**(Place your NPC information here)**

**Confidential Disclosure Questionnaire**

Please complete the questionnaire below, indicating any potential conflicts of interest. If you answer "yes" to any of the questions, provide a written description of the details in the space allowed. Attach additional sheets as needed. Submit your completed form to the (PLACE YOUR INFO HERE) Executive Director.

**Financial Interests** - A conflict may exist when a (PLACE YOUR INFO HERE) director, officer or employee or any of their relatives may directly or indirectly benefit or profit as a result of a decision, policy, transaction or arrangement made by (PLACE YOUR INFO HERE).

**During the past 12 months (for each “yes” response, please describe below or on a separate page):**

1. Has (PLACE YOUR INFO HERE) proposed to contract or contracted to purchase or lease goods,

services, or property from you, a relative or a business associate?

\_\_\_\_\_ Yes \_\_\_\_\_No

2. Are you related to any current or prospective (PLACE YOUR INFO HERE) director, officer or employee, or to the supervisor of any (PLACE YOUR INFO HERE) employee?

\_\_\_\_\_ Yes \_\_\_\_\_No

3. Have you, a relative or a business associate been provided with a gift, gratuity or

favor of a substantial nature from a person or entity that does business or seeks to do

business with (PLACE YOUR INFO HERE)?

\_\_\_\_\_ Yes \_\_\_\_\_No

4. Have you, a relative or business associate been gratuitously provided use of the

facilities, property, or services of (PLACE YOUR INFO HERE)?

\_\_\_\_\_ Yes \_\_\_\_\_No

5. Are you, a relative or a business associate in a position to benefit financially from

decision, policy, transaction or arrangement made by (PLACE YOUR INFO HERE)?

\_\_\_\_\_ Yes \_\_\_\_\_No

**Other Interests** - A conflict may also exist when a (PLACE YOUR INFO HERE) officer, director, employee or any of their relatives may obtain a non-financial benefit or advantage that they would not have obtained absent their relationship with (PLACE YOUR INFO HERE), or when their duty or responsibility owed to (PLACE YOUR INFO HERE) conflicts with a duty or responsibility owed to some other organization.

**During the past twelve months (for each “yes” response, please describe below or on a separate page.):**

1. Did you obtain for yourself or any other person or organization preferential

treatment, promotion, recognition or a non-salaried appointment as a consequence

of your association with (PLACE YOUR INFO HERE)?

\_\_\_\_\_ Yes \_\_\_\_\_No

2. Did you make use of confidential information obtained from (PLACE YOUR INFO HERE) for your own

benefit or for the benefit of any person or organization?

\_\_\_\_\_ Yes \_\_\_\_\_No

3. Did you take advantage of an opportunity or enable any person or organization to

take advantage of an opportunity that you had reason to believe would be of interest

to (PLACE YOUR INFO HERE)?

\_\_\_\_\_ Yes \_\_\_\_\_No

4. Were you in a position to benefit in a nonfinancial way from a decision, policy,

transaction or arrangement made by (PLACE YOUR INFO HERE)?

\_\_\_\_\_ Yes \_\_\_\_\_No

**Other** - Describe any other circumstances or relationships you or a relative may have that you believe may assist (PLACE YOUR INFO HERE) in protecting its interests and preventing conflicts of interest:

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name (Please print) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_