

# Town of Southborough

## Special Municipal Employee Activity Reporting Form

Per the Southborough Board of Selectmen policy adopted on XXX, all persons designated as Special Municipal Employees ("SMEs") must file this form for any matter or instance when the SME's actions meet one or more of the following conditions:

1. Represents private parties before municipal board(s) other than his or her own board.
2. Acts as agent for private parties in connection with a matter of interest to the Town.
3. Receives pay or other compensation in connection with matters involving the Town.
4. Has a financial interest in a contract with a department which is completely independent of the department where they work.
5. Has a financial interest in a contract with his or her own department (or with a department which has overlapping jurisdiction with his or her department) and for which the Board has voted to grant an exemption pursuant to G.L Ch. 268 §20.

***Submit this form to the Town Clerk before any of the activities identified above begins and by July 1 of each year when the activity will be considered ongoing.***

**Failure to submit this form may be grounds for removal a board or committee.**

Date submitted: \_\_\_\_\_

Name of Special Municipal Employee:

\_\_\_\_\_

Activity reported on this form is related to activity #s identified above: \_\_\_\_\_

Activity pertains to my membership on this committee:

\_\_\_\_\_

**For activities # 1 and #2:**

List the parties (legal name and address) you represented or acted as an agent in this matter:

\_\_\_\_\_

List the boards involved in this matter:

\_\_\_\_\_

When did the representation occur: \_\_\_\_\_

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**For activity # 3:**

List the boards involved in this matter:

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List the compensation or other benefit you will receive through this activity during this calendar year:

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Identify the nature of the work to be performed:

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List the compensation or other benefit you will receive through this activity during this calendar year:

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**For activities #4 and #5:**

List the department(s) involved in this matter:

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Identify the nature of the work to be performed:

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List the compensation or other benefit you will receive through this activity during this calendar year:

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List the legal name and address of all other entities who are parties to this contact:

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