

TOWN OF CLARENCE



ANNUAL STATEMENT OF DISCLOSURE For Calendar Year 2024

Fill Out Completely

Name: _____
(Last) (First) MI

Address: _____, NY _____
(Street address) (Town) (Zip code)

Spouse (if applicable): _____

Position(s) Held

Town Employee/Committee or Board

The filing of the Annual Statement of Disclosure is required for all Town employees, Town officials and residents in a volunteer position. This is explained in the Town of Clarence Ethics Code, Chapter 19. The purpose of the Annual Disclosure is to identify potential conflicts of interest before they occur. In answering the questions on this Statement of Disclosure, please note the definitions contained in Section 19-3 of the Ethics Code, including:

1. **Interest**, as used in this Disclosure, is defined as follows:
 - A. Providing goods, influence, investment, property or service(s) to any person, business or entity for which compensation or benefit is expected or received, and
 - B. Holding ownership, title or right, alone or with others, to a property, within the Town or bordering the Town.
2. **Contract**, as used in this Disclosure, shall be defined in accordance with the Standard English usage.
3. **Dependent** is defined as follows: Son, daughter, stepson, stepdaughter or any other person who could be claimed as a dependent for federal income tax purposes.
4. **Family Member** is defined as follows: Spouse, spouse's siblings, parent, parents-in-law, sibling, child, stepchild, grandparent, aunt, uncle, niece, nephew, grandchild and their spouses.

PLEASE ANSWER THE FOLLOWING FOUR QUESTIONS AND THEN SIGN YOUR NAME:

1. Do you, any Family Members, or Dependents have an interest in any business or entity doing business with the Town currently or within the last twelve (12) months? Yes: _____ No: _____
2. Do you, any Family Members, or Dependents have an interest in any contract made or executed by the Town within the past twelve (12) months? Yes: _____ No: _____
3. Do you receive any benefits, compensation, or other consideration that are derived directly or indirectly from your employment or association with the Town of Clarence other than your remuneration from the Town for the services you provide? Yes: _____ No: _____

If you answered yes to any of these three (3) questions, you should describe the nature, source, and amount of such benefits, compensation and other considerations as per instructions for filing and the explanation of Annual Statement of Disclosure. Please attach an additional sheet of paper if necessary.

4. Over the last twelve (12) months, have you **RECUSED** yourself from any deliberations and/or a vote on a matter before a Board during the last twelve (12) months? Yes: _____ No: _____

If you checked “No”, you have completed Question 4. If you checked “Yes,”

- a. Briefly describe the reason(s) for your recusal(s):

- b. Did you file a Transactional Disclosure Form for each recusal with the Town Clerk?
Yes: ___ No: __. If “No”, why not? _____

During the current year, if there are any changes in your answer to items 1, 2, 3, or 4 above, you must file an amended “Annual Disclosure” with the Town Clerk within thirty (30) days of such change.

I HEREBY CERTIFY THAT THE INFORMATION I HAVE PROVIDED IN THIS ANNUAL DISCLOSURE IS TRUE, CORRECT, AND COMPLETE. I HAVE REVIEWED THE CURRENT CODE OF ETHICS FOR THE TOWN OF CLARENCE.

(Signature)

Date: _____

(Print name)

(Return this form to the Town Clerk)