

**NEW YORK STATE COMMISSION
ON ETHICS AND LOBBYING IN GOVERNMENT
540 BROADWAY
ALBANY, NY 12207**

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

DATE OF REQUEST: _____

FILER INFORMATION	FULL NAME AGENCY AFFILIATION TITLE
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I request that the NYS Commission on Ethics and Lobbying in Government 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