

## **County Board Members Wishing to Register as County Vendors**

| Gilma Di<br>The Com<br>19 West | ubmit the following information by mail, fax, <b>or</b> email to:<br>iaz-Greco, Staff Attorney<br>nmission on Ethics and Public Trust<br>Flagler Street, Suite 820<br>FL 33130  | Phone:<br>Fax:   | (305) 350- 0638<br>(305) 579-0273<br>C@miamidade.gov   |   |
|--------------------------------|---|--|--|---|
| Board M                        | Iember's Name   |  |  |   |
| Board N                        | ame   |  |  |   |
| Board M                        | lember Title  |  |  |   |
| Business                       | s Name/Type of Business   |  |  |   |
| Board M                        | Iember's Mailing Address  |  |  |   |
| Board M                        | Iember's email  |  |  | -   |
| the Cour                       | nave a <b>controlling financial interest</b> (10% or more) in ty?  Yes No  The you or any of your immediate family members <b>emplo</b> County Vendor   | -  | ·  |   |
| Member<br>County i             | mi-Dade County Conflict of Interest & Code of Ethics Or is who have a <b>controlling financial interest (10% or</b> in certain circumstances and if the following criteria are 1. I will not contract with any County agency or depa policy-setting, or quasi-judicial authority of the bot 2. I will not make a presentation or seek any benefits 11.1(m)(2).  3. I will not vote on any matter if I will be directly affer relationships in Sec. 2-11.1(v) with the firm, corpo | more) in a corpora<br>e met: [See also So<br>rtment subject to t<br>ard of which I am a<br>for myself or othe<br>ected by the vote a<br>ration, or entity be | ation firm or entity to decs. 2-11.1 (m)(2),(v)] the regulation, oversight member. See 2-11.1 (c) rs from the board on w | contract with the out, management, (3) and (d). Thich I serve. See 2- |
|                                | Signature   | —— ——— Date  |  |   |