

## **Affirmation of Compliance**

I have received and carefully read the Conflict of Interest Policy and have considered not only the literal expression of the policy, but also its intent. By signing this affirmation of compliance, I hereby affirm that I understand and agree to comply with the Conflict of Interest Policy. I further understand that BVARI is a non-profit organization and that in order to maintain its federal tax exemption status, it must engage primarily in activities that accomplish one or more of its tax-exempt purposes without personal inurement (other than by salary) by Board members or staff.

Except as otherwise indicated in the Confidential Disclosure Questionnaire and attachments below, I hereby state that I do not have any conflict of interest, financial or otherwise that may be seen as competing with the interests of BVARI, nor does any relative or associate have such a potential conflict of interest. Nor shall I, any relative or associate benefit from any action, policy or transaction made by BVARI in a manner that has not been previously disclosed.

If any situation should arise in the future that I think may involve me in a conflict of interest, I will promptly and fully disclose in writing the circumstances to the Chair of the Board of Directors of BVARI or to the CEO, as applicable.

I further certify that the information set forth in the Confidential Disclosure Statement and attachments, if any, is true and correct to the best of my knowledge, information and belief.

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**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. .

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

- |   | Yes | No |
|---|-----|----|
| 1. Has BVARI proposed to contract or contracted to purchase or lease goods, services, or property from you, a relative or a business associate?   |     |    |
| 2. Are you related to any current or prospective director, officer or employee, or to the supervisor of any of BVARI's employees?   |     |    |
| 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 BVARI? |     |    |
| 4. Have you, a relative or business associate been gratuitously provided use of the facilities, property, or services of BVARI?   |     |    |
| 5. Are you, a relative or a business associate in a position to benefit financially from decision, policy, transaction or arrangement made by BVARI?  |     |    |
| 6. Do you currently receive benefits and/or compensation from another entity?<br>If yes, please list the name of the entity.  |     |    |

I herby certify that my answers above are true and accurate to the best of my ability. I further affirm my continuing duty to inform the Board of Directors and/or the BVARI CEO, if applicable, of a conflict of interest.

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**(To Be Completed Annually)**

**Other Interests:** A conflict may also exist when a BVARI officer, director, employee or any of their relatives may obtain a non-financial benefit or advantage that they would not have obtained absent their

relations with BVARI, or when their duty or responsibility owed to BVARI conflicts with a duty or responsibility owed to some other organization

During the past twelve months, please check yes or no (for each "yes" response please describe below or on a separate page):

- |  | Yes | No |
|--|-----|----|
| 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 BVARI? |     |    |
| 2. Did you make use of confidential information obtained from BVARI for your own benefit or for the benefit of any person or organization other than VA and/or BVARI?                            |     |    |
| 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 BVARI?               |     |    |
| 4. Were you in a position to benefit in a nonfinancial way from a decision, policy, transaction or arrangement made by BVARI?  |     |    |

**Other-** Describe any other circumstance or relationships you or a relative may have that you believe may assist BVARI in protecting its interests and preventing conflicts of interests:

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I hereby certify that my answers above are true and accurate to the best of my ability. I further affirm my continuing duty to inform the Board of Directors and/or the BVARI CEO, if applicable, of a conflict of interest.

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**Printed Name**

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**Signature**

**(To Be Completed Annually)**