

PENNSYLVANIA STATE ETHICS COMMISSION
STATEMENT OF FINANCIAL INTERESTS

01 LAST NAME										FIRST NAME										MI	SUFFIX
W e l b y										T h o m										R	

02 ADDRESS office (business or governmental) or home				City	State	Zip Code	Area Code	Phone
123 Wyoming Avenue, 6th Flor				Scranton	PA	18503	570	9636800

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

04 PUBLIC OFFICE OR PUBLIC EMPLOYMENT (i.e. administrator, member, Commissioner, job title, etc.)		<input checked="" type="checkbox"/> seeking	<input type="checkbox"/> hold	<input type="checkbox"/> held
A C o m m i s s i o n e r		<input type="checkbox"/> seeking	<input checked="" type="checkbox"/> hold	<input type="checkbox"/> held
B C o m m i s s i o n e r				

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 L a c k a w a n n a C o u n t y	
B L a c k a w a n n a C o u n t y	

06 OCCUPATION OR PROFESSION (This may be the same as block 4)	07 YEAR SEE INSTRUCTIONS
Comissioner	Information in blocks 8-15 represents disclosure for the calendar year listed here: 2 0 2 5

08 REAL ESTATE INTERESTS involved in transactions with the Commonwealth, any of its agencies, or a political subdivision	If NONE, check this box <input type="checkbox"/>
--	--

09 CREDITORS TO WHOM IS OWED MORE THAN \$6,500	If NONE, check this box <input type="checkbox"/>
Name: _____ Address: _____	Interest Rate _____

10 DIRECT OR INDIRECT SOURCES OF INCOME OF \$1,300 OR MORE, including (but not limited to) all employment	If NONE, check this box <input type="checkbox"/>
Name: Lackawanna County Address: 123 Wyoming Avenue, Scranton	(OFFICIAL USE ONLY)
PA House of Representatives Harrisburg PA	

11 GIFTS VALUED AT \$250 OR MORE IN THE AGGREGATE	If NONE, check this box <input type="checkbox"/>
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 <input type="checkbox"/>
Source of Transportation, Lodging, or Hospitality _____ Value _____	
Address _____	

13 OFFICE, DIRECTORSHIP OR EMPLOYMENT IN ANY BUSINESS	If NONE, check this box <input type="checkbox"/>
Business Entity (Name and Address) _____	Interest Held (i.e., officer, director, employee, etc.) _____
Friendship House, 415 Biden Street, Scranton PA 18503 (additional attached)	

14 FINANCIAL INTEREST IN ANY LEGAL ENTITY IN BUSINESS FOR PROFIT	If NONE, check this box <input type="checkbox"/>
Business (Name and Address) _____	Interest Held (i.e., 5%, 10%, etc.) _____

15 BUSINESS INTERESTS TRANSFERRED TO IMMEDIATE FAMILY MEMBER	If NONE, check this box <input type="checkbox"/>
Business (Name and Address) _____	Interest Held (i.e., officer, director, employee, etc.) _____
Transferee (Name and Address) _____	Relationship _____

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: Thomas Welby Enter Current Date: 05FEB26

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

Additional:

4 - PUBLIC OFFICE OR PUBLIC EMPLOYMENT: District Office Director

5 - GOVERNMENTAL BODY: PA House of Representatives

6 - OCCUPATION OR PROFESSION: District Office Director

13 - OFFICE, DIRECTORSHIP OR EMPLOYMENT IN ANY BUSINESS

Lackawanna County Visitors Bureau, Director, 135 Jefferson Avenue, Scranton PA 18503

Scranton Recreation Municipal Authority, Vice-chair, 500 Arthur Avenue, Scranton PA 18510

Valley in Motion, Director/board member, 1300 Old Plank Road, Mayfield, PA 18433

First Friday Scranton, Director, PO Box 20032, Scranton PA 18502