

**CODE OF CONDUCT FOR MEMBERS OF COUNCIL FOR
THE CORPORATION OF THE COUNTY OF ELGIN**



**Conflict of Interest Form
COUNTY OF ELGIN
Council Code of Conduct**

Name of Member: _____

Telephone No.: _____

Email Address: _____

Date of Council meeting: _____

Agenda item number and name:

General Nature of the Conflict of Interest:

Signature of Council Member

Date Received by County Clerk