

Name: Villages Honor Flight, Inc. ("VHF") EIN: 45-5560376

**Director, Officer and Hub Management Team  
Annual Conflict of Interest Statement**

1. Name \_\_\_\_\_ Title \_\_\_\_\_

2. Position:

Are you a Director? Yes No If Yes, are you Independent as defined in the Policy? Yes No

Are you an Officer? Yes No

Are you on the Hub Management Team? Yes No

3. I affirm the following (initial to signify Yes):

- a. I have received a copy of the VHF Conflict of Interest Policy. \_\_\_\_\_ (initial)
- b. I have read and understand the Policy. \_\_\_\_\_ (initial)
- c. I agree to comply with the Policy. \_\_\_\_\_ (initial)
- d. I am not aware of any unreported violations of the Policy. \_\_\_\_\_ (initial)
- e. I understand that VHF is charitable and in order to maintain its federal tax exemption, it must engage primarily in activities which accomplish its tax-exempt purposes. \_\_\_\_\_ (initial)

4. Disclosures:

a. Do you have a direct or indirect financial interest (current or potential) with VHF or any of its vendors, as defined in the Conflict of Interest Policy with VHF? Yes No

- i. If yes, please describe it: \_\_\_\_\_
- ii. If yes, has it been disclosed, as provided in the Conflict of Interest Policy? Yes No

b. In the past, have you had a direct or indirect financial interest with VHF or any of its vendors, as defined in the Conflict of Interest Policy with VHF? Yes No

- i. If yes, please describe it, including when (approximately): \_\_\_\_\_
- ii. If yes, has it been disclosed, as provided in the Conflict of Interest Policy? Yes No

5. Any Additional Comments you feel are appropriate: \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

Review by Board Member: \_\_\_\_\_ Date \_\_\_\_\_