

Conflict of Interest Disclosure Statement

Name: _____

Office or position with Venice Art Center:

Primary occupation/employer: _____

1. General Compliance

Are you familiar with, have you read, and do you agree to abide by the terms of the Venice Arts Center's Conflict of Interest Policy? ____YES ____NO

2. Other Nonprofit Affiliations

Please list any nonprofit organizations for which you are a board member, employee, or consultant. If none, state none. Please attach additional sheet if necessary.

Name of organization	Position held		

3. Business Interests

To the best of your knowledge, during the past year, have you, or any member of your family (spouse, parents, siblings, children, or any other individual living in the same household) or any entity in which you or a family member had an interest engaged in any financial transaction, either consummated or pending with the Venice Art Center.

_____Yes (please describe below) _____No

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Name of organization	Posit	tion held
Gifts		
During the past year, have you	yee, officer, or Board	ur family received a gift(s) due to member of the Venice Art Cente
Yes (please describe bel	low)No	
Gift	Value	Grantor
Other		
		st Policy, are there other activities e regarded as a conflict of
Yes (please describe belo	ow) <u>No</u>	

Signed: _____ Date: _____