



CITY OF HAGERSTOWN, MARYLAND

Office of the City Clerk

One East Franklin Street • Hagerstown, MD 21740

Telephone: 301.766.4183 • TDD: 301.797.6617 • Website: www.hagerstownmd.org

THE ETHICS COMMISSION FOR THE CITY OF HAGERSTOWN, MARYLAND

c/o City Clerk, 1 East Franklin Street, Room 200, Hagerstown, MD 21740

REQUEST FOR ADVISORY OPINION

Requestor's Name: _____

Requestor's Department: _____

Requestor's Title/Position: _____

Requestor's Mailing Address: _____

1. Description of the facts and circumstances in question (Continue on the back of this form if additional space is needed). Please attach any relevant supported documentation.

2. Summary of the ethics issue requested to be determined (continue on back of this form if necessary): _____

The undersigned Requestor, a person subject to the City of Hagerstown Code of Ethics, hereby requests an advisory opinion of The Ethics Commission for the City of Hagerstown pursuant to §33-3, B of the City Code and §02.B.(6) of the Rules of Procedure adopted by the Ethics Commission, as outlined above. I may obtain a complete copy of the Rules of Procedure from the City's website or by request to the City Clerk.

Signature: _____

Date: _____