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FIRST AND	LAST NAME	S OF MEMBI	ERS OF IM	IMEDIATE FAMILY: Dorot	hy McAuliffe

This Session Gift Report will be available to the public via the searchable database on the Virginia Conflict of Interest and Ethics Advisory Council website, as required by § 30-356.

**REPORT TO THE BEST OF INFORMATION AND BELIEF** Information required on this Statement must be provided on the basis of the best knowledge, information, and belief of the individual filing the Statement as of the date of this report.

## **AFFIRMATION**

I swear or affirm that the information provided on this report is full, true, and correct to the best of my knowledge.

Terence McAuliffe (Electronically Signed: 3/1/2017 12:44:33 PM)	3/1/2017 12:44:33 PM	
Signature	Date	

## Virginia Conflict of Interest and Ethics Advisory Council

## URL:

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