

\_\_\_\_\_ **Soil & Water Conservation District**

**Conflict of Interest Information Form**

Name: \_\_\_\_\_

Date: \_\_\_\_\_

Please describe below any interest, or any family or business relationship that could rise to a potential or actual conflict of interest (as defined by Ohio's Ethics Law and related statutes and/or \_\_\_\_\_ Soil & Water Conservation District's Policy).

*I hereby certify that the information set forth above is true and complete to the best of my knowledge. I have reviewed, and agree to abide by, the Policy of Conflict of Interest of \_\_\_\_\_ Soil & Water Conservation District and Ohio's Ethics Laws and related statutes.*

*Signature: \_\_\_\_\_ Date: \_\_\_\_\_*