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SENATE OF PA
SECRETARY'S OFFICE

COMMONWEALTH OF PENNSYLVANIA
OFFICE OF THE GOVERNOR
HARRISBURG

THE GOVERNOR

MEMBER OF THE MUNICIPAL POLICE OFFICERS' EDUCATION AND TRAINING COMMISSION

September 26, 2012

To the Honorable, the Senate
of the Commonwealth of Pennsylvania:

In conformity with law, I have the honor hereby to nominate for the advice and consent of the Senate, The Honorable Robert Fean, 117 Sawkill Avenue, Milford 18337, Pike County, Twentieth Senatorial District, for reappointment as a member of the Municipal Police Officers' Education and Training Commission, to serve for a term of three years and until his successor is appointed and qualified.

Tom Corbett

TOM CORBETT
Governor

COMMONWEALTH OF PENNSYLVANIA
SEC-1 REV. 01/12

STATEMENT OF FINANCIAL INTERESTS

PLEASE PRINT NEATLY

PENNSYLVANIA STATE ETHICS COMMISSION
(717) 783-1610 • TOLL FREE 1-800-932-0936

01 LAST NAME: FEAN | FIRST NAME: ROBERT | MI: B | SUFFIX:

02 ADDRESS: 117 SAWKILL AVE | City: MILFORD | State: PA | Zip Code: 18337 | Area Code: (570) | Phone: 296-6694

NOTE: IF YOU ARE INCLUDING ATTACHMENTS, DO NOT INCLUDE ANYTHING THAT BEARS YOUR SOCIAL SECURITY NUMBER OR FINANCIAL ACCOUNT NUMBERS.

03 STATUS Check applicable block or blocks, more than one block may be marked. (See instructions on page 2)

- A ☐ Candidate (including write-in)
- B ☒ Nominee
- C ☒ Public Official (Current)
- C ☐ Public Official (Former)
- D ☐ Public Employee (Current)
- D ☐ Public Employee (Former)
- E ☐ Check this block if you are filing as a solicitor
- ☐ Check this block if you are amending an original filing

04 PUBLIC POSITION OR PUBLIC OFFICE (administrator, member, Commissioner, job title, etc.) ☐ seeking ☒ hold ☐ held

A MILFORD BOROUGH MAYOR

☒ seeking ☒ hold ☐ held

B MPOETC MEMBER

05 GOVERNMENTAL ENTITY in which you are/were an Official, Employee, Candidate or Nominee (e.g., dept, agency, authority, borough, board, commission, county, school district, twp, etc.)

A MILFORD BOROUGH PIKE COUNTY PA

B MPOETC

06 OCCUPATION OR PROFESSION (This may be the same as block 4)

RETIRED

07 YEAR The information in blocks 8 through 15 below represents financial interests for the PRIOR calendar year indicated: 2011

08 REAL ESTATE INTERESTS (See instructions on page 2) If NONE, check this box. ☒

09 CREDITORS (See instructions on page 2). Creditor (Name and Address) If NONE, check this box. ☒

Name: Address: Interest Rate

10 DIRECT OR INDIRECT SOURCES OF INCOME including (but not limited to) all employment. (See instructions on pg. 2) ONLY IF NONE, check this block ☒ (OFFICIAL USE ONLY)

Name: Address:

11 GIFTS (See instructions on page 2) If NONE, check this box ☒

Source of Gift | Value of Gift

Address of Source of Gift | Circumstances (including description) of Gift

12 TRANSPORTATION, LODGING, HOSPITALITY (See instructions on page 2) If NONE, check this box. ☒

Source (Name and Address) | Value

13 OFFICE, DIRECTORSHIP OR EMPLOYMENT IN ANY BUSINESS (See instructions on page 2) If NONE, check this box. ☒

Business Entity (Name and Address) | Position Held

Name: Address:

14 FINANCIAL INTEREST IN ANY LEGAL ENTITY IN BUSINESS FOR PROFIT (See instructions on page 2) If NONE, check this box. ☒

Name and Address of Business | Interest Held

15 BUSINESS INTERESTS TRANSFERRED TO IMMEDIATE FAMILY MEMBER (See instructions on page 2) If NONE, check this box. ☒

Business (Name and Address) | Interest Held

Transferee (Name and Address) | Relationship | Date Transferred

The undersigned hereby affirms that the foregoing information is true and correct to the best of said person's knowledge, information and belief; said affirmation being made subject to the penalties prescribed by 18 Pa.C.S. §4904 (unsworn falsification to authorities) and the Public Official and Employee Ethics Act, 65 Pa.C.S. §1109(b).

Signature: Robert B. Fean | Enter Current Date: OCT 1, 2012

THIS FORM IS CONSIDERED DEFICIENT IF ANY BLOCK ABOVE IS NOT COMPLETED. MAKE A COPY FOR YOUR RECORDS.

2012 OCT -3 P 4:38 STATE ETHICS COMMISSION
SENATE OF PA SECRETARY'S OFFICE
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