Basic Conflict of Interest Disclosure Form [insert date]

Date: _____

Name: _____

Position (board member):_____

Please describe below any relationships, transactions, positions you hold (volunteer or otherwise), or circumstances that you believe could contribute to a conflict of interest between OSTC and your personal interests, financial or otherwise:

_____ I have no conflict of interest to report

I have the following conflict of interest to report (please specify other nonprofit and for-profit boards you (and your spouse) sit on, any for-profit businesses for which you or an immediate family member are an officer or director, or a majority shareholder, and the name of your employer and any businesses you or a family member own):

1	 	
2.		

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 Policy of Conflict of Interest of Oregon Society of Tax Consultants.

Signature: _____

3.

Date: _____

Sample Policy Adopted from a template policy provided by the Minnesota Council of Nonprofit Organizations

Approved 12/8/12