Procurement Committee Conflict of Interest Disclosure Form

Name:
Position/Title:
Department:
Берагипени.
Date:
Conflict of Interest Disclosure
Please disclose any personal, professional, or financial interests that may be perceived as a potential conflict of interest with your duties as a member of the Procurement Committee:
List any relationships or affiliations with vendors, contractors, or parties seeking to do business with the organization:
Other relevant information:
I certify that the information provided above is true and complete to the best of my knowledge.
Signature

Date