

## ***Conflict of Interest***

### **Purpose**

The purpose of the conflict of interest policy is to protect New England Healthcare Engineers' Society's tax-exempt interest when it is negotiating financial decisions that might benefit the private interest of a board member. The policy is intended to supplement but not replace any state and federal laws governing conflict of interest applicable to nonprofit and charitable organizations.

### **Policy Statement**

No member of the Board of Directors shall receive any personal profit or gain, directly or indirectly, through his or her participation in the organization.

Any member of the Board, any Committee, Staff, and certain Consultants shall not obtain any list of clients for personal or private solicitation purposes at any time during the term of their affiliation.

### **Procedures**

#### Duty to Disclose

Each individual shall disclose to the organization any personal interest which he/she may have in any matter pending before the organization and shall refrain from participation in any decision on such matter.

After disclosure of the financial interest and all material facts, and after any discussion with the interested board member, he/she shall leave the governing board or committee meeting while the determination of a conflict of interest is discussed and voted upon. The remaining board or committee members shall decide if a conflict of interest exists.

If it is concluded that a conflict of interest exists, the board member with a conflict of interest may make a presentation at the board or committee meeting. After the presentation, he/she shall leave the meeting during the discussion of, and the vote on, the particular transaction or arrangement.

#### Violations of the Conflicts of Interest Policy

If there is cause to believe a violation of this policy has been committed, the member shall be given an opportunity to explain the alleged failure to disclose. If a determination is made that the member did fail to disclose an actual conflict of interest, appropriate corrective actions will be taken.

### **ADOPTION**

ORIGINAL

**Conflict of Interest Statement**

At this time, I am a board member, committee member, or an employee of the following organizations:

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Now this is to certify that I, except as described below, am not now nor at any time during the past year have been:

1) A participant, directly or indirectly, in any arrangement, agreement, investment, or other activity with any vendor, supplier, or other party doing business with New England Healthcare Engineers' Society which has resulted or could result in personal benefit to me.

2) A recipient, directly or indirectly, of any salary payments or loans or gifts of any kind or any free service or discounts or other fees from or on behalf of any person or organization engaged in any transaction with New England Healthcare Engineers' Society.

Any exceptions to 1 or 2 above are stated below with a full description of the transactions and of the interest, whether direct or indirect, which I have (or have had during the past year) in the persons or organizations having transactions with New England Healthcare Engineers' Society.

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Date: \_\_\_\_\_

Signature: \_\_\_\_\_

Printed: \_\_\_\_\_

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<sup>i</sup> IRS: <http://www.irs.gov/instructions/i1023/ar03.html>, <http://form1023.org/nonprofit-conflict-of-interest-policy-and-agreement>