

**LEGAL SERVICES CORPORATION  
TECHNOLOGY INITIATIVE GRANT PROGRAM  
DISCLOSURE OF INTERESTS FOR DETERMINATION OF CONFLICTS  
ACKNOWLEDGEMENT AND DISCLOSURE FORM**

I have read the LSC TIG Disclosure of Interests for Determination of Conflicts Policy and agree to comply fully with its terms and conditions at all times during my service as a Covered Individual (as that term is defined in that policy) of the LSC grantee listed below.

*If at any time following the submission of this form, I become aware of any actual, potential or apparent conflicts of interest, or if any of the information provided below becomes inaccurate or is incomplete, I will promptly notify in writing the grantee's board chair (or, if he or she is the one with the conflict, then to the board's vice chair).*

Disclosure of Actual, Apparent or Potential Conflicts of Interest:

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If you need to use additional pages, please *attach and initial* all additional pages.

If you have nothing to disclose, then please state in the lines above; "Nothing to Disclose" and place your initials next to that statement.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
LSC Grantee Name

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

\_\_\_\_\_  
Date

*All completed Disclosure Forms and written updates, as well as any other related information, shall be provided to the board chair or, if the interest involves him or her, then to the board's vice chair. A copy of the completed Disclosure Forms, written updates and actions taken shall be kept on file at the grantee's main office and available for inspection.*