

CONFIDENTIAL

**ANNUAL CONFLICT OF INTEREST QUESTIONNAIRE
City of Fayetteville, North Carolina
For Fiscal Year Ending June 30, 2026**

The questionnaire is based on the City of Fayetteville's Code of Ethics and serves to identify and document any personal interest appointed officials or employees may have with the City of Fayetteville. It is not practical to cover every aspect of the Code in this questionnaire, any more than it is possible to cover all elements of ethics in the Code. By signing this form, you are attesting not only to the questions below but also to compliance with the entire Code and its intent.

To assure awareness and support for our goal of maintaining a high standard of ethics in our business dealings, please complete the following disclosure form either electronically or via hard copy. Once completed, please retain a copy for your records while returning the original to the Director of Internal Audit either by email at RoseRasmussen@FayettevilleNC.gov or via interoffice mail in an envelope marked "Confidential".

Although this disclosure form will be completed annually, if circumstances should arise during the year that could warrant a different response, please notify the Director of Internal Audit of the change.

"Immediate Family" for the purposes of this questionnaire includes your spouse, domestic partner, all children including step and adopted children, all siblings including step and half siblings, parents and in-laws including mother-in-law, father-in-law, brother-in-law and sister-in-law.

If the answer to any of the following questions is "none" please so indicate or check 'N/A'.

Incomplete questionnaires will be returned.

Please return the completed questionnaire to the Director of Internal Audit by November 21, 2025.

1. Name and Address

Last Name

First Name

Middle Initial

Title

Residential Address

City

State

Zip Code

2. Interest in Contracts

Describe any interest of you or any immediate family member in any contract involving the City of Fayetteville.

Name of Family Member:

Description of City Contract:

N/A:

Name: _____

3. Nonprofits

List the name of any nonprofit as defined in N.C.G.S. 14-234.3 for which you serve as director, officer or governing board member.

Name of Nonprofit:

Position / Title:

Nature of Business

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N/A:

4. Your Employment or Business

List the name of any outside employer or business from which you receive compensation for services rendered or goods sold or produced or of which you are a member, officer, or employee.

Name of Employer/Business:

Position / Title:

Nature of Business:

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N/A:

5. Your Spouse or Domestic Partner's Employment or Business

Name of Spouse or Domestic Partner: _____

List the name of any employer or business from which your spouse or domestic partner receives compensation for services rendered or goods sold or produced or of which your spouse or domestic partner is a member, officer, or employee.

Name of Employer/Business:

Position / Title:

Nature of Business:

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N/A:

Name: _____

6. Respond “yes” or “no” to all questions below. Answer all questions. Incomplete forms will be returned. Explain any “yes” answers in the space provided. Add additional sheet as necessary.

- a. Do you or any member of your immediate family own more than ten percent (10%) of the stock of a corporation or have more than a ten percent (10%) ownership in any other business entity, which to your knowledge, is doing business or seeking to do business with or competing with the City of Fayetteville?

Yes

No

- b. Have you or any member of your immediate family received or sought to receive directly or indirectly, any payment, loan, service, entertainment, travel, gift (other than of a token nature) as identified in City Code 2-94(e), or other payment from any organization or a representative of it, doing or seeking to do business with or in competition with the City of Fayetteville.

Yes

No

- c. During the period of July 1, 2025 to present, have you served or are you presently serving as an officer, director, or employer, or have you performed services for an organization not previously disclosed in question 4 above?

Yes

No

Name: _____

- d. Are you aware of any other interests or arrangements about which you may have a question as to whether a conflict of interest may exist?

Yes No

- e. Are you aware of any other areas of the Code with which you are not in compliance?

Yes No

- f. Are you aware of any City official or employee who has not complied with or is not complying with the City's Code of Ethics or the N.C.G.S. 14-234, 14-234.1 or 14-234.3?

Yes No

I have read the City of Fayetteville Code of Ethics, the N.C.G.S. 14-234, 14-234.1, 14-234.3 and this questionnaire. I fully understand all of the aforementioned documents, and my responses in this questionnaire are true, accurate, and complete to the best of my knowledge and belief. I fully comply with the City of Fayetteville's Code of Ethics and in the event that a change occurs subsequently which alters or could potentially alter my compliance, I will advise the appropriate City of Fayetteville official immediately.

Signature

Date

Name (please print)