

STATE ETHICS COMMISSION
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REQUEST TO DELETE POSITION FROM FINANCIAL DISCLOSURE LIST (Form No. 8)

Use this form to request the deletion of a position (job) from the financial disclosure list applicable to your Department or agency. **To request the deletion of a person**, rather than the position, from the list, **use Form No. 8A.**

Name of Department or Agency: _____

Agency Code: _____

Name of Person in Position to be Deleted: _____

Person's E-mail Address: _____

Position or Job Title: _____

PIN Number: _____

Salary Grade: _____

(Or compensation if not State graded)

REASON OR REASONS FOR DELETION FROM LIST - CHECK ALL THAT APPLY

- Salary and Duties Not Applicable
- Duties Relating to Contracts Not Applicable

In the space below briefly explain the reasons why the duties of a position no longer require the filing of a financial disclosure statement. Consult the [Financial Disclosure Filer Identification Manual](#) or Commission regulations explaining who must file financial disclosure before preparing this explanation. Clarify whether the duties are being changed or the position is being abolished. Also, attach a job description or describe in detail the current duties.

Signature of Department or Agency representative authorized to make this request. (The Head of the Department or Agency involved must authorize Persons making these requests.)

Signature

Date

Print Name