Conflict of Interest Policy
Annual Affirmation of Compliance and Disclosure Statement

I have received and carefully read the Conflict of Interest Policy for board members and officers
of the Friends of Matthias Baldwin Park and have considered not only the literal expression of
the policy, but also its intent. By signing this affirmation of compliance, I hereby affirm that I
understand and agree to comply with the Conflict of Interest Policy. I further
understand that the Friends of Matthias Baldwin Park is a charitable organization and that in
order to maintain its federal tax exemption, it must engage primarily in activities which
accomplish one or more of its tax-exempt purposes.

Except as otherwise indicated in the Disclosure Statement below, I hereby state that I do not, to
the best of my knowledge, have any conflict of interest that may seem as competing with the
interests of the Friends of Matthias Baldwin Park nor does any relative or business associate
have such an actual or potential conflict of interest.

If any situation should arise in the future which I think may involve me in a conflict of interest, I
will promptly and fully disclose the circumstances to the President of the Board of Directors of
the Friends of Matthias Baldwin Park.

I further certify that the information set forth in the Disclosure Statement below is true and
correct to the best of my knowledge, information and belief.

Disclosure Statement

During the past 12 months, have you had any Financial Interest as defined in Article II-
Definitions of the Conflict of Interest Policy of the Friends of Matthias Park.
Yes _____ No [X]

If yes, please describe:

[Signature]

James M. Fennell
Name (Print)

[Signature]

James M. Fennell
Signature

12/16/20
Date
Conflict of Interest Policy
Annual Affirmation of Compliance and Disclosure Statement

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Disclosure Statement

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Yes _____  No [X]

If yes, please describe:

Grace Hanrahan
Name (Print)

[Signature]

12/15/2020
Date
Conflict of Interest Policy
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Disclosure Statement

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Yes _____ No X

If yes, please describe:

__________________________
Name (Print)

__________________________
Signature

__________________________
Date

Joan M. Mako
Conflict of Interest Policy

Annual Affirmation of Compliance and Disclosure Statement

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Disclosure Statement

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Yes ______ No [X]

If yes, please describe:

__________________________
RUSTrunk
Name (Print)

__________________________
RUSTrunk
Signature

__________________________
12/18/20
Date
Conflict of Interest Policy
Annual Affirmation of Compliance and Disclosure Statement

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Disclosure Statement

During the past 12 months, have you had any Financial Interest as defined in Article II-Definitions of the Conflict of Interest Policy of the Friends of Matthias Park.

Yes ☒ No ☐

If yes, please describe:

______________________________________________________________________________

JOSEPH A. WALKER
Name (Print)

JOSEPH A. WALKER
Signature

15 DECEMBER 2020
Date
Conflict of Interest Policy
Annual Affirmation of Compliance and Disclosure Statement

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Disclosure Statement

During the past 12 months, have you had any Financial Interest as defined in Article II-Definitions of the Conflict of Interest Policy of the Friends of Matthias Park.
Yes _____ No __________

If yes, please describe:

_________________________
Sandra Owens
Name (Print)

_________________________
Sandra Owens
Signature

_________________________
12/15/2020
Date