



OKLAHOMA ETHICS COMMISSION

PHONE: (405) 521-3451 • FAX: (405) 521-4905 • WEBSITE: WWW.OK.GOV/ETHICS

STATE OFFICER OR EMPLOYEE SCHOLARSHIP, GRANT OR SUBSIDY REPORT

AMENDED: ☐

Full Legal Name of State Officer or Employee		Job Title and Description	
State Agency Served			
Event Date(s)		Event Location	
Name of Sponsoring Organization(s)			
Name of Person(s) Providing the Scholarship, Grant or Subsidy:			
Subject Matter of the Event			
		Value of Scholarship, Grant or Subsidy	

By signing, electronic or otherwise, my name below, I, acknowledge that the information submitted is complete, true and accurate as of the date submitted. I understand the failure to provide such information is a violation of the Ethics Rules of Oklahoma. I understand that I can update the information above at any time by filing an amended Report.

Date submitted

Officer or Agent signature

Non-Elected State Officers and State Employees ONLY:

Chief Administrative Officer Certification. By signing, electronic or otherwise, my name below, I, certify that the educational or training event attended by the above signing non-elected state officer or employee, will significantly assist the state officer or employee in discharging his or her duties.

Date: _____

Printed Name of Chief Administrative Officer

Chief Administrative Officer Signature

Return form to the Ethics Commission by emailing in pdf format to ethics@ethics.ok.gov; by mail or in person to 2300 N. Lincoln Boulevard, Room G-27, Oklahoma City, OK 73072