

North American Sundial Society

CONFLICT OF INTEREST DISCLOSURE FORM

This form must be filed annually by all specified parties, as identified in NASS' Conflict of Interest Policy Statement.

DISCLOSURE OF INTERESTS: Check NONE if applicable, or list items to be disclosed.

1. List all instances in which you or members of your immediate family have received gifts or payments valued greater than \$100 and related to your role as a NASS Board Member, Officer, or volunteer.

EXPLANATION:

____NONE

2. Do you or any member of your immediate family have any interest that could constitute a conflict of interest or influence your judgment, advice or decisions on behalf of NASS?

EXPLANATION:

____NONE

DECLARATION: I declare that the members of my immediate family and I have no affiliations or interests that, when considered with my position in relation to NASS, constitute a conflict of interest, except as specifically disclosed in my responses on this form.

I agree that I have a continuing duty to report immediately to the Board of Directors all new interests or relationships that may constitute a conflict of interest or may affect my ability to exercise impartial, ethical judgment on behalf of NASS.

DATE

SIGNATURE

NAME (Please print)