Conflict of interest disclosure form

Name:	Position:
Entity:	Reporting To:
Please describe below any relationships, transactions, positions you hold (volunteer or otherwise), or circumstances that you believe could contribute to a conflict of interest between the Group and your personal interests, financial or otherwise:	
	,
I hereby certify that the information set forth above is true and complete to the best of my knowledge. I have reviewed, and agree to abide by, the Policy of Conflict of Interest of the Group.	
Signature:	Date: