



AVHTM

**Election Nominee
Conflict of Interest Statement**

Name _____

Date _____

In order to run in AVHTM’s Board of Director election, all nominees must submit a Conflict of Interest Statement prior to the general election. Once it has been approved by the Election Committee will your name be added to the ballot.

I affirm the following:

- I have received a copy of the **AVHTM Conflict of Interest Policy**. _____ (initial)
- I have read and understand the policy. _____ (initial)
- I agree to comply with the policy. _____ (initial)
- I understand that AVHTM is charitable and in order to maintain its Federal tax exemption, it must engage primarily in activities which accomplish one or more of tax-exempt purposes. _____ (initial)

Disclosures:

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

i. If yes, please describe it (attach additional sheet, if necessary):

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 AVHTM? Yes No

i. If yes, please describe it, including when (approximately): _____

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

Signature of Nominee _____

Date _____

Signature of Vice President _____

Date _____