

The Alliance Conflict of Interest Statement

At this time, I _____ am a Board member, a committee member, or an employee of the following organizations (please attach a separate sheet if needed):

Organization/committee	Relationship to Organization	Nature of Conflict of Interest or Potential Conflict of Interest

By signing below, I certify that I have: 1) received a copy of the conflict of interest policy, 2) have read and understand the policy as presented, 3) fully agree to comply with the policy, and 4) understand that the Alliance is a charitable organization and that, in order to maintain its federal tax exemption, it must engage primarily in activities which accomplish one or more of its tax-exempt purposes.

Further, except as described above, I am not now nor at any time during the past year have been a participant, directly or indirectly, in any arrangement, agreement, investment, or other activity with any vendor, supplier, or other party doing business with the Alliance which has resulted or could result in personal benefit to me.

Date: _____

Signature: _____

Printed name: _____

Approved April 12, 2019