print legibly.**

No (Go to Schedule E)

Yes If Yes:

1. Who gave you the gift(s)? \_\_\_\_\_

2. On what date was the gift(s) given? \_\_\_\_\_

3. What was the nature of the gift(s)? (Ex. Cash, restaurant meal, event tickets, membership or subscription, etc.)  
\_\_\_\_\_

4. What was the value of the gift(s)? \_\_\_\_\_

5. If the gift was given to someone else on your behalf, list the identity of the gift recipient.  
\_\_\_\_\_  
\_\_\_\_\_

YOUR NAME: \_\_\_\_\_

## REPORTING YEAR: 2024

**SCHEDULE E**

**Additional Information.** Please use this schedule to report any additional information, not otherwise disclosed, that you wish to disclose. **If you do not have any additional information, please indicate N/A.**

**Please print legibly.**

N/A