

**Code Of Conduct For Members Of Council For  
The Corporation Of The Municipality of West Elgin**



MUNICIPALITY OF  
**West Elgin**

***Appendix D***

**Conflict of Interest Form  
Municipality of West 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 Municipal Clerk