

PURDUE UNIVERSITY

CONFLICT OF INTEREST DISCLOSURE STATEMENT

Name of person submitting statement: _____

Title or position with Purdue University: _____

Department: _____

This statement, in duplicate, is submitted (check one):

- a. _____ as a new _____, renewal _____ annual disclosure statement, as to my financial interest in any University contracts or purchases, related to my University duties or functions, which are made on a regular basis with or from particular contractors or vendors; or
- b. _____ as a "single-transaction" disclosure statement, as to my financial interest in a specific contract or purchase, related to my University duties or functions, proposed to be made by the University with or from a particular contractor or vendor.

The phrase "my financial interest" as used in this Disclosure Statement, includes any interest of myself or my spouse.

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Name of Contractor or Vendor	Description of Contract, Purchase, or Other Source of Conflict of Interest	Description of My Financial Interest
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(Attach extra pages if additional space is needed)

I affirm the truth of the statements made above, under penalty of perjury. I understand that if any such interest is not approved by the Board of Trustees of The Trustees of Purdue University, pursuant to statute, I will be required to discontinue it or divest myself of it.

Signature of person submitting this statement Date

Approval Recommended:

Department Head Date

Dean or Director Date

Vice President/Chancellor Date

Note: Please submit this form through organizational channels to the Office of the Treasurer. For details concerning policy, refer to Executive Memorandum C-1, dated August 22, 1983, Compliance with New "Conflict of Interest" Disclosure Requirements.