

\$40 FILING FEE

JOINT LEGISLATIVE ETHICS COMMITTEE
50 WEST BROAD STREET, SUITE 1308
COLUMBUS, OH 43215



THIS STATEMENT IS TO BE
FILED IN 2015 FOR THE
CALENDAR YEAR 2014

2014 Financial Disclosure Statement

Please provide a complete address and telephone number
PLEASE PRINT OR TYPE (Do not use pencil)

House

Senate

Agency

1. NAME OF PERSON FILING STATEMENT

Pillich

LAST

Connie

FIRST

M.I.

2. MAILING ADDRESS (May use Home, Business or Govt.)

9910 Forestglen Drive

STREET

Montgomery

CITY

45242

ZIP CODE

Hamilton

COUNTY

(513) 792-9668

TELEPHONE NUMBER

3. EMAIL ADDRESS (OPTIONAL) _____

4. CURRENT EMPLOYER(S) (Other than the General Assembly)

1 None

2

3

4

5

2015 APR 17 PM 1:06

OFFICE OF
LEGISLATIVE
INSP. GENERAL

Financial Disclosure Statement Instructions

YOU MUST COMPLETE THIS FORM IF:

- * You are a member of the General Assembly during 2015;
- * You were a member of the General Assembly during 2014;
- * You are currently, or were in 2014, an employee of the General Assembly or any legislative agency who is designated by the Joint Legislative Ethics Committee or employing agency, as a financial disclosure statement filer.

FILING FEE: \$40 FILING FEE. Campaign funds MAY be used for this fee. If you are or were an employee (non-elected) of the General Assembly or any legislative agency, the \$40 fee will be invoiced to your agency at a later date.

PENALTIES: Any person who knowingly files a false statement may be subject to criminal prosecution of a first degree misdemeanor. Any person who fails to file a **complete** financial disclosure statement by the appropriate deadline may be assessed a late filing fee of \$10.00 for each day the statement is late, up to a maximum of \$250.00, and may also be subject to criminal prosecution of a fourth degree misdemeanor.

FILING DEADLINE: The filing deadline is **Wednesday April 15, 2015**, unless you are:

- * **AN INCUMBENT MEMBER OF THE GENERAL ASSEMBLY** whose name will appear on any 2015 Primary Election Ballot for local office. The filing deadline is 30 days prior to the Primary Election or April 15, 2015, whichever is earlier.
- * **AN APPOINTEE TO THE GENERAL ASSEMBLY:** Any person appointed to fill a vacancy for an un-expired term in the General Assembly must file within 15 days after he or she qualifies for office.
- * **A NEWLY HIRED OR PROMOTED EMPLOYEE:** An employee of the General Assembly, or any legislative agency, must file by April 15, 2015, unless you were employed or promoted to a filing position in 2015, then you must file within 90 days after employment or promotion.

ATTACHMENTS: You may attach additional pages as necessary; however, please reference the appropriate section for which you are submitting additional information.

**FOR MORE INFORMATION, PLEASE CONTACT THE JOINT LEGISLATIVE ETHICS COMMITTEE,
OFFICE OF THE LEGISLATIVE INSPECTOR GENERAL AT (614)728-5100.**

**THIS IS A PERSONAL FINANCIAL DISCLOSURE STATEMENT.
THIS IS NOT A CAMPAIGN FINANCE-RELATED REPORT.**

1. INCOME

Complete **EITHER** Section A (Members) or Section B (Employees), whichever is applicable.

A. IF YOU ARE A MEMBER OF THE GENERAL ASSEMBLY IN 2015 OR WERE A MEMBER OF THE GENERAL ASSEMBLY IN 2014: You are required to list **EVERY** source of income and identify the amount from that source in accordance with the following ranges and appropriate identifying letter: A. \$0 - \$999; B. \$1,000 - \$9,999; C. \$10,000 - \$24,999; D. \$25,000 - \$49,999; E. \$50,000 - \$99,999; F. \$100,000 or more. **"Income" includes sources of gross income for federal tax purposes and interest and dividends on all governmental securities.** Also, list each source of income received by any other person for your use or benefit. You are not required to list the source of income of your spouse, unless the income was received specifically for your use or benefit. MILEAGE REIMBURSEMENT IS REPORTED IN "SECTION 8. TRAVEL". DO NOT INCLUDE MILEAGE REIMBURSEMENT IN "SECTION 1. INCOME".

You are not required to list the individual items of income from your business or profession, only the name of any business, governmental agency, or employer from which you received income; EXCEPT (1) you must list the source and dollar amount of income received, or shared with a partner in your business or profession, that is attributable to services or goods provided to a client or customer who is a "legislative agent" AND/OR (2) you must list the source and dollar amount of income received from a person or entity that is doing or seeking to do business with the General Assembly.

Attorneys, physicians, or other professionals subject to confidentiality requirements as described in Revised Code Section 102.02(A)(2)(c) should list each practice separately but need not disclose the names of their clients, patients, or other recipients of professional services unless those clients, patients, or other recipients are legislative agents. If the client, patient, or other recipient is a legislative agent, you must disclose each client, patient, or other recipient unless excepted under Revised Code Section 102.02(A)(2)(c).

For each source of income listed, briefly **describe the services** for which the income was received.

EXAMPLE:

SOURCE OF INCOME	SERVICE PERFORMED	AMOUNT (A, B, C, D, E, OR F)
State of Ohio	Senator/Representative	E
Smith and Jones Law Firm	Lawyer	C
Friendly National Bank	Interest on Savings Account	A
Leo Lobbyist - Legislative Agent	Boat Insurance Policy	\$143.00
123 Main Street	Rental Income	B

IF NONE, CHECK HERE

	SOURCE OF INCOME	SERVICE PERFORMED	AMOUNT (A, B, C, D, E, OR F)
1	State of Ohio	Representative	E
2	Huntington National Bank	Interest	A
3	Keesler Federal Credit Union	Interest	A
4	Kim Bond	Interest	A
5	Linguini Group	Interest, Dividends, Cap Gains	A
6	UBS Financial Services	Div, Int, Cap Gains, Distr	C
7	UBS Money Market	Interest	A
8	Fidelity Destiny Plans	Div, Cap Gains	C
9	Rental Income 3613-3615 Amberson Ave	Rental Income	C
10	State of Ohio	Income Tax Refund	A
11			
12			

B. IF YOU ARE AN EMPLOYEE OF THE GENERAL ASSEMBLY OR ANY LEGISLATIVE AGENCY:

You are required to list each source of gross income. **You are not required to disclose any dollar amounts except as indicated below.** Also, list each source of income received by any other person for your use or benefit. Remember to list your employment as a source of income. **"Income" includes gross income for federal tax purposes and interest and dividends on all governmental securities.** You are not required to list the sources of income of your spouse, unless the income was received specifically for your use or benefit.

You are not required to list the individual items of income from your business or profession, only the name of any business, governmental agency, or employer from which you received income; EXCEPT (1) you must list the source and dollar amount of income received, or shared with a partner in your business or profession, that is attributable to services or goods provided to a client or customer who is a "legislative agent" AND/OR (2) you must list the source and dollar amount of income received from a person or entity that is doing or seeking to do business with the General Assembly.

Attorneys, physicians, and other professionals subject to confidentiality requirements as described in Revised Code Section 102.02(A)(2)(c) should list each practice separately but need not disclose names of their clients, patients, or other recipients of professional services, unless those clients, patients, or other recipients are legislative agents. If the client, patient, or other recipient is a legislative agent, you must disclose each client, patient, or other recipient, unless excepted under Revised Code Section 102.02(A)(2)(c).

For each source of income listed, briefly **describe the services** for which the income was received.

IF NONE, CHECK HERE

SOURCE OF INCOME	SERVICE PERFORMED	AMOUNT (if required)
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2. IMMEDIATE FAMILY MEMBERS

List the names of members of your immediate family. "Immediate family" is defined as your spouse residing in your household and any dependent child.

IF NONE, CHECK HERE

1 Paul A. Forshey	2 Kayla P. Forshey
3 Tallin P. Forshey	4
5	6
7	8
9	10

3. BUSINESS NAMES

List all names under which you or members of your immediate family do business.

IF NONE, CHECK HERE

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4A. Fiduciary Relationships

List the names of each corporation incorporated or authorized to do business in Ohio and each trust, business trust, partnership, or association authorized to do or transact business in Ohio in which you hold an office or have a fiduciary relationship (regardless of any monetary investment), including holding office in a not-for-profit corporation. For each listing, give a brief description of the office or relationship.

EXAMPLE:

NAME OF CORPORATION, TRUST, BUSINESS TRUST, PARTNERSHIP, OR ASSOCIATION	NAME OF OFFICE OR FIDUCIARY RELATIONSHIP
Smith and Jones	Partner
XYZ Inc.	President
Neighborhood Civic Association	Volunteer Trustee

IF NONE, CHECK HERE

NAME OF CORPORATION, TRUST, BUSINESS TRUST, PARTNERSHIP, OR ASSOCIATION	NAME OF OFFICE OR FIDUCIARY RELATIONSHIP
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4B. Investments

List the names of each corporation incorporated or authorized to do business in Ohio and each trust, business trust, partnership, or association authorized to do or transact business in Ohio in which you or any other person for your use or benefit had an investment of more than \$1,000 during 2014 (at fair market value as of December 31, 2014, or the date of disposition, whichever is earlier). Include all investments of more than \$1,000 even though they constitute a source of income.

You do not have to disclose accounts with banks, building and loan associations, savings and loan associations, and credit unions if the amount is a deposit or withdrawable share account. You are not required to list investments held solely by your spouse unless the investment is strictly for your use or benefit. For each listing, give a brief description of the investment.

EXAMPLE:

NAME OF CORPORATION, TRUST, BUSINESS TRUST, PARTNERSHIP, OR ASSOCIATION	TYPE OF INVESTMENT
Acme Corporation	Common Stock
Public Employee Retirement System of Ohio (PERS)	Retirement Fund
Public Employee Deferred Compensation	Mutual Fund
Brokerage Firm	Money Market Account
ABC Fund	Mutual Fund

IF NONE, CHECK HERE

NAME OF CORPORATION, TRUST, BUSINESS TRUST, PARTNERSHIP, OR ASSOCIATION	TYPE OF INVESTMENT
1 Linguini Group	Investment Club
2 Fidelity Destiny Plans	Mutual Fund
3 Hancock	Custodian, 529 plan for child
4 PERS	Retirement Plan
5 UBS Investments	Mutual Fund, Money Market, IRA
6 USAA Investment Management Co.	Coverdell (custodian)
7 S&P Index Fund	Stock Index Fund
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5. REAL ESTATE

List all **leasehold or ownership interests in real property located in Ohio** to which you hold legal title or in which you have any beneficial interest. You do not have to list your personal residence or any real property used primarily for personal recreation. List by address, parcel number, or other legal description.

IF NONE, CHECK HERE

	STREET ADDRESS	CITY	COUNTY	ZIP CODE
1	3613-3615 Amberson Ave	Cincinnati	Hamilton	45208
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6. CREDITORS

List the names of all creditors residing or transacting business in Ohio to whom **you owe, or have owed**, at any time during the calendar year 2014, more than \$1,000 in your own name or in the name of any other person. You must disclose automobile loans, school loans, credit card accounts, and all other similar accounts if the balance exceeded \$1,000 at any time during the calendar year 2014, even if no balance is currently outstanding. You do not have to disclose the debts on your personal residence or real property used primarily for personal recreation, or short-term debts resulting from the ordinary conduct of a business or profession.

IF NONE, CHECK HERE

1 Union Savings Bank	2 Kemba Credit Union
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7. DEBTORS

List the names of all **debtors** residing or transacting business in Ohio who **owe, or have owed, you** at any time during the calendar year 2014, more than \$1,000 in your own name or in the name of any other person for your use or benefit. If you are an attorney, physician, or any other professional subject to a confidentiality requirement as described in Revised Code Section 102.02(A)(2)(c), you do not have to disclose the names of your clients, patients or other recipients of professional services. You do not have to disclose the names of persons indebted to you if they are short-term debts resulting from the ordinary conduct of your business or profession. Banks, building and loan associations, savings and loan associations, and credit unions need not be listed if the only monies owed to you by them are monies which you deposited with such institutions or which are in a withdrawable share account.

IF NONE, CHECK HERE

1 Kim Bond	2
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8. TRAVEL

List the **source** and **amount** of each payment of expenses incurred for **official travel**. Travel expenses include payments or reimbursements received by you in your own name, or by any other person for your use or benefit, for travel **in connection with your official duties**. You must disclose every payment or reimbursement of expenses for travel **both** inside and outside of Ohio. **You must disclose travel payments or reimbursements, INCLUDING but not limited to MILEAGE REIMBURSEMENTS, made to you, or on your behalf, by the General Assembly. Members and employees of the General Assembly need not disclose official travel in a vehicle owned or leased by a state agency or state institution of higher education.**

You do not have to disclose expenses incurred at a meeting or convention of a national or state organization to which **any state agency**, including, but not limited to, any legislative agency or state institution of higher education as defined in Section 3345.011 of the Revised Code, or any political subdivision in Ohio pays membership dues. Questions regarding membership status should be directed to the organization.

IF NONE, CHECK HERE

	SOURCE	AMOUNT
1	Ohio House of Representatives mileage reimbursement for travel to Statehouse	\$2708.16
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9. GIFTS

List the source of each gift worth more than \$75, aggregated for the calendar year 2014, received by you in your own name, or by any other person for your use or benefit. If you are a member or employee of the General Assembly, also list the source of each gift or gifts over \$25, aggregated for the calendar year 2014, received from a legislative agent. If you are a member or employee of the General Assembly, you are prohibited from receiving a gift or gifts from a legislative agent where the value of the gift or gifts aggregated per calendar year, exceeds \$75.

You do not have to disclose the source of gifts received under a will or by inheritance. Also, you do not have to disclose the source of the gifts received from your spouse, parents, grandparents, children, grandchildren, siblings, nephews, nieces, uncles, aunts, cousins, step-relations, brothers-in-law, sisters-in-law, sons-in-law, daughters-in-law, fathers-in-law, mothers-in-law, or any person to whom you stand in loco parentis, or received by way of distribution from any inter vivos or testamentary trust established by a spouse or ancestor.

IF NONE, CHECK HERE

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10. MEALS, FOOD AND BEVERAGES

List the **source** of each payment of expenses for **meals and other food and beverages** received in connection with your **official duties** that exceed \$100 aggregated for the calendar year 2014. Expenses include payments or reimbursements to you. You must include the General Assembly if it was the source of expenses or reimbursements for meals, food, or beverages totaling over \$100 for the calendar year 2014.

You are not required to disclose the source of meals and other food and beverages provided at a meeting at which you participated in a panel, seminar, or speaking engagement; or at a meeting or convention of a national or state organization to which **any state agency**, including, but not limited to, any legislative agency or state institution of higher education as defined in Section 3345.011 of the Revised Code, or any political subdivision in Ohio pays membership dues. Nor must you disclose any meals or beverages, which have been reported in Section 8 above as travel expenses paid by the General Assembly.

IF NONE, CHECK HERE

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11. NON-DISPUTED INFORMATION

The lobbying community must file final lobbying expenditure reports with the Joint Legislative Ethics Committee by February 2, 2015. **Not later than February 20, 2015, JLEC will provide each Member of the General Assembly and each legislative staff filer with a personalized report of non-disputed information for 2014.** If you do not dispute this report, please attach it to your statement. If you dispute the information contained therein, or did not receive a report, please contact JLEC at 614-728-5100. You can monitor reported lobbying expenditures at any time by visiting the Ohio Lobbying Activity Center at www.ohiolobbying.com.

PLEASE SEE ATTACHMENT "NON-DISPUTED INFORMATION REPORT":

I HAVE NO NON-DISPUTED INFORMATION TO REPORT:

I PREFER TO LIST MY NON-DISPUTED INFORMATION BELOW:

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12. LICENSES

Any **member of the General Assembly** who engages in the conduct or practice of a particular business, profession, trade, or occupation that is subject to licensing or regulation by any branch, department, division, institution, instrumentality, board, commission, or bureau of the state, is required to file a notice that he or she is the holder of a particular license, or is engaged in such activity, as part of the financial disclosure statement. Therefore, if you are a member of the General Assembly, list all licenses held or a description of any regulated activity.

IF NONE, CHECK HERE

License(s) Held	Attorney, Supreme Court of Ohio
	Federal District Court for Southern Ohio, Sixth Circuit Court of Appeals
Regulated Activity	Practice of Law

BEFORE SIGNING THIS STATEMENT, PLEASE REVIEW EVERY QUESTION TO MAKE CERTAIN YOU HAVE DISCLOSED THE NECESSARY INFORMATION OR, IF YOU HAVE NOTHING TO DISCLOSE IN A GIVEN QUESTION, YOU HAVE CHECKED THE BOX MARKED "NONE".

IF THE ANSWER TO ANY QUESTION IS OMITTED, THE STATEMENT IS INCOMPLETE UNDER THE LAW AND WILL BE RETURNED TO YOU.

PERSONS WHO FAIL TO FILE A COMPLETE STATEMENT BY THE APPROPRIATE DEADLINE MAY BE ASSESSED A LATE FILING FEE. A KNOWING FAILURE TO FILE IS A MISDEMEANOR OFFENSE.

ACKNOWLEDGMENT

By signing below, I swear or affirm that this statement and any additional attachments were prepared or carefully reviewed by me and constitute a complete, truthful, and correct disclosure of all required information.

By signing below, I acknowledge awareness and understanding of Sections 102.02(D) and 2921.13(A)(7) of the Ohio Revised Code which prohibit me from knowingly filing a false statement and which are criminal misdemeanors of the first degree, punishable by a fine of not more than \$1,000 or imprisonment of not more than six months, or both. (See Revised Code Sections 102.99(B), 2921.13(F)(1), and 2929.21.)

By signing below, I acknowledge that I am required to pay a **\$40 FILING FEE** (check or money order ONLY made payable to JLEC), or that I am, or was, an employee (non-elected) of the General Assembly, or any legislative agency and that my agency will be invoiced at a later date.

Your Signature is Required Connie Pelleich Date 4/14/15

NOTE: No person is required to file more than one financial disclosure statement for any given calendar year with the appropriate ethics agency. If you are a member of the Ohio General Assembly you will file the JLEC statement with the Joint Legislative Ethics Committee regardless of your status as a former local or statewide officeholder, candidate for local or statewide office or service on a state board or commission. **If you are a member or employee of the General Assembly and receive a Financial Disclosure Statement from the Ohio Ethics Commission, DISREGARD the statement provided by the Ohio Ethics Commission.**

RETAIN A COPY OF THIS STATEMENT FOR YOUR RECORDS

This statement is to be submitted to:

JOINT LEGISLATIVE ETHICS COMMITTEE
OFFICE OF THE LEGISLATIVE INSPECTOR GENERAL
50 West Broad Street, Suite 1308
Columbus, Ohio 43215-5908
(614)728-5100

FOR OFFICIAL USE ONLY:

Reviewed By: Jennifer M. Burkwood Date 4/20/15
 Filer answered every question Filer has not answered these questions _____
Date form returned to filer: / / Date completed form received at OLIG / /

9910 Forestglen Drive
Cincinnati, Ohio 45242
14 April 2015

Joint Legislative Ethics Committee
Office of the Legislative Inspector General
50 W. Broad Street, Suite 1308
Columbus, OH 43215-5908

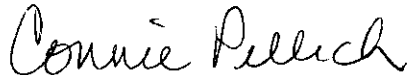
RE: Annual Financial Disclosure

Dear Sir or Madam:

Enclosed please find my Financial Disclosure Statement and filing fee for calendar year 2014. I have enclosed a copy of the first page. Would you please file stamp it and return it in the self-addressed stamped envelope?

Thank you.

Sincerely,

A handwritten signature in cursive script that reads "Connie Pillich". There are two short horizontal lines above the signature.

Connie Pillich



THE OHIO GENERAL ASSEMBLY

JOINT LEGISLATIVE ETHICS COMMITTEE

OFFICE OF THE LEGISLATIVE INSPECTOR GENERAL

50 W. Broad Street, Suite 1308, Columbus, OH 43215 • (614) 728-5100 • www.jlec-olig.state.oh.us

To: Joint Legislative Ethics Committee
From: The Honorable Connie Pillich
Date: February 20, 2015
Re: §11 Non-disputed Information for the 2014 Financial Disclosure Statement to be filed in 2015

I do not dispute the following final report of non-disputed information for calendar year 2014. Attachment of this report fulfills my requirements for Section 11.

Legislative Expenditure Search

Reporting Period: Starting: Ending:

Employer Name:

Bill:

Recipient:

Industry:

Type:

Explanation

No matching expenditures found.

Rep. Period	Employer	Agent F Name	Agent L Name	Type	Recipient	Bill	Description	Amount	Date
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TOTAL: \$0.00

Ms. Connie Pillich

9910 Fo

Cincinnati

Charter A

