

**South Middle River Civic Association
CONFLICT OF INTEREST**

My signature below signifies and affirms that as a Board member, I:

1. Have received a copy of the SMRCA Board Policy;
2. Have read and understand the policy;
3. Agree to comply with the policy; and
4. Have provided herewith my Annual Conflict/Gift Disclose form.

PRINT NAME

POSITION

SIGNATURE

DATE