

FINANCIAL DISCLOSURE STATEMENT

RECEIVED
City Clerk's Office

8-21-23

Printed Name: Emily Francis

Choose *one column only* and then check appropriate boxes within that column.

| Column 1 |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Filing as: <input type="checkbox"/> Mayor/Councilmember <i>(currently seated – not seeking reelection)</i> |
| Type of Filing: <input type="checkbox"/> Post-Election/Appointment Filing <input type="checkbox"/> Annual Filing |
| Status: <input type="checkbox"/> This is my first filing as an elected/appointed official <i>(answer all questions completely)</i> <input type="checkbox"/> This amends my previous filing dated _____ <i>(answer all questions completely)</i> <input type="checkbox"/> There have been no changes since my previous filing dated _____ <i>(skip to signature line)</i> |

| Column 2 |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Filing as: <input checked="" type="checkbox"/> Council Candidate <i>(new candidates and incumbents)</i> |
| Type of Filing: <input checked="" type="checkbox"/> Candidate Filing |
| Status: <input checked="" type="checkbox"/> This is my first filing as a candidate <i>(answer all questions completely)</i> <input type="checkbox"/> This amends my previous filing dated _____ <i>(answer all questions completely)</i> |

| Column 3 |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Filing as: <input type="checkbox"/> City Manager <input type="checkbox"/> City Attorney |
| Type of Filing: <input type="checkbox"/> Post-Appointment Filing <input type="checkbox"/> Annual Filing |
| Status: <input type="checkbox"/> This is my first filing as an appointed official <i>(answer all questions completely)</i> <input type="checkbox"/> This amends my previous filing dated _____ <i>(answer all questions completely)</i> <input type="checkbox"/> There have been no changes since my previous filing dated _____ <i>(skip to signature line)</i> |

List the source or sources of any income, including capital gains, whether or not taxable, of the person making disclosure and such person's spouse. (It is not necessary to list amounts.)

Colorado Department of Public Health & the Environment
(State of Colorado)

City of Fort Collins

Indicate any financial interest in excess of \$10,000 in any business entity.

Provide the legal description of any interest in real property owned by the person making disclosure or such person's spouse.

2404 Tamarac single family home
2437 Crabtree duplex

Identify by name all offices and directorships held by the person making disclosure and such person's spouse.

Poudre Fire Authority Vice chair
Housing Catalyst Commissioner

List the name of each creditor to whom the person making disclosure or such person's spouse owes money in excess of \$10,000.

List businesses with which the person making disclosure, or such person's spouse, are associated that do business with or are regulated by the City of Fort Collins and the nature of such business or regulation.

Provide any additional information which the person making disclosure might desire.

Signature: _____



8/21/23

Date

