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SENATE OF PA
SECRETARY'S OFFICE



COMMONWEALTH OF PENNSYLVANIA
OFFICE OF THE GOVERNOR
HARRISBURG

THE GOVERNOR

MEMBER OF THE COUNCIL OF TRUSTEES OF BLOOMSBURG UNIVERSITY OF
PENNSYLVANIA OF THE STATE SYSTEM OF HIGHER EDUCATION

May 23, 2013

To the Honorable, the Senate
of the Commonwealth of Pennsylvania:

In conformity with law, I have the honor hereby to nominate for the advice and consent of the Senate, The Honorable Mary Jane Bowes, 2600 Grant Building, 310 Grant Street, Pittsburgh 15219, Allegheny County, Forty-second Senatorial District, for appointment as a member of the Council of Trustees of Bloomsburg University of Pennsylvania of the State System of Higher Education, to serve for a term of six years and until her successor is appointed and qualified, vice Charles C. Housenick, Bloomsburg, whose term expired.

A handwritten signature in black ink, reading "Tom Corbett".

TOM CORBETT
Governor

STATEMENT OF FINANCIAL INTERESTS

PLEASE PRINT NEATLY

01 LAST NAME BOWES		FIRST NAME MARY JANE		MI	SUFFIX	
02 ADDRESS (work or home) 330 Grant St.		City Pittsburgh	State PA	Zip Code 15219	Area Code (412)	Phone 565-2342
NOTE: IF YOU ARE INCLUDING ATTACHMENTS, DO NOT INCLUDE ANYTHING THAT BEARS YOUR SOCIAL SECURITY NUMBER OR FINANCIAL ACCOUNT NUMBERS.						
03 STATUS Check applicable block or blocks, more than one block may be marked. (See instructions on page 2)						
A <input type="checkbox"/> Candidate (including write-in) C <input checked="" type="checkbox"/> Public Official (Current) D <input type="checkbox"/> Public Employee (Current) E <input type="checkbox"/> Check this block if you are filing as a solicitor						
B <input checked="" type="checkbox"/> Nominee C <input type="checkbox"/> Public Official (Former) D <input type="checkbox"/> Public Employee (Former)						
04 PUBLIC POSITION OR PUBLIC OFFICE (administrator, member, Commissioner, job title, etc.) <input type="checkbox"/> seeking <input checked="" type="checkbox"/> hold <input type="checkbox"/> held						
A JUDGE <input checked="" type="checkbox"/> seeking <input type="checkbox"/> hold <input type="checkbox"/> held						
B Trustee <input type="checkbox"/> seeking <input type="checkbox"/> hold <input type="checkbox"/> held						
05 GOVERNMENTAL ENTITY in which you are/were an Official, Employee, Candidate or Nominee (e.g., dept, agency, authority, borough, board, commission, county, school district, twp, etc.)						
A Superior Court of Pennsylvania						
B Council of Trustees of Bloomsburg University						
06 OCCUPATION OR PROFESSION (This may be the same as block 4) Judge, Superior Court of PA				07 YEAR The information in blocks 8 through 15 below represents financial interests for the PRIOR calendar year indicated: 2012		
08 REAL ESTATE INTERESTS (See instructions on page 2) If NONE, check this box. <input checked="" type="checkbox"/>						
09 CREDITORS (See instructions on page 2). Creditor (Name and Address) If NONE, check this box. <input type="checkbox"/> Name: Nissan Motor Acceptance Corp Address: 8900 Freepoint Pkwy, Irving, TX 75063						
10 DIRECT OR INDIRECT SOURCES OF INCOME including (but not limited to) all employment. (See instructions on pg. 2) ONLY IF NONE, check this block. <input type="checkbox"/> Name: Commonwealth of PA Address: Commonwealth Ave, Suite 1500, PO Box 61260, Harrisburg PA 17106						
11 GIFTS (See instructions on page 2) If NONE, check this box. <input checked="" type="checkbox"/> Source of Gift Address of Source of Gift Circumstances (including description) of Gift						
12 TRANSPORTATION, LODGING, HOSPITALITY (See instructions on page 2) If NONE, check this box. <input checked="" type="checkbox"/> Source (Name and Address)						
13 OFFICE, DIRECTORSHIP OR EMPLOYMENT IN ANY BUSINESS (See instructions on page 2) If NONE, check this box. Business Entity (Name and Address) Name: See Attachment A Address: Position Held						
14 FINANCIAL INTEREST IN ANY LEGAL ENTITY IN BUSINESS FOR PROFIT (See instructions on page 2) If NONE, check this box. <input checked="" type="checkbox"/> Name and Address of Business Interest Held						
15 BUSINESS INTERESTS TRANSFERRED TO IMMEDIATE FAMILY MEMBER (See instructions on page 2) If NONE, check this box. <input checked="" type="checkbox"/> Business (Name and Address) Transferee (Name and Address) Interest Held Relationship Date Transferred						

The undersigned hereby affirms that the foregoing information is true and correct to the best of said person's knowledge, information and belief; said affirmation being made subject to the penalties prescribed by 18 Pa.C.S. §4904 (unsworn falsification to authorities) and the Public Official and Employee Ethics Act, 65 Pa.C.S. §1109(b).

Signature

Enter Current Date

6-6-13

THIS FORM IS CONSIDERED DEFICIENT IF ANY BLOCK ABOVE IS NOT COMPLETED. MAKE A COPY FOR YOUR RECORDS.

Statement of Financial Interest

Bowes, Mary Jane

Attachment A

Chair, Board of Trustees
St. Anthony Charitable Foundation
2000 Corporate Drive, Suite 580
Wexford, PA 15090

Member, Board of Trustees
Allegheny County Medical Society
713 Ridge Avenue
Pittsburgh, PA 15212

Member, Board of Governors
University of Pittsburgh Law Alumni Association
University of Pittsburgh School of Law
Barco Law Building
3900 Forbes Avenue
Pittsburgh, PA 15260

2013 JUN 11 PM 4 18
STATE ETHICS
COMMISSION

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2013 JUN 11 PM 4:28
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