## Conflict of Interest Form

|      | ose of this form is to obtain information in order to comply with conflict of interest regulations. Please answer able items listed below, or we may be unable to process the payment. |
|------|--|
| 1. N | Name   |
|      |  |

2. Address City State Zip 3. Are you an employee of Iowa State University? Yes No If the answer to question 3 is yes, payment for services must be made through Payroll or contracted through Procurement Services. Exceptions: Payments to research participants, experiental learning participant or prize winners are allowed. Do you have a spouse who is an employee of Iowa State University? No Yes 5. Are you the parent of a minor child who is an employee of Yes No Iowa State University? 6. If you are a minor child, is one of your parents an employee of Yes No N/A Iowa State University? If the answer to questions 4, 5 or 6 is Yes, state the names of the ISU employee(s). 7. Are you an employee of the University of Iowa, The University of Yes No Northern Iowa or another agency of the State of Iowa? If so, please identify which one: If the answer to questions 4, 5, 6 or 7 is Yes, a Requisition is required; unless the payment is to a research participant,

experiential learning participant or prize winner.

8. Are you a U.S. citizen or a resident of the U.S. or U.S. territories? Yes

U.S. citizens and residents of the U.S. or U.S. territories must also complete an IRS W-9 form.

If you are not a U.S. citizen or a resident of the U.S. or U.S. territories, independent personal service payments made to you by ISU require 30% to be withheld unless you have a U.S. Social Security Number or Individual Taxpayer Identification number and are exempt because of a tax treaty. An IRS Form 8233 must be completed and attached to the Supplier Invoice to qualify for exemption.

No

| Date         |                                       |
|--------------|---------------------------------------|
| Email        |                                       |
| Phone Number | Signature of Person Providing Service |

The departmental representative to contact for question about information on this form is:

If you have questions about this form, please contact Jane Houk (294-5180) or Matt Devick (294-0457).