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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 MANSFIELD UNIVERSITY  
OF PENNSYLVANIA OF THE STATE SYSTEM OF HIGHER EDUCATION

May 31, 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, Karen J. Russell, 958 Odell Road, Mansfield 16933, Tioga County, Twenty-fifth Senatorial District, for appointment as a member of the Council of Trustees of Mansfield 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 Thomas Browning, Peckville, whose term expired.

A handwritten signature in black ink that reads "Tom Corbett".

TOM CORBETT  
Governor

## STATEMENT OF FINANCIAL INTERESTS

PLEASE PRINT NEATLY

01	LAST NAME	FIRST NAME	MI	SUFFIX
	RUSSELL	KAREN	J	MS

02	ADDRESS (work or home)	City	State	Zip Code	Area Code	Phone
	958 Odell Rd.	Mansfield	PA	16933	(570)	662-3927

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)		<input type="checkbox"/> Check this block if you are amending an original filing	
	A	<input type="checkbox"/> Candidate (including write-in)	C	<input type="checkbox"/> Public Official (Current)	D	<input type="checkbox"/> Public Employee (Current)
	B	<input checked="" type="checkbox"/> Nominee	E	<input type="checkbox"/> Check this block if you are filing as a solicitor		
			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 checked="" type="checkbox"/> seeking	<input type="checkbox"/> hold	<input type="checkbox"/> held
A	COUNCIL OF TRUSTEES		<input type="checkbox"/> seeking	<input type="checkbox"/> hold	<input type="checkbox"/> held
B					

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	MANSFIELD UNIVERSITY OF PA	
B		

06	OCCUPATION OR PROFESSION (This may be the same as block 4)	07 YEAR The information in blocks 8 through 15 below represents financial interests for the PRIOR calendar year indicated:
	President	2012

08	REAL ESTATE INTERESTS (See instructions on page 2) If NONE, check this box. <input checked="" type="checkbox"/>
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09	CREDITORS (See instructions on page 2). Creditor (Name and Address)	If NONE, check this box. <input type="checkbox"/>	Interest Rate
	Name: Huntington National Bank	Address: PO Box 182519 Columbus, OH 43218-2519	3.88%

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"/>	(OFFICIAL USE ONLY)
	Name: Keystone North, Inc.	Address: 310 S. Main St. Mansfield, PA 16933

11	GIFTS (See instructions on page 2) If NONE, check this box. <input checked="" type="checkbox"/>	Value of Gift
	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"/>	Value
	Source (Name and Address)	

13	OFFICE, DIRECTORSHIP OR EMPLOYMENT IN ANY BUSINESS (See instructions on page 2) If NONE, check this box. <input type="checkbox"/>	Position Held
	Business Entity (Name and Address)	
	Name: Keystone North, Inc.	Address: 310 S. Main St., Mansfield, PA 16933

14	FINANCIAL INTEREST IN ANY LEGAL ENTITY IN BUSINESS FOR PROFIT (See instructions on page 2) If NONE, check this box. <input type="checkbox"/>	Interest Held
	Name and Address of Business	
	Keystone North, Inc., 310 S. Main St., Mansfield, PA 16933	100%

15	BUSINESS INTERESTS TRANSFERRED TO IMMEDIATE FAMILY MEMBER (See instructions on page 2) If NONE, check this box. <input checked="" type="checkbox"/>	Interest Held
	Business (Name and Address)	Relationship
	Transferee (Name and Address)	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: Karen Russell

Enter Current Date: 6/5/13

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

## Statement of Financial Interests

Russell, Karen J.  
958 Odell Road  
Mansfield, PA 16933

Continued:

09. Creditors:

Business Loans:

Fist Citizens Community Bank  
15 S. Main Street  
Mansfield, PA 16933  
Personal Guarantee, Interest Rate: 5.875%

Northwest Savings Bank  
50 S. Main Street  
Mansfield, PA 16933  
Personal Guarantee, Interest Rate: 6.5%

US Bank Equipment Finance  
13010 SW 68<sup>th</sup> Parkway, Suite 100  
Portland, OR 97223  
Personal Guarantee, Interest Rate: 3.95%

13. Office, Directorship or employment in any Business

Volunteer Boards:

Tioga County Development Corporation  
114 Main Street  
Wellsboro, PA 16901  
Position held: 1<sup>st</sup> Vice-President

Mansfield Downtown Development Corporation  
8 S. Main Street  
Mansfield, PA 16933  
Position held: Director

Betterment Organization of Mansfield  
51B S. Main Street  
Mansfield, PA 16933  
Position held: Director

Northern Tier Regional Planning & Development Corporation  
Workforce Investment Board  
312 Main Street  
Towanda, PA 18848  
Position held: Committee member

2013 JUN 6 PM 4 05  
STATE ETHICS  
COMMISSION

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2013 JUN -6 PM 4: 14  
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