

2014 MAY -7 AM 9: 04



HARRISBURG

SENATE OF PA SECRETARY'S OFFICE

THE GOVERNOR

MEMBER OF THE COUNCIL OF TRUSTEES OF LOCK HAVEN UNIVERSITY OF PENNSYLVANIA OF THE STATE SYSTEM OF HIGHER EDUCATION

May 7, 2014

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, Margery B. Krevsky, 4790 West Maple Road, Bloomsfield Hills, MI, 48301, for reappointment as a member of the Council of Trustees of Lock Haven University of Pennsylvania of the State System of Higher Education, to serve for a term of six years and until her successor is appointed and qualified.

TOM CORBETT Governor

Tom Corbett

COMMONWEALTH OF PENNSYLVANIA

STATEMENT OF FINANCIAL INTERESTS

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

,	PLEASE PRINT NEATLY
01	LAST NAME FIRST NAME MI SUFFIX
•	Krevsky Margery BMS
02	ADDRESS (Work or home) 4790 W Maple Rad Bloomfield HILS MI 48801 848, 626-547
N	OTE: 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)
<u> </u>	A Candidate (including write-in) C Public Official (Current) D Public Employee (Current) E Check this block if you are amending as a solicitor block if you are amending an original filing
04	PUBLIC POSITION OR PUBLIC OFFICE (administrator, member, Commissioner, job title, etc.
Α	Council Member III
	seeking hold held
В	Trustee
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.)
Α	Councillof trustees !!!!
B	LOCK Haven University
06	OCCUPATION OR PROFESSION (This may be the same as block 4) 07 YEAR The information in blocks 8 through 15 below represents financial interests for
7	Bosinoss Owner the PRIOR Calendar year indicated: 2013
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.
00	Name HINTINGTON BONK Address: 791 W Big BONK ADDRESS:
	TVOV. MT 48084 55 = 2,5%
10	DIRECT OR INDIRECT SOURCES OF INCOME including (but not limited to) all employment. (See instructions on pg. 2) ONLY IF NONE, (OFFICIAL USE ONLY) check this block of
	Name: Productions Plus - Address 706 00 Telegraph Retails
	The Talout Shan Bingloom Farms MI 40056
11	GIFTS (See instructions on page 2) If NONE, check this box. Source of Gift Value of Gift
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l	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)
13	OFFICE, DIRECTORSHIP OR EMPLOYMENT IN ANY BUSINESS (See instructions on page 2) If NONE, check this box.
	Name: ProductionSP118 - In 19 19 My Address 30 600 1-2 (graph) Pd Fay high
14	FINANCIAL INTEREST IN ANY LEGAL ENTITY IN BUSINESS FOR PROFIT (See instructions on page 2) If NONE, check this box.
<u></u>	Luctions Plus-The Talend Shap 80 600 Telegraph Ad, Fains, Mi 1009
15	BUSINESS INTERESTS TRANSFERRED TO IMMEDIATE FAMILY MEMBER (See instructions on page 2) If NONE, check this box. Interest Held Relationship
The	Transferee (Name and Address) Date Transferred a 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 th	he 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 Marky Krellsky Enter Current Date 5/19//4
	THIS FORM IS CONSIDERED DEFICIENT IF ANY BLOCK ABOVE IS NOT COMPLETED. MAKE A COPY FOR YOUR RECORDS.