

Policy 5a - LEAF Conflict of Interest Disclosure Form

Name: _____

Please describe below any relationships, transactions, or positions you hold (volunteer or otherwise), or circumstances that you believe could contribute to a conflict of interest or split loyalties between LEAF and your personal interest or those of the other organization(s).

_____ I have no conflict of interests to report _____ (Initial and sign below)

_____ I have the following possible conflicts of interest or split loyalties to report.

(Note: Please specify other nonprofits and for-profits you, or your significant other, sit on; any for-profit businesses for which you or an immediate family member are an officer, director, or majority shareholder; and the name of your employer and any businesses you or a family member own.

1. _____

2. _____

3. _____

4. _____

5. _____

I hereby certify that the information set forth above is true and complete to the best of my knowledge. I have reviewed and agree to abide by the LEAF Conflict of Interest Policy.

Signature: _____

Date: _____