



Metropolitan Water District of Southern California

Conflict of Interest Statement

This sponsorship request is for the following program/project, event or activity:

Sponsorship Amount requested from Metropolitan: \$_____



- I certify to the best of my knowledge, this sponsorship by Metropolitan will not pose a conflict of interest with any MWD director, employee or contractor.

If in the course of this application process, I become aware of any potential conflicts of interest, I will file a disclosure statement with the Community Partnering Program and Metropolitan’s Ethics Office.

- I am aware there is a conflict of interest;
I have attached a signed and dated written description of the potential conflict.

Submitted by:

Organization Representative Name (type or print)

Signature_____

Date (MM/DD/YYYY)_____

Fax to (213) 217-6500
Attn.: Y. Martinez

Or mail to:
Metropolitan Water District of Southern California
External Affairs – Community Partnering Program
P.O. Box 54153
Los Angeles, CA 90054-0153