## KENTUCKY LEGISLATIVE ETHICS COMMISSION

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,	STATEMENT OF FINANCIAL DISCLOSURE (IKRS 6.787).  To be filed by: All members of the General Assembly, all candidates and nominees for election to the General Assembly, and major management personnel in the legislative branch of state government.	15.,		
	☐ Check here and attach additional sheets if necessary Number of sheets attached.			
	Please include the following information for the preceding calendar year:	316		Control of the contro
9	Name Scott Lewis		3	1
	Business address P.O. Box 454 Hartford, Ky 42347			
*	Business telephone 170 - 912 - 6814			
<u> </u>	Home address 200 N. Main St Beaver Dam, Ky 42320			
	Title of public position, or office southt 5+ate Representative			i.
	Other occupations of filer Retiral School Superintendent and Business Owner Occupations of spouse N/A	, i. j	Set.	
	NOTE: The following sections do not require disclosure of specific dollar amounts.			
	1. Positions held by filer in any business, partnership, corporation for profit, or			
*	corporation not for profit from which the filer receives compensation, and the name of the			
	business, partnership, or corporation ohio County Bd of Education - Superi,	teric	bent -	Retir
	the acid relation to be on the contract of the			
	Lewis Exterprises - Owner 1 10 million of the contract of the			
	Manual Day of the first account of the second contract of the second			
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tallynia;	2. Positions held by filer's spouse in any business, partnership, corporation for profit, or			
1. 1884 T. J. 16.	corporation not for profit from which the filer's spouse receives compensation; and the name of the business, partnership, or corporation.			ļ   .
*				
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	3. Names and addresses of all businesses, investments, or securities in which the filer,			:
v	filer's spouse, or filer's minor children had at any time during the reporting year an			i i
ā.	interest of \$10,000 at fair market value, or 5% ownership interest or more	÷		i
	3 L Enterprise Inc. P.O. Box 454 Hortfurd, Ky 42347 (self)			1. 
¥	Lewis Enterprises P.O. Box 454 Hartfurd Ky 42347 (self)			i
	Found Truingly of LT Box 101 LIVILLIA IN 1941 (SOIL)			1
				1

4. Sources and form of gross income of the filer (list sources by name)	
Salary from Retired School Supt State of Ky	
Income from Lewis Enterprises	
Income from 3 L Enterprise Inc.	
Income from State Representative	
5. Sources and form of gross income of the filer's spouse (list sources by name)	
<u>N/A</u>	
6. Positions of a fiduciary nature held by the filer in a business	
-N/A	
•	
7. A designation as commercial, residential, or rural, and the location of all real property other than the filer's primary residence, in which there is an interest of \$10,000 or more held by the filer, filer's spouse, or filer's minor children Commercial - 200 N. Main Stand 245 Madison St. Beaver Dam, Ky #2320, Commercial - 313 S. Main St. Beaver Dam, Ky #2320, Commercial - 310 S. Main St. Beaver Dam, Ky #2320, Commercial - 200 Kirk St. Hartford, Ky #2340, Commercial - 315 W. Union St. Hartford, Ky #2347, Commercial - 315 W. Union St. Hartford, Ky #2347, Commercial - 101 N. Main, Beaver Dam, Ky #2320.  8. Sources of gitts of money or property with a retail value of more than \$200 to the filer or the filer's immediate family, except those from a member of the filer's family. (Family means spouse, parent, sibling, child, mother-in-law, father-in-law, son-in-law, daughter-in-law, grandparent, or grandchild, or dependent member of the filer's household. Immediate family means unemancipated child residing in an individual's household, spouse, or a person claimed by the filer as a dependent for tax purposes.)  N/A	<sup>1</sup> 7.

	lly, or household purposes)	-
F; E;	iret United Bank	_
_,c	irst Ky Bank ecilian Bank Evansville Teachers Credit Umon	_
E	vansville Teachers Credit Union	
10.	The name of any legislative agent who is:	
	(a) A member of the filer's immediate family;	
	(b) A partner of the filer, or a partner of a member of the filer's immediate family	/;
	(c) An officer or director of the filer's employer;	
	(d) An employer of the filer or an employer of a member of the filer's immediate	
	family;	
	(e) A business associate of the filer or a business associate of a member of the	
	filer's immediate family	
	N/A	
		_
		-
11	The names of any of the filer's clients who are legislative agents or employers	
	N/A	_
	NYA	
		_•

partner made an appearance. The before a specific agency.	filer need not id	entify which c	lient was rep	resented
Clients			`	. •
N/A				,
	•	•		
				•
State Agency				
N/A	•			
		•		
	NOTICES	5		•
1. Upon receipt by the Commiss record available for copying.	ion, a statement	of financial di	sclosure shal	l be a public
2. Any person who fails to file a a deficiency identified by the Corto exceed \$100 per day up to a m	nmission in a tim	ely manner m		
3. Any person who files a statem false information, or to omit required misdemeanor.				
_02 /06 /24 Date	Filer	,		
Send completed statements to:	The Kentucky I 22 Mill Creek F Frankfort, Kent FAX (502) 573	ark ucky 40601	ics Commiss	sion

13. If yes, list the names of the clients represented and list the agencies before which the

If you have questions please call us at (502) 573-2863.