New York State Joint Commission on Public Ethics
540 Broadway
Albany, New York 12207

RELEASE OF ANNUAL STATEMENT(S) OF FINANCIAL DISCLOSURE TO THE EMPLOYEE

Date of Request	
Filer Information	**Full Name**
	Agency Affiliation
	Title

I request that the Joint Commission on Public Ethics provide me with a copy of my Financial Disclosure Form(s) for calendar year(s)_____with all the information contained in the statement without removing the categories of value or other confidential information from the copy, to be sent to me at:

_____

_____

_____

_____

SIGNATURE:_____

STATE OF NEW YORK)
) SS.:
COUNTY OF)

On the_____day of_____, 20___, before me personally came_____, to me known, who, being by me duly sworn, did depose and say that s/he is the individual described in and who executed the foregoing instrument, and acknowledged that s/he executed the same.

_____
NOTARY PUBLIC