WASHBURN UNIVERSITY
ANNUAL CONFLICT OF INTEREST DISCLOSURE STATEMENT

DECLARATION:

I, _____, declare that this conflict of interest disclosure (including any accompanying pages and statements) has been examined by me and to the best of my knowledge and belief is a true, correct and complete statement of all my economic interests and other matters required by the conflict of interest policy.

DECLARATION OF INTENT:

I declare that I will notify the Vice President for Administration and Treasurer of any perceived or potential conflict of interest which might arise subsequent to filing this annual conflict of interest disclosure statement as required by the conflict of interest policy.

_____ _____

Date Signature

Return your completed statement to the Office of the Vice President for Administration and Treasurer no later than December 1 or within 30 days of being appointed to your position with the University.

The following definitions are provided to assist in completing the annual disclosure statement:

- Business Relationship: One in which a University employee, or a member of his or her family as defined below, is the owner or serves as an officer, director, employee, partner, trustee, or stockholder of an organization conducting business with Washburn University.
- Family Member: A spouse, parent, sibling, child, grandchild, or any other relative or person if the latter reside in the same household as the University employee.
- Financial Interest: When a University employee or a member of the employee's family (a) is the actual or beneficial owner of an organization conducting business with the University, or (b) has other direct or indirect dealings with such an organization from which the employee or a member of the employee's family benefits directly, indirectly, or potentially from cash or property receipts.

I have read the Washburn University Conflict of Interest Policy and understand its provisions, and hereby provide the requested information (attach additional pages as necessary).

1. Are you aware of any business or personal relationships between Washburn University and yourself or a member of your family as defined by the letter or spirit of this policy that may represent a conflict or potential conflict of interest?

   Yes ☐
   No ☐

   If Yes, please list such relationships, with whom the relationships exist, and the details of annual or potential financial benefit as you can best estimate them.

2. List all current places of employment (or those held during the last twelve months), and any businesses from which you, your spouse or a member of your household received compensation (salary, director fees, thing of value, or economic benefit received in return for services rendered, or to be rendered), which was reportable as taxable income (**if none, write "None"**):

Business Name and Address	Position Held	Held by Whom

3. List any organization or business in which you or a member of your family currently serve (or have served during the last twelve months) as a member, director, trustee, officer, partner or agent of or for the organization or business, irrespective of the amount of compensation received for holding such position (**if none, write "None"**):

Business Name and Address	Position Held	Held by Whom

4. List any person or business from whom you or a member of your family have received gifts, honoraria, or loans with preferential treatment or terms from any source (excluding public credit card companies) in the preceding twelve months (**if none, write "None"**).

Name of Business or Person	Address	Received by: