

**CHAPTER 2.20 CONFLICT OF INTEREST AFFIDAVIT**

Council / Board / Commission: \_\_\_\_\_

Meeting Date: \_\_\_\_\_

Agenda Item Number: \_\_\_\_\_

**STATE OF TEXAS  
COUNTY OF WILLIAMSON**

I, \_\_\_\_\_, reside at \_\_\_\_\_. I am a member of the \_\_\_\_\_ (City Council, City Board, Committee or Commission) of the City of Georgetown, and I hereby make this affidavit and on my oath state the following:

"I have a conflict of interest *pursuant to Chapter 2.20* in the above-referenced agenda matter for the following reason(s): (check all that are applicable).

\_\_\_\_\_ The item involves my outside employer or the outside employer of a member of my family or household.

\_\_\_\_\_ The item involves a business entity I or my family owns five percent more of a voting stock or share or five thousand dollars or more of FMV.

\_\_\_\_\_ The item involves a business entity from which I receive or my family member receives more than 10% of our gross income in the previous year.

\_\_\_\_\_ The item involves real property in which I or a family member or member of my household have an equitable interest or legal ownership.

\_\_\_\_\_ The item involves a person or business entity from whom I or a member of my family solicited or received and did not reject a good faith offer of employment within the past six months.

"I further attest that if I have not also submitted a Chapter 171 Conflict of Interest Affidavit that I do not have a conflict of interest under Chapter 171 of the Local Government Code."

"Upon filing of this affidavit with the recording secretary and/or the City Secretary, I affirm that I will abstain from all participation, discussion and voting involving the matter identified in the above-referenced agenda item whatsoever.

Further, Affiant sayeth not."

Printed Name: \_\_\_\_\_

Affiant's Signature: \_\_\_\_\_

BEFORE ME, the undersigned authority, on this day personally appeared the above-named person who on oath stated that the facts hereinabove stated are true to the best of his/her knowledge or belief.

SWORN TO AND SUBSCRIBED before me on this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

\_\_\_\_\_  
Notary Public in and for the State of Texas  
County of Williamson