



# THE CITY OF BRUNSWICK MARYLAND

1 WEST POTOMAC STREET · BRUNSWICK, MARYLAND 21716 · (301) 834-7500

## NOMINATIONS

Nominations of candidates for Mayor or Council shall be made by petition, signed by at least twenty (20) voters, and filed with the Director of Administration thirty (30) days before the day of election. The signers of this petition must be qualified to vote for the person whose name is presented for a place on the official ballot.

I hereby consent that my name be placed on the official ballot as candidate for (circle one) Mayor/Council Member of the City of Brunswick, as prayed in the foregoing petition. I attest that I am a resident of Brunswick and a registered voter.

Print Name: John Caves Phone Number: (301) 520-1986

Address: 817 5<sup>th</sup> Ave, Brunswick, MD 21716

E-mail Address: john@cavesforbrunswick.com

Signature: [Handwritten Signature]

### TO BE COMPLETED BY A NOTARY PUBLIC

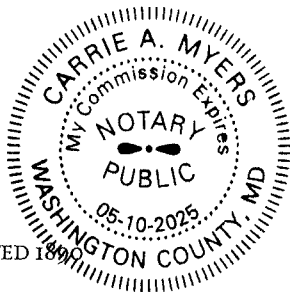
State of Maryland, Frederick County.

To wit:

I hereby certify that on this 23rd day of May in the year 2024 before me the subscriber, a notary public of Washington County, Maryland, personally appeared

John Caves, one of the foregoing petitioners, and made oath in

due form of law; that each and all of the foregoing signers are qualified to vote for the person whose name is here presented for a place on the official ballot.



[Handwritten Signature]  
Signature of Notary

PETITION

20+

We, the undersigned residents of the City of Brunswick, in Frederick County, Maryland, and duly qualified to vote at any election to be held therein, hereby petition your honorable body to place upon the official ballot used at the City of Brunswick Municipal Election to be held on Tuesday, August 6, 2024, the name of:

John Caves whose residence is 817 5<sup>th</sup> Avenue  
as a candidate for Elected Office of the City of Brunswick.

Signature [Signature] Print Name Christina Caves ✓ Street Address 817 5<sup>th</sup> Avenue

By placing my initials on this line, I affirm consent of including my signature by electronic means on this petition. CC

2. [Signature] John Faith Sr ✓ 227 E. Potomac

By placing my initials on this line, I affirm consent of including my signature by electronic means on this petition. JF

3. [Signature] WAYNE AUGIER ✓ 515 WEST C ST.

By placing my initials on this line, I affirm consent of including my signature by electronic means on this petition. WA

4. [Signature] D. Timothy Wilson ✓ 2 Manchester Ct

By placing my initials on this line, I affirm consent of including my signature by electronic means on this petition. DTW

5. [Signature] H. Bruce Funk ✓ 805 N. Maple Ave.

By placing my initials on this line, I affirm consent of including my signature by electronic means on this petition. HBF

6. [Signature] Donald Peterson ✓ 223 E. Potomac St.

By placing my initials on this line, I affirm consent of including my signature by electronic means on this petition. DP

7. [Signature] Tanya Detwiler ✓ 819 5<sup>th</sup> Ave.

By placing my initials on this line, I affirm consent of including my signature by electronic means on this petition. TD

8. [Signature] ANDREW Detwiler ✓ 819 5<sup>th</sup> Ave

By placing my initials on this line, I affirm consent of including my signature by electronic means on this petition. AD

9. [Signature] David Meeske ✓ 810 5<sup>th</sup> Ave

By placing my initials on this line, I affirm consent of including my signature by electronic means on this petition. DM

10. [Signature] Christie Gingras ✓ 810 5<sup>th</sup> Ave

By placing my initials on this line, I affirm consent of including my signature by electronic means on this petition. CG

11. Jennifer Jones Jennifer Jones ✓ 818 5th Ave Brunswick

By placing my initials on this line, I affirm consent of including my signature by electronic means on this petition. J

12. D C Rohmiller David C. Rohmiller ✓ 506 E.H St. Brunswick

By placing my initials on this line, I affirm consent of including my signature by electronic means on this petition. DR

13. Charles Rohmiller Charles Rohmiller ✓ 506 E H Street Brunswick

By placing my initials on this line, I affirm consent of including my signature by electronic means on this petition. CR

14. Vicki Rohmiller Vicki Rohmiller ✓ 506 E.H Street Brunswick MD 21716

By placing my initials on this line, I affirm consent of including my signature by electronic means on this petition. VJR

15. Ivory G. Davis Ivory G. Davis ✓ 814 4th Ave Brunswick, MD 21716

By placing my initials on this line, I affirm consent of including my signature by electronic means on this petition. IGD

16. Jesse T. Davis Jesse T. Davis ✓ 814 4TH AVE BRUNSWICK, MD 21716

By placing my initials on this line, I affirm consent of including my signature by electronic means on this petition. JTB

17. Jeremy A. Miller Jeremy A. Miller ✓ 814 4th Ave Brunswick, MD 21716

By placing my initials on this line, I affirm consent of including my signature by electronic means on this petition. JAM

18. Vicki Allgaier VICKI ALLGAIER ✓ 515 WEST CST BRUNSWICK, MD 21716 Va

By placing my initials on this line, I affirm consent of including my signature by electronic means on this petition. VA

19. Vicki Fleetwood Vicki Fleetwood ✓ 702 E. H St. Brunswick MD 21716

By placing my initials on this line, I affirm consent of including my signature by electronic means on this petition. V.F.

20. Nora Wilson NORA Wilson ✓ 2 Manchester Ct Brunswick, MD

By placing my initials on this line, I affirm consent of including my signature by electronic means on this petition. NW

Under penalties of perjury, I swear that (a) I was at least 18 years old when each signature was obtained; (b) the information given to the left identifying me is true and correct; (c) I personally observed each signer as he or she signed this page; and (d) to the best of my knowledge and belief; (i) all signatures on this page are genuine; and (ii) all signers are registered voters of Brunswick, Maryland.

Circulator/Candidate's Signature [Signature] Date 5/19/2024

**\*\*PLEASE ADD ADDITIONAL PAGES AS NECESSARY\*\***

21 AC Andrew St. John ✓ 119 9th Ave  
By placing my initials on this line, I affirm consent of including my signature by electronic means on this petition. AS

22 CS Carliah Summers ✓ 111 EG Street  
By placing my initials on this line, I affirm consent of including my signature by electronic means on this petition. CS

23 DAY Daniel Yochelson ✓ 108 W D St.  
By placing my initials on this line, I affirm consent of including my signature by electronic means on this petition. DAY

24 CV Chris Vigliotti ✓ 819 East A. St.  
By placing my initials on this line, I affirm consent of including my signature by electronic means on this petition. CV

25 IA Isan Anderson ✓ 828 6th Ave  
By placing my initials on this line, I affirm consent of including my signature by electronic means on this petition. IA

26 IA Letha Anderson ✓ 828 6th Ave  
By placing my initials on this line, I affirm consent of including my signature by electronic means on this petition. IA

27 \_\_\_\_\_  
By placing my initials on this line, I affirm consent of including my signature by electronic means on this petition. \_\_\_\_\_

28 \_\_\_\_\_  
By placing my initials on this line, I affirm consent of including my signature by electronic means on this petition. \_\_\_\_\_

29 \_\_\_\_\_  
By placing my initials on this line, I affirm consent of including my signature by electronic means on this petition. \_\_\_\_\_

30 \_\_\_\_\_  
By placing my initials on this line, I affirm consent of including my signature by electronic means on this petition. \_\_\_\_\_

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Circulator/Candidate's Signature AL L III Date 5/19/2024

**\*\*PLEASE ADD ADDITIONAL PAGES AS NECESSARY\*\***

**City of Brunswick  
City Ethics Commission  
1 West Potomac Street  
Brunswick, MD 21716**

**FINANCIAL DISCLOSURE STATEMENT - FORM #1**

1. Fill in the preliminary information requested in the box below. Be sure to correctly identify the reporting period.
2. Upon completion of your financial disclosure statement, sign and date the lower portion of the page and make the required oath or affirmation before a notary public or other officer authorized to take oaths.

Form Reviewed by \_\_\_\_\_ on \_\_\_\_\_  
 I Would Like To Be Notified If Someone Looks At My Form

Regular Reporting Period: January 1, **2023** through December 31, **2023**

**PLEASE PRINT OR TYPE**

FIRST NAME <b>John</b>	INITIAL <b>P.</b>	LAST NAME <b>Caves III</b>
AGENCY AFFILIATION (INCLUDE DEPARTMENT AND UNIT WHERE APPLICABLE)		
CURRENT AGENCY ADDRESS (WHERE YOU CAN BE SENT CORRESPONDENCE) <b>817 5<sup>th</sup> Ave, Brunswick, MD 21716</b>		
CURRENT POSITION OR OFFICE HELD WITH CITY, IF ANY (OR OFFICE FOR CANDIDACY) <b>Candidate for City Council</b>		
E-MAIL ADDRESS <b>john@cavesforbrunswick.com</b>		

This financial disclosure statement describes all interests and related transactions and matters required to be disclosed by State Government Article, Title 15, Subtitle 6 of the Maryland Public Ethics Law with respect to the period indicated and pertaining to the person filing the statement. The statement consists of this cover sheet, the checklist, and Schedules A through I.

I hereby make oath or affirm under the penalties of perjury that the contents of this financial disclosure statement, including the Schedules attached hereto, are complete, true and correct to the best of my knowledge, information and belief.

Signature of Person Filing: \_\_\_\_\_

Date: \_\_\_\_\_

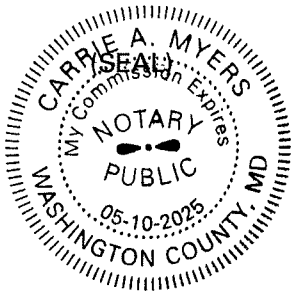
Sworn to before me this 23 day of \_\_\_\_\_

Signature of Notary Public: \_\_\_\_\_

Printed/Typed Name of Notary Public: \_\_\_\_\_

My Commission Expires: \_\_\_\_\_

**John P. Caves III**  
**5/9/2024 5/23/2024**  
 \_\_\_\_\_  
**Carrie A. Myers**  
**Carrie A. Myers**  
**5-10-2025**



**Instructions:**

Check the proper block to Questions A through I. Do not leave any questions unanswered. If you check "Yes" to any question by sure to complete the corresponding Schedule.

**Caution: Please read all instructions on accompanying instruction sheet including all definitions, before completing this form.**

- A. I held interests during reporting period in real property located in or outside Maryland. (If "Yes," complete Schedule A.)
- B. I held interests during reporting period in corporations, partnerships and similar entities. (If "Yes," complete Schedule B.)
- C. I held interests in a non-corporate business entity which did business with the City, other than a partnership. (If "Yes", complete Schedule C.)
- D. I received gifts during reporting period from persons doing business with the City, regulated by the City, or registered or required to register as lobbyists. (If "Yes," complete Schedule D.)
- E. I or a member of my immediate family was a partner or held an office, directorship, or salaried employment during reporting period in or with a business entity doing business with the City. (If "Yes," complete Schedule E.)
- F. I or a member of my immediate family owed debts (excluding retail credit accounts) during reporting period to persons doing business with the City. (If "Yes," complete Schedule F.)
- G. A member of my immediate family was employed by the City of Brunswick during reporting period. (If "Yes," complete Schedule G.)
- H. I or a member of my immediate family received a salary or was sole or partial owner of a business entity from which earned income was received, during the reporting period. (If "Yes," complete Schedule H.)
- I. Is additional information set forth on Schedule I? (If "Yes," complete Schedule I.)

	YES	NO
A.	X	
B.		X
C.		X
D.		X
E.		X
F.	X	
G.		X
H.	X	
I.		X

**Form 1 – Elected Officials and Candidates for public office**

**Schedule A – Real Property Interests**

Do you have any interest (**as an owner or a tenant**, including interests in time shares) in real property in Maryland or in any other state or country?

Yes  
 No (Go to Schedule B)

**If Yes; (Answer each question below. A separate Schedule A will be required for each property you need to disclose.)**

1. What is the address or legal description of the property? (Give Street Address, if you know it. If the property is your primary residence, you may enter the lot and block legal description instead, if you wish)

Street Address 817 5<sup>th</sup> Ave  
City/State/Zip Brunswick, MD 21716

2. What kind of property is it?

Improved (indicate whether property is residential or commercial property): Residential

Unimproved (vacant lot): \_\_\_\_\_

3. Is the interest held directly by you or is it attributable to you? (See Paragraph E of Instructions for definition of "Attributable.")

Direct  \_\_\_\_\_ Attributable \_\_\_\_\_

4. Are you the owner or tenant?

Owner  \_\_\_\_\_ Tenant \_\_\_\_\_

5. Do you hold the interest solely or is it jointly held with another?

Solely \_\_\_\_\_ Jointly  \_\_\_\_\_ Tenants by the Entirety \_\_\_\_\_

If held jointly, or by tenants by the entirety, the name(s) of the other joint owner(s): \_\_\_\_\_

Christina F. Caves

6. Are there any legal conditions or encumbrances on the property? (Example: mortgages, liens, contracts, options, etc.)

Yes  
 No

**If yes;** what is/are the name(s) of the lender(s), creditor(s), lien holder(s), etc? Truist Bank

7. What date was the property acquired? 5/23/2019

8. How was the property acquired? (Example: purchase, gift, inheritance, etc.)

Purchase

9. From whom was the property acquired? (Name of individual or entity from whom you purchased or inherited the property or who gifted the property to you.)

Constance Stiers

10. What consideration was given when the property was acquired? (Dollar amount paid or, if you received the property as a gift or inherited it, the fair market value at the time you acquired your interest in the property) \$369,900

11. Have you transferred any interest in this property during the reporting period?

Yes  
 No

**If Yes;**

11.A. What percentage of interest did you transfer: \_\_\_\_\_ %

11.B. What consideration did you receive for the interest: \_\_\_\_\_

11.C. To whom did you transfer the interest: \_\_\_\_\_

**If you have any additional interests in real property in Maryland, any other state or any other country, please use additional sheet(s), if necessary, and respond to each above question for each such entry.**



**Schedule B – Interests in Corporations and Partnerships**

Did you have any interest in any corporations, partnerships, limited liability partnerships (LLP) or limited liability companies (LLC) during the reporting period whether or not the entity did business with the City of Brunswick?

Yes  
 No (Go to Schedule C)

**If Yes; (Answer each question below. A separate Schedule B will be required for each interest you need to disclose.)**

1. What is the name of the entity? Include the complete name of the entity, do not identify solely by trading symbol: \_\_\_\_\_

2. Does the stock of the corporation trade on a stock exchange?

Yes  
 No

If "no," the legal address of the entity's principal office:

\_\_\_\_\_

3. Is the interest held directly by you or is it attributable to you? (See Paragraph E of Instructions for definition of "Attributable.")

Directly: \_\_\_\_\_ Attributable: \_\_\_\_\_

4. Do you hold the interest in your name alone, or is it held jointly?

In your name alone: \_\_\_\_\_ Jointly: \_\_\_\_\_

If jointly, the percentage of your interest: \_\_\_\_\_%

5. What is the nature of your interest and its dollar value or the number of shares? (Example: stock, notes, bonds, puts, calls, straddles, purchase options, etc.) If in a non-publicly traded entity or LLP or LLC, report the percentage of ownership.

Type: \_\_\_\_\_

Dollar Value of Shares: \_\_\_\_\_ or Number of Shares: \_\_\_\_\_

percentage of ownership: \_\_\_\_\_%

6. Are there any legal conditions or encumbrances that apply to your interest in the entity? (Example: mortgages, liens, contracts, options, etc.)

No

Yes; **If yes**, name of entity holding the encumbrance: \_\_\_\_\_

7. Did you acquire an interest in the entity during the reporting period?

Yes  
 No

**If Yes:**

7A. In what month was the interest acquired? \_\_\_\_\_

7B. How was the interest in the entity acquired? (Example: purchase, gift, will, etc.): \_\_\_\_\_

7C. From whom did you acquire the interest in the entity? (If you purchased it from a brokerage, the name of the brokerage): \_\_\_\_\_

7D. What consideration was given when the interest was acquired? (Dollar amount paid, or if you received the property as a gift or inherited it, the fair market value at the time you acquired your interest in the property): \_\_\_\_\_

8. Have you transferred any interest in this entity during the reporting period?

\_\_\_ Yes

\_\_\_ No

**If Yes:**

8A. What portion of the interest was transferred? \_\_\_\_\_

8B. What consideration did you receive for the interest in the entity? (Dollar amount paid, or if you received the property as a gift or inherited it, the fair market value and terms at the time you transferred your interest in the property): \_\_\_\_\_

8C. To whom did you transfer your interest in the entity? \_\_\_\_\_

**If you have additional interests in corporations or partnerships, please use additional sheet(s) if necessary, and answer each of the above questions for each additional entry.**

**Schedule C – Interests in Non-Corporate Business Entities Doing Business with the City**

Do you have an interest in any non-corporate business entity (a sole proprietorship) that did business with the City during the reporting period?

Yes  
 No (Go to Schedule D)

**If Yes: (Answer each question below. A separate Schedule C will be required for each business entity to be disclosed.)**

1. Name and Address of the Principal office of the business entity?

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

2. Is the interest held directly by you or is it attributable to you? (See Paragraph E of Instructions for definition of "Attributable.")

Direct: \_\_\_\_\_ Attributable: \_\_\_\_\_

3. Do you hold the interest solely or is it jointly held with another?

Solely: \_\_\_\_\_ Jointly: \_\_\_\_\_

3.A. If jointly, the percentage of your joint interest: \_\_\_\_\_%

3.B. Dollar value of your interest in the entity: \$ \_\_\_\_\_; or  
percentage of your interest in the entity: \_\_\_\_\_%

4. Are there any legal conditions or encumbrances that apply to your interest in the entity? (Example: mortgages, liens, contracts, options, etc.)

Yes, If yes give name of creditor: \_\_\_\_\_  
 No

5. Was any interest acquired during the reporting year?

Yes  
 No

**If Yes:**

5A. What month was the interest acquired? \_\_\_\_\_

5B. How was the interest in the entity acquired? (Example: purchase, gift, will, etc.)  
\_\_\_\_\_

5C. From whom did you acquire the interest? \_\_\_\_\_

5D. What consideration was given when the interest was acquired? (Dollar amount paid or if you received the property as a gift or inherited it, the fair market value at the time you acquired your interest in the property) \_\_\_\_\_

6. Did you transfer any of your interest during the reporting period?

Yes

No

**If yes:**

6A. What percentage of interest, if less than all, was transferred? \_\_\_\_\_%

6B. What consideration did you receive for the interest in the entity? (Dollar amount paid or if you received the property as a gift or inherited it, the fair market value and terms at the time you transferred your interest in the property): \_\_\_\_\_

6C. To whom did you transfer your interest in the entity? \_\_\_\_\_

**If you have additional interests in sole proprietorship(s) that did business with the State during the reporting year, please use additional sheet(s) if necessary, and answer each of the above questions for each additional entry.**

**Schedule D – Gifts**

During the reporting period, did you receive any gift(s), directly or indirectly, in excess of a value of \$20 or a series of gifts from the same donor with a cumulative value of \$100 or more from a person or entity who: 1) did business with the City; 2) engaged in an activity that was regulated or controlled by the City; or 3) was a regulated lobbyist? Gifts received from a member of the official's or employee's immediate family, another child, or a parent of the individual, do not need to be disclosed.

- Yes
- No (Go to Schedule E)

**~~If Yes, (Answer each question below. A separate Schedule D will be required for each gift.)~~**

1. Who gave you the gift?

\_\_\_\_\_

2. What was the nature of the gift? (Example: book, restaurant meal, theater tickets, book, etc.)

\_\_\_\_\_

3. What was the value of the gift?

\_\_\_\_\_

4. If the gift was given to someone else at your direction, list the identity of the recipient of the gift.

\_\_\_\_\_

**Please use additional sheet(s), if necessary, for any additional entries.**

**Schedule E – Officers, Directorships, Salaried Employment and Similar Interests**

During the reporting period, did you or any member of your immediate family (spouse or dependent child) have any salaried employment or hold any office or directorship with an entity that did business with the City of Brunswick?

Yes  
 No (Go to Schedule F)

**If Yes; (Answer each question below. A separate Schedule E will be required for each disclosure.)**

1. What is the name and address of the business entity?

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

2. Who was the individual who held the position or interest listed above? (Example: yourself, spouse, dependent child)

Self: \_\_\_\_\_ Spouse: \_\_\_\_\_ Dependent child: \_\_\_\_\_

2A. Name of spouse or dependent child: \_\_\_\_\_

3. What is the title of the office you, your spouse or dependent child held? (Example: limited partner, director, treasurer, chair of the board of trustees, etc.) \_\_\_\_\_

4. What year did the position begin? \_\_\_\_\_

5. With what City department (s) did the business entity do business? \_\_\_\_\_

6. What was the nature of the business? (Example: regulated by your agency, registered under the lobbying law, or involved with sales and contracts with the State)

**If necessary, please use additional sheet(s) for any additional entries.**

**Schedule F – Debts You Owe**

During the reporting period, did you owe a debt (excluding a retail credit account) to a financial entity that did business with the City? [NOTE: If, on Schedule A, B or C you listed a financial entity that did business with the City as the holder of your mortgage or other encumbrance, you must complete Schedule F with regard to that indebtedness.] Financial entities doing business with the City are: BB&T Bank, PNC Bank, and M&T Bank.

Yes  
 No (Go to Schedule G)

**If Yes; (Answer each question below. A separate Schedule F will be required for each debt to be disclosed.)**

1. To whom did you owe the debt? (Do not include consumer credit debts)

Truist Bank

2. When was the debt incurred? 5/23/2019

3. What are the interest rate and terms of payment of the debt?

Interest Rate 3.875%

Terms (monthly, bimonthly, annually, etc): Monthly

4. What was the amount of the debt as of the end of the reporting period. If debt existed during the reporting period but was paid in full at the end of the period, put \$0.

\$ 273,562.92

5. Did the principal of the debt increase \_\_\_\_\_ or decrease  during the reporting period, and by how much? \$ 12,014.80

6. Was any security given for the debt?

Yes  
 No

If Yes; Please state what type of security was given (home, car, boat, etc):

Home

7. If this is a transaction in which you were involved, but which resulted in a debt being owed by your spouse or dependent child, identify your spouse or child and describe the transaction. \_\_\_\_\_

**If necessary, please use additional sheet(s) for any additional entries.**

**Schedule G – Family Members Employed by the City/County/State**

During the reporting period, were any members of your immediate family (spouse or dependent children) employed by the City/County/State in any capacity?

- Yes  
 No (Go to Schedule H)

**If Yes; (Answer each question below. A separate Schedule G will be required for each member of the immediate family who is employed by the City/County/State.)**

1. What is the relation and name of the immediate family member employed by the City/County/State? \_\_\_\_\_
2. What is the name of the agency that employed the member of your immediate family?  
\_\_\_\_\_
3. What was the title of your immediate family member's position in the City/County/State agency during the reporting period? \_\_\_\_\_

**If necessary, please use additional sheet(s) for any additional entries.**



**Schedule H – Employment/Business Ownership**

During the reporting period, did you or any member of your immediate family, receive any earned income from an entity other than the City of Brunswick? Please note that your dependent child’s employment or business ownership does not need to be disclosed unless the place of employment or the business entity is subject to regulation or the authority of your agency or has contracts in excess of \$10,000 with your agency.

Yes  
 No (Go to Schedule I)

**If Yes; (Answer each question below. A separate Schedule H will be required for each member of the immediate family who had employment or ownership of a business entity.)**

1. If, during the reporting period, you or a member of your immediate family had employment from which you or they earned income, list the relation, name, and address of the employment.

Name: John P. Caves III

Relationship: Self

Name of Employer: Wisconsin Project on Nuclear Arms Control

Address: 1701 K St NW Suite 805

City/State/Zip: Washington, DC 20006

2. If, during the reporting period, you or a member of your immediate family wholly or partially owned any business entity from which income was earned, list the relation, name and address of the business entity.

Name: \_\_\_\_\_

Relationship: \_\_\_\_\_

Name of Business Entity: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

**If necessary, please use additional sheet(s) for any additional entries.**

**Schedule H – Employment/Business Ownership**

During the reporting period, did you or any member of your immediate family, receive any earned income from an entity other than the City of Brunswick? Please note that your dependent child’s employment or business ownership does not need to be disclosed unless the place of employment or the business entity is subject to regulation or the authority of your agency or has contracts in excess of \$10,000 with your agency.

Yes  
 No (Go to Schedule I)

**If Yes; (Answer each question below. A separate Schedule H will be required for each member of the immediate family who had employment or ownership of a business entity.)**

1. If, during the reporting period, you or a member of your immediate family had employment from which you or they earned income, list the relation, name, and address of the employment.

Name: Christina F. Caves

Relationship: Spouse

Name of Employer: U.S. Department of Defense

Address: 9800 Savage Road

City/State/Zip: Fort Meade, MD 20755

2. If, during the reporting period, you or a member of your immediate family wholly or partially owned any business entity from which income was earned, list the relation, name and address of the business entity.

Name: \_\_\_\_\_

Relationship: \_\_\_\_\_

Name of Business Entity: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

**If necessary, please use additional sheet(s) for any additional entries.**

## **Schedule I – Other**

Is there any additional information or interest you would like to disclose?

*No.*

### **STANDARDS OF CONDUCT**

The Maryland Public Ethics Law and City Ordinance include standards of conduct applicable to financial disclosure filers. The standards address disqualification from participation, prohibited secondary employment, prohibited ownership interests, misuse of position, prohibited solicitation and acceptance of gifts, misuse of confidential information, post-employment limitations, prohibited dealings with the State, and procurement specifications assistance restrictions. The Law provides for exceptions and exemptions under certain circumstances.

Filers wanting more detailed information about these requirements should contact the City Ethics Commission or the offices of the State Ethics Commission.

### **PRIVACY NOTICE**

The Public Ethics Law (State Government Article, Title 15), Annotated Code of Maryland) requires the collection of this information, which will be used primarily for public disclosure and to determine compliance with the Law. The information may be disclosed to any requesting person, including officials of State, local or federal government, who records their name and address, and this record will be provided to the filer upon request. The subject has the right to review, correct and amend the record as set forth in the Public Ethics Law, Md. Code Ann., State Gov't § 10-625 (Supp. 2004). Failure to file or to report information required by Public Ethics Law §15-607 can subject you to civil and administrative penalties including termination or other disciplinary action, suspension of pay, a late filing fee up to \$250, and a civil fine of up to \$5,000 per day. Willful and false filing is subject to criminal penalty for perjury pursuant to Criminal Law Article §9-101, Annotated Code of Maryland.