# 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

4/2021

## **State Elected Official Financial Disclosure Form**

Name of Official:	Joshua Thomas Larson
Office Held:	Representative
	Senate District (if applicable):  House District (if applicable):
Business Address: Business City, State ar Business Phone:	606 Walnut St  Rock Springs, WY 82901  307 389-0162
Home Address: Home City, State and 2 Home Phone:	606 Walnut St  Rock Springs, WY 82901  307, 389-0162

## I. Offices, Directorships and Employment

(Please use additional sheets as necessary.)

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7 Strategies LLC
3 Walnut St.
Springs, WY 82901
<u>, , , , , , , , , , , , , , , , , , , </u>
es.
lress of Enterprise
ne and Address of Enterpris
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## II. Sources of Income

(Please use additional sheets as necessary.)

Employment Name of Employer	Address of Employer
SAP Virtual Resources	N/A
business interest (W.S. 9-13-108 (c) states	dresses of all business entities in which you has: "Name and address of all business entities 19%) of the entity is owned, or sole proprietorship to
Name of Business Entity	Address of Business Entity
T	
Investments	Income Earned
Investments  A. Any security or interest earnings	Yes X No.
<ul> <li>A. Any security or interest earnings</li> <li>B. Real estate, leases, royalties</li> </ul>	Ves X No
<ul> <li>A. Any security or interest earnings</li> <li>B. Real estate, leases, royalties</li> </ul>	Yes
<ul> <li>A. Any security or interest earnings</li> <li>B. Real estate, leases, royalties</li> </ul>	Yes

### **III. Contracts**

(Please use additional sheets as necessary.)

Address of Enterprise
Address of State Entity
e contract:
e contract: