

Form EC-C:2

Request for Written Advisory Opinion

Weare Ethics Committee
Town of Weare, NH 03281

Your name: _____

Title of Office Held, or Position: _____

Address: _____

Telephone No.: _____

Email address: _____

Applicable Provision of Ethics Code: _____

Please describe the specific issue on which you wish to have the Ethics Committee write an advisory opinion pursuant to Section II-C of the Weare Ethics Code. These concerns should be of a general nature and not related to an identifiable person. Please be as specific as possible. If necessary, attach additional pages.

I hereby certify that:

- ✓ *I am a Weare town official, board/committee member, or employee.*
- ✓ *I have read the Weare Ethics Code.*
- ✓ *I believe that this matter is a fair subject of inquiry for the Ethics Committee.*

Please mail this document to the Committee at 15 Flanders Memorial Rd., Weare, NH 03281.

Dated: ____ / ____ / ____ Signature _____

Revised 10-1-06