NEW YORK STATE OF OPPORTUNITY.

Division of Corporations, State Records and Uniform Commercial Code Department of State DIVISION OF CORPORATIONS, STATE RECORDS AND UNIFORM COMMERCIAL CODE One Commerce Plaza 99 Washington Ave. Albany, NY 12231-0001 www.dos.ny.gov

State Employee Statement in Lieu of Oath Pursuant to Civil Service Law § 62

	(TYPE ALL INFORM	ATION SIGN IN BLACK I	NK)
Name of Appointee:	EGAN (Last Name)	(First Name)	(Middle Initial)
	declare that I will support the d that I will faithfully discharged		ates, and the constitution of the
Title of Position:	Deputy (Commissi	oner
			FILED
Agency Name:	Jest of He	alth	STATE RECORDS
	. 6		NOV 1 8 2020
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Agency Code: 1	2000		
	· · · · · · · · · · · · · · · · · · ·		
according to the best o	f my ability.		
X	Fé		cb[s]o
	(Signature of Appointes)		(Date)

PUBLIC OFFICERS LAW §78 CERTIFICATE

I, the Appointee named above, hereby acknowledge receipt of a copy of sections 73, 73-a, 74, 75, 76, 77 and 78 of the Public Officers Law, together with such other material related thereto as may have been prepared by the Secretary of State, and I acknowledge that I have read the same and that I undertake to conform to the provisions, purposes and intent thereof and to the norms of conduct for members, officers and employees of the legislature and state agencies.

(Signature of ppointee)

(Date)

(Appointee must sign both the State Employee Statement in Lieu of Oath and the Public Officer's Law §78 Certificate)

Go to www.dos.ny.gov for filing instructions.



Division of Corporations, State Records and Uniform Commercial Code

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FILED STATE RECORDS						
	DEC 0 1 2017	•				

New York State Department of State DIVISION OF CORPORATIONS, STATE RECORDS AND UNIFORM COMMERCIAL CODE One Commerce Plaza 99 Washington Ave.

DEPARTMENT OF STATE

Albany, NY 12231-0001 www.dos.ny.gov

	TVDE AL	I INIEOD	MATION	SICN IN DI	ACVINIU			
	(TIPE AL	LINFUR	MATION	- SIGN IN BL	ACK INK)		•
Name of Appointee: Egan			i a i co	Theresa	·. ·		L. 1	•
(Last 1				(First Name)	., .		(Middle	Initial)
STATE OF NEW YORK	•		j · · · ·					
COUNTY OF Albany	· · · · · · · · · · · · · · · · · · ·) ss.:)					
l do solemnly swear (or affi State of New York, and that	rm) that I will I will faithful	support th ly dischar	ne constitut ge the dutio	ion of the Uni es of the office	ted States, a	and the con	stitution o	fthe
Title of Position: Executive	Deputy Con	nmission	er		÷		•	
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		- *				1		
Agency Name: NYS Depa	rtment of Mo	tor Vehic	les		······			
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Agency Code: 23000		· · ·	•	···).	,			÷
according to the best of my	ability.				•			
X	-40	\c-				OTHY BLEN		
(Signati	ire of Appointed	2			· No	blic, State o 0.02LE5071	070	
Sworn (or affirmed) before a	me this	284	-	day Co	Qualifie mmission E	d in Saratog xpires Febru	a County lary 12, 20	19.
of November?	-		20 17	-		· .	÷	
M P	······,	in the yea	ir, 20 <u>17</u>		• •		· ·	
Notary Public		 · · · · · · · · · · · · · · · · ·		<u> </u>				
**************************************	*****					· . •		
P	PUBLIC OF	FICER	S LAW 8	78 CERTI	FICATE	************	********	*****
the Appointee named above. Officers Law, together with s acknowledge that I have read to norms of conduct for members	, hereby acknow such other mate the same and the	wledge reco erial related pat I under	eipt of a cop d thereto as take to confi	by of sections 7 may have bee form to the provi	3, 73-a, 74, n prepared isions, purpo	by the Secre	tary of Sta	ate, and
1.0	·	nteol			•1	(Date)		
r (Sign	nature of Appoin	incer 1				(Duic)		

Page 1 of 1

STATE EMPLOYEE OATH/AFFIRMATION

(TYPE ALL INFORMATION -- SIGN IN BLACK INK)

Name of Appointee: Egan	Theresa L.
(Last Name)	(First Name) (Middle Initial)
STATE OF NEW YORK)	
COUNTY OF Albany) ss.:)	
I do solemnly swear (or affirm) that I will support the constitution of the State of New York, and that I will	
Title of Posițion:	
Executive Deputy Commissioner	FILED
	STATE RECORDS
Agency Name:	JUL 28 2015
New York State Department of Motor Vehicles	DEPARTMENT OF STATE
Agency Code: 23000	
according to the best of my ability.	
SI ST	
(Signature of Appointee)	* *
Sworn (or affirmed) before me this $2\partial^2$	TIMOTHY B LENNON Notary Public, State of New York day No. 02LE5071070
of, in the year, 20 <u>15</u>	Qualified in Saratoga County Commission Expires February 12, 20_1
Hmother Bhi	
Notary Public	
******	*****
PUBLIC OFFICERS LA	W §78 CERTIFICATE
I, the Appointee named above, hereby acknowledge h and 78 of the Public Officers Law, together with su prepared by the Secretary of State, and I acknowledge conform to the provisions, purposes and intent thereo and employees of the legislature and state agencies.	ch other material related thereto as may have been ge that I have read the same and that I undertake to
(Appointee must sign both the Sta and the Public Officer's	,

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Go to www.dos.ny.gov for filing instructions.

STATE OF NEW YORK DEPARTMENT OF STATE

ONE COMMERCE PLAZA 99 WASHINGTON AVENUE ALBANY, NY 12231-0001 HTTPS://DOS.NY.GOV

KATHY HOCHUL GOVERNOR

ROBERT J. RODRIGUEZ SECRETARY OF STATE

State Employee Oath/Affirmation and Public Officers Law §78 Certificate

APR 1.9 2007

Name of Appointee:	Egan		Theresa	L.		
	(Last Name)		(First Name)	(Middle Initial)		
STATE OF NEW Y	ORK)	Insert the name of the County within N	New York State in which this Oath is being		
COUNTY OF	Albany) ss:)	Insert the name of the County within New York State in which this Oath is being executed. Please note that ss: does not stand for "social security." The appointce's social security number should NOT be inserted anywhere on this form.			

I do solemnly swcar (or affirm) that I will support the constitution of the United States, and the constitution of the State of New York, and that I will faithfully discharge the duties of the office of

Title of Position:

Deputy Commissioner

Agency Name:

New York State Department of Motor Vehicles

23000 Agency Code:

according to the best of my-ability.

(Signature of Appointee)

Sworn (or affirmed) before me this 13th , in the year, 2007 day of Notary Public

CELESTINE ZANDRI NOTARY PUBLIC - State of New York No. 01ZA4729730 Qualified in Albany County Commission Expires October 31, 20 (0

I, the Appointee named above, hereby acknowledge receipt of a copy of sections 73, 73-a, 74, 75, 76, 77 and 78 of the Public Officers Law, together with such other material related thereto as may have been prepared by the Secretary of State, and I acknowledge that I have read the same and that I undertake to conform to the provisions, purposes and intent thereof and to the norms of conduct for members, officers and employees of the legislature and state agencies.

(Signature of Appointee)

April 12, 2007 (Date)

(Do not include any social security number anywhere on this form)



DOS-1691 (Rev. 3/07)