

## **MVLS Forms & Procedures**

Form Title: Conflict of Interest Annual Statement

<u>Policy/Guideline:</u> Conflict of Interest Policy

## Annual Statement

Individual Completing Form

By signing below, board of trustees members and key employees indicate that they have seen, read, understand and agree to abide by the MVLS Conflict of Interest Policy. Signers acknowledge the tax exempt mission of MVLS, and affirm that MVLS activities should contribute to that mission. Signers will indicate any potential conflicts of interest concerning the vendors, employees or contractors with whom MVLS does business. A conflict of interest is a financial interest or benefit accruing to the signer, a family member of the signer or any business substantially controlled by the signer as the result any business relationship or contemplated transaction engaged in by the Mohawk Valley Library System.

## Name: \_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_ Information Concerning Conflicts of Interest Please check one of the following statements. If you check the first statement, indicating no conflicts of interest, there is no need to complete the final section. I have no known conflicts of interest with vendors, employees or contractors doing business with MVLS. I have the following conflict(s) of interest concerning vendors, employees or contractors doing business with MVLS: (Please list any individuals or businesses in which you have an interest)