

**GOVERNMENT OF THE DISTRICT OF COLUMBIA
BOARD OF ETHICS AND GOVERNMENT ACCOUNTABILITY**



FINANCIAL DISCLOSURE PARTIAL WAIVER REQUEST

Pursuant to D.C. Official Code § 1-1162.24(a)(2) the Board of Ethics and Government Accountability (“the Board”) may, on a case-by-case basis, exempt a public official from the public FDS filing requirement or some portion of the requirement for good cause shown.

The Board may consider the following good cause factors when deliberating on such matters:

- (a) Personal or physical safety concerns;
- (b) Articulable identity theft or security breach concerns (a general fear of a possible breach without an articulable threat will not be considered);
- (c) Secret or sensitive government information concerns or competitive or secret financial or business concerns;
- (d) Undue burden; or
- (e) Other substantial or important matters of first impression

Waiver requests submitted pursuant to this rule should be submitted, in writing, to the Board within fifteen (15) days of receiving written notification of the annual filing requirement.

The Board shall issue a written Decision and Order for each waiver request at the Board meeting that occurs next in time to the partial waiver request.

It is unnecessary for Confidential Financial Disclosure Statement (“CFDS”) filers to submit this request form as completed CFDS forms are not made available to the public.

A pending waiver request is not good cause for an extension of the Financial Disclosure filing deadline, except when the Office of Government of Ethics has caused delay in the processing of the pending request. **If the Board’s consideration of your request might cause you to miss the May 15th filing deadline, please submit a deadline extension request along with this form.**

Please read the information provided on this form carefully and then submit this fully completed form to bega-fds@dc.gov or Board of Ethics and Government Accountability, 441 4th Street, NW, Suite 830 South, Washington, DC 20001.

Your request will be considered by the Board at its next Board meeting. If you would like to attend the meeting at which your request is being considered please indicate your interest in attending on this form.

NAME:

AGENCY, POSITION AND SALARY:

ADDRESS:

EMAIL ADDRESS:

Reason for Filing Waiver Request (*if more space is needed, use a blank sheet of paper and attach to this form*):

SIGNATURE:

DATE:

FOR INTERNAL USE ONLY:

DATE:

CASE NUMBER:

RESPONSE OF THE OFFICE OF GOVERNMENT ETHICS:

- The Office of Government Ethics **does not oppose** this request. See explanation below.
- The Office of Government Ethics **opposes** this request. See explanation below.

Explanation:

The OGE employee completing the above section must print their initials anywhere within the section.

FOR INTERNAL USE ONLY:

DATE:

DECISION:

- Good cause was shown, and the waiver request is, hereby, GRANTED.**
- No good cause was shown, and the waiver request is, hereby, DENIED.**

Explanation:

CHAIRPERSON PRINTED NAME

CHAIRPERSON SIGNATURE