

FINANCIAL DISCLOSURE FORM

Section I. Personal Information

Reporting period: 01 February 2006 to 31 January 2007

1. Name of the staff member: Asha-Rose Mtengeti-Migiro

2. Index Number:

3. Functional title: Deputy Secretary-General

Department or Office: EOSG

Level: DSG

(a) Marital status. If married, please give the full name of spouse. (If there is more than one spouse, filing is required for each spouse).

Married - Professor Cleophas Lukanazyza Chitende Migiro

(b) Name(s) of dependent child(ren).

1 dependent child

Section II. Staff member's disclosure in respect of themselves, their spouse and dependent child(ren)

Part 1: Do you, your spouse or dependent child(ren) hold any assets over US\$10,000?

Staff member: Yes: No:
 Spouse: Yes: No:
 Dependent child(ren): Yes: No: } if yes, please disclose below

Name and detailed description of assets over US\$10,000	Name of asset holder (you, your spouse or dependent child)	Value US\$ (check appropriate box)					
		\$10,001 - \$50,000	\$50,001 - \$100,000	\$100,001 - \$250,000	\$250,001 - \$500,000	\$500,001 - \$1,000,000	Over \$1,000,000
1. House - Leased out: Dar Es Salaam, Tanzania	Self	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. House - Personal: Mwanza, Tanzania	Self & Spouse	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Undeveloped plot: Dar Es Salaam, Tanzania	Self & Spouse	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. 'Right of Occupancy' to Plot: Dar Es Salaam, Tanzania	Self & Sister	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Savings account: Tanzania	Spouse	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Overdraft Facility: Tanzania	Spouse	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. Fixed Deposit account: Tanzania	Spouse	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. Trust account (For relative): Tanzania	Spouse	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. Savings & Current account: Tanzania	Self	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. Current & Fixed Deposit account: Tanzania	Self	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Section II. Staff member's disclosure in respect of themselves, their spouse and dependent child(ren)

Part I: Do you, your spouse or dependent child(ren) hold any assets over US\$10,000?

Staff member: Yes: No:
 Spouse: Yes: No:
 Dependent child(ren): Yes: No: } if yes, please disclose below

	Name and detailed description of assets over US\$10,000	Name of asset holder (you, your spouse or dependent child)	Value US\$ (check appropriate box)					
			\$10,001-\$50,000	\$50,001-\$100,000	\$100,001-\$250,000	\$250,001-\$500,000	\$500,001-\$1,000,000	Over \$1,000,000
11.	Shares - Twiga Cement Co.	Spouse	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12.	Shares - Twiga Cement Co.	Self	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13.			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14.			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15.			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
16.			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
17.			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
18.			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
19.			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
20.			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Part 2: Have you, your spouse or dependent child(ren) had any profits of more than US\$10,000 on the sale of personal property held for investment or business purposes?

Staff member: Yes: No:
 Spouse: Yes: No:
 Dependent child(ren): Yes: No: } if yes, please disclose below

	Description of personal property sold	Date of sale	Name of person selling property (you, your spouse or dependent child)	Amount US\$ (check appropriate box)				
				\$10,001 - \$20,000	\$20,001 - \$50,000	\$50,001 - \$100,000	\$100,001 - \$500,000	Over \$500,000
1.				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2.				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3.				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4.				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5.				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6.				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7.				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8.				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9.				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10.				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Part 3: Do you, your spouse or dependent child(ren) own any stock options, publicly-listed or private, regardless of value?

Staff member: Yes: No:
 Spouse: Yes: No:
 Dependent child(ren): Yes: No: } if yes, please disclose below

Name and detailed description of stock options	Name of owner (you, your spouse or dependent child)
1.	
2.	
3.	
4.	
5.	
6.	
7.	
8.	
9.	
10.	

Part 4: Have you, your spouse or dependent child(ren) had any income from non-United Nations sources totalling over US\$10,000 in the reporting period?

Staff member: Yes: No:
 Spouse: Yes: No:
 Dependent child(ren): Yes: No: } if yes, please disclose below

Source of income (name and address)	Detailed description	Name of income-earner (you, your spouse or dependent child)	Amount US\$ (check appropriate box)				
			\$10,001-\$20,000	\$20,001-\$50,000	\$50,001-\$100,000	\$100,001-\$500,000	Over \$500,000
1. Government of Tanzania	Ministerial Salary	Self	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Cleaner Production Centre of Tanzania	Consultancy Salary	Spouse	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Tanzania Cigarette Co.	House rent	Self & Spouse	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4.			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5.			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6.			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7.			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8.			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9.			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10.			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Part 5. Have you, your spouse or dependent child(ren) received any supplements, gifts, housing, subsidized housing, per diem, reimbursements, entertainment or travel expenses totalling US\$250 or more from a single source during the reporting year?

Staff member: Yes: No:
 Spouse: Yes: No:
 Dependent child(ren): Yes: No: } if yes, please disclose below

Source (name and address)	Detailed description	Name of recipient (you, your spouse or dependent child)	Amount US\$ (check appropriate box)					
			\$250 - \$500	\$501 - \$1,000	\$1,001 - \$2,500	\$2,501 - \$5,000	\$5,001 - \$10,000	Over \$10,000
1. Dar Es Salaam University Women's Groups, Box 35091, DSM	Personal Gift Accessories	Self	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Fellow Parliamentarians, Tanzanian Parliament	Personal Gift Accessories	Self	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Women's Organisation of Tanzania, (UWT), Tanzania	Personal Gift Accessories	Self	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Women & Development Foundation (WAMA), Tanzania	Personal Gift Accessories	Self	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Employees & Friends from the Foreign Ministry of Tanzania	Personal Gift Accessories	Self	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Tanzanian Foreign Ministry	Travel & Per Diem expenses as Minister	Self	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
7. Parliament of Tanzania	Travel & Per Diem as Member of Parliament	Self	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. Employees & Friends from the Foreign Ministry of Tanzania	Personal Gift Accessories	Spouse	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9.			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10.			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Part 6. Do you, your spouse or dependent child(ren) have any liabilities (including mortgages and loans on a personal and/or vacation residence) over US\$50,000?

Staff member: Yes: No:
 Spouse: Yes: No:
 Dependent child(ren): Yes: No: } if yes, please disclose below

Creditors (name and address)	Type of liability	Date incurred	Term (if applicable)	Name of debtor (you, your spouse or dependent child)	Amount US\$ (check appropriate box)			
					\$50,001 - \$100,000	\$100,001- \$250,000	\$250,001- \$500,000	Over \$500,000
1.					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2.					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3.					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4.					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5.					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6.					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7.					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8.					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9.					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10.					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Part 7: Follow-up questions in respect of staff member

1. Do you have any leadership or policy-making role in any non-United Nations entity (including membership on corporate boards)?
Yes: No: If yes, please specify.

1. Member of Tanzanian Parliament, 2. Minister of Foreign Affairs for Government of Tanzania, and 3. Member of Central Committee for Chama Cha Mapinduzi Political Party – I have resigned from all 3 positions upon appointment as DSG.

2. Are you, or have you ever been involved in any other activity that could have an impact on your objectivity or independence in the performance of your duties for the United Nations, or otherwise affect the image or reputation of the Organization?
Yes: No: If yes, please specify.

3. Do you have any relatives employed in the United Nations systems, namely spouse, father, mother, son, daughter, brother or sister?
Yes: No: If yes, please specify.

Part 8: Follow-up question in respect of your spouse and dependent child(ren)

1. To the best of your knowledge, does your spouse and/or dependent child(ren) have any interest in, or association with, any entity with which you may be required, directly or indirectly, to have dealings on behalf of the Organization, or which has any commercial interest in the work of the United Nations, or a common area of activity with the United Nations?

Yes: No: If yes, please specify the name(s) and the relevant interest or association.

Section III. Certification and Affirmation

A. I certify and affirm that the disclosures I have made in this Form, including this Certification and Affirmation, and all attachments thereto, are true, complete and correct to the best of my knowledge and belief. I certify and affirm that I understand that failure to provide true, complete and correct information in this Form to the best of my knowledge and belief may have serious consequences, including the institution of disciplinary proceedings.

B. I understand that I must declare anything that could affect my objectivity or independence in respect of the performance of my duties for the United Nations, or the perception by others of my objectivity and independence, and if I am uncertain, I will seek guidance from the Ethics Office, OHRM or other appropriate offices.

Signature of the staff:

Asha-Rose Mtengeti-Migiro

Date: 11/04/2007