Director and Officer Annual Conflict of Interest Statement

1.	Name:		Date:	
2.	Position:			
	Are you a voting Director? Yes No Are you an Officer? Yes No If you are an Officer, which Officer position do you hold?		No	
3.	l affirm the follo	affirm the following:		
	I have received a copy of the MICU Conflict of Interest Policy (initial) I have read and understand the policy (initial) I agree to comply with the policy (initial) I understand that MICU is charitable and in order to maintain its federal tax exemption it must engage primarily in activities which accomplish one or more of tax-exempt purposes. (initial)			
4.	Disclosures:			
	a. Do you have a financial interest (current or potential), including a compensation arrangement, as defined in the Conflict of Interest policy with MICU? Yes No			
			t been disclosed, as provided in the Conflict of Interest polic	
 In the past, have you had a financial interest, incl the Conflict of Interest policy with MICU? Yes 		-	erest, including a compensation arrangement, as defined in J? Yes No	
	i. If y	res, please describe it, includ	ding when (approximately):	
	ii. If y Yes		t been disclosed, as provided in the Conflict of Interest polic	
5.	Are you an inde	Are you an independent director, as defined in the Conflict of Interest policy? Yes No		
	a. If you are n	a. If you are not independent, why?		
			Date:	
Sig	nature of Directo	r		

Date Of Review by Executive Committee: