REDWOOD EMPIRE FOOD BANK

ACKNOWLEDGMENT OF RECEIPT
AND
AGREEMENT TO COMPLY WITH CONFLICT OF INTEREST POLICY

I hereby acknowledge that I have received a copy of the conflict of interest policy of the Redwood Empire Food Bank, have read and understood it, and agree to comply with its terms.

_____ _____
Signature Date

_____
Printed Name

YOU MUST ALSO COMPLETE AND RETURN THE ANNUAL CONFLICT OF INTEREST DISCLOSURE FORM ON THE FOLLOWING PAGE:

DISCLOSURE OF FINANCIAL INTERESTS

To comply with the Redwood Empire Food Bank ("REFB") Conflict of Interest Policy, each Director and each employee must complete and submit this disclosure to the Chief Executive Officer or their designee.

Please check ONE of the following boxes:

☐ My interests and relationships have not changed since my last disclosure of interests. [Proceed to signature block below. Do not complete the tables.]

OR

☐ I hereby disclose or update my interests and relationships that could give rise to a conflict of interest: [Complete the table below. Use additional pages as needed.]

Family Relationships	Names of those presenting a potential conflict of interest
Include spouse/domestic partner, living ancestors, brothers and sisters (whether whole or half blood), children (whether natural or adopted), grandchildren, great grand-children, and spouses/ domestic partners of brothers, sisters, children, grandchildren, and great grandchildren	

Type of interest	Description of interest that could lead to a conflict of interest
Transactions or arrangements with the REFB:	
Transactions or affiliations with the following other nonprofit organizations:	
Substantial business activities or investment holdings in the following organizations:	
Transactions or affiliations with the following businesses not listed above:	

I am not aware of any financial interest involving me or a family member that could present a conflict of interest that I have not disclosed either above or in a previous disclosure statement.

_____ _____

Signature **Date**

_____

Printed Name