

Municipal and Multi-Jurisdictional Judge Candidates – Filing your SEI

Incumbent local judicial candidates: If you are an incumbent municipal or multi-jurisdictional judge, you are already entered into our online system. You should receive an email notice about December 1st with a reminder to file. If you do not receive this notice, contact ethics staff to make sure we have the correct email address on file.

New local judicial candidates:

1. Municipal judge candidates should go to <https://sei.wi.gov> to file.
2. Click on the **Candidates** option in the upper menu bar.
3. Enter the position you seek and the election cycle and click **Continue**.
4. Enter your name and contact information and click **Save Official**.

Ethics staff will receive notice of your submission and verify that your information is correct. If you have filed an SEI in the past (for example, you filed as a Court Commissioner or other official), they will also link your candidate record to the existing filer record. You then will receive an email notice with a username and password, plus directions on how to file. If you do not receive an email notice within 1 or 2 business days, or if you have immediate questions, contact Ethics staff to confirm your information was received.

Follow the directions on the email to log in and file your SEI. Once it is filed, you will receive an email confirmation. If you do not receive a confirmation, please contact our office to ensure the SEI has been filed.

Staff will post a spreadsheet with a list of SEI filers so your local clerk can verify that you have filed and are eligible to be placed on the ballot. That page is available [here](#).

If you are elected, you will be required to file an SEI once per year, by April 30th. The same website will be used, and each form will be pre-filled with the information you provided the previous year.

Another way to file an SEI is to file a physical paper form or .pdf file. To file a paper form, go to the Ethics Commission website and find the [SEI Forms page](#). You should open the ETH-1 form and the instructions. After you have completed the form, you must sign it. You can return the signed copy by email (ethics@wi.gov), fax (608-264-9319), or mail (Wisconsin Ethics Commission, P.O. Box 7125, Madison WI 53707-7125). Please do not mail your SEI within a week of the deadline.

Contact Ethics staff:

Phone (608) 266-8123

Email ethics@wi.gov



STATE OF WISCONSIN
Wisconsin Ethics Commission

Statement of Economic Interests - Instructions

General filing information:

- This form is required by Wis. Stat. §§19.43 and 19.44, Wis. Admin. Code § UWS 8.06, UW Board of Regents Policy, or Supreme Court Rule 60.05.
- Current Officials may file electronically at <https://sei.wi.gov>.
- Questions? Visit <http://ethics.wi.gov> or email ethics@wi.gov; otherwise call (608) 266-8123.

Attachments:

Additional pages may be used to provide all of the information necessary to complete your Statement of Economic Interests. Attached pages should conform to the same formatting as the existing Statement of Economic Interests. Investment house and brokerage statements should not be filed with your statement. Attachments relating to investment information should contain only the name of the investment and whether its value is between \$5,000 and \$50,000 or greater than \$50,000.

Definitions:

- **"Family" or "family member"** means your spouse, and any child, stepchild, parent, or parent-in-law who receives more than one-half of his or her support from you or from whom you receive more than one-half of your support.
- **"Income"** means **gross** income before deductions and depreciation, from whatever source derived, as defined by the Internal Revenue Code, but excludes dividends and interest.
- A **"lobbyist"** is an individual who attempts to influence legislation or administrative rules in Wisconsin by communicating with an elected state official, agency official, or legislative employee on another's behalf for pay.

Part A As of (Start Date or Nomination Date or Dec. 31 of Previous Year)

- If you were appointed or nominated to a new position or a new term of office since 12/31 of the previous year, this section should be current as of your start date.
- If you are a continuing official, this section should be current as of 12/31 of the previous year.
- If you are a candidate, this section should be current as of 12/31 of the year before your election. (Forms may not be filed before 12/1 of the year before your election.)

1. INVESTMENTS. List stocks, bonds, limited partnerships, Wisconsin governmental securities, and mutual and money market funds you or your family held (minimum \$5,000).

a. Funds Available in Wisconsin Deferred Compensation Program. These funds are available to participants in the Wisconsin Deferred Compensation program and many of them are also available for direct purchase, independent of that program. If you held an investment of \$5,000 or more in any of these funds – either directly or through the program -- please check the appropriate box.

b. Other Investments.

List

- ◆ stocks and stock options
- ◆ commodity futures contracts
- ◆ bonds
- ◆ limited partnerships
- ◆ securities issued by the State of Wisconsin or by local governmental entities within Wisconsin
- ◆ mutual funds and money market funds
- ◆ any of the above held directly or:
 - in a deferred compensation plan, profit-sharing plan, or pension plan whose investments you or your family directs
 - in an individual retirement account (IRA)
 - in a trust you or a family member created or of which you or a family member has beneficial use
 - held for you by a corporation, partnership, or other entity which you or your family controls

Do not list

- ◆ Wisconsin Retirement System
- ◆ savings accounts
- ◆ checking accounts
- ◆ certificates of deposit
- ◆ annuities
- ◆ insurance contracts
- ◆ securities issued by the federal government or a government outside Wisconsin
- ◆ securities issued by an organization that does not do any business in Wisconsin
- ◆ securities in a company in which you and your family's total interest is valued at less than \$5,000

List the security by name. For example, list "Fidelity Puritan Fund" and "IBM." Do not list "deferred compensation plan" or "IRA" or "Merrill Lynch account," since these terms do not identify the securities within the deferred compensation plan, IRA, or brokerage account.

To determine whether an investment meets the \$5,000 minimum for reporting, add the total value of all types of securities you and your family held in an individual business or other entity.

2. BUSINESS ACTIVITIES. List businesses; farms; rental, commercial, and income-producing real estate; and business activities in which you or your family had at least a 10% or greater interest.

- a) Enterprise(s) operating under a business or trade name, list here.** List the name of each business; farm; and rental, commercial and income-producing real estate that operated under a business name.
- b) Enterprise(s) NOT operating under a business or trade name, list here.**
- ◆ If you or a family member owned rental or other income-producing real estate, but did not operate under a business name, list the street address or fire number, municipality or town, county, and state of the real estate, and describe the nature of the business.
 - ◆ If you or a family member was self-employed, but did not operate under a business name, list the street address or fire number, municipality or town, county, and state of the real estate, and describe the nature of the business.

3. BUSINESS PARTNERS. For each enterprise reported under Item 2, list its co-owners, partners, officers, and directors (other than yourself), unless the information is already registered with the Wisconsin Department of Financial Institutions.

List separately for each business the names and locations:

- ◆ for a general partnership, its partners
- ◆ for a corporation not registered to do business in Wisconsin, its officers and directors
- ◆ for a limited partnership not registered to do business in Wisconsin, its general partners

Do not list:

- ◆ information for a limited partnership created or registered in Wisconsin
- ◆ information for a corporation created or registered in Wisconsin

4. COMMERCIAL CUSTOMERS, CLIENTS, AND TENANTS. For each unincorporated business, subchapter S corporation, service corporation (SC), limited liability company (LLC), partnership, or income-producing real estate reported under item 2 from which the filer or a member of the filer's immediate family received \$10,000 or more in the previous calendar year (1/1 to 12/31), list businesses, organizations, and lobbyists that paid the enterprise \$10,000 or more in the previous calendar year. Please place a checkmark in the appropriate column if the organization authorized you to represent it as an attorney-at-law, agent, spokesperson, or representative.

List:

- ◆ both a third-party payer as well as the customer, client, or tenant if the business received income from a third-party payer (such as a fee, commission, or insurance payment received by a realtor, travel agent, or medical practice)

Do not list:

- ◆ an individual (unless the individual was a lobbyist or acting on behalf of a business or organization)
- ◆ a decedent's estate

5. NON-COMMERCIAL REAL ESTATE. List the specific location of WISCONSIN REAL ESTATE in which you or your family had an interest (except your principal residence and real estate whose location you listed in Item 2).

List:

- ◆ real estate you or your family owned directly or through: (a) a partnership; (b) a corporation; (c) a trust; or (d) other enterprise

Do not list:

- ◆ your principal residence unless it was used for the conduct of a business or for rental purposes
- ◆ real estate for which you provided the location in Item 2

6. OFFICERS AND DIRECTORS. List organizations of which you or a family member was an officer or director (unless already listed in Item #2).

List:

- ◆ each business, labor union, association, cooperative, or other organization of which you or a family member was an officer or director

Do not list:

- ◆ charitable organizations (entities to which a contribution is tax deductible)
- ◆ political organizations (entities whose primary purpose is to influence voting)
- ◆ non-profit social or community service organizations
- ◆ trusts; or
- ◆ federal, state, or local governments or governmental agencies

7. AGENT, REPRESENTATIVE OR SPOKESPERSON. List organizations that authorized you or a family member to represent it in its dealings with others as an attorney-at-law, agent, spokesperson, or representative (unless already listed in Item 2, 3, or 6).

List:

- ◆ each business, labor union, association, cooperative, partnership, or other organization for which you or a family member was an authorized representative or legal agent
- ◆ in the case of a lawyer, business clients for which you or a family member was authorized to provide representation in dealing with other parties or before a tribunal

Do not list:

- ◆ employers listed in Item 9
- ◆ businesses you listed in Item 2 as having a 10% or greater interest
- ◆ individuals
- ◆ charitable organizations (entities to which a contribution is tax deductible)
- ◆ political organizations (entities whose primary purpose is to influence voting)
- ◆ non-profit social or community service organizations
- ◆ trusts
- ◆ federal, state, or local governmental agencies
- ◆ in the case of a lawyer, organizations for which your efforts or those of a family member did not include representation to third parties

8. CREDITORS. List creditors to which you or your family owed \$5,000 or more.

List:

- ◆ each creditor (for personal and business debts) if you or a family member was personally liable for the debt
- ◆ your portion of any partnership debts

Part B

For 1/1 to 12/31 of the previous calendar year

9. EMPLOYERS. List your and your family's EMPLOYERS (\$1,000 or more of income) in the previous calendar year.

List:

- ◆ each employer from which you or a family member received income of \$1,000 or more during the year
- ◆ if State of Wisconsin employee, the office or department

Do not list:

- ◆ an individual (unless the individual was a lobbyist or acting on behalf of a business or organization)

10. ADDITIONAL SOURCES OF INCOME. List other sources from which you or your family received income of \$1,000 or more in the previous calendar year.

List:

- ◆ Social Security payments
- ◆ an entity from which you or your family received retirement benefits
- ◆ an entity from which you or your family received directors fees
- ◆ in the case of a fee or commission, both a third-party payer as well as your customer, client, or tenant
- ◆ an entity that purchased real estate from you or your family
- ◆ an entity that furnished you or your family honoraria not reported in Item 12
- ◆ any source of income not listed in Item 2 or 9

Do not list:

- ◆ the source of dividends or interest
- ◆ the source of insurance benefits, inheritances, scholarships (if no teaching or services were required in return)
- ◆ the purchaser of securities unless you know the purchaser's identity
- ◆ an individual (unless the individual was a lobbyist or acting on behalf of a business or organization)

11. ENTERTAINMENT AND GIFTS. List individuals and organizations that provided you with entertainment or gifts (more than \$50) in the previous calendar year.

Do not list:

- ◆ gifts received by family members if they were not intended for you
- ◆ gifts from your spouse, child, parent, brother, sister, grandchild, grandparent, aunt, uncle, niece, nephew, fiancé(e), parent-in-law, grandparent-in-law, brother-in-law, or sister-in-law

A **"gift"** includes any money, property, favor, service, entertainment, travel, or payment furnished without valuable consideration. Include tickets to sporting or theatrical events, golfing fees, prizes, samples and promotional items, items from sales representatives or as part of business promotions, and similar items. A **"gift"** does not include political contributions reported to the Wisconsin Ethics Commission, or meals, beverages, or lodging that an individual offers as hospitality at his or her own expense, and not as a business expense, for reasons unrelated to your holding state public office.

12. HONORARIA AND EXPENSES. List, for the previous calendar year, sources of honoraria and payment of expenses related to your state government duties (more than \$50) not previously reported to the Wisconsin Ethics Commission.

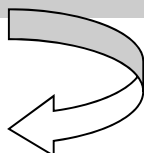
List:

- ◆ each individual or organization from which you received, in the previous calendar year, lodging, transportation, meals, expenses, or honoraria having a total value of more than \$50, for attendance at a conference, presentation of a talk, participation in a meeting, or for a published work about issues initiated by or affecting state government or state agencies

Do not list:

- ◆ information about lodging, transportation, meals, money or any other thing of pecuniary value:
 - (1) if you returned it within 30 days
 - (2) if you received it from the agency of which your state public office is a part
 - (3) if you received it from a source already listed in Items 2, 9, or 10
 - (4) if you already reported the payment to the Wisconsin Ethics Commission as a matter of public record

Mail or fax or email completed form to:
Wisconsin Ethics Commission
P.O. Box 7125
Madison, WI 53707-7125
Fax: (608) 264-9319
Email: Ethics@wi.gov



Keep a copy of your completed form for your records.

If you fax or email the form, keep the original--
Do not mail it to the Wisconsin Ethics Commission



Statement of Economic Interests

IF YOU ARE A CURRENT OFFICIAL, PLEASE CONSIDER FILING ELECTRONICALLY AT <https://sei.wi.gov> BEFORE USING THIS PAPER FORM. FOR EXPLANATIONS, EXAMPLES, AND EXCEPTIONS SEE THE INSTRUCTIONS OR VISIT OUR WEBSITE AT <https://ethics.wi.gov>. Email further questions to: Ethics@wi.gov.**Attach additional pages as needed/Please See Instructions.**

Last Name	First Name	Middle Initial	Start Date: (For new employees or nominees only)
<input type="checkbox"/> Check if a Current Official. <u>List State Position Held</u> (including agency, division, branch or district, if applicable):			
<input type="checkbox"/> Check if a Candidate. <u>List office sought</u> , including branch or district, if applicable, and election date.			

Part A As of December 31 or Nomination/Appointment Date

1. INVESTMENTS.

a) **Funds Available in Wisconsin Deferred Compensation Program.** These funds are available to participants in the Wisconsin Deferred Compensation program. If you held an investment of \$5,000 or more in any of these funds – either directly or through the program -- please check the appropriate box.

Deferred Compensation Funds	"√" one		Deferred Compensation Funds	"√" one	
	\$5,000 to \$50,000	Over \$50,000		\$5,000 to \$50,000	Over \$50,000
Profile Series			Large Cap and Balanced Funds		
Vanguard Retirement 2055 Fund			American Beacon Bridgeway		
Vanguard Retirement 2045 Fund			Calvert US Large Cap		
Vanguard Retirement 2035 Fund			Fidelity Contrafund		
Vanguard Retirement 2025 Fund			Vanguard Institutional Index Plus		
Vanguard Retirement 2015 Fund			Vanguard Wellington Admiral		
Vanguard Target Retirement Income			Bond Funds		
			BlackRock US Debt Index		
			Dodge & Cox Income		
International Funds			Federated US Gov't Securities 2-5 Yr.		
American Funds EuroPacific			Vanguard Long-Term Investment Grade		
BlackRock EAFE Equity Index			Money Market Funds		
Small Cap Funds			Vanguard Adm Treasury Money Market		
BlackRock Russell 2000 Index			Fixed Income Funds		
DFA US Micro Cap			Stable Value		
Mid Cap Funds			FDIC Bank Option		
BlackRock Mid Cap Equity Index			Brokerage Funds		
T. Rowe Price Mid Cap Growth			Schwab PCRA		

b) **Other Investments.** List stocks, bonds, limited partnerships, Wisconsin governmental securities, and mutual and money market funds in which you and your family's interest was valued at \$5,000 or more. Please attach a list with additional items if necessary.

Name Of Security	Type of security - "√" one					Amount - "√" one	
	Mutual or Money Market Fund	Stock/Option/Futures	Bond	Limited Partnerships	Wisconsin Governmental Securities	\$5,000 To \$50,000	More Than \$50,000

2. **BUSINESS ACTIVITIES.** List businesses, farms, rental, commercial, and income-producing real estate; and business activities in which you or your family had at least a 10% or greater interest.

a) **Enterprise(s) operating under a business or trade name, list here.**

Name of business	Municipality	County	State	Describe nature of business

b) **Enterprise(s) NOT operating under a business or trade name, list here.**

Name of business	Municipality	County	State	Describe nature of business

3. **BUSINESS PARTNERS.** For each enterprise reported under Item 2, list its co-owners, partners, officers, and directors (other than yourself), unless the information is already registered with the Wisconsin Department of Financial Institutions.

Business	Partners, or officers and directors	City	State

4. **COMMERCIAL CUSTOMERS, CLIENTS, AND TENANTS.** For each unincorporated business, subchapter S corporation, service corporation (SC), limited liability company (LLC), partnership, or income-producing real estate reported in Item 2, from which the filer or a member of the filer's immediate family received \$10,000 or more in the calendar year, list businesses, organizations, and lobbyists that paid the enterprise \$10,000 or more in the calendar year. Check the far-right box if the organization authorized you to represent it in its dealings with others as an attorney-at-law, agent, spokesperson, or representative.

Businesses, organizations, or lobbyists that were customers, clients, or tenants	City	State	<input type="checkbox"/>

5. **NON-COMMERCIAL REAL ESTATE.** List the specific location of WISCONSIN REAL ESTATE in which you or your family had an interest (except your principal residence and real estate whose location you listed in item 2).

LOCATION OF PROPERTY			NATURE OF INTEREST
Street address or fire number	Municipality	County	(own, lease, option, easement, land contract)

6. **OFFICERS AND DIRECTORS.** List organizations not listed in item #2 of which you or a family member was an officer or director.

Business or organization	City	State	Position

7. **AGENT, REPRESENTATIVE OR SPOKESPERSON.** List each organization that authorized you or a family member to represent it in its dealings with others as an attorney-at-law, agent, spokesperson, or representative (unless listed in item 2, 3, or 6.)

Business or organization	City	State

8. **CREDITORS.** List creditors to which you or your family owed \$5,000 or more.

Creditor	City	State	"✓" one	
			\$50,000 or less	Over \$50,000

Part B For The Previous Calendar Year (January 1 to December 31)

9. **EMPLOYERS.** List your and your family's EMPLOYERS (\$1,000 or more of income).

Name of employer (If State of Wisconsin, identify agency/institution)	City	State	Nature of employer's business

10. **ADDITIONAL SOURCES OF INCOME.** Other sources from which you or your family received income of \$1,000 or more.

Source of Income	City	State

11. **ENTERTAINMENT/GIFTS.** Individuals or organizations that provided *you* with entertainment or gifts (over \$50 in the aggregate).

Name of provider	City	State

12. **HONORARIA AND EXPENSES.** Sources of honoraria and payment of expenses related to *your* state government duties (more than \$50 in the aggregate).

Date Received	Payer	Value of expenses	Amount of honorarium	Circumstances of receipt

Printed Name:	
Daytime Phone Number:	Email Address:
This filing is for: <ul style="list-style-type: none"> <input type="checkbox"/> Annual Filing due by April 30, _____ (fill in appropriate year) covering the preceding year <input type="checkbox"/> My nomination/appointment, which occurred or will occur on _____ (date) <input type="checkbox"/> My candidacy to participate in an election. The election date is: _____ (election date) 	
This filing includes _____ (#) of pages	

I have read the accompanying instructions and certify that the information contained in this Statement of Economic Interests is true, complete, and correct to the best of my knowledge, information, and belief. In the event this Statement of Economic Interests is filed prior to December 31st for the following calendar year, I certify that I will amend it on or before the statutory filing deadline to accurately reflect my economic interests as of December 31st. If any part has been left blank, I have done so intentionally because there is nothing to report.

The information sought in this form is required by Wis. Stat. §§19.43 and 19.44, Wis. Admin. Code § UWS 8.06, UW Board of Regents Policy, or Supreme Court Rule 60.05. Failure to file a completed form may result in a forfeiture of up to \$500. Statements of Economic Interests are open for public inspection. The Wisconsin Ethics Commission will notify you of the identity of any person who examines your Statement. In accordance with Wis. Stat. §15.04(1)(m), the Wisconsin Ethics Commission states that no personally identifiable information is likely to be used for purposes other than those for which it is collected.

Signature of person required to file

Date Signed