



DISCLOSURE OF APPEARANCE OF CONFLICT OF INTEREST
AS REQUIRED BY G. L. c. 268A, § 23(b)(3)

REDACTED

PUBLIC EMPLOYEE INFORMATION	
Name of public employee:	Mavis A. Bergman
Title or Position:	City Councilor At-Large
Agency/Department:	City of Worcester
Agency address:	455 MAIN STREET Worcester, MA
Office Phone:	(508) 808 -
Office E-mail:	Bergman.M@worcesterma.gov
	<p>In my capacity as a state, county or municipal employee, I am expected to take certain actions in the performance of my official duties. Under the circumstances, a reasonable person could conclude that a person or organization could unduly enjoy my favor or improperly influence me when I perform my official duties, or that I am likely to act or fail to act as a result of kinship, rank, position or undue influence of a party or person.</p> <p>I am filing this disclosure to disclose the facts about this relationship or affiliation and to dispel the appearance of a conflict of interest.</p>
APPEARANCE OF FAVORITISM OR INFLUENCE	
Describe the issue that is coming before you for action or decision.	Possible executive committee to discuss labor Union (Police) negotiations with City Manager for contract changes due to change of conditions etc...
What responsibility do you have for taking action or making a decision?	Only finding approval if/when agreement is reached w/ City Manager thru City Budget votes.
Explain your relationship or affiliation to the person or organization.	Past legal representation of union members / Officials & [REDACTED] and/or Emily [REDACTED]
How do your official actions or decision matter to the person or organization?	Only finding approval if/when City Manager reaches an agreement thru City Budget votes.

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Optional: Additional facts – e.g., why there is a low risk of undue favoritism or improper influence.	
If you cannot confirm this statement, you should recuse yourself.	WRITE AN X TO CONFIRM THE STATEMENT BELOW. <input checked="" type="checkbox"/> Taking into account the facts that I have disclosed above, I feel that I can perform my official duties objectively and fairly.
Employee signature:	
Date:	

Attach additional pages if necessary.

Not elected to your public position – file with your appointing authority.

Elected state or county employees – file with the State Ethics Commission.

Members of the General Court – file with the House or Senate clerk or the State Ethics Commission.

Elected municipal employee – file with the City Clerk or Town Clerk.

Elected regional school committee member – file with the clerk or secretary of the committee.

Form revised July, 2012

