



FILING DEADLINE EXTENSION REQUEST FORM

Filer Name: _____

Position: _____

Agency/Principal/District: _____

Current Filing Due Date: _____

Expected Return Date of Filer: _____

Select the form that applies to the extension request:

Statement of Economic Interest

Financial Disclosure

Lobbyist's Disclosure Statement

Real Estate Disclosure

Reason for extension request:

1. The death of a relative of the filer, as defined in § 30-356.2

2. A state of emergency is declared by the Governor or the President of the United States

3. Filer is a member of a uniformed service of the United States and is on active duty

4. A failure of the Council's electronic filing system

5. Other: _____

Requested By:

Name: _____

Position: _____

Agency/County/City: _____

Phone: _____ Email: _____

Internal Office Use Only

Reviewed by: _____

Approved Denied Reason for denial: _____

Length of Extension: 30 days 60 days indefinite extension

other _____

New filing deadline: _____

Requestor Notified: _____

