ROCHESTER

Minnesota

ETHICS ORDINANCE
DISCLOSURE FORM

JUDY SCHERR, CMC
City Clerk
201 4th Street SE, Room 135
Rochester, MN 55904-3742
(507) 328-2900
FAX #(507) 328-2901

NAME: IAN J. LOCHRIDGE

ADDRESS: 2910 CLOVER PLACE SW

CITY, STATE, ZIP CODE ROCHESTER MN 559023483

1. What is the name of your position, title or job title?

   BOARD MEMBER

2. Is this an employed, appointed, or elected position?

   APPOINTED

3. What is the name of the City department in which you are employed, or City board, commission or elected body on which you serve?

   ZONING BOARD OF APPEALS

4. When were you hired, appointed or elected to this position?

   12. 16. 2013

For questions 5, 6 and 7, the word "interest" means a substantial financial interest through your ownership of stocks, bonds, notes or other securities. The word "interest" also includes an interest arising from blood, marriage or other personal relationships or close business or political association. The phrase "doing business" means engaged in any contractual relationship with the City or making application for such relationship or for any relief or benefit available from the City including, but not limited to, variance, permit, license or plat approval.

(SEE REVERSE SIDE)

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5. Please list your interests in real property within the City of Rochester, other than your homestead. Complete on a separate page if necessary.

NONE.

6. Please list any interests you have in a business doing business with the City.

NONE.

7. Please list any interest you have in any business located within, or doing business in, the City.

NONE

8. List any and all employment.

RETIRED ATTORNEY (2003). NONE.

I hereby certify that the above information is complete and accurate.

Signature

12.19.2013
Date

Please mail completed and signed form to:
Judy Scherr, CMC, City Clerk, City Hall, 201 4th Street SE, Room 135
Rochester, MN 55904-3742
11/27/12