



FINANCIAL DISCLOSURE STATEMENT
(For use by all Local Public Officers and Candidates in the City of Tucson, State of Arizona)

Name of Local Public Officer or Candidate:	Richard C. Fimbres
Address:	4300 S. PORK Ave., Tuesson, AZ 85714
Public Office Held or Sought: (	Councilman-Ward 5
District / Division # (if applicable):	Ward 5, CH & Tusson
Please select the appropriate box that reflects	Please select the appropriate box that reflects your service for this filing year (double-click the box and change the default value to "checked"):
I am a Local Public officer filing this ☐ I have been appointed to fill a vacar the 12 month period ending with the I	I am a <b>Local Public officer</b> filing this Financial Disclosure Statement covering the 12 months of calendar year <b>2017</b> .  I have been <b>appointed</b> 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 Local Public officer who have year 2017. This is my final Financial	I am a <b>Local Public officer who has served in the last full year of my final term</b> , which expires less than thirty-one days into calendar year 2017. This is my final Financial Disclosure Statement covering the last 12 months plus the final days of my term for the current year.
l am a candidate for a public office, statement, from the month of	l am a <b>candidate</b> for a public office, and am filing this Financial Disclosure Statement covering the 12 months preceding the date of this statement, from the month of20, to the month of20

November 2017

Signature of Local Public Officer or Candidate
(Typewritten signatures accepted)

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

VERIFICATION

## A. PERSONAL FINANCIAL INTERESTS

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

# Identification of Household Members and Business Interests

	What to disclose: If you are married, is your spouse a member of your household? Are any minor children <sup>2</sup> members of your household? [] Yes (if yes, disclose how response).	XÎYes □N	Ž
What to disclose: If you are married, is your spouse a member of your household? X Yes \( \text{No} \text{ No} \text{ N/A} \) (If not married/widowed, select N/A) Are any minor children² members of your household? \( \text{Yes} \) (if yes, disclose how many \( \text{NO} \) \( \text{NO} \) \( \text{NO} \) \( \text{N/A} \) (If no children, select N/A)			
	Are any minor children² members of your household? [] Yes (if yes, disclose how r	any {	

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

Disclosure Statement on the internet or providing it in response to a public records request. by name, the Secretary of State's office or other local filing officer are not expected to redact that information when posting this Financial You are not required to disclose the names of your spouse or minor children when answering the questions below. Thus, you may identify your household members as "spouse," "minor child 1", "minor child 2," etc. Please note that if you choose to identify your spouse or minor children

## Sources of Personal Compensation

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 subsection (2)(a), provide the name and address of each employer who paid you or any member of your household more

nature of that person's services that benefited you, and provide information about the third-party who paid for the services on your behalf 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 In subsection (2)(b), if applicable, list anything of value that any other person (outside your household) received for your or a member of your

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 11 below.

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If additional space is needed to report information on this Financial Disclosure Statement, select the appropriate reporting area and additional rows to the form. For example, to report an additional employer's name in Section 2, right-click in any row, click "Insert," and click "Insert Rows Above" or "Insert Rows Below" as needed.

Minor children include children 18 years old and younger whom you have joint or sole legal custody over.

### Subsection (2)(a):

	スカ	Hous
	haeo Co. Fimbres	LOCAL PUBLIC OFFICER OR HOUSEHOLD MEMBER <sup>3</sup> BENEFITTED
	Kichaeo G. Fimbres City of Tucson-Naeo 5 Government 143005. Park Ave Tucson, AZ85714	NAME AND ADDRESS OF EMPLOYER WHO D PROVIDED COMPENSATION > \$1,000
William Art and a state of the	Government	NATURE OF EMPLOYER'S BUSINESS
	Councilmember	NATURE OF SERVICES PROVIDED BY LOCAL PUBLIC OFFICER OR HOUSEHOLD MEMBER FOR EMPLOYER

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

	Z P	LOCAL PUBLIC OFFICER OR HOUSEHOLD MEMBER <sup>3</sup> BENEFITTED
		NAME AND ADDRESS OF PERSON WHO PROVIDED SERVICES VALUED OVER \$1,000 FOR YOUR OR YOUR HOUSEHOLD MEMBER'S USE OR BENEFIT
		NATURE OF SERVICES PROVIDED BY PERSON FOR YOUR OR YOUR HOUSEHOLD MEMBER'S USE OR BENEFIT
		NAME AND ADDRESS OF THIRD PARTY WHO PAID FOR PERSON'S SERVICES ON YOUR OR YOUR HOUSEHOLD MEMBER'S BEHALF

## 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 11 below.

You are not required to disclose the names of your spouse or minor children. Thus, you may identify your household members as "spouse," "minor child l", "minor child 2," etc. November 2017

	NA	LOCAL PUBLIC OFFICER OR HOUSEHOLD MEMBER <sup>4</sup> AFFECTED
		TYPE OF LICENSE
		PERSON OR ENTITY HOLDING THE LICENSE
		JURISDICTION OR ENTITY THAT ISSUED LICENSE

### Personal Creditors

\$1,000 during any point during the period covered by this Financial Disclosure Statement. What to disclose: The name and address of each creditor to whom you or a member of your household owed a qualifying personal debt<sup>5</sup> over

this Financial Disclosure Statement. Otherwise, write "N/A" (for "not applicable") after the word "Date" if the debt was not first incurred or fully discharged during the period covered by and check the applicable box to indicate whether it was incurred or discharged (double-click the box and change the default value to "checked"). 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

# 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 below);
- 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

MEMBER® OWING THE DEBT  TO WHOM PAYMENTS ARE MADE;
TO WHOM PAYMENTS ARE MADE)

<sup>&</sup>lt;sup>4</sup> You are not required to disclose the names of your spouse or minor children. Thus, you may identify your household members as "spouse," "minor child 1", "minor child 2," etc.
<sup>5</sup> A "qualifying" debt is a personal debt other than the types of debts in the bullet point list above.

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### 5. Personal Debtors

and change the default value to "checked"). covered by this Financial Disclosure Statement, along with the approximate value of the debt by financial category (double-click the applicable box 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

Statement. applicable") after the word "Date" if the debt was not first incurred or fully discharged during the period covered by this Financial Disclosure 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 whether it was incurred or discharged (double-click the appropriate box and change the default value to "checked"). Otherwise, write "N/A" (for "not

		<b>∂</b> ★	LOCAL PUBLIC OFFICER OR HOUSEHOLD MEMBER <sup>6</sup> OWED THE DEBT
			NAME OF DEBTOR
☐ \$1,000 - \$25,000 ☐ \$25,001 - \$100,000 ☐ \$100,001 +	☐ \$1,000 - \$25,000 ☐ \$25,001 - \$100,000 ☐ \$100,001 +	☐ \$1,000 - \$25,000 ☐ \$25,001 - \$100,000 ☐ \$100,001 +	APPROXIMATE VALUE OF DEBT
Date: ☐ Incurred ☐ Discharged	Date: ☐ Incurred ☐ Discharged	Date: ☐ Incurred ☐ Discharged	IF THE DEBT WAS FIRST INCURRED OR COMPLETELY DISCHARGED DURING THIS REPORTING PERIOD, PROVIDE THE DATE (MM/DD/YYYY) AND CHECK THE APPROPRIATE BOX

### s. Gifts

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

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. Please note: the concept of a "gift" for purposes of this Financial Disclosure Statement is separate and distinct from the gift restrictions outlined in

## 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;

<sup>&</sup>lt;sup>6</sup> You are not required to disclose the names of your spouse or minor children. Thus, you may identify your household members as "spouse," "minor child 1", "minor child 2," etc.

- Gifts received from any other member of the household;
- Gifts received by parents, grandparents, siblings, children and grandchildren; or
- Political campaign contributions reported on campaign finance reports.

			0 P	LOCAL PUBLIC OFFICER OR HOUSEHOLD MEMBER' WHO RECEIVED GIFT(S) OVER \$500
				NAME OF GIFT DONOR

# 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.

		0 P
HOUSEHOLD MEMBER	ORGANIZATION OR ASSOCIATION	RELATIONSHIP
RELATIONSHIP HELD BY THE LOCAL PUBLIC OFFICER OR	ORGANIZATION, TRUST, OR NONPROFIT	MEMBER HAVING THE REPORTABLE
DESCRIPTION OF OFFICE, POSITION OR FIDUCIARY	NAME AND ADDRESS OF BUSINESS,	LOCAL PUBLIC OFFICER OR HOUSEHOLD

<sup>&</sup>lt;sup>7</sup> You are not required to disclose the names of your spouse or minor children. Thus, you may identify your household members as "spouse," "minor child 1", "minor child 2," etc. April 2017

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

proprietorship. Also, put a check mark to indicate the value of the debt (double-click the applicable box and change the default value to "checked"), ownership or beneficial interest of over \$1,000 during the period covered by this Financial Disclosure Statement. This includes stocks, annuities, 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 mutual funds, or retirement funds. It also includes any financial interest in a limited liability company, partnership, joint venture, or sole

\$1,000 - \$25,000 \$25,001 - \$100,000 \$100,001 + \$1,000 - \$25,000 \$1,000 - \$25,000 \$25,001 - \$100,000 \$100,001 +		Armonk, NY 10504	
\$1,000 - \$25,000 \$25,001 - \$100,000	Stocks	TBM CORPORA	Sonot
VALUE OF THE INTEREST	OR INVESTMENT FUND	OR INVESTMENT FUND	MEMBER <sup>8</sup> HAVING THE INTEREST
APPROXIMATE EQUITY	DESCRIPTION OF THE BUSINESS, TRUST	NAME AND ADDRESS OF BUSINESS, TRUST	LOCAL PUBLIC OFFICER OR HOUSEHOLD

### Ownership of Bonds

applicable box and change the default value to "checked"). during the period covered by this Financial Disclosure Statement. Also, put a check mark to indicate the value of the bonds (double-click the 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

applicable") after the word "Date" if the bonds were not first acquired or fully divested during the period covered by this Financial Disclosure the bonds were acquired or divested (double-click the appropriate box and change the default value to "checked"). Otherwise, write "N/A" (for "not 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 whether

		<b>ひ</b>	LOCAL PUBLIC OFFICER OR HOUSEHOLD MEMBER <sup>8</sup> ISSUED BONDS
			ISSUING STATE OR LOCAL GOVERNMENT AGENCY
\$1,000 - \$25,000 \$25,001 - \$100,000 \$100,001 +	☐ \$1,000 - \$25,000 ☐ \$25,001 - \$190,000 ☐ \$100,001 +	☐ \$1,000 - \$25,000 ☐ \$25,001 - \$100,000 ☐ \$100,001 +	APPROXIMATE VALUE OF BONDS
Date: ☐ Acquired ☐ Divested	Date: ☐ Acquired ☐ Divested	Date: ☐ Acquired ☐ Divested	IF THE BONDS WERE FIRST ACQUIRED OR COMPLETELY DISCHARGED DURING THIS REPORTING PERIOD, PROVIDE THE DATE (MM/DD/YYYYY) AND CHECK THE APPROPRIATE BOX

Vou are not required to disclose the names of your spouse or minor children. Thus, you may identify your household members as "spouse," "minor child 1", "minor child 2," etc. November 2017

### 10. Real Property Ownership

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

applicable") after the word "Date" if the land was not first acquired or fully divested during the period covered by this Financial Disclosure Statement. the land was acquired or divested (double-click the appropriate box and change the default value to "checked"). Otherwise, write "N/A" (for "not 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

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

						TIMORES ALTICOLO	TUSSON TUSSON AC	, OWNS LAND	HOUSEHOLD MEMBER THAT	LOCAL PUBLIC OFFICER OR
						7 2001	24 NOSSYIT	OEE	COCALION AND APPROXIMATE	CONTION AND ABBOVINATE
\$100,001 +	\$1,000 - \$25,000	☐ \$100,001 ÷	<b> </b>	☐ \$1,000 - \$25,000	\$100,001 +	☐ \$25,001 - \$100,000	☐ \$1,000 - \$25,000	CANO	AFFROXING C VALUE OF	ADDOVIMATE VALUE OF
☐ Acquired ☐ Divested	Date:	Acquired Divested		Date:	☐ Acquired ☐ Divested		Date:	DATE (MM/DD/YYYY) AND CHECK THE APPROPRIATE BOX	DISCHARGED DURING THIS REPORTING PERIOD, PROVIDE THE	IF THE LAND WAS FIRST ACQUIRED OR COMPLETELY

## **B. BUSINESS FINANCIAL INTERESTS**

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

### 11. Business Names

corporations, limited liability companies, partnerships, sole proprietorships or any other type of business conducted under a trade name. you or your household member were self-employed) during the period covered by this Financial Disclosure Statement, which include any 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

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

You are not required to disclose the names of your spouse or minor children. Thus, you may identify your household members as "spouse," "minor child 1", "minor child 2," etc.

Please note: If the business was either controlled or dependent, check whether it was controlled or dependent (double-click the appropriate box and change the default value to "checked") in the last column below. If the business was both controlled and dependent during the period covered by this Financial Disclosure Statement, check both boxes. Otherwise, leave the boxes in the last column below blank.

		D)#	LOCAL PUBLIC OFFICER OR HOUSEHOLD MEMBER 10 OWNING THE BUSINESS
			NAME AND ADDRESS OF BUSINESS
☐ Controlled ☐ Dependent	☐ Controlled ☐ Dependent	☐ Controlled ☐ Dependent	CHECK THE APPROPRIATE BOX IF THE BUSINESS IS "CONTROLLED" BY OR "DEPENDENT" ON YOU OR A HOUSEHOLD MEMBER

businesses listed in Question 11 were "controlled" or "dependent," you need not complete the remainder of this Financial Disclosure Statement. <u>Please note</u>: If a business listed in the foregoing Question 11 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

### 12. Controlled Business Information

What to disclose: The name of each controlled business listed in Question 11 above, and the goods or services provided by the business

activities in the final column below (but if the major client is an individual, write "N/A" for "not applicable" in the final column below). business provided to this major client in the third column below. Also, if the major client is a business, please describe the client's type of business period covered by this Financial Disclosure Statement, the client or customer is deemed a "major client" and therefore you must describe what your 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

If the business does not have a major client, write "N/A" for "not applicable" in the last two columns below

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

leave this question blank 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

<sup>10</sup> You are not required to disclose the names of your spouse or minor children. Thus, you may identify your household members as "spouse," "minor child 1", "minor child 2," etc. November 2017

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)
 D A			

### 13. Dependent Business Information

What to disclose: The name of each dependent business listed in Question 11 above, and the goods or services provided by the business

business provided to this major client in the third column below. Also, if the major client is a business, please describe the client's type of business activities in the final column below (but if the major client is an individual, write "N/A" for "not applicable" in the final column below). period covered by this Financial Disclosure Statement, the client or customer is deemed a "major client" and therefore you must describe what your 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

also a controlled business, disclose the business only in Question 12 above and leave this question blank. If the business does not have a major client, write "N/A" for "not applicable" in the last two columns below. Likewise, if the dependent business is

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

leave this question blank. 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

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

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

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

applicable") after the word "Date" if the land was not first acquired or fully divested 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 (double-click the appropriate box and change the default value to "checked"). Otherwise, write "N/A" (for "not

dependent business, you may leave this question blank. 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

		アカ	DEPENDENT BUSINESS THAT OWNS LAND
			LOCATION AND APPROXIMATE SIZE
\$1,000 - \$25,000 \$25,001 - \$100,000 \$100,001 +	☐ \$1,000 - \$25,000 ☐ \$25,001 - \$100,000 ☐ \$100,001 +	☐ \$1,000 - \$25,000 ☐ \$25,001 - \$100,000 ☐ \$100,001 +	APPROXIMATE VALUE OF LAND
Date: ☐ Acquired ☐ Divested	Date: □ Acquired □ Divested	Date: ☐ Acquired ☐ Divested	DISCHARGED DURING THIS REPORTING PERIOD, PROVIDE THE DATE (MM/DD/YYYY) AND CHECK THE APPROPRIATE BOX

## Controlled or Dependent Business' Creditors

("qualifying business debt"). was also more than 30% of the business' total indebtedness at any time during the period covered by this Financial Disclosure Statement 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

applicable") after the word "Date" if the business debt was not first incurred or fully discharged during the period covered by this Financial Disclosure Statement. and check whether it was incurred or discharged (double-click the box and change the default value to "checked"). Otherwise, write "N/A" (for "not 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

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.

☐ Incurred ☐ Discharged		
Date:		
☐ Incurred ☐ Discharged		
Date:		
☐ Incurred ☐ Discharged		です
Date:		•
DISCHARGED DURING THIS REPORTING PERIOD, PROVIDE THE DATE (MM/DD/YYYY) AND CHECK THE APPROPRIATE BOX	TO WHOM PAYMENTS ARE MADE)	BUSINESS OWING THE QUALIFYING DEBT
IF THE DEBT WAS FIRST INCURRED OR COMPLETELY	NAME AND ADDRESS OF CHEDITOR (OR DEDSON	NAME OF CONTROL ST OF DESENDENT

## 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 disclose the approximate value of the debt by financial category (double-click the applicable box and change the default value to "checked").

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 whether it was incurred or discharged (double-click the box and change the default value to "checked"). Otherwise, write "N/A" (for "not applicable") after the word "Date" if the business debt was not first incurred or fully discharged during the period covered by this Financial Disclosure

controlled or dependent business, you may leave this question blank. 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

			Section 2 and a section of the secti
☐ Incurred ☐ Discharged	\$100,001 +		
Date:	\$1,000 - \$25,000		
☐ Incurred ☐ Discharged	\$100,001 +		
Date:	\$1,000 - \$25,000		
☐ Incurred ☐ Discharged	\$100,001+		D)A
Date:	☐ \$1,000 - \$25,000 ☐ \$25,001 - \$100,000		
DURING THIS REPORTING PERIOD, PROVIDE THE DATE (MM/DD/YYYY) AND CHECK THE APPROPRIATE BOX	Dear	NAME OF DEBTOR	HOUSEHOLD MEMBER " OWED THE DEBT
IF THE DEBT WAS FIRST INCURRED OR COMPLETELY DISCHARGED	APPROXIMATE VALUE OF		LOCAL PUBLIC OFFICER OR

April 2017 11 You are not required to disclose the names of your spouse or minor children. Thus, you may identify your household members as "spouse," "minor child 1", "minor child 2," etc. 12