CONFLICT OF INTEREST AFFIRMATION OF COMPLIANCE

I have received and carefully read the Conflict of Interest Policy for the Sayville Library Board of Trustees members and staff. By signing this Affirmation of Compliance, I hereby affirm that I understand and agree to comply with the Conflict of Interest Policy.

Please check one:
() I hereby state that I do not have any conflict of interest in business dealings with the library, nor does any relative of mine have such a conflict of interest that has not been previously disclosed.
() I believe that I may have a potential conflict of interest.
Explanation:

The final determination as to whether a conflict of interest exists will be determined by the Library's Board of Trustees.
If any situation should arise in the future that I think may involve me in a conflict of interest, I will promptly and fully disclose (in writing) the circumstances to the President of the Board of Trustees and the Library Director.
Name (Please print)
Signature
Date

Approved: September 14, 2005 Revised: January 12, 2015 Revised: November 13, 2017 Reviewed: July 09, 2018 Reviewed: July 08, 2019 Reviewed: July 13, 2020 Reviewed: July 12, 2021 Reviewed: July 11, 2022 Reviewed: July 10, 2023