

Date: _____

James E. Ryan
President, University of Virginia
c/o Alita Salley, Interim Director of Procurement & Supplier Diversity Services
P.O. Box 400202
Charlottesville, Virginia 22904

Dear President Ryan:

I am an employee of the University of Virginia. My position is:

Title: _____

School/Department: _____

I am writing to disclose that I (or my spouse or other immediate family member) own or have an equity interest in excess of 3%, or such an interest and also an income interest of more than \$5,000 annually, in the Firm or Company identified below.

Name of Firm or Company and Its Tax ID Number:

I have completed this certification for the **Ho "qt" Eompany** listed in a prior year and attest that there have dggp"pq" changes in Equity Interest(s) or Equity/Income Interests.

Please Provide the Firm's Projected Annual Income from the University:

Equity Interest(s) or Equity/Income Interests Disclosure:

The foregoing is a complete and accurate disclosure of my equity or ownership interest and any income interest in the above Firm or Company, including that of my spouse and any other person residing in my household who is my dependent or upon whom I am dependent.

As required by [Section 2.2-3110\(A\)\(5\)](#) of the State and Local Government Conflict of Interests Act, I certify that:

- I have not and will not participate in any contract negotiations between the above firm and the University on behalf of either party,
- I also do not have authority on behalf of the University to participate in the procurement or the letting of any contract to the Firm or, if I have such authority, I certify that I shall not in any event exercise such authority or in any way participate in the University's procurement or letting of the contract and have so notified my immediate supervisor (or in the case of BOV members, provided a copy of this disclosure to both the Rector and the Secretary of the Board of Visitors for inclusion with the Board's public minutes).
- I understand that the foregoing certifications are maintained by the University as a public record accessible to public inspection.

Sincerely, _____

(Please sign and date this line if submitted by postal mail or UVA Messenger Mail.)

Printed Name: _____

Contact Phone: _____ UVA Email I.D.: _____

- **By checking this box, I hereby certify the truth of this disclosure.**

***To submit electronically (no SSN present), please save, then click 'submit' or email to askfinance@virginia.edu*