

LEGISLATOR'S FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2004

NOTE: Before completing this Disclosure Statement, please carefully read the enclosed instructions. If additional space is needed, please duplicate this form as necessary and staple all pages together. An original signature is required on page 4; a facsimile, photocopy or stamp signature is not acceptable. Questions should be directed to Legislative Counsel at (609) 292-4625. The completed disclosure form is due May 15, 2005 and should be sent to: Joint Legislative Committee on Ethical Standards, 2nd Floor, State House Annex, Room 210, PO Box 068, Trenton, New Jersey 08625-0068.

William Gormley

PRINT NAME

CHECK APPROPRIATE HOUSE:

Senate

General Assembly

Provide the following information for yourself, your spouse and minor children (unless otherwise indicated) for calendar year 2004. For each entry, check [✓] the box of the appropriate recipient. 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.

I. **EARNED INCOME:** List the name, address and amount for each source of earned income. (Earned income includes salaries, bonuses, royalties, commissions, profit sharing and fees.)

	Name	Address	Circle Amount Code	Self	Spouse	Child
1)	<u>State of New Jersey</u>	<u>Trenton, NJ</u>	1 2 ③ 4	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2)	<u>Piper Rudnick LLP</u>	<u>379 Thornall St., Edison, NJ</u>	1 2 3 ④	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3)	<u>Atlantic City Medical Center</u>	<u>1925 Pacific Ave., Atl.Cty, NJ</u>	1 2 ③ 4	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
4)	_____	_____	1 2 3 4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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II. **UNEARNED INCOME:** List the name, address and amount for each source of unearned income. (Unearned income includes rents, dividends and income from investments, trusts and estates.)

A. **RENTS**

	Property Address	Tenant Name	Circle Amount Code	Self	Spouse	Child
1)	<u>N/A</u>	_____	1 2 3 4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2)	_____	_____	1 2 3 4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3)	_____	_____	1 2 3 4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4)	_____	_____	1 2 3 4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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	Circle Amount Code	Self	Spouse	Child
1) <u>Seligman NJ Municipal Fund CLA</u>	<u>100 Park Ave., NY, NY 10017</u>	① 2 3 4	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2) <u>Putnam Tax Free Hi Yld-A</u>	<u>PO Box 41203, Providence, RI 02940</u>	① 2 3 4	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
3) <u>Verizon Communications</u>	<u>AG Edwards, 802 Tilton Rd. Northfield</u>	① 2 3 4	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
4) <u>AG Edwards Centennial Money Market</u>	<u>802 Tilton Rd., Northfield, NJ 08225</u>	① 2 3 4	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

* See attached

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

Name	Address	Circle Amount Code	Self	Spouse	Child
1) <u>UBS Financial Access-Acct. 17477</u>	<u>1909 New Rd.#1, Northfield, NJ 08225</u>	① 2 3 4	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2) <u>UBS Financial Access-MDT Acct.#18218</u>	<u>1909 New Rd.#1, Northfield, NJ 08225</u>	① 2 3 4	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3) <u>Bank Hapoalim BM NY US 6% Fixed CD</u>	<u>UBS 1909 New Rd, Northfield, NJ 08225</u>	① 2 3 4	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4) <u>Alliance World DLR Government</u>	<u>Wachovia, 1401 New Rd., Linwood, NJ 08221</u>	① 2 3 4	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

* See attached

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	Circle Amount Code	Self	Spouse
1) <u>N/A</u>	<u>_____</u>	1 2 3 4	<input type="checkbox"/>	<input type="checkbox"/>
2) <u>_____</u>	<u>_____</u>	1 2 3 4	<input type="checkbox"/>	<input type="checkbox"/>
3) <u>_____</u>	<u>_____</u>	1 2 3 4	<input type="checkbox"/>	<input type="checkbox"/>
4) <u>_____</u>	<u>_____</u>	1 2 3 4	<input type="checkbox"/>	<input type="checkbox"/>

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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 circle whether the source is a profit (P), nonprofit (N), or governmental (G) entity.

Name & Nature of Reimbursement or Prepaid Expense	Address	Circle Amount Code	Self	Spouse	Child	Circle P, N, or G
1) <u>N/A</u>	<u>_____</u>	1 2 3 4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	P N G
2) <u>_____</u>	<u>_____</u>	1 2 3 4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	P N G
3) <u>_____</u>	<u>_____</u>	1 2 3 4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	P N G
4) <u>_____</u>	<u>_____</u>	1 2 3 4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	P N G

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.

V. GIFTS: List the name, address, nature and amount for each source of gift in excess of \$250.

	Name & Nature of Gift	Address	Circle Amount Code				Self	Spouse	Child
			1	2	3	4			
1)	N/A	_____	<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"/>	
3)	_____	_____	<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"/>	

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 and Nature of Liability	Address	Circle Amount Code				Self	Spouse
			1	2	3	4		
1)	N/A	_____	<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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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 and Nature of Forgiven Liability	Address	Circle Amount Code				Self	Spouse
			1	2	3	4		
1)	N/A	_____	<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"/>	

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)	Boston Financial Qualified Housing	101 Arch St., Boston, MA 02110-1106	<input type="checkbox"/>	<input checked="" type="checkbox"/>
2)	Tax Credits L.P. V		<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 and Address of Entity	Self	Spouse
1)	Non Capital Partner	Piper Rudnick, LLP 379 Thornall St., Edison, NJ 08837	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2)			<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)	115 S. Nassau Ave., Margate, NJ	Personal Residence	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2)	1/50 Owner Block 15, Lot 9,	Land	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
3)	Margate, NJ		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4)			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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I certify that the above information is correct and complete to the best of my knowledge.

May 13, 2005
Date

William L. Gormley
Signature of Member (must be an ORIGINAL signature, not a facsimile, stamp or photocopy)

II. UNEARNED INCOME
 B. DIVIDENDS

<u>Name</u>	<u>Address</u>	<u>Circle Code</u>	<u>Self</u>	<u>Spouse</u>	<u>Child</u>
5) Illinois 7.35% Sales Tax Rev Bond	AG Edwards, 802 Tilton Rd, Northfield, NJ 08225	① 2 3 4			X
6) NJ 0% Economic Dev Auth Rev Bond	AG Edwards, 802 Tilton Rd, Northfield, NJ 08225	① 2 3 4			X
7) AG Edwards Centennial Money Market	AG Edwards, 802 Tilton Rd, Northfield, NJ 08225	① 2 3 4	X	X	
8) UBS Financial Access - Berkley Acct 17477	UBS 1909 New Rd Suite 1, Northfield, NJ 08225	② 2 3 4	X		
9) UBS Financial Access - MDT Acct 18218	UBS 1909 New Rd Suite 1, Northfield, NJ 08225	① 2 3 4	X		
10) Federated Market Opportunity Fund CI C	UBS 1909 New Rd Suite 1, Northfield, NJ 08225	① 2 3 4	X		
11) RMA Money Mkt Portfolio	UBS 1909 New Rd Suite 1, Northfield, NJ 08225	① 2 3 4	X		
12) Alliance/Bernstein Value Fund Class C	UBS 1909 New Rd Suite 1, Northfield, NJ 08225	① 2 3 4	X		
13) South Jersey Industries Inc	UBS 1909 New Rd Suite 1, Northfield, NJ 08225	① 2 3 4	X		
14) Bank Hapolaim BM NY US 6% Fixed CD	UBS 1909 New Rd Suite 1, Northfield, NJ 08225	① 2 3 4	X		
15) General Motors Acceptance 5.6% Note	UBS 1909 New Rd Suite 1, Northfield, NJ 08225	① 2 3 4	X		
16) UBS Bank USA Deposit Acct	UBS 1909 New Rd Suite 1, Northfield, NJ 08225	① 2 3 4	X		
17) Alliance World Dlr Govt	Wachovia, 1401 New Road, Linwood, NJ 08221	① 2 3 4	X		
18) Calamos Groth & Incm Fd C	Wachovia, 1401 New Road, Linwood, NJ 08221	① 2 3 4	X		
19) Cohen & Steers REIT	Wachovia, 1401 New Road, Linwood, NJ 08221	① 2 3 4	X		
20) Dreyfus Wrldwde M/M CI C	Wachovia, 1401 New Road, Linwood, NJ 08221	① 2 3 4	X		
21) Fidelity Adv VIII Emerg	Wachovia, 1401 New Road, Linwood, NJ 08221	① 2 3 4	X		
22) Hancock Fd Rgl Bnk CI C	Wachovia, 1401 New Road, Linwood, NJ 08221	① 2 3 4	X		
23) Ishares Goldman Sachs	Wachovia, 1401 New Road, Linwood, NJ 08221	① 2 3 4	X		
24) Fidelity Treasury Fund C	Wachovia, 1401 New Road, Linwood, NJ 08221	① 2 3 4	X		
25) Pioneer High Yield Fd C	Wachovia, 1401 New Road, Linwood, NJ 08221	① 2 3 4	X		
26) Willis Group Holdings	Wachovia, 1401 New Road, Linwood, NJ 08221	① 2 3 4	X		
27) Wachovia Bank Deposit Sweep	Wachovia, 1401 New Road, Linwood, NJ 08221	① 2 3 4	X		
28) Avalon Boro 4% Bond	Wachovia, 1401 New Road, Linwood, NJ 08221	① 2 3 4	X		

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II. UNEARNED INCOME

C. INCOME FROM INVESTMENTS (including capital gains)

<u>Name</u>	<u>Address</u>	<u>Circle Code</u>	<u>Self</u>	<u>Spouse</u>	<u>Child</u>
5) Dreyfus Prm Grtr China C	Wachovia, 1401 New Road, Linwood, NJ 08221	① 2 3 4	X		
6) Fidelity Adv VII Emerg	Wachovia, 1401 New Road, Linwood, NJ 08221	① 2 3 4	X		
7) Fidelity Treasury Fund C	Wachovia, 1401 New Road, Linwood, NJ 08221	① 2 3 4	X		
8) Pioneer High Yield Fund C	Wachovia, 1401 New Road, Linwood, NJ 08221	① 2 3 4	X		

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