

EXHIBIT A CONFLICT OF INTEREST DISCLOSURE FORM

Please disclose any conflicts or potential conflicts of interest that any board member, officer, director, or administrator of the organization may have with the County of Hawai'i. Only those listed below need to be disclosed. One form per conflict is needed. Please duplicate as needed to fully disclose. All disclosure forms must be signed, regardless of whether a conflict exists.

Conflict of interest is defined as: a substantial probability that action taken by an individual will result in measurable direct benefits accruing to the individual as opposed to benefits accruing in general to an industry.

Project Title _____
Organization Name _____
Individual's Name _____
Individual's Position _____

May have a conflict or potential conflict of interest, including any familial relationship, with any of the following (check all that apply):

Please briefly specify any and all mitigation measures to avoid, in fact or appearance, and conflicts or potential conflicts of interest below:

- No conflicts exist. (No further information required. Please sign form at bottom.)
- Member or members of the County Council.
- Staff appointed by a member of the County Council.
- The Mayor.
- The Managing Director.
- The Director or Deputy Director of Finance.
- The Director or any staff of the Department of Research and Development.
- The Corporation Counsel, the Assistant Corporation Counsel, or any Deputy Corporation Counsel.

Please briefly specify any and all mitigation measures to avoid, in fact or appearance, and conflicts or potential conflicts of interest below:

Signature and Title

Date