MEMORANDUM FOR [*insert supervisor*]

SUBJECT: Disqualification Statement (Financial)

In accordance with section 208 of title 18 of the United States Code, a criminal statute, and section 2635.604 of title 5 of the Code of Federal Regulations, I am disqualified from participating personally and substantially as a Government officer or employee in any particular matter that would have a direct and predictable effect on my own financial interests or those imputed to me. In particular, I current hold an interest in the following “covered party(ies):”

Covered Parties:

[i*nsert name of company(ies)*]

I am taking the following steps to ensure that I do not participate in any particular matter affecting the covered parties:

(1) I am instructing [*insert screener name*] to screen all matters directed to my attention that involve any persons or organizations outside the Federal Government, and to determine whether such matters involve the covered parties. I have directed [*insert screener name*] to consult an ethics counselor if there is any uncertainty as to whether I am disqualified from participating.

(2) If [*insert screener name*] determines that a matter directly or indirectly involves a covered party, the matter will be referred to the [*Name and Title of person with authority to act on behalf of Employee*] for action or assignment, without my knowledge or involvement.

(3) I will advise my immediate subordinates of this disqualification, and also instruct them to direct all inquiries regarding matters directly or indirectly involving the covered parties to [*Name and Title of person with authority to act on behalf of Employee*], without my knowledge or involvement.

This disqualification remains in effect until further notice. In the event of changed circumstances, such as rejecting the possibility of employment with one of the covered parties or the passage of a 2 month period during which I have receive no indication of interest in employment discussions from one of the covered parties, I will consult an ethics counselor, update this memorandum and notify everyone concerned.

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 [insert name]

cc: Ethics Counsel

 [Screener’s Name]

 (Name and Title of person with authority to act on behalf of Employee]

 [additional supervisors or subordinates, as appropriate]