

**ACT 44 DISCLOSURE FORM FOR ENTITIES PROVIDING  
PROFESSIONAL SERVICES TO THE  
LOWER PROVIDENCE TOWNSHIP PENSION SYSTEM**

CHAPTER 7-A OF ACT 44 OF 2009 MANDATES the annual disclosure of certain information by every entity (hereinafter “**Contractor**”) which is a party to a professional services contract with one of the pension funds of **LOWER PROVIDENCE TOWNSHIP** (hereinafter the “**Requesting Municipality**”). Act 44 disclosure requirements apply to *Contractors* who provide professional pension services and receive payment of any kind from the **Requesting Municipality’s** pension fund. The **Requesting Municipality** has determined that your company falls under the requirements of Act 44 and must complete this disclosure form. You are expected to submit this completed form, to the Requesting Municipality below, by **December 1, 2011**. If, for any reason you believe that Act 44 does not require you to complete this disclosure form, please provide a written explanation of your reason(s) by **December 1, 2011**.

**RETURN COMPLETED**

**DISCLOSURE TO:**

Lower Providence Township  
Attn: Joseph C. Dunbar, C.P.M., Township Manager  
100 Parklane Drive  
Eagleville, PA 19403  
(610) 539-8020  
jdunbar@lowerprovidence.org

**REQUIRED UPDATES:**

Where noted, information in this form must be updated in writing as changes occur.

## DEFINITIONS FOR DISCLOSURE

TERM:	DEFINITION:
<b>CONTRACTOR</b>	Any person, company, or other entity that receives payments, fees, or any other form of compensation from a municipal pension fund in exchange for rendering professional services for the benefit of the municipal pension fund.
<b>SUBCONTRACTOR OR ADVISOR</b>	Anyone who is paid a fee or receives compensation from a municipal pension system – directly or indirectly from or through a contractor.
<b>AFFILIATED ENTITY</b>	Any of the following: <ol style="list-style-type: none"> <li>1. A subsidiary or holding company of a lobbying firm or other business entity owned in whole or in part by a lobbying firm.</li> <li>2. An organization recognized by the Internal Revenue Service as a tax-exempt organization under section 501(c) of the Internal Revenue Code of 1986 (Public Law 99-514, 26 U.S.C. § 501 (c) ) established by a lobbyist or lobbying firm or an affiliated entity.</li> </ol>
<b>CONTRIBUTIONS</b>	As defined in section 1621 of the act of June 3 <sup>rd</sup> , 1937 (P.L. 1333, No. 320), known as the Pennsylvania Election Code
<b>POLITICAL COMMITTEE</b>	As defined in section 1621 of the act of June 3 <sup>rd</sup> , 1937 (P.L. 1333, No. 320), known as the Pennsylvania Election Code
<b>EXECUTIVE LEVEL EMPLOYEE</b>	<b>Any employee or person or the person’s affiliated entity who:</b> <ol style="list-style-type: none"> <li>1. Can affect or influence the outcome of the person’s or affiliated entity’s actions, policies, or decisions relating to pensions and the conduct of business with a municipality or a municipal pension system; or</li> <li>2. Is directly involved in the implementation or development policies relating to pensions, investments, contracts or procurement or the conduct of business with a municipality or municipal pension system.</li> </ol>
<b>MUNICIPAL PENSION SYSTEM</b>	Any qualifying pension plan, under Pennsylvania state law, for any municipality within the Commonwealth of Pennsylvania; includes the Pennsylvania Municipal Retirement System. <i>Example: the Police Pension Plan for the Borough of Winchesterville</i>
<b>MUNICIPAL PENSION SYSTEM OFFICIALS AND EMPLOYEES; MUNICIPAL OFFICIALS AND EMPLOYEES</b>	<b>Specifically</b> , those listed in <b>TABLE 2</b> titled: “ <i>List of Pension System and Municipal Officials and Employees</i> ” on the next page. Where applicable, includes any employee of the <b>Requesting Municipality</b> .
<b>PROFESSIONAL SERVICES CONTRACT</b>	A contract to which the municipal pension system is a party that is: (1) for the purchase of professional services including investment services, legal services, real estate services, and other consulting services; and, (2) not subject to a requirement that the lowest bid be accepted.

## **List of Municipal Officials for the Requesting Municipality**

Certain requests for information in this form will refer to a **“List of Municipal Officials.”** To assist you in preparing your answers, you should consider the following names to be a complete list of pension system and municipal officials and employees. Throughout this Disclosure Form, the below names will be referred to as the **“List of Municipal Officials.”**

### **Lower Providence Township Board of Supervisors**

**Richard Brown**  
**Christopher DiPaolo**  
**Marie Altieri**  
**Colleen Eckman**  
**Donald Thomas**

### **Lower Providence Township Pension Plans – Chief Administrative Officer**

**Joseph C. Dunbar, C.P.M., Township Manager**

### **Lower Providence Township Solicitor**

**Michael Sheridan**  
**Fox, Differ, Callahan, Sheridan & McDevitt**

### **Lower Providence Township Director of Human Resources**

**Geraldine Golas**

### **Lower Providence Township Accounting Manager**

**Susan Law**

### **Lower Providence Township Pension Advisory Committee**

**Christopher DiPaolo - Board Liaison**  
**Joseph C. Dunbar - Non-uniform Committee Member – Township Manager**  
**Geraldine Golas – Non-uniform Committee Member**  
**Susan Law– Non-uniform Committee Member**  
**Rodney Hagenbuch – Non-uniform Committee Member**  
**Joseph Chillano– Non-uniform Committee Member**  
**Stanley Turtle – Police Pension Committee Member**  
**William Hopkins – Police Pension Committee Member**  
**Matthew Kuhnert – Police Pension Committee Member**  
**James Crawford – Police Pension Committee Member**

## IDENTIFICATION OF CONTRACTORS & RELATED PERSONNEL

**CONTRACTORS:** (See “Definitions” – page 2) Any entity who currently provides service(s) by means of a Professional Services Contract to the Municipal Pension System of the **Requesting Municipality**, please complete all of the following:

**Identify the Municipal Pension System(s) for which you are providing information:**

Indicate all that apply with an “X”:

<input checked="" type="checkbox"/>	Non- Uniform Plan	<input checked="" type="checkbox"/>	Police Plan
<input type="checkbox"/>	Fire Plan		

**\*\*NOTE:** For all that follow, you may answer the questions / items on a separate sheet of paper and attach it to this Disclosure if the space provided is not sufficient. Please reference each question / item you are responding to by the appropriate number. (example: REF – Item #1.)

1. Please provide the names and titles of all individuals providing professional services to the **Requesting Municipality’s** pension plan(s) identified above. Also include the names and titles of any advisors and subcontractors of the Contractor, identifying them as such. After each name provide a description of the responsibilities of that person with regard to the professional services being provided to each designated pension plan.

Charles B. Friedlander, F.S.A., Director, Actuarial Services

Responsibilities include preparation of actuarial valuations, participant benefit statements and government reporting forms, calculation of plan benefits for terminating and retiring participants, assistance with the preparation of the annual Minimum Municipal Obligation, routine consulting services.

2. Please list the name and title of any *Affiliated Entity* and their *Executive-level Employee(s)* that require disclosure; after each name, include a brief description of their duties. (See: Definitions)

Not applicable.

3. Are any of the individuals named in **Item 1 or Item 2** above, a current or former official or employee of the **Requesting Municipality**?

➔ **IF “YES”**, provide the name and of the person employed, their position with the municipality, and dates of employment.

No.

4. Are any of the individuals named in **Item 1 or Item 2** above a current or former registered Federal or State lobbyist?

➔ **IF “YES”**, provide the name of the individual, specify whether they are a state or federal lobbyist, and the date of their most recent registration /renewal.

No.

**NOTICE:** All information provided for items 1- 4 above must be updated as changes occur.

5. Since December 17<sup>th</sup> 2009, has the **Contractor** or an **Affiliated Entity** paid compensation to or employed any third party intermediary, agent, or lobbyist that is to directly or indirectly communicate with an official or employee of the **Municipal Pension System** of the **Requesting Municipality** (OR), any municipal official or employee of the **Requesting Municipality** in connection with any transaction or investment involving the **Contractor** and the Municipal Pension System of the **Requesting Municipality**?

**This question does not apply** to an officer or employee of the **Contractor** who is acting within the scope of the firm's standard professional duties on behalf of the firm, including the actual provision of legal, accounting, engineering, real estate, or other professional advice, services, or assistance pursuant to the professional services contact with municipality's pension system.

- ➔ **IF "YES"**, identify: (1) whom (the third party intermediary, agent, or lobbyist) was paid the compensation or employed by the **Contractor** or **Affiliated Entity**, (2) their specific duties to directly or indirectly communicate with an official or employee of the **Municipal Pension System** of the **Requesting Municipality** (OR), any municipal official or employee of the **Requesting Municipality**, (3) the official they communicated with, and (4) the dates of this service.

No.

6. Since December 17<sup>th</sup> 2009, has the **Contractor**, or any agent, officer, director or employee of the **Contractor** solicited a contribution to any municipal officer or candidate for municipal office in the **Requesting Municipality**, or to the political party or political action committee of that official or candidate?

- ➔ **IF "YES"**, identify the agent, officer, director or employee who made the solicitation and the municipal officials, candidates, political party or political committee who were solicited (to whom the solicitation was made).

No.

7. Since December 17<sup>th</sup>, 2009: Has the **Contractor** or an **Affiliated Entity** made any contributions to a municipal official or any candidate for municipal office in the **Requesting Municipality**?

- ➔ **IF "YES"**, provide the name and address of the person(s) making the contribution, the contributor's relationship to the Contractor, The name and office or position of the person receiving the contribution, the date of the contribution, and the amount of the contribution.

No.

8. Does the **Contractor** or an **Affiliated Entity** have any direct financial, commercial or business relationship with any official identified on the **List of Municipal Officials**, of the **Requesting Municipality**?

- ➔ **IF "YES"**, identify the individual with whom the relationship exists and give a detailed description of that relationship.

**\*\*NOTE:** A written letter is required from the **Requesting Municipality** acknowledging the relationship and consenting to its existence. The letter must be attached to this disclosure. Contact the **Requesting Municipality** to obtain this letter and attach it to this disclosure before submission.

No.

9. Has the **Contractor** or an **Affiliated Entity** given any gifts having more than a nominal value to any official, employee or fiduciary – specifically, those on the **List of Municipal Officials** of the **Requesting Municipality**?

➔ **IF “YES”**, Provide the name of the person conferring the gift, the person receiving the gift, the office or position of the person receiving the gift, specify what the gift was, and the date conferred.

No.

10. Disclosure of contributions to any political entity in the Commonwealth of Pennsylvania

**Applicability:** A “yes” response is required and full disclosure is required **ONLY WHEN ALL** of the following applies:

- a) The contribution was made within the last 5 years (specifically since: December 18<sup>th</sup> 2004)
- b) The contribution was made by an officer, director, executive-level employee or owner of at least 5% of the **Contractor** or **Affiliated Entity**.
- c) The amount of the contribution was at least \$500 and in the form of:
  1. A single contribution by a person in (b.) above, **OR**
  2. The aggregate of all contributions all persons in (b.) above;
- d) The contribution was for
  1. Any candidate for any public office or any person who holds an office in the Commonwealth of Pennsylvania;
  2. The political committee of a candidate for public office or any person that holds an office in the Commonwealth of Pennsylvania.

➔ **IF “YES”**, provide the name and address of the person(s) making the contribution, the contributor’s relationship to the **Contractor**, The name and office or position of the person receiving the contribution (or the political entity / party receiving the contribution), the date of the contribution, and the amount of the contribution.

Yes. See the attached *Schedule of Reportable Contributions to Candidates for Public Office*

11. With respect to your provision of professional services to the Municipal Pension System of the **Requesting Municipality**:

Are you aware of any apparent, potential or actual conflicts of interest with respect to any officer, director or employee of the **Contractor** and officials or employees of the **Requesting Municipality**?

**NOTE: If, in the future**, you become aware of any apparent, potential, or actual conflict of interest, you are expected to update this **Disclosure Form** immediately in writing by:

- Providing a brief synopsis of the conflict of interest (and);
- An explanation of the steps taken to address this apparent, potential, or actual conflict of interest.

➔ **IF “YES”**, Provide a detailed explanation of the circumstances which provide you with a basis to conclude that an apparent, potential, or actual conflict of interest may exist.

No.

12. To the extent that you believe that **Chapter 7-A of Act 44 of 2009** requires you to disclose any additional information beyond what has been requested above, please provide that information below or on a separate piece of paper.

Not applicable; no additional disclosures required.

Please provide the name(s) and position(s) of the person(s) participating in the completion of this Disclosure. **One of the individuals** identified by the *Contractor* in **Item #1** above must participate in completing this Disclosure and must sign the below verification attesting to the participation of those individuals named below.

**Name:** Charles B. Friedlander **Name:**

**Position:** Director, Actuarial Services **Position:**

**Name:** **Name:**

**Position:** **Position:**

**Name:** **Name:**

**Position:** **Position:**



SIGNATURE

Director, Actuarial Services

TITLE

November 22, 2011

DATE

Municipal Finance Partners, Inc.

Schedule of Reportable Contributions to Candidates for Public Office

Recipient of Contribution

Date	Person Making Contribution	Relationship to Contractor	Name	Office	Amount
5/2007	Jay Wenger	Shareholder	Steven Reed	Mayor	\$1,000
8/2007	Jay Wenger	Shareholder	George Hartwick	County Commissioner	500
9/2007	Jay Wenger	Shareholder	Jeff Haste/Dominic DiFrancesco	County Commissioner	5,000
9/2007	Jay Wenger	Shareholder	Doug Hoke	County Commissioner	1,000
3/2008	Jay Wenger	Shareholder	Dennis Stuckey	County Commissioner	500
5/2008	Jay Wenger	Shareholder	Jeff Haste/Dominic DiFrancesco	County Commissioner	5,000
7/2008	Jay Wenger	Shareholder	Scott Martin	County Commissioner	500
7/2008	Jeffrey Weiss	Shareholder	John Siptroth	PA State Representative	200
11/2008	Mark Morgan	Shareholder	Dan Onorato	Governor	250
2/2009	Mark Morgan	Shareholder	Dominic DiFrancesco	Lieutenant Governor	2,000
2/2009	Charles B. Friedlander	Shareholder	Dominic DiFrancesco	Lieutenant Governor	500
2/2009	Jeffrey Weiss	Shareholder	Dominic DiFrancesco	Lieutenant Governor	2,000
3/2009	Jay Wenger	Shareholder	Dominic DiFrancesco	Lieutenant Governor	2,000
3/2009	Jay Wenger	Shareholder	Michael Rozman	Judge	500
3/2009	Jay Wenger	Shareholder	George Hartwick	County Commissioner	200
3/2009	Charles B. Friedlander	Shareholder	George Hartwick	County Commissioner	285
4/2009	Jay Wenger	Shareholder	Dennis Stuckey	County Commissioner	250
4/2009	Jay Wenger	Shareholder	Scott Martin	County Commissioner	500
5/2009	Jay Wenger	Shareholder	Jeff Haste/Dominic DiFrancesco	County Commissioner	5,000
5/2009	Jay Wenger	Shareholder	Kim Bracey	Mayor	750
5/2009	Jeffrey Weiss	Shareholder	John Siptroth	PA State Representative	100
6/2009	Jay Wenger	Shareholder	Scott Martin	County Commissioner	250
8/2009	Jay Wenger	Shareholder	Jeff Haste/Dominic DiFrancesco	County Commissioner	400
9/2009	Jay Wenger	Shareholder	Christopher Reilly	County Commissioner	500
10/2009	Jay Wenger	Shareholder	Dan Onorato	Governor	500
12/2009	Jay Wenger	Shareholder	George Hartwick	County Commissioner	500
3/2010	Jay Wenger	Shareholder	Jeff Haste/Mike Pries	County Commissioner	5,000
3/2010	Jay Wenger	Shareholder	Scott Martin	County Commissioner	500
4/2010	Charles B. Friedlander	Shareholder	Jeff Haste/Dominic DiFrancesco	County Commissioner	30
5/2010	Jeffrey Weiss	Shareholder	Jonathan Saidel	Lieutenant Governor	500
7/2010	Jeffrey Weiss	Shareholder	John Siptroth	PA State Representative	200
9/2010	Jeffrey Weiss	Shareholder	John Siptroth	PA State Representative	250
4/2011	Mark Morgan	Shareholder	Jeff Haste/Mike Pries	County Commissioner	2,000
4/2011	Jeffrey Weiss	Shareholder	Jeff Haste/Mike Pries	County Commissioner	2,000

## VERIFICATION

I, Charles B. Friedlander, hereby state that I am Director, Actuarial Services for  
(Name) (Position)  
Municipal Finance Partners, Inc. and I am authorized to make this verification.  
(Contractor)

I hereby verify that the facts set forth in the foregoing Act 44 Disclosure Form for Entities Providing Professional Services to Lower Providence Township's Pension System are true and correct to the best of my knowledge, information and belief. I also understand that knowingly making material misstatements or omissions in this form could subject the responding Contractor to the penalties in Section 705-A(e) of Act 44.

I understand that false statements herein are made subject to the penalties of 18 P.A.C.S. § 4904 relating to unsworn falsification to authorities.



\_\_\_\_\_  
Signature

November 22, 2011

Date