City of Meriden CONFLICT OF INTEREST PUBLIC DISCLOSURE FORM Community Development Block Grant (CDBG) Program PROGRAM YEAR 48 (July 1, 2022 - June 30, 2023)

Pursuant to Title 24, §570.611 of the Code of Federal Regulations, no persons who exercise any functions or responsibilities with respect to HUD-funded activities, or who are in a position to participate in the decision making process or gain inside information with regard to such activities, may obtain a financial interest or benefit from a HUDfunded activity, or have a financial interest, including compensation, in any contract, subcontract or agreement with respect to a HUD-funded activity, or with respect to the proceeds of a HUD-funded activity, either for themselves or those with whom they have business or immediate family ties, during their tenure or for one year after. HUD defines "family ties" as the spouse, parent (including stepparent), child (including stepchild), brother, sister (including stepbrother or stepsister), grandparent, grandchild, and in-laws of a covered person, regardless of whether the relation is by blood, marriage or adoption.

A subrecipient is a public agency, private non-profit organization, in some circumstances a Community-Based Development Organization (CBDO), or perhaps even a for-profit entity that has been provided CDBG funds by the local "grantee" (the City of Meriden) to carry out agreed upon activities that are eligible under the Federal regulations.

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erefore, please answer the following disclosure questions:	
1.	Are you currently a (Please Check One):
	Subrecipient Board Member or Officer
	Subrecipient Executive Management Staff
	Subrecipient Staff directly associated with delivery of the program
	SUBRECIPIENT AGENCY:
2.	Are you a business partner of an employee, agent, consultant, officer, or elected official or appointed official of
	the City of Meriden, or any designated public agencies, or subrecipients that are receiving funds?
	Yes No
	If yes, please state the name of the city employee(s) and the department or city council member(s):
3.	Are you yourself or are you related to an employee, agent, consultant, officer, or elected official or appointed
	official of the City of Meriden, or any designated public agencies, or subrecipients that are receiving funds?
	Yes No
	If yes, please state the name of the city employee(s) and the department or city council member(s):
	SIGNED BY: DATE:
	PRINTED NAME AND TITLE: