## 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).

of each year
ecretary of State's Office
ilding East
d 101
th Street Cheyenne, WY

E-mail: <u>elections@wyo.gov</u>

RECEIVED

By Wyoming Secretary of State at 1:29 pm, Jan 22, 2025

4/2021

Name of Official: Office Held:	Megan Degenfelder State Superintendent of Public Senate District (if applicable): House District (if applicable):
Business Address:	122 W 25th St. Suite E200
Business City, State a	and Zip: <u>Cheyenne</u> , WY 82002
Business Phone:	(307) 777 - 7675
Home Address:	<u>3470 (apitol Avenue</u>
Home City, State and	zip: <u>Cheyenne</u> , WY 87001
Home Phone:	(302) 2595738

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I. Offices, Directorships and Employment (Please use additional sheets as necessary.)				
a)	List the <i>offices</i> held in business enterprises. T Office Held	This includes partnerships. Name and Address of Enterprise		
b)	) List any <i>directorship positions</i> held in business enterprises. Name of Enterprise Address of Enterprise			
c)	Salaried Employment Job Title	Name and Address of Enterprise		
	state Superintendent of public Instruction	State of wyoming		
		122 W 25th St Suite E201 Cheyenne, WY 82002		

	II. Sources of Income (Please use additional sheets as necessary.)			
-	oyment e of Employer	Address of Employer		
WY.	Department of	122 W 25° ST Suite 200		
Edu	lation	Uneyenne, wy 82002		
busin exclu	ess interest (W.S. 9-13-108 (c) states:	sses of all business entities in which you have a "Name and address of all business entities but ) of the entity is owned, or sole proprietorship from		
Name	e of Business Entity	Address of Business Entity		
Invest	ments	Income Earned		
Α.	Any security or interest earnings	Yes No		
B.	Real estate, leases, royalties	Yes No		
Other	(describe generally):			
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## **III.** Contracts

(Please use additional sheets as necessary.)

List all state entities you, or your business enterprise in which you own ten percent (10%) or a) more interest, has a contract with for services and supplies in an amount greater than five thousand dollars (\$5,000.00).

	Name of Enterprise	Address of Enterprise	
	Name of State Entity	Address of State Entity	
<ul> <li>b) Please provide the following information for the contract:</li> <li>Type:</li> <li>Description:</li> </ul>			
On thi	Effective Date:		
On thi inform	as <u> 4</u> day of <u>January</u>	, MDS, I affirm that the preceding MSS Signature	
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