

**From:** [noreply@civicplus.com](mailto:noreply@civicplus.com)  
**To:** [HR](#)  
**Subject:** Online Form Submittal: PERSONAL DISCLOSURE STATEMENT FOR PUBLIC OFFICIALS  
**Date:** Tuesday, March 15, 2022 6:45:50 PM

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## PERSONAL DISCLOSURE STATEMENT FOR PUBLIC OFFICIALS

### Personal Disclosure Statement for Public Officials

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In accordance with the Charter Township of Clinton Ethics Policy, Public Officials must complete this form in full and file it with the Human Resources Department within 30 days of taking office.

Questions should be directed to the Human Resources Department, 40700 Romeo Plank Rd., Clinton Township, MI 48038, Telephone 586-286-9341.

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**FORM MUST BE FILED WITH THE HUMAN RESOURCES DEPARTMENT  
WITHIN 30 DAYS OF TAKING OFFICE**

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Date of Statement	1/7/2022
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#### GENERAL INFORMATION

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First Name	Tammy
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Last Name	Patton
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Street Address	39150 Aynesley ST
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City	Clinton Township
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State	MI
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Zip	48038
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Township Position	Trustee
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**Step 2**

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PART A - CURRENT EMPLOYER(S) - SOURCES OF EARNED INCOME

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List the name and address of each full and part-time employer(s) with which the filer currently holds a position. Include all public and private sector employment other than your employment with Clinton Township. For the purpose of this section, an employer is one who provides you with a W-2 or 1099NEC.

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Employer Name	N/A
Title/Position	<i>Field not completed.</i>
Employer Address	<i>Field not completed.</i>
Employer Name	<i>Field not completed.</i>
Title/Position	<i>Field not completed.</i>
Employer Address	<i>Field not completed.</i>
Employer Name	<i>Field not completed.</i>
Title/Position	<i>Field not completed.</i>
Employer Address	<i>Field not completed.</i>

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**Step 3**

PART B - CORPORATE & NON-PROFIT POSITIONS

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List the name and address of any entity on which the filer serves as an officer, director, member, or partner, and receives compensation.

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Organization's Name	Team Patton Outreach
Title/Position	Director
Address	39150 Aynesley ST.
Organization's Name	<i>Field not completed.</i>
Title/Position	<i>Field not completed.</i>
Address	<i>Field not completed.</i>
Organization's Name	<i>Field not completed.</i>

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Title/Position *Field not completed.*

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Address *Field not completed.*

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Organization's Name *Field not completed.*

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Title/Position *Field not completed.*

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Address *Field not completed.*

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Organization's Name *Field not completed.*

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Title/Position *Field not completed.*

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Address *Field not completed.*

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**Step 4**

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**PART C - OTHER INCOME SOURCES**

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List the name and a general description of each source of income generated by the filer. The Internal Revenue Service definition of "income" for the filing of Federal tax returns is the definition of "income under this Policy. General description can include: stocks, mutual funds, bank accounts, etc.

Name of Issuing Company *Field not completed.*

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Description *Field not completed.*

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Name of Issuing Company *Field not completed.*

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Description *Field not completed.*

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Name of Issuing Company *Field not completed.*

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Description *Field not completed.*

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Name of Issuing Company *Field not completed.*

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Description *Field not completed.*

---

Name of Issuing Company *Field not completed.*

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Description *Field not completed.*

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**Step 5**

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**PART D - DIRECT OWNERSHIP INTERESTS IN BUSINESS ENTITY**

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List each business in which the filer holds a direct ownership interest worth at least 5% or \$50,000.

Name of Business Pumpkin Creations

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Address 39150 Aynesley St

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Name of Business *Field not completed.*

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Address *Field not completed.*

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Name of Business *Field not completed.*

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Address *Field not completed.*

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Name of Business *Field not completed.*

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Address *Field not completed.*

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Name of Business *Field not completed.*

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Address *Field not completed.*

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**Step 6**

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**PART E - PROPERTY OWNERSHIP**

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List all real property owned by the filer located within Clinton Township and/or contiguous to the Township.

Address *Field not completed.*

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Address *Field not completed.*

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Address *Field not completed.*

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Address *Field not completed.*

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Address *Field not completed.*

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Address *Field not completed.*

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Address *Field not completed.*

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Address *Field not completed.*

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**Step 7**

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## ATTESTATION

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I hereby acknowledge that the information contained herein is to the best of my knowledge true, correct and complete. I further certify that I have not and will not transfer any asset or interest for the purpose of concealing it from disclosure while retaining an equitable interest therein.

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Electronic Signature Agreement I agree.

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Electronic Signature Tammy T. Patton

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Date: 1/7/2022

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