PMI PHOENIX CHAPTER, INC.
CONFLICT OF INTEREST QUESTIONNAIRE AND ETHICS CERTIFICATION

PMI Phoenix Chapter Officers, Board Members, and Board Committee/Center/Council/Team Members

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Name

_____
PMI Phoenix Chapter Office or Position You Hold or You Will Assume

PLEASE NOTE: The PMI Phoenix Chapter (Chapter) governing documents require that this Questionnaire and Certification be filled out completely and accurately on an annual basis and returned to the Chapter Secretary. PMI Phoenix Chapter Officers, Directors, and Board Committee/ Center/ Council/ Team Members are expected to be aware of all corporate, personal, and family business interests and relationships that may involve or relate to the Chapter in any way. Officers, Directors, and Committee Members must openly and accurately reveal these interests and relationships to the Chapter in this questionnaire; and must comply with all PMI and Chapter policies and requirements concerning ethics, conflicts of interest, and related matters.

If you are uncertain whether particular business interests or relationships involve the Chapter, please contact the Worldwide Component Affairs department of PMI (the international organization) to review the matter. Upon request, the Chapter can provide a list of companies, organizations, and individuals with whom the Chapter has, or is considering, a business relationship.

Thank you for your cooperation in providing accurate responses to the following questions.

In responding to these questions, please note that a "yes" answer does not imply that the relationship or transaction was necessarily inappropriate. For purposes of responding to these questions, please refer to the attached partial list of companies with which the Chapter has entered into contracts within the last twelve moths. (This list is not exhaustive but is intended to assist you in determining whether there are any companies or other entities which you might not otherwise be aware of).

1. Are you now or have you been, within the past twelve months, an officer, director, or principal of any corporation, company, association, institution, or other business (including independent contractors) with which the Chapter has any business relationship or interactions, including professional or service relationships?

   Yes_____ No_____

   If the answer to this question is yes," please specifically identify: the names of such corporations, companies, associations, institutions, and/or businesses; the office or other position you held or hold; the nature of the business-relationship or dealings with the

Chapter; and, the approximate dollar-amount of business involved with the Chapter during the last year.

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2. Other than incidental stock ownership through a portfolio, do you, does any member of your family, or your domestic partner, have an ownership, financial, or other interest in, or receive any benefit, remuneration or income from, any corporation, company, association, institution, or other business (including independent contractors) with which the Chapter has any business relationship or interactions, including professional or service relationships?

Yes_____ No_____

If the answer to this question is "yes", please supply the following information: (a) the names of all corporations, companies, associations, institutions, and/or businesses in which you or a family member or domestic partner hold such an ownership, financial, or other interest; (b) the nature of the respective interest held: (c) the nature and amount of each such benefit, remuneration, or income; and, (d) the name and relationship to you of each person holding such an interest or receiving such a benefit, remuneration, or income:

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3. Within the past twelve months, did you or any member of your family or domestic partner receive any gifts, in-kind support or services, reimbursement, loans, or other benefits from any corporation, company, association, institution, or other business (including

independent contractors) which sells, or otherwise provides, to the Chapter any goods or services, or with which the Chapter has any other business relationship or interactions, including professional or service relationships?

Yes_____ No_____

If the answer to this question is "yes", please identify all such gifts, in-kind support or services, reimbursement, loans, or other benefits, and specifically identify: the person(s) receiving, and the source of, the gift, in-kind support or service, reimbursement, loan, or other benefit, including approximate fair value.

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4. Were you involved in any other activity during the past year that reasonably could be interpreted as a possible conflict of interest, or reasonably could be viewed as having an appearance or a divided interest or loyalty on your part?

Yes_____ No_____

If the answer to this question ‘‘yes", please describe the activity:

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If you have answered yes to any of the above questions, please submit a mitigation plan to the Chapter Board of Directors for review and approval.

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I certify that: (1) I have reviewed and understand all PMI and Chapter requirements, policies, rules, and procedures related to ethics, conflicts of interest, and related matters; (2) I am in compliance with all such requirements, policies, rules, and procedures; and, (3) the information I have provided in this questionnaire is true, accurate, and complete to the best of my knowledge. Should any information provided in my responses become incomplete or inaccurate, I understand that I am required and obligated to revise or supplement the information in a timely manner.

_____ _____
Signature Date

_____
Name (please print)