Policy

It is the policy of the Society of St. Vincent de Paul, Council of Northern Kentucky, Diocese of Covington that members of the Board of Directors and the Executive Director will disclose any activities that could result in a possible conflict of interest.

Procedure

1. Members of the Board of Directors and the Executive Director will be given a copy of the Conflict of Interest Policy and Procedures upon election/appointment/or initiation of employment.

2. The Executive Director will ensure that all members of the Board of Directors, complete the Conflict of Interest Questionnaire (Exhibit A) during the first month of their appointment/election. The Questionnaire will then be updated on an annual basis.

3. The Diocesan Council President will ensure that the Executive Director complete the Conflict of Interest Questionnaire (Exhibit A) during the first month of their appointment/employment. The Questionnaire will then be updated on an annual basis.

4. Any individual having a conflict of interest or possible conflict of interest as discovered through the Conflict of Interest Questionnaire or subsequently should not vote or use personal influence on the matter. Minutes of meetings should reflect that a disclosure was made and note the abstention from voting.

5. Any conflict of interest or possible conflict of interest on the part of an individual should be disclosed to the Members of the Board of Directors when it becomes a matter of possible Diocesan Council action.

6. The forgoing requirement should not be construed as to prevent an individual from briefly stating his/her position in the matter since his/her knowledge may be of assistance to the Council.
SOCIETY OF ST. VINCENT DE PAUL
COUNCIL OF NORTHERN KENTUCKY
DIOCESE OF COVINGTON

Conflict of Interest Questionnaire

Pursuant to the purposes and intent of the Society of St. Vincent de Paul, Council of Northern Kentucky, Diocese of Covington which requires disclosure of certain interests, a copy of which Policy has been furnished to me, I hereby state that I, or members of my immediate family have the following affiliations of interest and have taken part in the following transactions that, when considered in conjunction with my position with or relation to the Council of Northern Kentucky, might possibly constitute a conflict of interest.

Attach a separate sheet detailing conflict of interest if applicable, if no conflict exists, check (   ) NONE.

1. **Outside Interests:** Identify the interests of yourself or your immediate family:
   a) Holding, directly or indirectly, a position or a material financial interest in any outside concern which the individual has reason to believe this Council secures goods or services.
      (   ) NONE
   b) Competing, directly or indirectly with the Council, Conferences, or Special Works of the Council in the purchase or sale of property or property rights, interest, or services.
      (   ) NONE

2. **Outside Activities:** Identify outside activities of yourself or your immediate family that render directive, managerial, or consultative services to any outside concern that does business with, or competes with services of the Council.
   (   ) NONE

3. **Consultant Services:** Identify any relationship (financial or otherwise) with any company or organization which furnishes consulting or professional services for the Council.
   (   ) NONE

4. **Inside information:** By signature below, I certify that neither I nor any member of my immediate family have disclosed or used information relating to the Council’s business for the personal profit or advantage of myself or any member of my immediate family.

5. **Gifts and Gratuities:** I certify that neither I nor any members of my immediate family have accepted gift, gratuities, or entertainment that might influence my judgment or actions concerning business of the Council. (This does not include the acceptance of items of nominal or minor value that are clearly tokens of respect or friendship and not related to any particular transaction.)
   (   ) NONE

I agree to report to the Executive Director or in the case of the Executive Director to the Council President any change in the responses to each of the foregoing questions which may result from changes in circumstances.

Signature __________________________________________ Date __________________________

Printed Name ________________________________________________________________

Council Position ______________________________________________________________