



WOGAN MANAGEMENT

GREATER.

Vendor Conflict of Interest Disclosure Form

All vendors interested in conducting business with _____ (Entity Name) must complete and return the Vendor Conflict of Interest Disclosure Form before services may commence.

Certification: I hereby certify the following based on my actual knowledge:

1. No actual or reasonably foreseeable conflict of interest between _____ and the vendor exists.
2. No employee, employee's immediate family member, prospective employee, or prospective employee's immediate family member has an ownership interest in vendor or is deriving personal financial gain from this vendor relationship.
3. No Wogan Group employee is currently employed or prospectively employed by the vendor.
4. Vendor hereby declares it has not and will not provide gifts of any dollar value or any other gratuities to any Wogan Group employee to obtain or maintain this contract or vendor relationship.
5. Any exceptions to the above certification are noted below and, if necessary, a new certification will be provided if exceptions arise during the term of this contract or subsequent contracts.

Vendor Name:	_____
Address:	_____
Email:	_____
Phone:	_____

Conflict of Interest Disclosure

Name of Wogan Group Employee Potential Conflict: _____

Signature of Authorized Vendor Representative

Date

Name Title/Position

Printed

Acknowledged and Approved:

Portfolio Manager Signature

Date

Director of Human Resource Signature

Date

5384 Poplar Ave. Ste. 400
Memphis, TN 38119
901-290-8884
info@wogangroup.com

