A conflict of interest is defined as an actual or perceived interest by a member of the Board of Directors in an action that results in, or has the appearance of resulting in, personal, organizational, or professional gain. A conflict of interest exists when there is evidence of or the appearance that a Board Member's personal interests have influenced or may influence Agency transactions or operations, or that these interests take precedence over the interests, goals, and/or mission of Agency. A conflict of interest may relate to you, your spouse/partner, family member, business interests, and/or associates.

Board Members shall exercise the utmost good faith in all transactions involved in their duties, and they shall not use their positions with Agency or knowledge gained therefrom for their personal benefit. The interests of the organization must be the first priority in all decisions and actions.

Pursuant to this policy, each Board Member shall disclose by indicating below any personal interest which he or she may have in any manner pending before Agency and shall leave the governing board or committee meeting while the topic of interest is being discussed and/or voted upon.

Considering the period from \[ \text{to} \] (Dates)

*Yes No

1. I (or a party related to me) hold, directly or indirectly a position of financial interest in an outside concern from which Agency secure goods or services.
2. I (or a party related to me) render directive, managerial, or consultative service to, or am an employee of, any outside concern that does business with Agency.
3. I have accepted gifts or other benefits from any outside concern that does, or is seeking to do, business with Agency.
4. At Agency, I have participated in management decisions concerning transactions that affect or benefit me, my family, or my personal financial interests.
5. I (or a party related to me) have received or continue to receive services from Agency.

* If you answered "Yes" to any of these statements, please provide further explanation and information on any related-party transactions.

________________________________________________________________________________________
________________________________________________________________________________________

I understand that it is my responsibility as a Board member to adhere to the above policy and to contact the agency’s Compliance Officer to complete a new disclosure form and to inform the agency of any changes and/or additions regarding disclosure that may occur throughout the year.

_________________________________ Date

Signature

_________________________________

Printed name