(Revised October 14, 2014)

State law requires that each and any Applicant for a local zoning map amendment, or Party of Record, who has made a contribution to a candidate for County Executive or County Council of \$500.00 or more, calculated cumulatively for the four-year election cycle either before the filing of the application or during the four-year cycle within which the application is pendent, must disclose the name of the candidate to whose treasurer, political committee, or slate the contribution was made, the amount and the date of the contribution.

A Disclosure Statement must be filed when the application is filed or within two weeks after entering the proceeding by a Party of Record and be updated within 5 business days of any contribution made after the filing of the initial disclosure and before final disposition of the application by the District Council. If more than one contribution is made, please specify in the space provided below each contribution and to whom it was made. If more than one applicant is involved in a single application, each applicant must file this statement.

Subject to the penalties of perjury, I, Ralph J. Duffie, Inc.	
(NAME OF APPLICANT FOR FLOATING ZONE PLAN	
AMENDMENT OR PARTY OF RECORD)	
HEREBY AFFIRM that the contents of this statement are true to the best of my knowledge, information and beliand that: (SELECT EITHER 1 OR 2 BELOW AND CHECK APPROPRIATE STATEMENT)	ef,
1. I HAVE made a contribution of (FILL IN AMOUNT OF CONTRIBUTION IF \$500 OR MORE, OR STATE N/A IF NOT APPLICABLE)	
On(FILL IN DATE (MONTH, DAY AND YEAR) OF CONTRIBUTIONS),	
to the following candidate's treasurer, political committee, or slate:	
(FILL IN NAME OR NAMES OF CANDIDATE, OR STATE N/A IF INAPPLICABLE)(If more space is required, use the back of this form.)	
2. I HAVE NOT made a contribution requiring disclosure.  SIGNATURE OF DECLARANT  This Statement is filed in compliance with the public ethics requirements of Mr. Code Ann, General Provisions, §§5-842 through 5-845; 2014 Md. Laws Ch. 94. Any violations of these provisions is a misdemeanor, and upon conviction, is subject to a fine of not more than \$1,000.	-
Subscribed and sworn to me, a Notary Public for Montgomery County, Maryland, this	
NOTARY PUBLIC  My Commission Expires: 4/18/36	WMAN ARY
NOTARY PUBLIC  My Commission Expires: 4 \ \2 \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	PUBL SEORGE SURVEY

(Revised October 14, 2014)

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Subject to the penalties of perjury, I, Grady Family LLC
(NAME OF APPLICANT FOR FLOATING ZONE PLAN AMENDMENT OR PARTY OF RECORD)
HEREBY AFFIRM that the contents of this statement are true to the best of my knowledge, information and belief and that: (SELECT EITHER 1 OR 2 BELOW AND CHECK APPROPRIATE STATEMENT)
I HAVE made a contribution of
(FILL IN AMOUNT OF CONTRIBUTION IF \$500 OR MORE, OR STATE N/A IF NOT APPLICABLE)
on
(FILL IN DATE (MONTH, DAY AND YEAR) OF CONTRIBUTIONS),
to the following candidate's treasurer, political committee, or slate:
(FILL IN NAME OR NAMES OF CANDIDATE, OR STATE N/A IF INAPPLICABLE)(If more space is required, use the back of this form.)  2. I HAVE NOT made a contribution requiring disclosure)
SIGNATURE OF DECLARANT
This Statement is filed in compliance with the public ethics requirements of Md. Code Ann, General Provisions, §§5-842 through 5-845; 2014 Md. Laws Ch. 94. Any violations of these provisions is a misdemeanor, and upon conviction, is subject to a fine of not more than \$1,000.  Subscribed and sworn to me, a Notary Public for Montgomery County, Maryland, this
15th day of August, 20 23 Mangaet of Jac
NOTARY PUBLIC  My Commission Expires:  My Commission Expires:
For your convenience, some definitions are included on the reverse side of this form.

Md. Code Ann., Gen. Prov. §5-842

(Revised October 14, 2014)

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Subject to the penalties of perjury, I, Elaine Milestone Trust f/b/o Scott Milestone (NAME OF APPLICANT FOR FLOATING ZONE PLAN AMENDMENT OR PARTY OF RECORD) HEREBY AFFIRM that the contents of this statement are true to the best of my knowledge, information and belief, and that: (SELECT EITHER 1 OR 2 BELOW AND CHECK APPROPRIATE STATEMENT) I HAVE made a contribution of (FILL IN AMOUNT OF CONTRIBUTION IF \$500 OR MORE, OR STATE N/A IF NOT APPLICABLE) (FILL IN DATE (MONTH, DAY AND YEAR) OF CONTRIBUTIONS), to the following candidate's treasurer, political committee, or slate: (FILL IN NAME OR NAMES OF CANDIDATE, OR STATE N/A IF INAPPLICABLE)(If more space is required, use the back of this form.) I HAVE NOT made a contribution requiring disclosure. This Statement is filed in compliance with the public ethics requirements of Md. Code Ann, General Provisions, §85-842 through 5-845; 2014 Md. Laws Ch. 94. Any violations of these provisions and upon convictions of these provisions. SIGNATURE OF DECLARANT misdemeanor, and upon conviction, is subject to a fine of not more than \$1,000. COMMISSION Subscribed and sworn to me, a Notary Public for Montgomery County, Maryland, this EXPIRES

For your convenience, some definitions are included on the reverse side of this form.

NOTARY PUBLIC

My Commission Expires:

MAHADEO S. WAYAL

NOTARY PUBLIC STATE OF MARYLAND My Commission Expires August 1, 2026

(Revised October 14, 2014)

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	Down L. Cooks Issues application, each applicant must the this statement.
Subject	to the penalties of perjury, I, Dawn L. Cooke Irrevocable Trust  (NAME OF APPLICANT FOR FLOATING ZONE PLAN AMENDMENT OR PARTY OF RECORD)
HERE and th	EBY AFFIRM that the contents of this statement are true to the best of my knowledge, information and belief, at: (SELECT EITHER 1 OR 2 BELOW AND CHECK APPROPRIATE STATEMENT)
	1. I HAVE made a contribution of
	(FILL IN AMOUNT OF CONTRIBUTION IF \$500 OR MORE, OR STATE N/A IF NOT APPLICABLE)
	on
	(FILL IN DATE (MONTH, DAY AND YEAR) OF CONTRIBUTIONS),
	to the following candidate's treasurer, political committee, or slate:
	(FILL IN NAME OR NAMES OF CANDIDATE, OR STATE N/A IF INAPPLICABLE)(If more space is required, use the back of this form.)
V	2. I HAVE NOT made a contribution requiring disclosure.  SIGNATURE OF DECLARANT
Provisi	catement is filed in compliance with the public ethics requirements of Md. Code Ann, General ions, §§5-842 through 5-845; 2014 Md. Laws Ch. 94. Any violations of these provisions is a neanor, and upon conviction, is subject to a fine of not more than \$1,000.
	ibed and sworn to me, a Notary Public for Montgomery County, Maryland, this
174	day of August 2023.
	NOTARY PUBLIC My Commission Expires: 2/4/2024 Jin Weo Yang Notary Public
For you	ar convenience, some definitions are included on the reverse side of this form.  Howard County, Maryland Nov Colom. Exp. 8/4/2024

Md. Code Ann., Gen. Prov. §5-842

(Revised October 14, 2014)

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Subject to the penalties of perjury, I, Ann Leahy Revocable Trust dtd 11/14/1994

(NAME OF APPLICANT FOR FLOATING ZONE PLAN AMENDMENT OR PARTY OF RECORD)

HEREBY AFFIRM that the contents of this statement are true to the best of my knowledge, information and belief, and that: (SELECT EITHER 1 OR 2 BELOW AND CHECK APPROPRIATE STATEMENT)

	1.	I HAVE made a contribution of	
	on_	(FILL IN DATE (MONTH, DAY AND YEAR) OF CONTRIBUTIONS),	
,		the following candidate's treasurer, political committee, or slate:	
	(FIL	LL IN NAME OR NAMES OF CANDIDATE, OR STATE N/A IF INAPPLICABLE)(If more ce is required, use the back of this form.)	
	2.	I HAVE NOT made a contribution requiring disclosure.  SIGNATURE OF DECLARANT	_
Provi	sions, §	nent is filed in compliance with the public ethics requirements of Md. Code Ann, General , §55-842 through 5-845; 2014 Md. Laws Ch. 94. Any violations of these provisions is a nor, and upon conviction, is subject to a fine of not more than \$1,000.	
		and sworn to me, a Notary Public for Montgomery County, Maryland, this	,
20	2 da	lay of <u>Aujus</u> , 20 <b>23</b> .	
		NOTARY PUBLIC	
		My Commission Expires: SHRAGA KAWIOF	₹
For y	our con	NOTARY PUBLIC MONTGOMERY COUN MARYLAND	
Md.	Code	Ann., Gen. Prov. §5-842	23, 2027

(Revised October 14, 2014)

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Subjec	et to the penalties of perjury, I, Louis Pohoryles
Subjec	(NAME OF APPLICANT FOR FLOATING ZONE PLAN AMENDMENT OR PARTY OF RECORD)
HER and t	EBY AFFIRM that the contents of this statement are true to the best of my knowledge, information and belief, hat: (SELECT EITHER 1 OR 2 BELOW AND CHECK APPROPRIATE STATEMENT)
	1. I HAVE made a contribution of
	(FILL IN AMOUNT OF CONTRIBUTION IF \$500 OR MORE, OR STATE N/A IF NOT APPLICABLE)
	ON
	to the following candidate's treasurer, political committee, or slate:
	(FILL IN NAME OR NAMES OF CANDIDATE, OR STATE N/A IF INAPPLICABLE)(If more space is required, use the back of this form.)
d	2. I HAVE NOT made a contribution requiring disclosure  SIGNATURE OF DECLARANT
Provi	Statement is filed in compliance with the public ethics requirements of Md. Code Ann, General isions, §§5-842 through 5-845; 2014 Md. Laws Ch. 94. Any violations of these provisions is a emeanor, and upon conviction, is subject to a fine of not more than \$1,000.
Subse	cribed and sworn to me, a Notary Public for Montgomery County, Maryland, this
16	day of Avg , 20_23
	NOTARY PUBLIC GODLIVE KABALIISA
	My Commission Expires:  Notary Public - State of Maryland Montgomery County
For y	our convenience, some definitions are included on the reverse significant management by the convenience of t

(Revised October 14, 2014)

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Subjec	ct to the penalties of perjury, I, Elyce Vanden Broecke	
	(NAME OF APPLICANT FOR FLOATING ZONE PLAN AMENDMENT OR PARTY OF RECORD)	
HER and t	EBY AFFIRM that the contents of this statement are true to the best of my knowledge, information and believed that: (SELECT EITHER 1 OR 2 BELOW AND CHECK APPROPRIATE STATEMENT)	ef,
	I HAVE made a contribution of	
	(FILL IN AMOUNT OF CONTRIBUTION IF \$500 OR MORE, OR STATE N/A IF NOT APPLICABLE)	
	on	
	(FILL IN DATE (MONTH, DAY AND YEAR) OF CONTRIBUTIONS),	
	to the following candidate's treasurer, political committee, or slate:	
-	(FILL IN NAME OR NAMES OF CANDIDATE, OR STATE N/A IF INAPPLICABLE)(If more space is required, use the back of this form.)	
V	2. I HAVE NOT made a contribution requiring disclosure.	
	SIGNATURE OF DECLARANT	ck
Provi	Statement is filed in compliance with the public ethics requirements of Md. Code Ann, General isions, §§5-842 through 5-845; 2014 Md. Laws Ch. 94. Any violations of these provisions is a emeanor, and upon conviction, is subject to a fine of not more than \$1,000.	
	The day of House 1, 2023.	
	My Commission Expires: 12 09 2032	

For your convenience, some definitions are included on the reverse side of this form.

Md. Code Ann., Gen. Prov. §5-842

Notary Public - State of South Carolina My Commission Expires December 09, 2032