

**EMPLOYEE ACKNOWLEDGEMENT FORM**  
**SUMMARY OF THE CONFLICT OF INTEREST LAW**  
**FOR MUNICIPAL EMPLOYEES**

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I \_\_\_\_\_, ACKNOWLEDGE RECEIVING THE CONFLICT OF INTEREST LAW SUMMARY. I ACKNOWLEDGE THAT I HAVE THIRTY (30) DAYS TO READ THE SUMMARY OF THE STATE OF THE CONFLICT OF INTEREST LAW AND COMPLETE THE ONLINE TRAINING AS REQUIRED UNDER SECTION 28 OF THE M.G.L. 268A LAW. I MUST RETURN THE FOLLOWING FORMS TO THE OFFICE OF HUMAN RESOURCES AFTER COMPLETION.

- RECEIPT OF STATE OF CONFLICT OF INTEREST LAW SUMMARY
- CONFLICT OF INTEREST LAW ONLINE TRAINING PROGRAM RECEIPT

SIGNATURE: \_\_\_\_\_

DATE: \_\_\_\_\_