FORM OSM 23 (8/89)

## UNITED STATES DEPARTMENT OF THE INTERIOR

Office of Surface Mining Reclamation and Enforcement State Employee Statement of Employment and Financial Interest

Approved by OMB
CN 1029-0067
Expires: 7/31/17

<u> </u>					
1. Name (Last, First, Initial)		2. Title of Position	2. Title of Position		
3. Date of Appo	pintment (in present position)	4. Organizational Unit	4. Organizational Unit		
5. Duty Station	(Office location)	6. Telephone No.	7. Calendar Year (previous)		
	ions. Report all interests held during the previous cal				
the other person si information to be spouse, minor chil household. <b>Part I. Employm</b> your spouse, minor to: (1) an interest retirement plan, in interest through the religious, fraternal mutual funds, inve employment, pens	ny of the required information is not known to you, lubmit the information on your behalf. Provide the name supplied. Briefly explain the situation and the information of the relatives, (S) for Spouse, (C) for minor character and Securities. List the names of business entited or child or other relatives who are full-time residents as an employee, officer, owner, director, trustee, paradividual retirement account, shared income, or other ne ownership of stock, bonds, securities or other arrall, political organizations or any similar organization as estment clubs or regulated investment companies not sion or retirement plans with the U.S. or State Govern likely to be changed as a result of actions taken by the	ame and address of the other person, a mation requested. <i>Codes</i> : (E) for Emphild or (R) for other Relatives who are ies, non-profit organizations, education of your immediate household have a return or consultant; (2) a continuing first arrangement as a result of any current negement including trusts. <i>You may est</i> and those solely of an honorary nature at specializing in underground and surfaments; and (4) retirement plans with a	and include the date you requested the ployee, (J) for Joint ownership with full-time residents in your immediate onal and other institutions in which you, financial interest, including but not limited nancial interest through a pension or at or prior employment; (3) any financial exclude: (1) positions with charitable, by; (2) holdings in widely held diversified face coal mining operations; (3)		
is one which is un	likely to be changed as a result of actions taken by tr	ne State regulatory authority.	NONE		
Code J, S, C or R	Name and Address of Organization	Description of Interest (e.g., employment, stock)	Nature of Employment and Financial Interest (e.g., salary, dividends)		
Part II. REAL PROPERTY. List property in which you, your spouse, minor child or other relatives who are full-time residents of your immediate household have an interest. <i>Exclude</i> your personal residence. Personal residence means any real property used exclusively as a private dwelling.  NONE  Code J, S,  Nature of Interests (e.g., ownership,  Description of Interest  Location of Interest					
C or R	lease, royalty, mineral rights)	(e.g., employment, stock)	(county and state)		
Part III. CREDITORS. List debts owed to business entities and non-profit organizations to whom you, your spouse, minor child or other relatives who are full-time residents of your immediate household are indebted. <i>Exclude</i> debts owed to financial institutions (e.g., banks, credit unions), credit cards, and those for ordinary household and living expenses.					
Code J, S, C or R	Nature of Interests (e.g., ownership, lease, royalty, mineral rights)	Description of Interest (e.g., employment, stock)	Location of Interest (county and state)		
	OYEE CERTIFICATION. To the best of my know or surface coal mining operation except as follows:	ledge, none of the employment and fir	nancial interests listed represents an interest  NONE		
Code J, S, C or R	Nature of Interests (e.g., e	Nature of Interests (e.g., employment, mineral rights, stock, undeveloped land)			
I certify that the st	atements I have made are true, correct, and complete	to the best of my knowledge.			
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Signature of Em	plovee	Date			

Part V. REVIEWERS CERTIFICATION. how the basis for the certification:	Review completed and prohib	pited interests, if any, have been resolved.	Reviewer's comments, if any,
Signature of Reviewer		Date	

## PRIVACY AND PAPERWORK REDUCTION ACT NOTICES

Section 517(g) of Public Law 95-87, the Surface Mining Control and Reclamation Act, and 30 CFR 705, constitute the authority for collecting the personal data on this statement of employment and financial interests. This data must be furnished. Knowing failure to file or report information required may subject you to disciplinary action by your employing agency or other appropriate authority. Knowing failure to file or report information required may also subject you to criminal prosecution leading to a fine of not more than \$2,500 or imprisonment for not more than one year or both.

The information gathered from the statement will be used to determine whether there are any direct or indirect financial interests in violation of Section 517(g) of Public Law 95-87.

Maintenance of the statement by the State regulatory authority is subject to State law. Pursuant to 30 CFR 705 the statement may be inspected by or provided to representatives of the U.S. Department of the Interior.

If the statement is provided to the U.S. Department of the Interior, the statement will be subject to the requirements of Federal law, including the Privacy Act of 1974, 5 U.S.C. 552a. The U.S. Department of the Interior may make routine disclosures: (1) from the records of an individual in response to an inquiry from a Congressional office made at the request of that individual; (2) to the U.S. Department of Justice when related to litigation or anticipated litigation involving the records or the subject matter of the records; and (3) to appropriate State and Federal law enforcement agencies.

Public reporting burden for this form is estimated to average 5 minutes per response, including time for reviewing instructions, gathering and maintaining data, and completing and reviewing the form. You are not required to respond to this collection of information unless it displays a currently valid OMB control number. Direct comments regarding the burden estimate or any other aspect of this form to the Information Collection Clearance Officer, Office of Surface Mining Reclamation and Enforcement, Room 203 SIB, 1951 Constitution Ave., NW, Washington, D.C., 20240.