

1. Name: _____ Date: _____

2. Are you a voting Officer, Chair or Co-Chair? Yes No

What Officer position do you hold or what Committee do you Chair?

3. I affirm the following: (Please initial each line)

_____ I have received a copy of the Cape Fear Garden Club Conflict of Interest Policy.

_____ I have read and understand the policy.

_____ I agree to comply with the policy.

_____ I understand that Cape Fear Garden Club is a charitable organization and in order to maintain its federal tax exemption it must engage primarily in activities which accomplish one or more of its tax exempt purposes .

4. Do you have a financial interest (current or potential), including a compensation arrangement, as defined in the CFGC Conflict of Interest Policy? Yes No

If Yes, please describe it: _____

If Yes, has the financial interest been disclosed, including compensation arrangement, as defined in the CFGC Conflict of Interest Policy? Yes No

In the past have you had a financial interest, including a compensation arrangement, as defined in the CFGC Conflict of Interest Policy? Yes No

If Yes, please describe it, including when (approximately): _____

If Yes, has the financial interest been disclosed, including compensation arrangement, as defined in the CFGC Conflict of Interest Policy? Yes No

5. Are you an independent director, as defined in the CFGC Conflict of Interest Policy?

Yes No

If you are not independent, why? _____

Signature

Date

Date of Review by Executive Committee: _____