

## **Conflict of Interest Disclosure Form**

Officeholder name:
Office: Date:
ITEM 1A
The name(s) and address(es) of each of the individual's current employer(s) and name(s) and address(es) of each of the individual's employers during the preceding year.
Current Employer(s):
Previous Employer(s):
ITEM 1B
For each employer described in Item 1A, a brief description of the employment, including the individual's occupation, and, as applicable, job title.
Current Employer(s):
Previous Employer(s):

ITEM 2A		
The name of any entity in which the individual is an owner or officer, or was an owner or officer during the preceding year.		
ITEM 2B		
A brief description of the type of business or activity conducted by the entity(ies) described in Item 2A.		
ITEM 2C		
Individual's position in the entity(ies) described in Item 2A.		
ITEM 3A		
The name of each individual from whom, or entity from which, the individual has received \$5,000 or more in income during the preceding year.		
ITEM 3B		
A brief description of the type of business or activity conducted by the individual or entity described in Item 3A.		

ITEM 4A			
The name of each entity in which the individual holds any stock or bonds having a fair market value of \$5,000 or more as of the date of the disclosure for or during the preceding year (excluding funds that are managed by a third party,			
ITEM 4B			
A brief description of the type of business or activity conducted by the entity(ies) described in Item 4A.			
ITEM 5A			
The name of each entity or organization not described in Items 2A through 4B of this form in which the individual currently serves, or served in the preceding year, on the board of directors or in any other type of paid leadership capacity.			
ITEM 5B			
A brief description of the type of business or activity conducted by the entity(ies) or organization(s) described in Item 5A.			

ITEM 5C  Description of the type of advisory position hold by the individual within the entity(ics)		
Description of the type of advisory position held by the individual within the entity(ies) organization(s) described in Item 5A.		
ITEM 6A (optional)		
Description of any real property in which the individual holds an ownership or other financial interest that the individual believes may constitute a conflict of interest.		
ITEM 6B (optional)		
Description of type of interest held by the individual in the property(ies) described in Item 6A.		
ITEM 7A		
The name(s) of the individual's spouse and any other adult residing in the individual's household who is not related by blood or marriage, as applicable.		
Other Adults:		

and name(s) and address(es) of each employer(s) during the preceding year.  Spouse's Current Employer(s):		
spouse a current	t Employer (s):	
Spouse's Previou	ıs Employer(s):	
ITEM 7C	City with most and accomption of each adult who recides in the	
•	on of the employment and occupation of each adult who resides in the sehold and is not related to the individual by blood or marriage.	
ITEM 8A (opt	rional)	
` -	any other matter or interest that the individual believes may constitute	
a conflict of inte		
□ I the regulat	to diagnostication of condidate holiove this form is true and accurate to	
	ted officeholder or candidate, believe this form is true and accurate to my knowledge.	
Candidate/Office	eholder's Electronic Signature	