

When an amount is requested, use the following numerical code: 1=less than \$10,000; 2=\$10,000-\$24,999.99; 3=\$25,000-\$49,999.99; 4=\$50,000 or more.

B. DIVIDENDS

	Name	Address	Amount Code				Self	Spouse	Child
			1	2	3	4			
1)	see attached schedule		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2)			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3)			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4)			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

C. INCOME from investments, trusts and estates (including capital gains).

	Name	Address	Amount Code				Self	Spouse	Child
			1	2	3	4			
1)	see attached schedule		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2)			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3)			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4)			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

III. HONORARIA and FEES: List the name, address, nature and amount for each source of honorarium or fee received by you or your spouse for personal appearances, speeches or writings.

	Name & Nature of Honorarium or Fee	Address	Amount Code				Self	Spouse
			1	2	3	4		
1)	all honoraria and fees for speaking are not accepted		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2)	and organizations donate them to mental health		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3)	charitable organizations		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4)	Essex County Country Club	350 Mt. Pleasant Ave., West Orange, NJ 07052	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	

IV. REIMBURSEMENTS or PREPAID EXPENSES for TRAVEL, LODGING or SUBSISTENCE: List the name, address, nature and amount for each source of reimbursement or prepaid expense and indicate whether source is a profit (P), nonprofit (N), or governmental (G) entity.

	Name & Nature of Reimbursement or Prepaid Expense	Address	Amount Code				Self	Spouse	Child	Check Source			
			1	2	3	4				P	N	G	
1)	Jomar Agency, LLC	300 Executive Dr., West Orange, NJ 07052	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2)			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3)			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4)			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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 NEW JERSEY
 STATE ARCHIVE
 SERVICE

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V. GIFTS: List the name, address, nature and amount for each source of gift to you, your spouse or minor child from a named donor connected to the legislative process.

	Name & Nature of Gift	Address	Amount Code				Self	Spouse	Child
			1	2	3	4			
1)	None		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2)			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3)			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4)			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

VI. LIABILITIES: List the name and address of each creditor for you or your spouse and the nature and amount of each liability except for liabilities which are: (a) less than \$15,000 and owed to a relative; (b) less than \$3,000 and owed to any other person; (c) loans secured by a personal motor vehicle or household furniture or appliances; or (d) revolving charge accounts.

	Name & Nature of Liability	Address	Amount Code				Self	Spouse
			1	2	3	4		
1)	Somerset Hills Bank	Bernardsville, NJ	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	
2)	Wells Fargo Bank	Des Moines, Iowa	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	
3)			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4)			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

VII. FORGIVEN LIABILITIES: List the name and address of each former creditor for you or your spouse and the nature and amount of each forgiven liability which would have been required to be reported pursuant to VI above had it not been forgiven.

	Name & Nature of Forgiven Liability	Address	Amount Code				Self	Spouse
			1	2	3	4		
1)	None		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2)			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3)			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4)			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

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 STATE OF CONNECTICUT
 COMPTROLLER OF REVENUES

VIII. BUSINESS ORGANIZATIONS: List the name and address of all business organizations in which you or your spouse held an interest.

	Name	Address	Self	Spouse
1)	Devils Advocate	Newark, NJ	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2)	See attached schedule		<input type="checkbox"/>	<input type="checkbox"/>
3)			<input type="checkbox"/>	<input type="checkbox"/>
4)			<input type="checkbox"/>	<input type="checkbox"/>

IX. OFFICES, TRUSTEESHIPS, OR DIRECTORSHIPS: List the title of each position held by you or your spouse in any firm, corporation, association, partnership or business and the name and address of the entity in which the position was held.

	Position Held	Name & Address of Entity	Self	Spouse
1)	Member/Owner	Devils Advocate Newark, NJ	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2)	See attached schedule		<input type="checkbox"/>	<input type="checkbox"/>
3)			<input type="checkbox"/>	<input type="checkbox"/>
4)			<input type="checkbox"/>	<input type="checkbox"/>

X. REAL ESTATE: Provide the address and a brief description for all real property in New Jersey in which you, your spouse, or minor child held an interest.

	Property Address	Description of Property	Self	Spouse	Child
1)	20 Ford Lane, Roseland, NJ	Personal Residence	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2)	107 Essex Ave., Boonton, NJ	Investment	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3)	10 Eisenhower Parkway, Roseland, NJ	Investment	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4)			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

I certify that the above information is correct and complete to the best of my knowledge. In addition to this statement, you have a continuing obligation to report any termination or assumption of public employment of yourself or your spouse within 30 days, which report shall be an addendum to this statement.

April 10, 13
Date

Richard J. Goff
Signature of Member (must be an ORIGINAL signature, not a facsimile, stamp or photocopy)

**Richard J. Codey
2012**

Dividends - Section B

Estate of Patricia Codey (16% interest)	Self - 1	Estate of Patricia Codey, Orange, NJ
Call Mankind Corp Due	Self - 1	Publically Traded
Call Mankind Corp New	Self - 1	Publically Traded
Call Questcor Pharmaceut	Self - 1	Publically Traded
Call Sirius XM Radio Inc	Self - 1	Publically Traded
Hertz Global Holdings Inc	Self - 1	Publically Traded
Mannkind Corp New	Self - 1	Publically Traded
Medallion Finl Corp	Self - 1	Publically Traded
Pacific Health Laboratories Inc	Self - 1	Publically Traded
Sirius XM Radio Inc	Self - 1	Publically Traded

Investments - Section C (including interest)

Estate of Patricia Codey (16% interest)	Self - 1	Estate of Patricia Codey, Orange, NJ
Kearney Federal Savings	Self / Spouse - 1	Kearney, NJ
Knights of Columbus	Self - 1	New Haven, Conn. - Life Insurance
Llewellyn Savings	Self / Spouse - 1	West Orange, NJ
Met Life	Self - 1	Warwick, RI
Amedia Networks Inc	Self - 1	Publically Traded
ATLANTIC CITY NJ BRD OF ASSUR	Self - 1	Publically Traded
Bank of America	Self - 1	Publically Traded
Bergen Cnty NJ Impt Auth	Self - 1	Publically Traded
Call CYBX	Self - 1	Publically Traded
Cyberonics Inc	Self - 1	Publically Traded
FIA Card Services	Self - 1	Publically Traded
Gloucester Cnty NJ Impt	Self - 1	Publically Traded
GLOUSTER CO NJ IMP GTD	Self - 1	Publically Traded

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STATE OF
CONNECTICUT
- ADMINISTRATIVE
SERVICES

Richard J. Codey
2012

Groupon Inc	Self - 1	Publically Traded
Heckmann Corp	Self - 1	Publically Traded
Hudson Cnty NJ Impt Auth	Self - 1	Publically Traded
JP Morgan Chase & Co.	Self - 1	Publically Traded
Madison Boro, NJ	Self - 1	Publically Traded
Mahwah Twp NJ Gen Impt	Self - 1	Publically Traded
Mannkind Corp	Self - 1	Publically Traded
Medallion Finl Corp	Self - 1	Publically Traded
ML Bank Deposit Program	Self - 1	Publically Traded
MGM Resorts International	Self - 1	Publically Traded
ML Business Deposit Program	Self - 1	Publically Traded
MONROE TWP MIDDLESEX NJ	Self - 1	Publically Traded
MORRIS CNTY NJ IMPT AUT BE/R MAND SINK FND	Self - 1	Publically Traded
MORRIS CNTY NJ IMPT AUT	Self - 1	Publically Traded
New Jersey HCFFA St	Self - 1	Publically Traded
NEW JERSEY HEALTH CARE	Self - 1	Publically Traded
New Jersey St EDL Facs	Self - 1	Publically Traded
New Jersey St EDL Facs Auth Rev William Paterson Univ	Self - 1	Publically Traded
New Jersey St Tpk Auth	Self - 1	Publically Traded
New Jersey St Transn Tr	Self - 1	Publically Traded
Newton, NJ	Self - 1	Publically Traded
NJ ECO DV UTH SCH FACS SR GG	Self - 1	Publically Traded
NJ ECONOMIC DEV FACS SER A REV	Self - 1	Publically Traded
NJ Health Care	Self - 1	Publically Traded
NJ Hlthcare FFA Rv Rmkt	Self - 1	Publically Traded
NJ Trans Trust Fund Auth	Self - 1	Publically Traded
NJ St EDL FAC Au Rv Coll	Self - 1	Publically Traded
NJ St EDL FAC Au Rv Kern	Self - 1	Publically Traded
Passaic Cnty NJ Impt	Self - 1	Publically Traded
Piscataway Twp, NJ	Self - 1	Publically Traded
Port Auth NY & NJ	Self - 1	Publically Traded

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OFFICE OF
LEGISLATIVE
SERVICES

**Richard J. Codey
2012**

Princeton Univ	Self - 1		Publically Traded
PR Sales Tax Fing Corp	Self - 1		Publically Traded
Preferred Deposit Acct	Self - 1		Publically Traded
Proshares Ultrashort	Self - 1		Publically Traded
Questcor Pharmaceuticals	Self - 1		Publically Traded
RMA Money Market Portfolio	Self - 1		Publically Traded
Sirius XM Radio Inc	Self - 1		Publically Traded
UBS Bank USA Dep Acct	Self - 1		Publically Traded
Union Cnty NJ Impt Auth	Self - 1		Publically Traded
Jomar Pension Plan	Self - 1		Investments
<u>Business Organizations - Section VIII</u>			
Stockholder / Officer	Olympic Agency	West Orange, NJ (assets sold 2008)	Self
Member / Owner	Jomar Agency, LLC	West Orange, NJ	Self
Member / Owner	Richard J. Codey, LLC	Orange, NJ	Self
Member / Owner	81 High Street, LLC	Orange, NJ	Self / Spouse
Member / Owner	107 Essex Ave., LLC	108 Essex Ave., Boonton, NJ	Self / Spouse
Member / Owner	Codey Mackey Funeral Home, LLC	107 Essex Ave., Boonton, NJ	Self / Spouse
<u>Offices, Trusteeship or Directorship - Section IX</u>			
License Holder	Codey Funeral Home	Estate of Patricia Codey	Self
Stockholder / Officer	Olympic Agency	West Orange, NJ (assets sold 2008)	Self
Member / Owner	Jomar Agency, LLC	West Orange, NJ	Self
Member / Owner	Richard J. Codey, LLC	Orange, NJ	Self
Member / Owner	81 High Street, LLC	Orange, NJ	Self / Spouse

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OFFICE OF
LEGISLATIVE
SERVICES

Richard J. Codey			
2012			
Member / Owner	107 Essex Ave., LLC	108 Essex Ave., Boonton, NJ	Self / Spouse
Member / Owner	Codey Mackey Funeral Home, LLC	107 Essex Ave., Boonton, NJ	Self

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 COLLECTIVE
 SERVICES