Print Form

NEW YORK STATE
JOINT COMMISSION ON PUBLIC ETHICS
540 BROADWAY
ALBANY, NEW YORK 12207

REPORT OF HONORARIA FOR AGENCY TO COMPLETE

AGENCY:

AGENCY ADDRESS:

SUBMITTED BY:

NAME/TITLE	DATE OF HONORARIA	SOURCE	NATURE OF ACTIVITY	DESCRIPTION	LOCATION OF ACTIVITY	AMOUNT

Note:

Please respond by email to:
jcope@jcope.ny.gov

*Service was performed on other than work time or was charged to accrued leave
*Agency resources were not used to prepare or deliver service
*The service was not part of the individual's official duties
*Above organizations do not do business with the Agency
*Agency did not reimburse travel expenses