

ANNUAL STATEMENT OF FINANCIAL INTERESTS

Persons or Entities Conducting Business with the City
Waterbury, Connecticut
(For the Calendar Year 2024)

Vendor #:

(Noted on top right side of letter.)

Name of Filing Party _____

I. Outstanding Contracts or Purchase Orders with the City

No Outstanding Contracts or Purchase Orders with the City

(Service or Commodity Provided)

(Term of Contract or PO)

(Service or Commodity Provided)

(Term of Contract or PO)

(Service or Commodity Provided)

(Term of Contract or PO)

(Service or Commodity Provided)

(Term of Contract or PO)

ANNUAL STATEMENT OF FINANCIAL INTERESTS
Persons or Entities Conducting Business with the City
Waterbury, Connecticut
(For the Calendar Year 2024)

Name of Filing Party _____

II. Financial Interest Disclosure

(Public Officials, Employees or Board and Commission Members with interest in Person or Entity
Conducting Business with the City)

No Officials, Employees or Board and Commission Members with Financial Interest

(Name of Official)

(Position with City)

(Nature of Business Interest)
(e.g. Owner, Director etc...)

Interest Held By:

Self Spouse Joint Child

(Name of Official)

(Position with City)

(Nature of Business Interest)
(e.g. Owner, Director etc...)

Interest Held By:

Self Spouse Joint Child

ANNUAL STATEMENT OF FINANCIAL INTERESTS

Persons or Entities Conducting Business with the City
Waterbury, Connecticut
(For the Calendar Year 2024)

Name of Filing Party _____

CERTIFICATION

1. I certify that this Annual Statement of Financial Interests is a complete and accurate statement of those matters required to be disclosed by me pursuant to §39.061 of the Code of Ordinances. (Page 4)

2. I understand that if I fail to file an Annual Statement (or amendment thereto) or an inaccurate Statement I will be in violation with Chapter 39 of the Code of Ordinance and, thereby, subject to the remedies set forth in §§38.116 and 39.101 of said Code. (Page 4)

3. I understand that I must file with the City Clerk, within fifteen (15) days following any reportable occurrence, any amendments to the Annual Statement.

I have read and agree to the above certification.

(Name of Company, if applicable)

Signature of Individual (or Authorized Signatory)

Date

Print or Type Name and Title (if applicable)

Delivered by:

Email

Mail

Hand Delivered