Sign below the appropriate statement that applies to you and Return to Human Resources.

Statement of Compliance Regarding Conflict of Interest Policy	
I hereby certify I have reviewed the Conflict of Interest Policy, understand the provisions set forth therein, **and have described below all the conflicts (or potential conflicts) of interest for which I am responsible**	I hereby certify I have reviewed the Conflict of Interest Policy, understand the provisions set forth therein **and am in full compliance with all of those provisions**
Print Employee Name Date	Print Employee Name Date
Employee Signature	Employee Signature
Supervisor's Signature Date	Supervisor's Signature Date