

 Metro | *Policies and procedures*

**Subject** Conflict of Interest Disclosure  
**Section** Human Resources, Office of Metro Attorney  
**Approved by** Martha Bennett, Chief Operating Officer

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**POLICY**

Employees will disclose actual or potential conflicts of interest where there is opportunity to gain in accordance with Oregon Government Ethics statutes (ORS Chapter 244).

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**Applicable to**

All Metro employees.

**GUIDELINES**

1. All Metro employees that participate or may participate in contracting (including decisions regarding contract amendments/extensions/sign-offs, or IGAs), procurement or grantmaking with agencies, companies or organizations shall comply with this policy and the laws cited herein as well as the Metro Charter, Code and other applicable policies.

**PROCEDURES**

1. Prior to participating in any contracting (including decisions regarding contract amendments/extensions/sign-offs, or IGAs), procurement or grantmaking activity with agencies, companies or organizations, and by January 30 of each year thereafter, employees will complete the Conflict of Interest Disclosure Form and provide the completed form to the Human Resources Department with a copy to their supervisor.
  - a. The Human Resources department will ensure that the form is kept in the employee's personnel file.
2. On January 15 of each year, the Metro Attorney or the Metro Attorney's designee will notify all Metro supervisors to renew the Conflict of Interest Disclosure with employees that participate or may participate in contracting, procurement or grantmaking with agencies, companies or organizations.

3. During the course of the year, the employee will notify their supervisor and the Human Resources department either electronically or in writing once the actual or potential conflict ceases to exist.

## **RESPONSIBILITIES**

### Employees:

- Become familiar with this policy and comply with its terms.

### Supervisors and Managers:

- Oversee employee compliance with this policy.

### Office of Metro Attorney

- Notify all Metro supervisors of requirement to renew the Conflict of Interest Disclosure on January 15 of each year.
- Provide advice and guidance regarding application of this policy.

### Human Resources

- Keep copies of Conflict of Interest Disclosure forms in employee files.
- Retain files as notified by employee supervisors upon yearly renewal.

## **Cross Reference**

Evaluator's Statement of Independence and Non-Conflict of Interest  
Technical Advisor's Non-Conflict of Interest

## **References**

Oregon Government Ethics Statutes (ORS Chapter 244)

## **Attachment**

Conflict of Interest Disclosure Form

Metro employees,

In response to recommendations made by the Metro Auditor, Metro is implementing a Conflict of Interest Disclosure policy, which broadens our disclosure practices, increases transparency and demonstrates our Metro values of excellence and public service.

### ***Who should complete the form?***

- **All Metro (including Zoo and MERC venues) managers and supervisors** must complete the form, indicating whether they have actual, potential or no conflict of interest.
  - **Any Metro employee (including Zoo and MERC venues) who participates or may participate** in contracting (including decisions regarding contract amendments/extensions/sign-offs, or IGAs), procurement or grant-making with agencies, companies or organizations must complete the form, indicating actual or potential conflict of interest.
- X Metro employees that **do not participate in contracting, procurement or grant-making** are not required to complete the form.

### ***How does the employee submit the form?***

- Signed forms should be submitted to Human Resources (either by scanned copy with signature or original sent inter-office) and a copy should be provided to the employee's supervisor.
- Human Resources department will keep the form in the employee's personnel file.

Thank you for helping to implement this important policy. If you have any questions about this policy or form, please contact me.

Best,

Alison

**Alison R. Kean**  
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# Conflict of Interest Disclosure Form

## Conflict of Interest Definition

An actual or potential “conflict of interest” means making any action, decision or recommendation which would or could financially benefit you or your relative\*, or a business with which you or a relative is associated.

## Conflict of Interest Disclosure

I, \_\_\_\_\_ [your name], \_\_\_\_\_ [your title], hereby disclose to my supervisor and department director \_\_\_\_\_, [supervisor and director names], and to Metro’s Human Resources director that I have an actual or potential conflict of interest with \_\_\_\_\_ [business, company, organization or entities], because I or one of my relatives\*<sup>1</sup> have a financial interest in or work there, and I have some decision-making authority over Metro’s relationship with this business, company, organization or entity.

Due to this actual/potential conflict of interest, I agree not to participate in any actions, decisions, or recommendations (including signatures) related to this business, company, organization or entity, and that all such actions, decisions, or recommendations shall be handled by my supervisor or his/her delegate.

I agree to renew this disclosure every year that the conflict remains, and also to notify my supervisor if and when the conflict no longer exists.

\_\_\_\_\_  
Employee Signature

\_\_\_\_\_  
Date

## If the above does not apply to you, please sign below.

I, \_\_\_\_\_ [your name], \_\_\_\_\_ [your title], hereby certify that I **do not** have any financial interest in, nor do any relatives\* have financial interests in, businesses, companies, organizations, or entities doing business with Metro on matters over which I have any authority or involvement.

\_\_\_\_\_  
Employee Signature

\_\_\_\_\_  
Date

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Provide the signed, completed form to the Human Resources office with a copy to your supervisor.

<sup>1</sup> “Relative” is defined for these purposes as a spouse, domestic partner, child, stepchild, parent, parent-in-law, sibling, sibling-in-law, or persons to whom you provide employment benefits or have a legal support obligation, or a member of your household.