**CONFLICT OF INTEREST DISCLOSURE STATEMENT**

I. **NAME AND BACKGROUND INFORMATION**

A. Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_­­\_\_\_\_\_\_\_

Address:­­­­­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Position with Association: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

B. I hereby state that I or members of my immediate family have the following affiliations or interests and have taken part in the following transactions that, when considered in conjunction with my position with or relation to the Emergency Nurses Association ("Association") or any of its affiliates or subsidiaries, might possibly constitute a conflict of interest. (Check "none" where applicable.)

II. **OUTSIDE INTERESTS**

Identify any position held by yourself or a member of your immediate family in any outside concern from which the Association or any of its subsidiaries or affiliates secures goods or services or that provides services competitive with the Association or any of its subsidiaries or affiliates.

(\_\_\_\_\_\_\_\_) none

III. **INVESTMENTS**

List and describe, with respect to yourself or a member of your immediate family, all investments that

might be considered a "material financial interest", as described below:

1. Capital stock, obligations, or a combination of both, of any concern the capital stock or obligation of which are listed on any nationally recognized securities exchange, having an aggregate value in excess of $500,000; or
2. Any interest in any other outside concern, with the exception of the holding of

indebtedness; or

1. Holding of indebtedness of any outside concern, other than those mentioned in subparagraph A above, in any amount in excess of $100,000.

(\_\_\_\_\_\_\_\_) none

**CONFLICT OF INTEREST DISCLOSURE STATEMENT** (continued)

**IV. OUTSIDE ACTIVITIES**

List any other activities in which you or your immediate family are engaged that might be regarded as

constituting a conflict of interest, giving particular attention to activities rendered as a director, manager, consultant or employee of any outside concern that does business with or competes with the Association or any of its subsidiaries or affiliates, and to activities in which it would be possible to disclose or use information relating to the Association or any of its subsidiaries or affiliates for your advantage or of that of a member of your immediate family.

(\_\_\_\_\_\_\_\_) none

**V. GIFTS, GRATUITIES AND ENTERTAINMENT**

List and describe any gifts, gratuities or entertainment that you or members of your immediate family have received from any person or outside concern that does business, hopes to do business, or competes with the Association or any of its subsidiaries or affiliates. (If you have received such benefits, please approximate their value. Do not list gifts or entertainment of nominal value.)

(\_\_\_\_\_\_\_\_) none

**ACKNOWLEDGEMENT AND SIGNATURE**

I hereby agree to report to the President any changes in the response to each of the foregoing questions

which may result from changes in circumstances before completion of my next Conflict of Interest

Disclosure Statement.

The information I have given in this Statement is complete and accurate to the best of my knowledge.

 Signature

 Position

 Date