ATTACHMENT H

CONFLICT OF INTEREST STATEMENT

Name: _____

Affiliation with the City of Milwaukee, Mayor's Office or the Employ Milwaukee: (check one)

[ ] Member
[ ] Employee
[ ] Grant Applicant
[ ] Contractor

Do you, or any member of your immediate family have any ownership interest in, Development in, employment with, contractual relationship with, fiduciary or professional relationship with any organization or entity which receives or may seek to receive funds from, or which does business or may seek to do business with the City of Milwaukee, Mayor's Office or Employ Milwaukee?

[ ] a. YES [ ] b. NO

If yes, please explain, giving the name of every such organization and the nature of your association with it.

_____

_____

_____

_____

For Grant Applicants and Contractors Only. (Answers should be made keeping in mind each individual of the grant applicant's and contract's board of directors, officers, employees, or any of their immediate family members).

1. Are you an employee of the City of Milwaukee, Mayor's Office or Employ Milwaukee?

   [ ] a. YES [ ] b. NO

2. Do you have a business or employment relationship with the City of Milwaukee, Mayor's Office or Employ Milwaukee? [ ] a. YES [ ] b. NO

   If yes, please explain:

   _____

   _____

3. Does any employee of the Mayor's Office, City of Milwaukee or Employ Milwaukee serve on your organization's Board of Directors?

   [ ] a. YES [ ] b. NO

   If yes, please explain:

   _____

   _____

_____ _____

Signature **Date**

Form Date: 09.15.26