



Ethics Disclosure Form

First Name *

Linda

Last Name *

Parker

Position Held *

Board/Commission Member

Personal / Work Email

lindaparker421@hotmail.com

Address *

Street Address

725 Memorial Parkway SW

Address Line 2

City

Rochester

State / Province / Region

MN

Postal / Zip Code

55902

Country

USA

Are you employed by the City of Rochester? *

Yes

No

Do you serve on a volunteer Board/Commission? *

Yes

No

City of Rochester Volunteers

**Name of Board/Commission On Which You
Serve Or Are Seeking Appointment ***

Police Policy Oversight
Commission

**Date Appointed Or Date Application Was
Filed For Position ***

06/06/23

Do you have any interests in real property in Rochester other than your homestead? *

- Yes
- No

Do you have any interest in a business doing business with the City? *

- Yes
- No

Do you have any interest in a business located within, or doing business in, the City. *

- Yes
- No

List any and all employment. *

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Are you a member of a community, civic, or nonprofit organization? *

- Yes
- No

Signature *

Date *

9/22/2023

Year Number

Comments

2000 characters left

Approve

Deny