Measure X Community Advisory Board Member

Self-Attestation of No Conflicts of Interest

The Measure X Community Advisory Board (MXCAB) Bylaws outline eligibility requirements and conflict of interest disclosures for members. To support compliance with these provisions, members are asked to complete this self-attestation form at the beginning of their term and as requested by MXCAB support staff. This process helps maintain the integrity and transparency of the MXCAB.

Please review each statement and check the box to confirm.
$\ \square$ I am not an elected official or a County department head.
☐ I live and/or work in Contra Costa County.
I understand that as a member of the MXCAB, I must avoid any real or perceived conflict of interest.
☐ I will recuse myself from MXCAB discussions and decisions that could financially benefit me, my family, my employer, or any affiliated organization.
☐ I am not employed by, contracted with, or serving as a board member for any organization that has received Measure X funds in the past two years.
☐ My immediate family members are not employed by, contracted with, or serving as board members for any organization that receives Measure X funds.
☐ I will file California Form 700 – Statement of Economic Interests annually and also immediately upon leaving the Advisory Body.
☐ I will notify the MXCAB support staff immediately if my circumstances change and I, or any of my relatives, become affiliated in any way with a Measure X funded organization.
Certification
By signing below, I confirm that I have read and understood the conflict of interest requirements outlined above and that I will comply with the MXCAB Bylaws.
Name (printed):
Signature: