

RECEIVED OCT 17 2010

**ACT 44 DISCLOSURE FORM FOR ENTITIES PROVIDING
PROFESSIONAL SERVICES TO THE
BOROUGH OF IRWIN'S PENSION SYSTEM**

CHAPTER 7-A OF ACT 44 OF 2009 MANDATES the annual disclosure of certain information by every entity (hereinafter "**Contractor**") which is a party to a professional services contract with one of the pension funds of the Borough of Irwin (hereinafter the "**Requesting Municipality**"). Act 44 disclosure requirements apply to **Contractors** who provide professional pension services and receive payment of any kind from the **Requesting Municipality's** pension fund. The **Requesting Municipality** has determined that your company falls under the requirements of Act 44 and must complete this disclosure form. You are expected to submit this completed form, to the Requesting Municipality below, by November 5th, 2010. If, for any reason you believe that Act 44 does not require you to complete this disclosure form, please provide a written explanation of your reason(s) by October 29th, 2010.

**RETURN COMPLETED
DISCLOSURE TO:**

Borough of Irwin
Attn: Mary Benko, Borough Manager
424 Main St.
Irwin, PA 15642
Phone Number: (724)864-3100
E-Mail Address: irwin.manager@verizon.net

REQUIRED UPDATES:

Where noted, information in this form must be updated in writing as changes occur.

DEFINITIONS FOR DISCLOSURE

TERM	DEFINITION
CONTRACTOR	Any person, company, or other entity that receives payments, fees, or any other form of compensation from a municipal pension fund in exchange for rendering professional services for the benefit of the municipal pension fund.
SUBCONTRACTOR OR ADVISOR	Anyone who is paid a fee or receives compensation from a municipal pension system – directly or indirectly from or through a contractor.
AFFILIATED ENTITY	Any of the following: <ol style="list-style-type: none"> 1. A subsidiary or holding company of a lobbying firm or other business entity owned in whole or in part by a lobbying firm. 2. An organization recognized by the Internal Revenue Service as a tax-exempt organization under section 501(c) of the Internal Revenue Code of 1986 (Public Law 99-514, 26 U.S.C. § 501 (c)) established by a lobbyist or lobbying firm or an affiliated entity.
CONTRIBUTIONS	As defined in section 1621 of the act of June 3 rd , 1937 (P.L. 1333, No. 320), known as the Pennsylvania Election Code
POLITICAL COMMITTEE	As defined in section 1621 of the act of June 3 rd , 1937 (P.L. 1333, No. 320), known as the Pennsylvania Election Code
EXECUTIVE LEVEL EMPLOYEE	Any employee or person or the person's affiliated entity who: <ol style="list-style-type: none"> 1. Can affect or influence the outcome of the person's or affiliated entity's actions, policies, or decisions relating to pensions and the conduct of business with a municipality or a municipal pension system; or 2. Is directly involved in the implementation or development policies relating to pensions, investments, contracts or procurement or the conduct of business with a municipality or municipal pension system.
MUNICIPAL PENSION SYSTEM	Any qualifying pension plan, under Pennsylvania state law, for any municipality within the Commonwealth of Pennsylvania; includes the Pennsylvania Municipal Retirement System. <i>Example: the Police Pension Plan for the Borough of Winchesterville</i>
MUNICIPAL PENSION SYSTEM OFFICIALS AND EMPLOYEES; MUNICIPAL OFFICIALS AND EMPLOYEES	Specifically , those listed in TABLE 2 titled: <i>"List of Pension System and Municipal Officials and Employees"</i> on the next page. Where applicable, includes any employee of the Requesting Municipality .
PROFESSIONAL SERVICES CONTRACT	A contract to which the municipal pension system is a party that is: (1) for the purchase of professional services including investment services, legal services, real estate services, and other consulting services; and, (2) not subject to a requirement that the lowest bid be accepted.

List of Municipal Officials for the Requesting Municipality

Certain requests for information in this form will refer to a “**List of Municipal Officials.**”

To assist you in preparing your answers, you should consider the following names to be a complete list of pension system and municipal officials and employees. Throughout this Disclosure Form, the below names will be referred to as the “*List of Municipal Officials.*”

Elected Officials

Daniel T. Rose - Mayor
Debbie Kelly - Borough Council President
Danyce Neal - Borough Council Vice-President
Phyllis Thiem – Council Member
Gail Macioce – Council Member
Peggie Watson – Council Member
John Cassandro – Council Member
John Fonzo – Council Member

Appointed Officials or Employees

Alan Berk – Solicitor
Todd Turin – Solicitor
Mary Benko - Borough Manager

IDENTIFICATION OF CONTRACTORS & RELATED PERSONNEL

CONTRACTORS: (See "Definitions" – page 2) Any entity who currently provides service(s) by means of a Professional Services Contract to the Municipal Pension System of the **Requesting Municipality**, please complete all of the following:

Identify the Municipal Pension System(s) for which you are providing information:

Indicate all that apply with an "X":

Non-Uniform Plan

Police Plan

Fire Plan

****NOTE:** For all that follow, you may answer the questions / items on a separate sheet of paper and attach it to this Disclosure if the space provided is not sufficient. Please reference each question / item you are responding to by the appropriate number. (example: REF – Item #1.)

1. Please provide the names and titles of all individuals providing professional services to the **Requesting Municipality's** pension plan(s) identified above. Also include the names and titles of any advisors and subcontractors of the Contractor, identifying them as such. After each name provide a description of the responsibilities of that person with regard to the professional services being provided to each designated pension plan.

William C. Asay, CEBS – President & CEO – Consultant
 David Stimpson, E.A., M.A.A.A. – Vice President of Actuarial Services
 Zachary Kirkpatrick – Actuarial Analyst

2. Please list the name and title of any *Affiliated Entity* and their *Executive-Level Employee(s)* that require disclosure; after each name, include a brief description of their duties. (See: Definitions)

N/A

3. Are any of the individuals named in **Item 1** or **Item 2** above, a current or former official or employee of the **Requesting Municipality**? **NO**
 ➔ IF "YES", provide the name and titles of the person employed, their position with the municipality, and dates of employment.

4. Are any of the individuals named in **Item 1** or **Item 2** above a current or former registered Federal or State lobbyist? **NO**
 ➔ IF "YES", provide the name of the individual, specify whether they are a state or federal lobbyist, and the date of their most recent registration /renewal.

NOTICE: All information provided for items 1- 4 above must be updated as changes occur.

5. Since December 17th 2009, has the *Contractor* or an *Affiliated Entity* paid compensation to or employed any third party intermediary, agent, or lobbyist that is to directly or indirectly communicate with an official or employee of the *Municipal Pension System* of the *Requesting Municipality* (OR), any municipal official or employee of the *Requesting Municipality* in connection with any transaction or investment involving the *Contractor* and the *Municipal Pension System* of the *Requesting Municipality*? **NO**

This question does not apply to an officer or employee of the *Contractor* who is acting within the scope of the firm's standard professional duties on behalf of the firm, including the actual provision of legal, accounting, engineering, real estate, or other professional advice, services, or assistance pursuant to the professional services contact with municipality's pension system.

- ➔ **IF "YES"**, identify: (1) whom (the third party intermediary, agent, or lobbyist) was paid the compensation or employed by the *Contractor* or *Affiliated Entity*, (2) their specific duties to directly or indirectly communicate with an official or employee of the *Municipal Pension System* of the *Requesting Municipality* (OR), any municipal official or employee of the *Requesting Municipality*, (3) the official they communicated with, and (4) the dates of this service.

6. Since December 17th 2009, has the *Contractor*, or any agent, officer, director or employee of the *Contractor* solicited a contribution to any municipal officer or candidate for municipal office in the *Requesting Municipality*, or to the political party or political action committee of that official or candidate? **NO**

- ➔ **IF "YES"**, identify the agent, officer, director or employee who made the solicitation and the municipal officials, candidates, political party or political committee who were solicited (to whom the solicitation was made).

7. Since December 17th, 2009: Has the *Contractor* or an *Affiliated Entity* made any contributions to a municipal official or any candidate for municipal office in the *Requesting Municipality*? **NO**

- ➔ **IF "YES"**, provide the name and address of the person(s) making the contribution, the contributor's relationship to the *Contractor*, The name and office or position of the person receiving the contribution , the date of the contribution, and the amount of the contribution.

8. Does the *Contractor* or an *Affiliated Entity* have any direct financial, commercial or business relationship with any official identified on the *List of Municipal Officials*, of the *Requesting Municipality*? **NO**

- ➔ **IF "YES"**, identify the individual with whom the relationship exists and give a detailed description of that relationship.

****NOTE:** A written letter is required from the *Requesting Municipality* acknowledging the relationship and consenting to its existence. The letter must be attached to this disclosure. Contact the *Requesting Municipality* to obtain this letter and attach it to this disclosure before submission.

9. Has the *Contractor* or an *Affiliated Entity* given any gifts having more than a nominal value to any official, employee or fiduciary – specifically, those on the *List of Municipal Officials* of the Requesting Municipality? NO

➔ IF “YES”, Provide the name of the person conferring the gift, the person receiving the gift, the office or position of the person receiving the gift, specify what the gift was, and the date conferred.

10. Disclosure of contributions to any political entity in the Commonwealth of Pennsylvania

Applicability: A “yes” response is required and full disclosure is required ONLY WHEN ALL of the following applies: NONE

- a) The contribution was made within the last 5 years (specifically since: December 18th 2004)
- b) The contribution was made by an officer, director, executive-level employee or owner of at least 5% of the *Contractor* or *Affiliated Entity*.
- c) The amount of the contribution was at least \$500 and in the form of:
 1. A single contribution by a person in (b.) above, OR
 2. The aggregate of all contributions all persons in (b.) above;
- d) The contribution was for
 1. Any candidate for any public office or any person who holds an office in the Commonwealth of Pennsylvania;
 2. The political committee of a candidate for public office or any person that holds an office in the Commonwealth of Pennsylvania.

➔ IF “YES”, provide the name and address of the person(s) making the contribution, the contributor’s relationship to the *Contractor*, The name and office or position of the person receiving the contribution (or the political entity / party receiving the contribution), the date of the contribution, and the amount of the contribution.

11. With respect to your provision of professional services to the Municipal Pension System of the Requesting Municipality:

Are you aware of any apparent, potential or actual conflicts of interest with respect to any officer, director or employee of the *Contractor* and officials or employees of the Requesting Municipality? NO

NOTE: If, in the future, you become aware of any apparent, potential, or actual conflict of interest, you are expected to update this Disclosure Form immediately in writing by:

- Providing a brief synopsis of the conflict of interest (and);
- An explanation of the steps taken to address this apparent, potential, or actual conflict of interest.

➔ IF “YES”, Provide a detailed explanation of the circumstances which provide you with a basis to conclude that an apparent, potential, or actual conflict of interest may exist.

12. To the extent that you believe that Chapter 7-A of Act 44 of 2009 requires you to disclose any additional information beyond what has been requested above, please provide that information below or on a separate piece of paper.

None

Please provide the name(s) and position(s) of the person(s) participating in the completion of this Disclosure. One of the individuals identified by the Contractor in Item #1 above must participate in completing this Disclosure and must sign the below verification attesting to the participation of those individuals named below.

Name: William C. Asay, CEBS Name:

Position: President & CEO Position:

Name: Name:

Position: Position:

Name: Name:

Position: Position:


SIGNATURE

President & CEO
TITLE


10/18/2010
DATE

VERIFICATION

I, William C. Asay, hereby state that I am President & CEO for
(Name) (Position)
Mockenhaupt Benefits Group and I am authorized to make this verification.
(Contractor)

I hereby verify that the facts set forth in the foregoing Act 44 Disclosure Form for Entities Providing Professional Services to the Borough of Irwin Pension System are true and correct to the best of my knowledge, information and belief. I also understand that knowingly making material misstatements or omissions in this form could subject the responding Contractor to the penalties in Section 705-A(e) of Act 44.

I understand that false statements herein are made subject to the penalties of 18 P.A.C.S. § 4904 relating to unsworn falsification to authorities.

 Signature
10/18/2010 Date

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Indicate all that apply with an "X": Non- Uniform Plan Police Plan
 Fire Plan

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See attached

- 2. Please list the name and title of any *Affiliated Entity* and their *Executive-level Employee(s)* that require disclosure; after each name, include a brief description of their duties. (See: Definitions)

No

- 3. Are any of the individuals named in **Item 1** or **Item 2** above, a current or former official or employee of the **Requesting Municipality**?
➔ IF "YES", provide the name and titles of the person employed, their position with the municipality, and dates of employment.

No

- 4. Are any of the individuals named in **Item 1** or **Item 2** above a current or former registered Federal or State lobbyist?
➔ IF "YES", provide the name of the individual, specify whether they are a state or federal lobbyist, and the date of their most recent registration /renewal.

Yes, see attached

NOTICE: All information provided for items 1- 4 above must be updated as changes occur.

5. Since December 17th 2009, has the *Contractor* or an *Affiliated Entity* paid compensation to or employed any third party intermediary, agent, or lobbyist that is to directly or indirectly communicate with an official or employee of the *Municipal Pension System* of the **Requesting Municipality** (OR), any municipal official or employee of the **Requesting Municipality** in connection with any transaction or investment involving the *Contractor* and the *Municipal Pension System* of the **Requesting Municipality**?

This question does not apply to an officer or employee of the *Contractor* who is acting within the scope of the firm's standard professional duties on behalf of the firm, including the actual provision of legal, accounting, engineering, real estate, or other professional advice, services, or assistance pursuant to the professional services contact with municipality's pension system.

- ➔ IF "YES", identify: (1) whom (the third party intermediary, agent, or lobbyist) was paid the compensation or employed by the *Contractor* or *Affiliated Entity*, (2) their specific duties to directly or indirectly communicate with an official or employee of the *Municipal Pension System* of the **Requesting Municipality** (OR), any municipal official or employee of the **Requesting Municipality**, (3) the official they communicated with, and (4) the dates of this service.

No

6. Since December 17th 2009, has the *Contractor*, or any agent, officer, director or employee of the *Contractor* solicited a contribution to any municipal officer or candidate for municipal office in the **Requesting Municipality**, or to the political party or political action committee of that official or candidate?

- ➔ IF "YES", identify the agent, officer, director or employee who made the solicitation and the municipal officials, candidates, political party or political committee who were solicited (to whom the solicitation was made).

No

7. Since December 17th, 2009: Has the *Contractor* or an *Affiliated Entity* made any contributions to a municipal official or any candidate for municipal office in the **Requesting Municipality**?

- ➔ IF "YES", provide the name and address of the person(s) making the contribution, the contributor's relationship to the Contractor, The name and office or position of the person receiving the contribution, the date of the contribution, and the amount of the contribution.

No

8. Does the *Contractor* or an *Affiliated Entity* have any direct financial, commercial or business relationship with any official identified on the *List of Municipal Officials*, of the **Requesting Municipality**?

- ➔ IF "YES", identify the individual with whom the relationship exists and give a detailed description of that relationship.

****NOTE:** A written letter is required from the **Requesting Municipality** acknowledging the relationship and consenting to its existence. The letter must be attached to this disclosure. Contact the **Requesting Municipality** to obtain this letter and attach it to this disclosure before submission.

No

9. Has the **Contractor** or an **Affiliated Entity** given any gifts having more than a nominal value to any official, employee or fiduciary – specifically, those on the **List of Municipal Officials** of the **Requesting Municipality**?

➔ **IF "YES"**, Provide the name of the person conferring the gift, the person receiving the gift, the office or position of the person receiving the gift, specify what the gift was, and the date conferred.

No

10. Disclosure of contributions to any political entity in the Commonwealth of Pennsylvania

Applicability: A "yes" response is required and full disclosure is required ONLY WHEN ALL of the following applies:

- a) The contribution was made within the last 5 years (specifically since: December 18th 2004)
- b) The contribution was made by an officer, director, executive-level employee or owner of at least 5% of the **Contractor** or **Affiliated Entity**.
- c) The amount of the contribution was at least \$500 and in the form of:
 1. A single contribution by a person in (b.) above, OR
 2. The aggregate of all contributions all persons in (b.) above;
- d) The contribution was for
 1. Any candidate for any public office or any person who holds an office in the Commonwealth of Pennsylvania;
 2. The political committee of a candidate for public office or any person that holds an office in the Commonwealth of Pennsylvania.

➔ **IF "YES"**, provide the name and address of the person(s) making the contribution, the contributor's relationship to the **Contractor**, The name and office or position of the person receiving the contribution (or the political entity / party receiving the contribution), the date of the contribution, and the amount of the contribution.

Yes, see attached

11. With respect to your provision of professional services to the Municipal Pension System of the **Requesting Municipality**:

Are you aware of any apparent, potential or actual conflicts of interest with respect to any officer, director or employee of the **Contractor** and officials or employees of the **Requesting Municipality**?

NOTE: If, in the future, you become aware of any apparent, potential, or actual conflict of interest, you are expected to update this **Disclosure Form** immediately in writing by:

- Providing a brief synopsis of the conflict of interest (and);
- An explanation of the steps taken to address this apparent, potential, or actual conflict of interest.

➔ **IF "YES"**, Provide a detailed explanation of the circumstances which provide you with a basis to conclude that an apparent, potential, or actual conflict of interest may exist.

No

12. To the extent that you believe that **Chapter 7-A of Act 44 of 2009** requires you to disclose any additional information beyond what has been requested above, please provide that information below or on a separate piece of paper.

None Noted

Please provide the name(s) and position(s) of the person(s) participating in the completion of this Disclosure. **One of the individuals** identified by the *Contractor* in *Item #1* above must participate in completing this Disclosure and must sign the below verification attesting to the participation of those individuals named below.

Name:

Chris Cap, MRT-COO

Position:

Name:

Tom Klamm - Secretary/Treasurer.

Position:

Name:

Joe Scott - Pension Outreach Coord.

Position:

Name:

Position:

Name:

Name:

Position:

Position:

Chris Cap
SIGNATURE

MRT-COO
TITLE

11-16-2010
DATE

VERIFICATION

I, Chris Cope, hereby state that I am MRT-COO for
 (Name) (Position)
PSAB-MRT and I am authorized to make this verification.
 (Contractor)

I hereby verify that the facts set forth in the foregoing Act 44 Disclosure Form for Entities Providing Professional Services to the Borough of Irwin Pension System are true and correct to the best of my knowledge, information and belief. I also understand that knowingly making material misstatements or omissions in this form could subject the responding Contractor to the penalties in Section 705-A(e) of Act 44.

I understand that false statements herein are made subject to the penalties of 18 P.A.C.S. § 4904 relating to unsworn falsification to authorities.

Chris Cope
 Signature
11-16-2010
 Date

Contractor Team Listing (reference Question #1)

PSAB Municipal Retirement Trust (MRT) – State association and pension operations contractor

Thomas Klaum, PSAB Executive Vice President – Serves as MRT Secretary/Treasurer

Chris Cap, PSAB Deputy Executive Vice President – Acts as MRT Chief Operations Officer

Linda Costa, Director of MRT Trust Accounts – Inside/Outside pension service liaison

Joseph Scott, Municipal Pensions Outreach Coordinator – Inside/Outside pension service liaison

Thomas J. Anderson & Associates – Trust Administrator

Thomas Anderson, President – Manages Act 205 administrative compliance efforts

Douglas Werley, Employee Benefits Consultant – Assists municipalities with compliance matters

Wedge Capital Management L.L.P – Mid-Cap and Bond Manager

Martin L. Robinson, CFA, General Partner – Conducts outreach and financial reporting functions.

John G. Norman, Executive Vice President – Manages stock selection and operations platform.

NWQ Investment Management Company, LLC – Large Cap and Mid/Small Cap Manager

Raymond J. Urban, CFA, Managing Director – Conducts outreach and financial reporting functions

Jon Bosse, CFA, Chief Investment Officer – Manages stock selection and operations platform

Tradewinds Global Investors - International Manager

Raymond J. Urban, CFA, Managing Director – Conducts outreach and financial reporting functions.

David Iben, CFA, Chief Investment Officer – Manages stock selection and operations

ING Clarion Real Estate Securities – Real Estate Investment Trust Manager

Steven D. Burton, CFA, Managing Director - Global Strategy Portfolio Manager

Atalanta Sosnoff – Large Cap Growth Manager

Richard Maresca, Managing Director - Manages stock selection and operations process.

Anthony Salvatore – Vice President – Conducts outreach and investment performance functions.

Neuberger Berman – Large Cap Core Manager

Andrew Provencher, CFA, Managing Director – Oversight of stock selection and operations process

Aletheia Research and Management, Inc. – Large Cap Growth Manager

Peter Eichler, Jr., CEO and Chief Investment Officer – Oversight of stock selection and operations

CS McKee – Large Cap Core Manager

Jeffrey Davideck, Marketing Manager – Manages outreach and financial reporting functions

Gregory Melvin, CFA, Executive VP & Chief Investment Officer- Oversight of stock selection & research

The Endowment Fund – Alternative Investments Fund of Funds Manager

John E. Price, Chief Financial Officer – Oversight of financial operations and alternative investments

Wentworth, Hauser and Violich – International Fund Manager

Richard K. Hirayama, Senior Vice President – Oversight of stock selection and operations process.

Miriam E. Ballert, VP of Business Development - Conducts outreach and reporting functions.

Brown, Schultz, Sheridan & Fritz – Trust Auditor

John W. Bonawitz, Jr., Principal – Supervises annual audit functions for the Trust.

Hamilton & Musser – Accounting Contractor

Robert Mast, Shareholder – Manages account reporting, tax filings and fund disbursements

Fulton Bank – Fund Depository

Tammy Snyder, VP of Corporate Development – Manages checking and disbursement accounts

Merrill Lynch – Investment Market Monitor

Peter Butera, CIMA, First Vice President of Investments – Serves as investment monitor of MRT

William Bender, CFP, CIMA, ARPC – Serves as investment monitor of MRT

Mette Evans & Woodside – Law firm providing legal counsel

James Uish, Shareholder – Serves as the MRT Solicitor

Reed Smith – Law firm providing legal counsel

Joseph Rudolf, Partner – Provides legal counsel on select issues

Contractor Registered Lobbyists (Reference Question #4)

Thomas Klaum, State Registered Lobbyist (last renewed 1/1/2010) Position: PA State Association of Boroughs – Executive Vice President

Chris Cap, State Registered Lobbyist (last renewed 1/1/2010) Position: PA State Association of Boroughs – Deputy Executive Vice President

Political Contributions Disclosure (reference question #10)

James Felmler – PSAB President

6 Winding Way
Lewistown, PA 17044

Contributions:

(12/31/09) Corbett for Governor - \$200
(3/16/10) Corbett for Governor - \$300

Edward Porada – PSAB Board of Directors

409 Sunberry Street
Johnstown, PA 15904

Contributions:

(2008) Bryan Barbin for House of Representatives - \$100
(2009) Patrick Kiniry for Judge - \$100

Thomas Lloyd – PSAB Board of Directors & Trustees

2816 Voelkel Avenue
Dormont, PA 15216

Contributions:

(2010) Tim Murphy for Congress - \$50
(2010) Tim Murphy for Congress - \$50

Carol Sambol – PSAB Board of Directors

19 Anthony Wayne Terrace
Baden, PA 15005

Contributions:

(2008) Robert Matzie for State House of Representatives - \$25
(2008) Dave Rossie, Beaver County Prothonatory - \$25
(2008) Andrew Hladio for Ambridge District Magistrate - \$50

David Perruso – PSAB Board of Directors

2487 Lincoln Avenue
Easton, PA 18042

Contributions:

(2010) Robert Freeman – State Representative - \$25

Ann Simonetti – PSAB Board of Directors

413 Linden Avenue
Marysville, PA 17053

Contributions:

(2007) Mark Keller for State House of Representatives - \$50
 (2008) Mark Keller for State House of Representatives - \$50
 (2009) Mark Keller for State House of Representatives - \$50
 (2010) Mark Keller for State House of Representatives - \$50
 (2005) Jake Corman for State Senate - \$50
 (2006) Jake Corman for State Senate - \$50
 (2007) Jake Corman for State Senate - \$50
 (2008) Jake Corman for State Senate - \$50
 (2009) Jake Corman for State Senate - \$50
 (2010) Jake Corman for State Senate - \$50

John Dorin – PSAB Board of Directors

617 North Loyalsock Avenue
 Montoursville, PA 17754

Contributions:

(1/16/2008) People for Cappelli – State Senate - \$100

Debbie Shearer – Board of Directors

183 East King Street
 Abbottstown, PA 17301

Contributions:

5/27/2006 Lynn Swan for Governor - \$20
 6/22/2007 Adams County Republican Committee - \$12
 9/7/2007 Adams County Republican Committee - \$50
 10/25/2007 Adams County Republican Committee - \$25
 11/8/2007 Adams County Council of Republican Women - \$15
 11/8/2007 Adams County Council of Republican Women - \$10
 1/11/2008 Adams County Council of Republican Women - \$20
 2/3/2008 State Representative Dan Moul - \$10
 7/5/2008 Adams County Republican Committee - \$14
 2/4/2009 Adams County Council of Republican Women - \$20
 3/28/2009 State Representative Dan Moul - \$10
 5/2009 Adams County Republican Club - \$10
 8/2009 Adams County Republican Committee - \$10
 12/5/2009 Adams County Council of Republican Women - \$16

Kathleen DePuy – PSAB Board of Directors

4928 Parkvue Drive
 Pittsburgh, PA 15236

Contributions:

(2008) Whitehall Democratic Committee - \$300

Amy Webster-Sill – PSAB Board of Directors

314 Wayne Street

Hollidaysburg, PA 16648

Contributions:

(2008) Jerry Stern for PA House of Representatives - \$100

(2010) Jerry Stern for PA House of Representatives - \$100

Jennifer Jaworski – PSAB Board of Directors

38 Oakland Avenue

Homer City, PA 15748

Contributions:

10/2010 JoEllen Bowman for State House of Representatives - \$20

Edward Child – PSAB Board of Directors

116 Woodview Drive

Quakertown, PA 18951

Contributions:

10/27/2005 State Representative Paul Clymer - \$35

2/10/2006 State Representative Paul Clymer - \$30

3/3/2006 Pennridge Republican Club - \$80

9/24/2006 State Senator Robert Wonderling - \$50

10/5/2006 Quakertown Republican Council - \$25

9/24/2007 County Commissioner Jim Cawley/Charles Martin - \$50

10/10/2007 State Representative Paul Clymer - \$35

2/21/2008 Pennridge Republican Club - \$50

2/23/2008 Bucks County Republican Committee - \$100

9/18/2008 State Representative Paul Clymer - \$125

2/10/2009 Bucks County Republican Committee - \$100

2/10/2009 State Representative Paul Clymer - \$32

4/30/2009 Bucks County Republican Committee - \$100

6/25/2009 David Heckler, Bucks County District Attorney - \$40

9/18/2009 State Senator Bob Mensch - \$250

9/14/2009 Quakertown Republican Council - \$25

5/12/2010 Jim Cawley for Lieutenant Governor - \$100

6/29/2010 Bucks County Republican Committee - \$100

9/29/2010 State Senator Bob Mensch - \$50

Nancy Sherlock – PSAB Board of Trustees

424 West Bridge Street

Morrisville, PA 19067

Contributions:

(2008) Diane Marsiglia for County Commissioner - \$25

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IRWIN BOROUGH

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ACT 44 DISCLOSURE FORM FOR ENTITIES PROVIDING PROFESSIONAL SERVICES TO THE BOROUGH OF IRWIN'S PENSION SYSTEM

CHAPTER 7-A OF ACT 44 OF 2009 MANDATES the annual disclosure of certain information by every entity (hereinafter "**Contractor**") which is a party to a professional services contract with one of the pension funds of the Borough of Irwin (hereinafter the "**Requesting Municipality**"). Act 44 disclosure requirements apply to *Contractors* who provide professional pension services and receive payment of any kind from the **Requesting Municipality's** pension fund. The **Requesting Municipality** has determined that your company falls under the requirements of Act 44 and must complete this disclosure form. You are expected to submit this completed form, to the Requesting Municipality below, by **November 5th**, 2010. If, for any reason you believe that Act 44 does not require you to complete this disclosure form, please provide a written explanation of your reason(s) by **October 29th**, 2010.

**RETURN COMPLETED
DISCLOSURE TO:**

Borough of Irwin
Attn: Mary Benko, Borough Manager
424 Main St.
Irwin, PA 15642
Phone Number: (724)864-3100
E-Mail Address: irwin.manager@verizon.net

REQUIRED UPDATES:

Where noted, information in this form must be updated in writing as changes occur.

DEFINITIONS FOR DISCLOSURE

TERM:	DEFINITION:
CONTRACTOR	Any person, company, or other entity that receives payments, fees, or any other form of compensation from a municipal pension fund in exchange for rendering professional services for the benefit of the municipal pension fund.
SUBCONTRACTOR OR ADVISOR	Anyone who is paid a fee or receives compensation from a municipal pension system – directly or indirectly from or through a contractor.
AFFILIATED ENTITY	Any of the following: <ol style="list-style-type: none"> 1. A subsidiary or holding company of a lobbying firm or other business entity owned in whole or in part by a lobbying firm. 2. An organization recognized by the Internal Revenue Service as a tax-exempt organization under section 501(c) of the Internal Revenue Code of 1986 (Public Law 99-514, 26 U.S.C. § 501 (c)) established by a lobbyist or lobbying firm or an affiliated entity.
CONTRIBUTIONS	As defined in section 1621 of the act of June 3 rd , 1937 (P.L. 1333, No. 320), known as the Pennsylvania Election Code
POLITICAL COMMITTEE	As defined in section 1621 of the act of June 3 rd , 1937 (P.L. 1333, No. 320), known as the Pennsylvania Election Code
EXECUTIVE LEVEL EMPLOYEE	Any employee or person or the person's affiliated entity who: <ol style="list-style-type: none"> 1. Can affect or influence the outcome of the person's or affiliated entity's actions, policies, or decisions relating to pensions and the conduct of business with a municipality or a municipal pension system; or 2. Is directly involved in the implementation or development policies relating to pensions, investments, contracts or procurement or the conduct of business with a municipality or municipal pension system.
MUNICIPAL PENSION SYSTEM	Any qualifying pension plan, under Pennsylvania state law, for any municipality within the Commonwealth of Pennsylvania; includes the Pennsylvania Municipal Retirement System. <i>Example: the Police Pension Plan for the Borough of Winchesterville</i>
MUNICIPAL PENSION SYSTEM OFFICIALS AND EMPLOYEES; MUNICIPAL OFFICIALS AND EMPLOYEES	Specifically , those listed in TABLE 2 titled: <i>"List of Pension System and Municipal Officials and Employees"</i> on the next page. Where applicable, includes any employee of the Requesting Municipality .
PROFESSIONAL SERVICES CONTRACT	A contract to which the municipal pension system is a party that is: (1) for the purchase of professional services including investment services, legal services, real estate services, and other consulting services; and, (2) not subject to a requirement that the lowest bid be accepted.

List of Municipal Officials for the Requesting Municipality

Certain requests for information in this form will refer to a “**List of Municipal Officials.**”

To assist you in preparing your answers, you should consider the following names to be a complete list of pension system and municipal officials and employees. Throughout this Disclosure Form, the below names will be referred to as the “*List of Municipal Officials.*”

Elected Officials

Daniel T. Rose - Mayor
Debbie Kelly - Borough Council President
Danyce Neal - Borough Council Vice-President
Phyllis Thiem – Council Member
Gail Macioce – Council Member
Peggie Watson – Council Member
John Cassandro – Council Member
John Fonzo – Council Member

Appointed Officials or Employees

Alan Berk – Solicitor
Todd Turin – Solicitor
Mary Benko - Borough Manager

IDENTIFICATION OF CONTRACTORS & RELATED PERSONNEL

CONTRACTORS: (See “Definitions” – page 2) Any entity who currently provides service(s) by means of a Professional Services Contract to the Municipal Pension System of the **Requesting Municipality**, please complete all of the following:

Identify the Municipal Pension System(s) for which you are providing information:

Indicate all that apply with an “X”:

Non- Uniform Plan

Police Plan

Fire Plan

****NOTE:** For all that follow, you may answer the questions / items on a separate sheet of paper and attach it to this Disclosure if the space provided is not sufficient. Please reference each question / item you are responding to by the appropriate number. (example: REF – Item #1.)

1. Please provide the names and titles of all individuals providing professional services to the **Requesting Municipality's** pension plan(s) identified above. Also include the names and titles of any advisors and subcontractors of the Contractor, identifying them as such. After each name provide a description of the responsibilities of that person with regard to the professional services being provided to each designated pension plan.

Megan L. Schaffer - VP/Branch Manager S+T Bank
Robert Bowell - VP Commercial lending S+T Bank

2. Please list the name and title of any *Affiliated Entity* and their *Executive-level Employee(s)* that require disclosure; after each name, include a brief description of their duties. (See: Definitions)
3. Are any of the individuals named in **Item 1** or **Item 2** above, a current or former official or employee of the **Requesting Municipality**? **NO**
 ➔ **IF “YES”**, provide the name and titles of the person employed, their position with the municipality, and dates of employment.
4. Are any of the individuals named in **Item 1** or **Item 2** above a current or former registered Federal or State lobbyist? **NO**
 ➔ **IF “YES”**, provide the name of the individual, specify whether they are a state or federal lobbyist, and the date of their most recent registration /renewal.

NOTICE: All information provided for items 1- 4 above must be updated as changes occur.

5. Since December 17th 2009, has the *Contractor* or an *Affiliated Entity* paid compensation to or employed any third party intermediary, agent, or lobbyist that is to directly or indirectly communicate with an official or employee of the *Municipal Pension System* of the **Requesting Municipality** (OR), any municipal official or employee of the **Requesting Municipality** in connection with any transaction or investment involving the *Contractor* and the Municipal Pension System of the **Requesting Municipality**? No

This question does not apply to an officer or employee of the *Contractor* who is acting within the scope of the firm's standard professional duties on behalf of the firm, including the actual provision of legal, accounting, engineering, real estate, or other professional advice, services, or assistance pursuant to the professional services contact with municipality's pension system.

- ➔ **IF "YES"**, identify: (1) whom (the third party intermediary, agent, or lobbyist) was paid the compensation or employed by the *Contractor* or *Affiliated Entity*, (2) their specific duties to directly or indirectly communicate with an official or employee of the *Municipal Pension System* of the **Requesting Municipality** (OR), any municipal official or employee of the **Requesting Municipality**, (3) the official they communicated with, and (4) the dates of this service.

6. Since December 17th 2009, has the *Contractor*, or any agent, officer, director or employee of the *Contractor* solicited a contribution to any municipal officer or candidate for municipal office in the **Requesting Municipality**, or to the political party or political action committee of that official or candidate? No

- ➔ **IF "YES"**, identify the agent, officer, director or employee who made the solicitation and the municipal officials, candidates, political party or political committee who were solicited (to whom the solicitation was made).

7. Since December 17th, 2009: Has the *Contractor* or an *Affiliated Entity* made any contributions to a municipal official or any candidate for municipal office in the **Requesting Municipality**? No

- ➔ **IF "YES"**, provide the name and address of the person(s) making the contribution, the contributor's relationship to the Contractor, The name and office or position of the person receiving the contribution , the date of the contribution, and the amount of the contribution.

8. Does the *Contractor* or an *Affiliated Entity* have any direct financial, commercial or business relationship with any official identified on the *List of Municipal Officials*, of the **Requesting Municipality**? No

- ➔ **IF "YES"**, identify the individual with whom the relationship exists and give a detailed description of that relationship.

****NOTE:** A written letter is required from the **Requesting Municipality** acknowledging the relationship and consenting to its existence. The letter must be attached to this disclosure. Contact the **Requesting Municipality** to obtain this letter and attach it to this disclosure before submission.

9. Has the *Contractor* or an *Affiliated Entity* given any gifts having more than a nominal value to any official, employee or fiduciary – specifically, those on the *List of Municipal Officials* of the **Requesting Municipality**? *No*

➔ **IF “YES”**, Provide the name of the person conferring the gift, the person receiving the gift, the office or position of the person receiving the gift, specify what the gift was, and the date conferred.

10. Disclosure of contributions to any political entity in the Commonwealth of Pennsylvania

Applicability: A “yes” response is required and full disclosure is required ONLY WHEN ALL of the following applies: *None*

- a) The contribution was made within the last 5 years (specifically since: December 18th 2004)
- b) The contribution was made by an officer, director, executive-level employee or owner of at least 5% of the *Contractor* or *Affiliated Entity*.
- c) The amount of the contribution was at least \$500 and in the form of:
 1. A single contribution by a person in (b.) above, **OR**
 2. The aggregate of all contributions all persons in (b.) above;
- d) The contribution was for
 1. Any candidate for any public office or any person who holds an office in the Commonwealth of Pennsylvania;
 2. The political committee of a candidate for public office or any person that holds an office in the Commonwealth of Pennsylvania.

➔ **IF “YES”**, provide the name and address of the person(s) making the contribution, the contributor’s relationship to the *Contractor*, The name and office or position of the person receiving the contribution (or the political entity / party receiving the contribution), the date of the contribution, and the amount of the contribution.

11. With respect to your provision of professional services to the Municipal Pension System of the **Requesting Municipality**:

Are you aware of any apparent, potential or actual conflicts of interest with respect to any officer, director or employee of the *Contractor* and officials or employees of the **Requesting Municipality**? *No*

NOTE: If, in the future, you become aware of any apparent, potential, or actual conflict of interest, you are expected to update this **Disclosure Form** immediately in writing by:

- Providing a brief synopsis of the conflict of interest (and);
- An explanation of the steps taken to address this apparent, potential, or actual conflict of interest.

➔ **IF “YES”**, Provide a detailed explanation of the circumstances which provide you with a basis to conclude that an apparent, potential, or actual conflict of interest may exist.

12. To the extent that you believe that Chapter 7-A of Act 44 of 2009 requires you to disclose any additional information beyond what has been requested above, please provide that information below or on a separate piece of paper.

None

Please provide the name(s) and position(s) of the person(s) participating in the completion of this Disclosure. One of the individuals identified by the Contractor in Item #1 above must participate in completing this Disclosure and must sign the below verification attesting to the participation of those individuals named below.

Name: Megan Schaffer Name:
[Signature]
Position: VP/Branch Manager Position:

Name: Robert Bayell Name:
[Signature]
Position: VP/Commercial Lending Position:

Name: Name:
Position: Position:

[Signature]
SIGNATURE
VP/Branch Manager
TITLE
11-5-10
DATE

VERIFICATION

I, _____, hereby state that I am _____ for
 (Name) (Position)
 _____ and I am authorized to make this verification.
 (Contractor)

I hereby verify that the facts set forth in the foregoing Act 44 Disclosure Form for Entities Providing Professional Services to the Borough of Irwin Pension System are true and correct to the best of my knowledge, information and belief. I also understand that knowingly making material misstatements or omissions in this form could subject the responding Contractor to the penalties in Section 705-A(e) of Act 44.

I understand that false statements herein are made subject to the penalties of 18 P.A.C.S. § 4904 relating to unsworn falsification to authorities.

 Signature

 Date

INSTRUCTIONS FOR MUNICIPALITY:**DO NOT** INCLUDE THIS INSTRUCTION PAGE

WITH THE DISCLOSURE

You will need to prepare and send one of these disclosure forms to **each Contractor** that you have a contract for providing services to your pension plan (AND) a separate set of disclosures for each type of plan – fire, police, etc.

IF ONE CONTRACTOR services two or more plans, then only one disclosure is required, but the contractor must indicate he / she is completing the disclosure for more than one plan....**PAGE 4,**

Question One.

You should also prepare a brief cover letter explaining the reason you are sending this disclosure out.

➤ **Who should receive this disclosure?**

Generally there are 5 primary service providers for each pension plan but it is not limited to just these:

Actuarial Services Investment Services Administration Services Advisory Services
Legal Advisory Services – usually performed by the municipal solicitor

IF some of these services are combined through one service provider **or Contractor**, then you only need to send this to that one entity. **For Example**, your administrative services and actuarial services are conducted through **Robert Smith and Associates** and your contract is with this company. However, **Robert Smith and Associates** subcontracts certain portions of these services to two other companies. You need only send one disclosure to **Robert Smith and Associates**, and one to any other entity that provides specific services – other than administrative and actuarial.

➤ **PLEASE CHECK WITH YOUR SOLICITOR**....as a precaution regarding whom you should send this disclosure to.

Every place you see this: [ENTER NAME OF MUNICIPALITY] Enter the name of the municipality. Change the Font color to Black and remove the brackets.

Pages 1, 3, and 8 are the only pages that require modification and reprinting by the Municipality.

Instructions for the “Requesting Municipality” for completion of PAGE 3:

Under the header, prepare a list of Names and Positions of all personnel that are a party to ANY Pension Plan the municipality has. This should include: every Elected Official, Municipal Manager or equivalent position, Municipal Finance Director or equivalent position, Chief Administrative Officer for each plan, The Solicitor, Any Pension Advisory Committee or Pension Board Members (not listed above)