

**ATTACHMENT "D":  
REQUEST FOR ETHICS ADVISORY OPINION**

**WARREN COUNTY BOARD OF ETHICS**

c/o WARREN COUNTY ATTORNEY'S OFFICE  
WARREN COUNTY MUNICIPAL CENTER  
1340 STATE ROUTE 9  
LAKE GEORGE, NEW YORK 12845

**For Internal Use Only:**

AO Number: \_\_\_\_\_

Date Received: \_\_\_\_\_

**REQUESTOR'S INFORMATION:**

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Check all that apply to you:

- Current County Employee
- Former County Employee
- Prospective County Employee
- Supervisor for Current/Former/Prospective County Employee
- Other Warren County Public Servant (Explain: \_\_\_\_\_)

Provide your County Title/Position and Department or Board: \_\_\_\_\_.

Home Mailing Address for Advisory Opinion (if issued): \_\_\_\_\_.

I believe the matter involves one or more of the following Code of Ethics Sections (check all that may apply):

- Sec. 5: Use of Municipal Position for Personal or Private Gain
- Sec. 6: Failure to Disclose Interest in Legislation and Other Matters
- Sec. 8: Recusal or Abstention from Decision or Official Action
- Sec. 10: Investments in Conflict with Official Duties
- Sec. 11: Private Employment in Conflict with Official Duties
- Sec. 12: Future Employment
- Sec. 14: Use of Warren County Resources
- Sec. 15: Interests in Contracts
- Sec. 16: Nepotism
- Sec. 17: Political Solicitations
- Sec. 18: Confidential Information
- Sec. 19: Gifts

**Detailed Description of Matter for Which Advisory Opinion is Requested:**

*(attached additional pages if required)*

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I certify that the matter set forth above is factually accurate and true to the best of my personal knowledge and is a future action I believe will occur which requires an advisory opinion from the Board of Ethics.

Signature: \_\_\_\_\_ Dated: \_\_\_\_\_