Ethics Disclosure Form

First Name *
Sarah

Last Name *
Stevens

Position Held *
Board/Commission Member

Personal / Work Email

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 *	Date Appointed Or Date Application Was Filed For Position *
Pedestrian and Bicycle Advisory Commission	12/1/2020

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

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List any and all employment. *
Olmsted County Public Health

Are you a member of a community, civic, or nonprofit organization? *
○ Yes ◉ No

Signature *

Date *
01/30/2026