## APPOINTEE EXEMPTION DISCLOSURE FORM

PART 1:			
NAME: Tammy Fraley			
BOARD/COMMISSION NAME: Maryland Consortium on Coordinated Community Supports			
PART 2:			
EXEMPTION REQUESTED: No (If no, skip to Part 3, Signature)			
✓ Yes (If yes, complete rest of Part 2 and Part 3)			
I request an exemption for (check one or both): $\Box$ Financial Interest $\overline{igspace}$ Employment			
Financial Interest		Employment	
Name of Entity (where a financial interest exists):		Employment to be Exempted (include employer name): Allegany County Board of Education	
Interest to be Exempted:		Your Position/Job Title: Elected Board Member	
Current Value:			
Under \$1,000			
Additional Financial Interest (if any):		Additional Employment to be Exel Salvation Army of Cumberland, LaVale Athletic Associa Maryland Association of Boards of Education	mpted (if any):  tion,
Interest to be Exempted:		Your Position/Job Title:	
		Volunteer board member	
Current Value: Under \$1,000 \$5,000-\$10,000	\$1,000-\$5,000  \$10,000 or More		
absence of an exemption, wil	l conflict with your servi an additional page if ne	s) or employment situation(s) identice on the board or commission for cessary. You may wish to contact to 70.	which appointment
Potential for organizations to	o submit grant application	ons.	
PART 3:			
Appointee: Tammy Fraley	Signature: Jama	ny Haley	Date: 08/19/2022

Mail the completed form to the Appointing Authority. For appointments made by the Governor:

Governor's Appointments Office

**State House** 

Annapolis, MD 21401

\*\*\*NOTE: The Ethics Law requires the Commission, beginning with disclosures made on or after January 1, 2019, to post this information on the Internet.