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| **Procurement, Contract & Risk Management** |
| Klamath Falls: | Wilsonville: |
| 541.885.1133 (office) | 503.821.1277 (office) |
| 541.885.1115 (fax) | 503.218.1126 (fax) |
| 3201 Campus DriveSnell Hall 112Klamath Falls, OR 97601 | 27500 SW Parkway AveWilsonville, OR 97070 |



# NOTICE OF POTENTIAL OR REAL CONFLICT OF INTEREST

*Please provide all information requested. Incomplete forms will be returned for completion. Completed form should be emailed to:* *purchasing@oit.edu*

Department Name:

Department Campus Address:

Employee Name: Phone #:

Name of the Proposed Vendor:

1. Please provide a full description of your position/relationship with Oregon State University (e.g., if you are an employee, list your job title and briefly describe your duties):

1. What goods or services will be provided by this vendor to the University?

1. Explain your relationship to the vendor:

1. If you have ownership in the business, describe your involvement with the company, including percent of ownership: