

115 Scranton Avenue
Falmouth, MA 02540



Tel: (508) 548-1977 Fax: (508) 457-7573
www.falmouthhousing.org

FALMOUTH HOUSING AUTHORITY

CONFLICT OF INTEREST DISCLOSURE FORM

DISCLOSURE

This disclosure is provided by the Falmouth Housing Authority (FHA) to identify any conflict of interest, or perceived conflict of interest, by employees or Commissioners of FHA.

The Massachusetts State Ethics law can be found at M.G.L. c.268A. State, county and municipal employees are required by law to complete the conflict of interest law online training program (<https://MassEthicsTraining.SkillBurst.com>). Public employees must complete the online training program within 30 days of election or appointment to a state, county, or municipal position, and then every 2 years thereafter. Public employees must acknowledge in writing that they received the summary of the conflict of interest law within 30 days of election or appointment, and then annually thereafter.

I hereby state that I have completed the State of Massachusetts Ethics online training, and that I have read and understand the policy, agree to comply with the policy and understand that the policy applies to all activities associated with employment at the Falmouth Housing Authority. I further understand that the Falmouth Housing Authority is a quasi-municipality that must engage primarily in activities that accomplish one or more governmental purposes related to housing.

Name: _____

Position: _____

Phone Number: _____

Address: _____

_____ I hereby state that I have no conflict of interest to report.

_____ I hereby state that I, and members of my immediate family, have the following affiliations or interests and have taken part in the following transactions detailed below which, when considered in conjunction with my position with or relation to Falmouth Housing Authority or its affiliate entities, may reflect a conflict or possible conflict of interest.

NOTE, if any real estate interest is disclosed, fill out attached Real Estate Disclosure Form

1. Interests:

I hereby disclose for myself and members of my immediate family the following conflicts or possible conflicts of interest:

Suppliers: Actual or potential employment with or a financial interest (ownership, investment, and/or compensation arrangements) in any suppliers (or possible suppliers) of goods or services to Falmouth Housing Authority.

Please describe:

Housing: Actual or potential employment or financial interest in any entity providing housing development, management or resident services, which is/may be in competition with Falmouth Housing Authority.

Please describe:

2. Outside Activities:

I hereby disclose any activities of mine, or of my immediate family, that result in duality of interest from serving in a public office, either elected or appointed, on other boards or committees or rendering consulting services to others that might be for personal gain or involve participation in matters regarding Falmouth Housing Authority.

Please describe:

3. Acceptance of Gifts or Hospitality:

I hereby certify that neither I nor any member of my immediate family has accepted gifts, certificates or entertainment that might tend to influence my judgment or actions concerning the business of Falmouth Housing Authority, or its affiliate entities, except as listed below

Please describe:

4. Other:

I hereby disclose any other activities in which I or my immediate family may be engaged where my duties to Falmouth Housing Authority may be compromised by a competing interest that could possibly be regarded as constituting a conflict of interest as described in the guidelines:

Please describe:

I hereby agree to report to the Executive Director (for staff) or the Chairperson (for Commissioners) any further situation that may develop before completion of my next disclosure form.

Name (printed)

Signature

Date

DISCLOSURE OF INTEREST IN REAL ESTATE

It is the policy of the Falmouth Housing Authority to require that its employees and Commissioners make the following disclosure of any interest in real estate in Massachusetts.

1. Do you or does any member of your immediate family own or have any financial interest in any rental property in Massachusetts?

Yes _____ No

If yes, please list such property:

2. Do you or does any member of your immediate family have any financial interest in, or are employed by, any business dealing with the real estate industry in _____? (Please insert industry, i.e. rehabilitation, inspection, maintenance, brokerage, construction, contracting)

Yes _____ No

If yes, list the activities:

3. Do you or does any member of your family have any financial interest in any business or property which might receive funds under a FHA administered program or benefit financially from it?

Yes _____ No

If yes, list them:

To the best of my knowledge, all the information contained in this form is true, accurate and complete in every respect. It is understood and agreed that the FHA is relying on the truth of the information.

Signature

Date

Print name: _____

FHA Use Only:

Date Reviewed by Executive Director:

Requested action to address the conflict of interest (recusal, exemption request, etc.)

Policy approved by the Board of Commissioners on 11/20/23; Resolution No. 2024-061

*Approved by the Board of Commissioners on 3/27/24
Resolution No. 2024-061*