

STATE OF OREGON



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GOVT STANDARDS
& PRACTICES COMM

2007

ANNUAL VERIFIED STATEMENT OF ECONOMIC INTEREST

[INFORMATION FOR THE CALENDAR YEAR 2006]

INSTRUCTIONS: Please read carefully!!

1. Pursuant to ORS 244.050, you **MUST** file this statement with the Oregon Government Standards and Practices Commission (GSPC) if you will hold office on April 15, 2007. This applies even if you did not hold office during the calendar year 2006.
2. The information you report must reflect the economic interests you held at **any time during the calendar year January 1, 2006 through December 31, 2006.**
3. You may use and attach additional sheets if necessary to provide complete information.
4. Do not leave any spaces blank. Please indicate "N/A" if the requested information does not apply to you.
5. Please provide your daytime telephone number in the space provided on page 6.
6. Please sign and date this statement at the bottom of page 6.
7. **PLEASE MAKE A COPY OF THE COMPLETED FORM AND RETAIN IT FOR YOUR OWN RECORDS.** Although there is no requirement that you do so, you may want to consider returning your completed Statement of Economic Interest to the GSPC by certified mail. Items sometimes become lost in the mail and certified mail receipts will assure that you will not be penalized if your statement is not received by the GSPC.
8. Please return this form to the Oregon Government Standards and Practices Commission as soon as possible. **It must be postmarked no later than Monday, April 16, 2007.** Please contact the GSPC at 503-378-5105 if you have questions.

NOTE: Failure to complete and file this form by the final date for filing may subject you to an automatic civil penalty of \$5.00 for each day this statement is not filed up to a maximum of \$1,000. [ORS 244.050(7)(c)].

DIANE RINKS
LAFAYETTE CITY ADMINISTRATOR
2416 SW REDMOND HILL RD
MCMINNVILLE OR 97128-8475

DEFINITIONS

Please use the following definitions to assist you when completing the form:

1. **"Business"** means any corporation, partnership, proprietorship, firm, enterprise, franchise, association, organization, self-employed individual and any other legal entity operated for economic gain. This does not include income-producing not-for-profit corporations that are tax-exempt under section 501(c) of the Internal Revenue Code with which a public official is associated in a non-compensated capacity.
2. **"Honoraria"** means a payment or something of economic value given to a public official in exchange for services, upon which custom or propriety prevents the setting of a price. Services include, but are not limited to, speeches or other services connected with an event where the public official appears in an official capacity.
3. **"Income"** means income of any nature derived from any source, including but not limited to any salary, wage, advance, payment, dividend, interest, rent, honoraria, return of capital, forgiveness of indebtedness, income from government sources (i.e., social security, your public salary, etc.), retirement income, real estate transactions, inheritance income, or anything of economic value received as income.
4. **"Legislative or Administrative Interest"** means an economic interest, distinct from that of the general public, in one or more bills, resolutions, regulations, proposals or other matters subject to the action or vote of the public official.
5. **"Person"** means an individual, corporation, partnership, joint venture, and any other similar organization or association.
6. **"Relative"** means the spouse of the public official, any children of the public official or of the public official's spouse, and brothers, sisters or parents of the public official or of the public official's spouse.
7. **"Member of Household"** means any relative who resides with the public official.

1. **BUSINESS OFFICE OR DIRECTORSHIP; ASSUMED BUSINESS NAME**

A. If you or a member of your household was an officer or director of a business (see definition of "business" above) during 2006, please indicate the following:

<u>Title of Office/Directorship</u>	<u>Name of Business</u>	<u>Business Address</u>	<u>Description of Business</u>
1. <u>N/A</u>			
2. _____			

Name RINKS DIANE
Last First

B. If you or a member of your household did business (see definition of "business" on p. 2) under an assumed business name during 2006, show the following information:

Name of Business Business Address Description of Business

1. N/A
2. _____

2. **HONORARIA:** If you received honoraria (see definition of "honoraria" on p. 2) of more than \$50 during 2006, please list all such honoraria:

Received from Address Description of Appearance or Service

1. N/A
2. _____

3. **SOURCES OF INCOME:** (Be specific as to identity and description of each source.)

(See definition of "income" on p. 2)

A. Identify the income source(s) that produced from 10% to 49% of the combined total gross household income received by you or a member of your household during the 2006 calendar year.

Name of Source Address of Source Description of Source Household Member Who Received

1. N/A
2. _____

B. Identify the income source(s) that produced 50% or more of the combined total gross household income received by you or a member of your household during 2006.

Name of Source Address of Source Description of Source Household Member Who Received

1. CITY OF LAFAYETTE P.O. BOX 55 LAFAYETTE OR 97127 WAGES DIANE RINKS
2. _____

Name RINKS DIANE
Last First

C. Does an income source listed above do business, or could it reasonably be expected to do business, with the public body you serve or over which you have authority?
Yes _____ No X

D. Does an income source listed above have a legislative or administrative interest (see definitions, p. 2) in the public body you serve or over which you have authority?
Yes _____ No X

4. **REAL PROPERTY:** List all real property (residential, commercial, vacant land, etc.) in which, during **2006**, you or a member of your household had any ownership interest, any option to purchase or sell or any other right of any kind in real property, including a land sales contract, **located within the geographical boundaries of the public entity you serve.** (Describe in general terms, i.e., size, location, boundary and use designation.) You are not required to list your principal residence. [Boundaries for filers from state agencies, boards, commissions or institutions would be the state borders.]

<u>Description</u>	<u>Address</u>
1. <u>N/A</u>	
2.	

5. **SHARED BUSINESS WITH LOBBYIST:** If you or a member of your household shared a partnership, joint venture, or similar substantial economic relationship with a paid lobbyist during **2006** or were employed by or employed a paid lobbyist during **2006**, list: (NOTE: Owning stock in a publicly traded company in which the lobbyist also owns stock is not a relationship that requires disclosure.)

<u>Name of Lobbyist</u>	<u>Name of Business</u>	<u>Type of Business</u>
1. <u>N/A</u>		
2.		

6. **VALUE OF OFFICE RELATED EVENT:** If during **2006**, you participated in any event bearing a relationship to your office and you appeared in your official capacity and the aggregate value of food, lodging and travel provided to you exceeded \$152, list the event: (NOTE: **Do not list if the expenses were reimbursed by your public employer.**)

<u>Name of Event</u>	<u>Date of Event</u>	<u>Name and Address of Organization That Paid Expenses</u>	<u>Amount/Value of Expenses</u>
1. <u>N/A</u>			
2.			

PLEASE NOTE – Do NOT answer items 7, 8, 9 and 10 if the information requested does not involve:

A. An individual or business that did business with, or reasonably could be expected to do business with the public body you serve or over which you have authority; or

B. An individual or business with a legislative or administrative interest (see definitions, p. 2) in the public body you serve or over which you have authority.

(Please refer to the note above)

7. **INCOME OF MORE THAN \$1,000:** List each source of income over \$1,000, other than a source listed under question 3 on this form, that you or a member of your household received during 2006.

<u>Income Source</u>	<u>Address</u>	<u>Description</u>
1. _____	_____	_____
2. _____	_____	_____

(Please refer to note above)

8. **DEBT OF \$1,000 OR MORE:** If you or a member of your household owed to a person (see definition of "person" on p. 2) during 2006 a debt of \$1,000 or more, list: **(NOTE: do not list loans from state or federally regulated financial institutions (banks, etc.) or retail credit accounts and do not list the amounts owed.)**

<u>Name of Creditor</u>	<u>Date of Loan</u>	<u>Interest Rate of Loan</u>
1. _____	_____	_____
2. _____	_____	_____

(Please refer to note above)

9. **BUSINESS INVESTMENT OF MORE THAN \$1,000:** If you or a member of your household had a personal, beneficial interest or investment in a business (see definition of "business" on p. 2) during 2006 of more than \$1,000, list: **(NOTE: DO NOT list the amount of the investment. DO NOT list individual items in a mutual fund or blind trust, or a time or demand deposit in a financial institution, shares in a credit union, or the cash surrender value of life insurance.)**

<u>Business Name</u>	<u>Address</u>	<u>Brief Description of Business</u>
1. _____	_____	_____
2. _____	_____	_____

Name RINKS DIANE
Last First

(Please refer to note at top of page 5)

10. **SERVICE FEE OF MORE THAN \$1,000:** List each person (see definitions, p. 2) for whom you performed a service for a fee of more than \$1,000 in 2006. (NOTE: DO NOT list fees if you are prohibited from doing so by law or professional ethics including professional ethics for attorneys, physicians, psychologists, certified public accountants, etc.)

<u>Name</u>	<u>Name</u>
1. <u>N/A</u>	4. _____
2. _____	5. _____
3. _____	6. _____

11. **VERIFICATION** Under penalties for false swearing/false affirmation, I declare that the information submitted in this document is, to the best of my knowledge and belief, true, accurate and complete.

Diane J. Rinks
(Signature)
503-864-2451
(Daytime Telephone Number)

4/1/07
(Date)

Return to:

Telephone: 503-378-5105

Government Standards and Practices Commission
885 Summer St. NE, 2nd Floor
Salem, OR 97301-2522