

**PURDUE UNIVERSITY
CONFLICT OF INTEREST DISCLOSURE STATEMENT**

Name of person submitting statement:

Title or position with Purdue University:

Department:

This statement is submitted (check either a or b):

- a. As a new , renewal annual disclosure statement, as to my financial interest in any University contracts or purchases 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 purchase 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, my spouse or my dependent.

Name of Contractor or Vendor:

Description of Contract, Purchase, or Other Source of Conflict of Interest:

Description of My Financial Interest:

(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

*****Do Not Write Below Line – For Official Use Only*****

Executive Officer

Date