# State Elected Officials Financial Disclosure W.S. 9-13-101 through 109

This form can be accessed on the Secretary of State's Website at: http://soswy.state.wy.us/Forms/Ethics/ElectedOfficialsEthicsDisclosureForm.pdf

In accordance with W.S. 9-13-101 - 109, each of the state's five elected officials and each member of the Wyoming legislature shall file a financial disclosure form with the Secretary of State. This includes elected officials and legislators who have not sought re-election or were unsuccessful while seeking re-election but have served in an elected position during the previous filing period.

The financial disclosure form shall contain information current as of January 15th of each year.

As prescribed in W.S. 9-13-108(b), forms may be submitted by e-mail to: elections@wyo.gov.

Anyone violating the provisions of the Government Ethics Act is guilty of a misdemeanor punishable upon conviction by a fine of not more than one thousand dollars (\$1,000.00). W.S. 9-13-109(a).

Violation of any provision of the Government Ethics Act constitutes sufficient cause for termination of a public employee's employment or for removal of a public official or public member from his office or position. W.S. 9-13-109(b).

FILING DEADLINE:

January 31st of each year

FILING OFFICE:

Wyoming Secretary of State's Office

Herschler Building East

Suite 100 and 101

122 West 25th Street Cheyenne, WY

82002-0020

E-mail: elections@wyo.gov

#### RECEIVED

By Wyoming Secretary of State at 10:44 am, Jan 22, 2025

4/2021

# State Elected Official Financial Disclosure Form

Name of Official:	Abby Angelos			
Office Held:	State House Representative			
	Senate District (if applicable):			
House District (if applicable):				
Business Address:	1507 Metz Or. #4			
Business City, State and Zip: Gillette, Wy 82718				
Business Phone:	(307) (6800 800			
	689-2633			
Home Address:	III Overbrook Rd.			
Home City, State and	d zip: Gillette, wy 82718			
Home Phone:	(307) 689-2633			

# I. Offices, Directorships and Employment

(Please use additional sheets as necessary.)

a)	List the <i>offices</i> held in business enterprises. This <b>Office Held</b>	includes partnerships.  Name and Address of Enterprise
	Owner/Sole Proprietor	Omega Precision LLC
		Gillette, Wy 82718
b)	List any directorship positions held in business e	nterprises.
	Name of Enterprise	Address of Enterprise
c)	Salaried Employment  Job Title	Name and Address of Enterprise

### II. Sources of Income

(Please use additional sheets as necessary.)

Name of Employer	Address of Employer
business interest (W.S. 9-13-108 (c) states: excluding interests if less than ten percent (10%)	sses of all business entities in which you have a "Name and address of all business entities in which you have a "Name and address of all business entities in which you have a "Name and address of all business entities
Name of Business Entity	Address of Business Entity
Omega Precision LLC	1507 Metz Dr#4 Gillette, wy 82718
Investments	Income Earned
A. Any security or interest earnings	Yes No
B. Real estate, leases, royalties	Yes No
Other (describe generally):	
3	
	Business Interests - list the names and addre business interest (W.S. 9-13-108 (c) states: excluding interests if less than ten percent (10% which income is earned ")  Name of Business Entity  Omega Precision LLC  Investments  A. Any security or interest earnings  B. Real estate, leases, royalties

#### III. Contracts

(Please use additional sheets as necessary.)

	nterest, has a contract with for services and s	nterprise in which you own ten percent (10%) or upplies in an amount greater than five thousand			
dollars	s (\$5,000.00).				
	Name of Enterprise	Address of Enterprise			
-					
	Name of State Entity	Address of State Entity			
-					
_					
b)	Please provide the following information for the contract:  Type:				
	Effective Date:				
	Term of Contract:				
On thi	s 215t day of Jonuaru	, 2025, I affirm that the preceding			
		Signature ()			