Conflict of Interest Policy and Statement

No Board member shall use their position, or knowledge gained there from, in such a manner that a conflict between the interest of Second Harvest Community Food Bank or any of its agencies/affiliates and their personal interests.

Each Board member has a duty to place the interest of the organization foremost in any dealings with the organization and has a continuing responsibility to comply with the requirements of this policy.

Board members may not obtain for themselves, their relatives, or their friends a material interest of any kind from their association with the organization by virtue of their Board position.

If a Board member has an interest in a proposed transaction with the organization in the form of a significant personal or financial gain in the transaction or in any organization involved in the transaction, or holds a position as, director or officer in any such organization, they must make full disclosure of such interest before any discussion or negotiation takes place in regard to such transaction.

Any Board member who is aware of a potential conflict of interest with respect to any matter coming before the Board may be excused during the discussion and/or voting periods in connection with the specific matter.

Conflict of Interest Statement

I have read the policy regarding conflicts of interest.

To the best of my knowledge and belief, except as disclosed therewith, neither I nor any person with whom I have or had a personal or business relationship is engaged in any transaction or activity or has any relationship that may represent a potential or conflicting interest, as defined in the statement above.

Further, to the best of my knowledge and belief, except as disclosed herewith, neither I nor any person with whom I have or had a personal, business, or compensated professional relationship intends to engage in any transaction, to acquire any interest in any organization or entity, or to become the recipient of any favors that might be covered by the statement of policy regarding conflict of interests.

☐ Without exception
☐ Except as described in the attached statement

Name ______________________________________

Signature ___________________________________

Date _______________________________________