

# TOWN OF BERLIN STATEMENT OF FINANCIAL INTERESTS

---

The Town of Berlin Ethics Policy requires certain elected officials and employees of the Town of Berlin to file under the penalty of false statement this Statement of Financial Interest with the Town Clerk.

1. Filer's Personal Information:

- a. Full name \_\_\_\_\_
- b. Principal residence address \_\_\_\_\_
- c. Name of office or position \_\_\_\_\_
- d. Date of Election, Appointment or Hire \_\_\_\_\_
- e. Full name of spouse \_\_\_\_\_
- f. Full name(s) of dependent(s) over 18:  
\_\_\_\_\_  
\_\_\_\_\_
- g. Please indicate reason for filing (i.e. new election or appointment or annual update) \_\_\_\_\_

2. Real Property and Location:

Include any property within the Town of Berlin (excluding your principal residence) which is owned or leased for a period of two years by you, your spouse, and/or your dependent or any corporation, trust or partnership in which you and/or your spouse and/or dependent have at least a five percent (5%) legal or equitable interest. Please include street address, name of owner or beneficiary and whether the property is held directly. If not held directly, please list the name of the corporation, partnership or trust that holds the property.

---

---

---

---



## TOWN OF BERLIN STATEMENT OF FINANCIAL INTERESTS

---

5. Certification:

- 1.) I understand that if I fail to file this statement timely and accurately, I will be subject to certain penalties as set forth in the Town of Berlin Ethics Policy.
- 2.) I understand that all information that I provide on this Statement of Financial Interests shall be a matter of public record and may be disclosed by the Town of Berlin unless exempt from disclosure by the Freedom of Information Act.
- 3.) I certify that I have read and I understand the Town of Berlin Ethics Policy.
- 4.) I certify, under penalty of false statement, that this Statement of Financial Interests is a complete and accurate statement of financial interests for myself, my spouse, my dependent over eighteen years old and any corporation, trust or partnership in which I or we hold a legal or equitable interest of at least five percent (5%).

I have read and agree to the above certification.

Signature: \_\_\_\_\_

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

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