

Cole County COAD

INDIVIDUAL/ORGANIZATION REGISTRATION AND CODE OF ETHICS AND CONDUCT

To register, complete this fillable form, print and sign and send to the United Way office at 205 Alameda Drive, Jefferson City, MO 65109 or email to ann.bax@unitedwaycemo.org.

Only one registration form is required per organization.

The Cole County COAD is a not-for-profit organization that demands the highest ethical performance from its members. All members and member organizations are required to sign the Code of Ethics and Conduct form certifying that, in delivering services and in all other COAD activities, they shall meet the following standards of conduct. All members are required to comply with applicable federal, state and local laws and regulations.

Actions Prohibited by the Code of Ethics and Conduct--No member shall engage in the following:

- 1. Personal Use.** Authorize the use of or use for the benefit or advantage of any person, the name, emblem, endorsement, services or property of the COAD, except in conformance with COAD business.
- 2. Financial Advantage.** Accept or seek on behalf of or any other person, any financial advantage or gain of other than nominal value offered as a result of the member's affiliation with the COAD.
- 3. Affiliation.** Publicly use any COAD affiliation in connection with the promotion of partisan politics, religious matters or positions on any issue not in conformity with the official position of the COAD.
- 4. Confidentiality.** Disclose any confidential COAD information that is available solely as a result of the member's affiliation with the COAD to any person not authorized to receive such information, or use to the disadvantage of the COAD any such confidential information, without the express authorization of the COAD.
- 5. Improper Influence.** Knowingly take any action or make any statement intended to influence the conduct of the COAD in such a way as to confer any financial benefit on any person, corporation or entity in which the individual has a significant interest or affiliation.
- 6. Conflict of Interest.** Operate or act in a manner that creates a conflict or appears to create a conflict with the interests of the COAD and any organization in which the individual has a personal, business or financial interest. In the event there is a conflict, the COAD has a structured conflict of interest process. First, the individual shall disclose such conflict of interest to the chairman of the board. Next, a decision will be made about the conflict of interest, and, where required, the individual may be required to recuse or absent himself or herself during deliberations, decisions and/or voting in connection with the matter.
- 7. Retaliation.** Retaliate against any member who seeks advice from, raises a concern with or makes a complaint to an officer or other member of the COAD, or any whistleblower program, about fraud, waste, abuse, policy violations, discrimination, illegal conduct, unethical conduct, unsafe conduct or any other misconduct.
- 8. Contrary to the Best Interest of the Cole County COAD.** Operate or act in any manner that is contrary to the best interest of the COAD.

COLE COUNTY COMMUNITY ORGANIZATIONS ACTIVE IN DISASTER (CC-COAD)

CERTIFICATION OF COMMITMENT TO THE CODE OF ETHICS AND CONDUCT

I certify that I have read and understand the Code of Ethics and Conduct of the Cole County COAD and agree to comply with it, as well as applicable laws that impact the organization, at all times. I affirm that I have no personal, business or financial interest that conflicts, or appears to conflict, with the best interests of the Cole County COAD. I further affirm that the information registering the agency below as a member of the Cole County COAD is correct.

At any time during the term of my affiliation with the Cole County COAD, should an actual or potential conflict of interest arise between my personal, business or financial interests and the interests of the COAD, I agree to: (1) disclose promptly the actual or potential conflict to the COAD Chair; and (2) until the COAD approves actions to mitigate or otherwise resolve the conflict, refrain from participating in any discussions, deliberations, decisions and/or voting related to the conflict of interest.

Voting Member Signature: _____ Date: _____

Print Name: _____

1st Alternate Signature: _____ Date: _____

Print Name: _____

2nd Alternate Signature: _____ Date: _____

Print Name: _____

ORGANIZATION: _____

PHONE: _____

CONTACT PERSON: _____ PHONE _____

ADDRESS: _____

ORGANIZATION CATEGORY and SERVICES AVAILABLE (i.e. disaster relief, homeless services, church, health)

