



For Official Use Only

## DISCLOSURE OF CONFLICT STATEMENT

This statement is filed in accordance with Chapter 12A of the Dallas City Code. Copies of the applicable code sections and additional copies of this form may be obtained from the City Secretary's office.

Please print or type all information. Attach additional pages if more space is needed.

	Check One	Office Held	Fill in Appropriate Information
<input type="checkbox"/>	Elected Official	Office Held	
<input type="checkbox"/>	Appointed Official	Board or Commission/ Title	
<input type="checkbox"/>	City Employee	Title/Department	

1. Name of Employee/Official: \_\_\_\_\_

I \_\_\_\_\_ have a conflict as defined in Chapter 12A, Article II, of the Dallas City Code in the following matter:

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Nature of Conflict:

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As a result of this conflict, I will not take any official action in regard to the matter stated above.

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Signature of Employee/Official

Date

BEFORE ME, the undersigned authority, on this day personally appeared

\_\_\_\_\_, who on oath stated that the above facts are within \_\_\_\_\_ personal knowledge and are true and correct.

SWORN TO AND SUBSCRIBED BEFORE ME on this \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, to certify which, witness my hand and seal.

<NOTARY SEAL>

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Signature of officer administering oath

Printed name of officer administering oath

Title of officer administering oath