

STATEMENT OF FINANCIAL INTERESTS
SEE INSTRUCTIONS FOR ADDITIONAL DETAILS

01 LAST NAME FIRST NAME MI SUFFIX
C l a r k s o n D a n i e l W

02 ADDRESS office (business or governmental) or home City State Zip Code Area Code Phone
1947 Myrtle Street Scranton PA 18510 570 499-0131

NOTE: IF YOU ARE INCLUDING ATTACHMENTS, DO NOT INCLUDE ANYTHING THAT BEARS YOUR SOCIAL SECURITY NUMBER OR FINANCIAL ACCOUNT NUMBERS.

03 STATUS Check applicable box or boxes, more than one box may be marked.

A <input type="checkbox"/> Candidate (Including write-in)	C <input checked="" type="checkbox"/> Public Official (Current)	D <input type="checkbox"/> Public Employee (Current)	E <input type="checkbox"/> Check this box if you are filing as a solicitor	<input type="checkbox"/> Check this box if you are amending an original filing
B <input type="checkbox"/> Nominee	C <input type="checkbox"/> Public Official (Former)	D <input type="checkbox"/> Public Employee (Former)		

04 PUBLIC OFFICE OR PUBLIC EMPLOYMENT (i.e. administrator, member, Commissioner, job title, etc.) ☐ seeking ☒ hold ☐ held

A H o u s i n g B o a r d o f A p p e a l s ☐ seeking ☒ hold ☐ held

B

05 GOVERNMENTAL BODY in which you are/were an Official, Employee, Candidate or Nominee (e.g., dept, agency, authority, borough, board, commission, county, school district, twp, etc.)

A H o u s i n g B o a r d o f A p p e a l s

B

06 OCCUPATION OR PROFESSION (This may be the same as block 4)
Council Representative EASRCC

07 YEAR SEE INSTRUCTIONS
Information in blocks 8-15 represents disclosure for the calendar year listed here: 2 0 2 4

08 REAL ESTATE INTERESTS Involved in transactions with the Commonwealth, any of its agencies, or a political subdivision If NONE, check this box ☐

09 CREDITORS TO WHOM IS OWED MORE THAN \$6,500 If NONE, check this box ☐

Name: Wells Fargo, American Express, Bank of America, Truist DES	Address: AE, PO Box 96001 LA, CA 90096	Interest Rate
Wells Fargo PO Box 777053 Minneapolis, MN 55480	BOA, PO BOX 15019, Wilmington, DE 19880 (Truist DES, PO Box 3174 Wilmington, DE 19844 77)	Wells Fargo 0% AE 6.9%, BOA 0%, Truist DES 7.4%

10 DIRECT OR INDIRECT SOURCES OF INCOME OF \$1,300 OR MORE, including (but not limited to) all employment If NONE, check this box ☐

Name: Eastern Atlantic States Regional Council of Carpenters Address: 1803 Spring Garden St. Philadelphia, PA 19130

MAR 10 2025
OFFICE OF CITY COUNCIL/CITY CLERK

11 GIFTS VALUED AT \$250 OR MORE IN THE AGGREGATE If NONE, check this box ☐

Source of Gift Value of Gift

Address of Source of Gift Circumstances (including description) of Gift

12 TRANSPORTATION, LODGING OR HOSPITALITY WHERE ACTUAL EXPENSES EXCEEDED \$650 IN THE AGGREGATE If NONE, check this box ☐

Source (Name and Address) Value

13 OFFICE, DIRECTORSHIP OR EMPLOYMENT IN ANY BUSINESS If NONE, check this box ☐

Business Entity (Name and Address) Position Held (i.e., officer, director, employee, etc.)

Carpenters Local 445, Vice President, Delegate

14 FINANCIAL INTEREST IN ANY LEGAL ENTITY IN BUSINESS FOR PROFIT If NONE, check this box ☐

Business (Name and Address) Interest Held (i.e., 5%, 10%, etc.)

15 BUSINESS INTERESTS TRANSFERRED TO IMMEDIATE FAMILY MEMBER If NONE, check this box ☐

Business (Name and Address)	Interest Held
Transferee (Name and Address)	Relationship
	Date Transferred

The undersigned hereby affirms that the foregoing information is true and correct to the best of said person's knowledge, information and belief, said affirmation being made subject to the penalties prescribed by 18 Pa.C.S. §4904 (unsworn falsification to authorities) and the Public Official and Employee Ethics Act, 65 Pa.C.S. §1109(b).

Signature

Enter Current Date

3-6-2025

THIS FORM IS CONSIDERED DEFICIENT IF ANY BLOCK ABOVE IS NOT COMPLETED. MAKE A COPY FOR YOUR RECORDS.
SIGN THE FORM USING CURRENT DATE. DO NOT BACK DATE SIGNATURE.