

ANNUAL CONFLICT OF INTEREST STATEMENT

1. Name: \_\_\_\_\_ Date: \_\_\_\_\_

2. Position: \_\_\_\_\_

3. I affirm the following:

I have received a copy of the Diocese of the Rio Grande Conflict of Interest Policy \_\_\_\_\_(initial)

I have read and understand the Policy. \_\_\_\_\_(initial)

I agree to comply with the Policy. \_\_\_\_\_(initial)

4. Disclosures:

a. Do you have a financial interest (current or potential) including a compensation arrangement, as defined in the Conflict of Interest Policy of the Diocese of the Rio Grande?  Yes  No

i. If yes, please describe it: \_\_\_\_\_

ii. If yes, has the financial interest been disclosed, as provided in the Conflict of Interest Policy?  Yes  No

b. In the past have you had a financial interest, including a compensation arrangement as defined in the Conflict of Interest Policy with the Diocese of the Rio Grande?  Yes  No

i. If yes, please describe in and the approximate dates: \_\_\_\_\_

ii. If yes, has the financial interest been disclosed as provided in the Conflict of Interest Policy?  Yes  No

c. Do you have a personal interest (current or potential) as defined in the Conflict of Interest Policy of the Diocese of the Rio Grande?  Yes  No

i. If yes, please describe it: \_\_\_\_\_

ii. If yes, has the financial interest been disclosed, as provided in the Conflict of Interest Policy?  Yes  No

d. In the past have you had a personal interest as defined in the Conflict of Interest Policy with the Diocese of the Rio Grande?  Yes  No

i. If yes, please describe in and the approximate dates: \_\_\_\_\_

ii. If yes, has the financial interest been disclosed as provided in the Conflict of Interest Policy?  Yes  No

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date