MODEL AFFIDAVIT OF DISCLOSURE – TRANSACTIONAL

(This form should be filed with the Clerk of the local unit)

I, _________________________________________ make the following disclosure under oath:

(name of officer/employee)

Yes No

1. ☐ ☐ I am a ☐ elected or ☐ appointed ☐ officer or ☐ employee of the [name of local unit], holding the position of ____________________________
in the ________________________________ department.

2. ☐ ☐ I may derive income or benefit directly from a contract with the [name of local unit] or from any [type of unit] action detailed below.

☐ ☐ I may have a conflict between a personal interest and the public interest, the nature of which is disclosed below.

☐ ☐ I may have a financial interest in a matter proposed to be acted upon by the [name of local unit] as described below.

☐ ☐ I make this disclosure because of a possible appearance that I may be in violation of or in conflict with the [name of local unit's] Ethics Ordinance and/or Charter.

3. My position is: ☐ Full Time ☐ Part Time (less than 25 hours/week) ☐ Unpaid

4. PLEASE DESCRIBE IN DETAIL YOUR REASON(S) FOR SUBMITTING THIS DISCLOSURE AND EXPLAIN WHY YOU THINK A CONFLICT MAY/MAY NOT EXIST.____________________________________________________________________

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__________________________________________________________________________
I hereby certify that this disclosure is complete and accurate to the best of my knowledge, information and belief.

This Affidavit of Disclosure was executed on this ___ day of _____________, 20___.

___________________________________  
Signature of Officer/Employee

___________________________________  
Printed name of Officer/Employee

STATE OF MICHIGAN)
 )
COUNTY OF _______)

The foregoing instrument was acknowledged before me in _____________ County, Michigan this ___ day of ________, 20___.

___________________________________  
Notary Public

_________________________ County, Michigan

Acting in _____________County, Michigan

My Commission Expires: ______________