



**THE COMMUNITY FOUNDATION OF ST. CLAIR COUNTY - YAC**  
**CONFLICT OF INTEREST DISCLOSURE**

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

High School: \_\_\_\_\_

Parents' names: \_\_\_\_\_

Please list the names of clubs, community boards or corporations in which you or a member of your family may have a potential self-dealing or conflict of interest situation. Please also list any other relationship or involvement that may create self-dealing or a conflict of interest.

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I have read and understand the Foundation's Conflict of Interest Policy.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

How would you like your name to appear in the Annual Report?

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Email address: \_\_\_\_\_