

## Conflict of Interest Policy and Confidentiality Nondisclosure Form

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To help avoid any conflicts of interest, you are disclosing ownership or other proprietary interests, responsibilities, circumstances, or other reasons why you (or, by extension, any member of your family) might have an actual, apparent or potential conflict of interest with your duty to BOMA Oakland/East Bay, both with respect to the conflicts identified in BOMA's Conflict of Interest policy and any others. You hereby invite further review by BOMA of any aspects of these circumstances that might be appropriate. In addition, you agree to take other steps, such as avoiding deliberation and resolution of certain issues or even withdrawing from your membership on the Board, if it is determined that such steps are necessary to protect the integrity of the Board and avoid the breach of your fiduciary duty to BOMA. Finally, during such time as you continue to serve on the Board, you agree to notify the President promptly if and when you determine that any additional actual, apparent or potential conflict of interest with your duty to BOMA arises subsequent to the execution of this form. Please check the appropriate section at the bottom of this page.

### **NONDISCLOSURE AGREEMENT**

I agree that any confidential information disclosed to me by members or staff of BOMA, or by third parties, in connection with my membership on the BOMA Oakland/East Bay Board, will be treated as such. I will not use or disclose such information except as may be authorized by BOMA, and will make my best effort to prevent its unauthorized disclosure. Confidential information shall include all such information relating to BOMA's members or to BOMA's operations, policies, plans, goals, or objectives, and discussions by members, staff and third parties regarding these subjects. Confidential information shall not include information previously known to me, the BOMA membership, the general public, or previously recognized as standard practice in the field. I acknowledge that unauthorized disclosure of confidential information could cause irreparable harm and significant injury to BOMA and BOMA's members. I agree that, upon request, I will return to BOMA all materials supplied to me by them, including agendas, minutes and supporting documents.

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I have read BOMA's Confidentiality Policy, Conflict of Interest Policy, Conflict of Interest Disclosure Form, and Nondisclosure Agreement and agree to abide by their terms.

- I have no conflicts to disclose but agree to abide by all of the above terms and conditions.
- I have attached a statement of conflicts disclosure and agree to abide by all of the above terms and conditions.

\_\_\_\_\_  
*Signature*

\_\_\_\_\_  
*Printed Name*

\_\_\_\_\_  
*Organization*

\_\_\_\_\_  
*Date*

\_\_\_\_\_  
*Title*