

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

RECEIVED
STATE ETHICS COMMISSION
2023 MAY -8 AM 10:21

	PUBLIC EMPLOYEE INFORMATION
Name of public employee:	Toni K. Wolfenden
Title or Position:	Administrative Assistant
Agency/Department:	Health Department
Agency address:	120 Main Street North Andover, MA 01845
Office Phone:	978-688-9540
Office E-mail:	twolfenden@northandoverma.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.	Various septic issues.
What responsibility do you have for taking action or making a decision?	I forward septic plans to be reviewed to the Town Septic Consultant.
Explain your relationship or affiliation to the person or organization.	My son, John A. Wolfenden is a surveyor for Andover Consultants Inc., located at 1 East River Place Methuen, MA 01844. Andover Consultants from time to time will send septic plans to the health department to be reviewed and approved for homes in North Andover.
How do your official actions or decision matter to the person or organization?	Process septic plans and files.

Optional: Additional facts – e.g., why there is a low risk of undue favoritism or improper influence.	There is low risk of undue favoritism because I do not approve any of the septic plans.
If you cannot confirm this statement, you should recuse yourself.	WRITE AN X TO CONFIRM THE STATEMENT BELOW. _x_ Taking into account the facts that I have disclosed above, I feel that I can perform my official duties objectively and fairly.
Employee signature:	<i>Toni H. Wolfenden</i>
Date:	05.03.2023

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.