

RICE TOWNSHIP
POLICE PENSION FUND
3000 CHURCH ROAD
MOUNTAINTOP, PA 18707

DISCLOSURE FORM

- 1) State the names and titles of each individual in your organization who will be providing professional services to the Township pension system including, if any, outside advisors or subcontractors; and describe the responsibilities of each named individual.
- 2) State whether any of the above named individuals, or your organization
 - Is a current or former official or employee of this municipality
 - Is or has been a registered federal or state lobbyist
 - What are the responsibilities of each individual named above with regard to the proposed contract.
- 3) If the answer in either case is 'yes', explain the circumstances, including dates of employment.
- 4) Confirm that resumes of any of the above named individuals will be provided upon request.
- 5) Confirm that any information provided in this form will be updated annually and if and when changes occur.
- 6) State whether your organization has provided employment or compensation to any third party intermediary, agent, or lobbyist to directly or indirectly communicate with any township pension system official or employee, or municipal official or employee in connection with any transaction or investment involving your firm and the municipal pension system.
- 7) State whether your organization, or any agent, officer, director, or employee of your organization has solicited or made a contribution to any municipal official or

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- candidate for office in this municipality, or to the political party or political action committee of such an official or candidate.
- 8) State whether, following the advertisement of the Request for Proposal by this municipality, your firm has caused or knowingly allowed any third party to communicate with this municipality pension system about the award of a professional services contract, except for requests for technical clarification.
- 9) State whether your organization, or any affiliated entity, has made a contribution within the previous two years to any municipal official, or candidate office in this municipality. State the dates of any such contributions.
- 10) State whether your organization, or any affiliated entity, has any direct financial commercial or business relationship with any official of this municipal pension system or this municipality.
- 11) State whether your organization or any affiliated entity has offered or conferred a gift of more than nominal value to any official, employee, or fiduciary of this municipality pension system or this municipality.
- 12) State and disclose all contributions made by your organization or any affiliated entity which meet the following criteria:
- i. The contribution was made within the last five years
 - ii. The contribution was made by an officer, director, executive-level employee or owner of at least 5% of your organization or affiliated entity
 - iii. The amount of the contribution was at least \$500 in a form of:
 - a) A single contribution by a person included in subparagraph ii.
 - b) The aggregate of all contributions by all persons in subparagraph ii.
 - iv. The contribution was made to:
 - a) a candidate for any public office in the Commonwealth or to an individual who holds that office.

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b) a political committee of a candidate for public office in the Commonwealth or of an individual who holds that office.
The information provided under this item shall be updated annually.

13) State the following information with respect to all persons identified as contributors in the preceding sub-paragraph:

- i. Name and address of the contributor
- ii. The contributor's relationship to your organization
- iii. The name and office or position of each person who received a contribution
- iv. The amount of the contribution
- v. The date of the contribution

14) State and disclose any gifts by your organization, or any affiliated entity, to an official, or employee of this municipal pension system or this municipality.

15) State whether your organization, or affiliated entity, employs or retains any third party intermediary agent or lobbyist; and that person's duties.

16) State whether there exists any financial relationship between your organization, or affiliated entity, or any affiliated entity, and any official of this municipal pension system or this municipality.