

ARMA Conflict of Interest Pledge

The Member recognizes and acknowledges that an actual or potential Conflict of Interest must be disclosed to ARMA's Board of Directors, Committee, or Task Force leaders for appropriate discussion and disposition.

The Member further acknowledges that he/she will conduct his/herself loyally, impartially and for the benefit of the Association, without the influence of Personal or Financial Interests.

A Member who does not comply with this policy is subject to disciplinary action by the Board of Directors. In addition, ARMA International reserves the right to seek injunctive and/or other relief in a court of competent jurisdictions to address any violations or threatened violations of this policy.

ACKNOWLEDGMENT OF RECEIPT OF CONFLICT OF INTEREST POLICY

I, _____, have received and reviewed ARMA International's Conflict of Interest Policy. I have read this policy, understand its content, and agree to abide by its terms.

_____ I have no conflict of interest to report.

_____ I have the following potential conflict of interest to report (please specify):

Should a potential conflict of interest arise in the future, I agree to abide by the reporting procedures set forth in Policy 5. Section 14. Board of Directors Conflict of Interest Policy.

Name (please print)

Signature

Date

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