

ATTACHMENT A

SAMPLE CONFLICT OF INTEREST QUESTIONNAIRE

The following form is to be completed by any City of Houston (“City”) elected official or City employee, or an officer, agent or consultant of the City with purchasing responsibilities; or a person engaged in the selection, award, and administration of City contracts; or a person who exercise or have exercised any functions or responsibilities with respect to activities assisted with federal HUD funds, as identified below; or a person who is in a position to participate in a decision-making process or gain inside information with regard to those activities. It is intended to help identify all actual, potential or apparent conflicts of interest.

Last Name	First Name	Initial
-----------	------------	---------

Title	City Department/Agency/Consulting Firm
-------	--

Work Address	Work Phone No.
--------------	----------------

Conflict of Interest Questionnaire:

Please answer the following questions for the preceding calendar year. If the answer to any of the following questions is “none,” please so state. Attach additional pages if necessary.

1. Outside Employers and Businesses. List the name of every employer, firm or business, other than the City of Houston, from which you were a paid officer, director, or employee or from which you received a financial or other interest or a tangible personal benefit during the preceding calendar year. Do not list individual customers or clients of the business. Do not list businesses in which you were an investor only (those should be listed in Question 3 below). Identify the type of business, such as a partnership, corporation, or sole proprietorship, and list your relationship(s) to the employer or business (i.e., owner, partner, officer, director, member, employee, and/or shareholder). Provide the same information for your immediate family. “Immediate family” include (whether by blood, marriage or adoption), your spouse, parent (including a stepparent), child (including a stepchild), brother, sister (including a stepbrother or stepsister), grandparent, grandchild, and in-laws.

You or Name of Family Member	If Family Member, Relationship To You	Name of Employer or Business	Type of Business	Relationship to Employer or Business	Type of financial or other interest or benefit received

2. HUD program-assisted activities. List the name of every HUD program-assisted activity from which you (a) received any proceeds; or (b) from which you received a financial interest or financial benefit; or (c) from which you have a financial interest in any contract, subcontract, or agreement with respect to such activities during the preceding calendar year. Provide the same information for those with whom you have business ties and for your immediate family members, as defined in Question 1 above. Exceptions: Indicate that the City of Houston has requested and you have been granted a written exception from HUD in accordance with the procedures of the applicable HUD program regulations and HCDD procedures.

You or Name of Business or Family Member	If Business or Family Member, Indicate Relationship To You	Name of HUD Program	Type of financial interest received	Exception Granted

3. Ownership Interest. List the name of business, including any firm, partnership or corporation in which you invest or have an ownership interest in excess of 1% of the total ownership in such firm, partnership or corporation. Do not list any entity listed in response to Question 1 above. Identify the nature of the business and the type of business (e.g., corporation).

Name of Business	Nature of Business	Type of Business	Percentage of Ownership	Relationship of the business with the City of Houston

4. Gifts or Benefits. List each benefit that you received during the preceding calendar year from any persons, business entity or organization (offerors) who: (a) are subject to inspection by permitting, licensing, or regulatory programs from the City of Houston; (b) regularly engage in business or activity that requires the approval or licensure of the City of Houston; (c) act as lobbyists or consultants to represent any interests before the City of Houston; or (d) are seeking or who hold contracts or subcontracts, purchase orders, or other business interests with the City of Houston. A “benefit” includes any of the following: (1) any gift of food, goods, services, money, lodging, transportation, or any other thing of value; (2) the extension of a discount, rebate, or other privilege or thing that could reasonably be regarded as economic gain or advantage, whether given directly or indirectly to a City employee. Authorization: Indicate if the benefit received is for: (i) Special events for which the offeror is reimbursed or (ii) offers to receive food, lodging, transportation, or entertainment, if attendance would be of substantial benefit to the City of Houston; and you obtained advance authorization in accordance with the procedures of the City of Houston Executive Order No. 1-28 REV, as amended.

Gift or Benefit	Name of Offeror of the Gift or Benefit	Relationship of Offeror with the City of Houston	Estimated \$ amount of the Gift or Benefit	Authorization Obtained

5. Volunteer Positions. List each volunteer office or position that you hold with any nonprofit corporation or organization; provide any remuneration was received or state if you are an unpaid volunteer; and indicate if such nonprofit corporation or organization is a recipient or subrecipient of HUD federal grants, funds or awards. Exceptions: Do not list entities of which you were a member only or for which you volunteered only in a non-policymaking, non-administrative capacity, such as a Little League coach. Provide the same information for members of your immediate family as defined in Question 1.

You or Name of Family Member	If Family Member, Relationship To You	Name of Nonprofit corporation or organization	Position (member of Board of Directors or officer)	Reimbursements/ Fees received/ or if Unpaid Volunteer	Recipient of HUD Grants, Funds, Awards

I certify that all of the above information is true to the best of my knowledge.

Signed: _____ Date Signed: _____

Please be aware that Federal, state and local governments' conflicts of interest laws, regulations and ordinances might come with their own separate legal disclosure requirements. The filing of one conflict of interest disclosure form, statement or questionnaire does not fulfill the obligations imposed by the other applicable laws, regulations and ordinances.

ATTACHMENT B

Conflict of Interest Compliance Notification SAMPLE

Date of Notification:

City of Houston Department:

City of Houston Official or Employee Name:

Position:

Phone Number:

Address:

Details of the Nature of the Conflict of Interest (actual, real, potential, perceived or apparent):

Requested Action Addressing Conflict of Interest (elimination, recusal or other mitigation, exemption or waiver requested, or disclosure, referral, reporting to the appropriate authority, etc.):

Final Action taken or resolution:

Additional Documentation related to this Conflict of Interest Compliance may include, but are not limited to:

- Conflict of Interest questionnaire or similar disclosure documents
- Review or Investigation documents
- Evaluation of Conflict of Interest: assessment and how it was considered, including any legal advice
- Disclosure documentation (e.g. print out of web page with disclosure, date and time of City Council meeting where disclosure was made and transcript of the same, newspaper publication containing the disclosure)
- Waiver request submitted to appropriate authority and response to the same