



## Conflict of Interest and Affiliation Disclosure Form

Consistent with the [Los Angeles County Code 3.29.046](#) (Conflict of Interest), the Los Angeles County Commission on HIV (Commission), members are required to abide by the Conflict of Interest and Disclosure requirements of the Commission, the County of Los Angeles, the State of California (including Government Code [Sections 87100](#), [87103](#), and [1090](#), et seq.), the Ryan White Program, as outlined in Human Resources & Services Administration (HRSA) and relevant Center of Disease Control (CDC) prevention grant guidance. **Please note that this Conflict of Interest and Affiliation Disclosure Form is not affiliated with and is separate from the County's Statements of Economic Interests - Form 700 required by the State of California Fair Political Practices Commission.**

*Conflict of Interest, for purposes of the Ryan White Program, is defined as having a financial interest in, serving as a board member, being employed by, having been employed by, or having a contract or agreement with, an organization, partnership, or any other entity, whether public or private, that receives Ryan White Part A funds. These provisions extend to direct ascendants and descendants, siblings, spouses and domestic partners of Commission members and non-Commission Committee-only members\*.*

Additionally, as an integrated HIV prevention and care planning body for Los Angeles County, the Commission extends disclosure to those having a financial interest in, serving as a board member, being employed by, having been employed by, or having a contract or agreement with, an organization, partnership, or any other entity, whether public or private, that receives CDC HIV-prevention funding from Los Angeles County. \*\*

*\*If you, a family member, or a member of your household also have a role as an employee or a Board member of an organization or agency that has received or is seeking Part A Program funds from Los Angeles County, please disclose that information below.*

*\*\*If you have a role as an employee or a Board member of an organization or agency that has received or is seeking CDC HIV-prevention funding through Los Angeles County, please disclose that information.*

**If you are a client and your only relationship with an organization or agency is that you receive, or are eligible for, services or you participate on a client or consumer advisory board, that would not be considered a conflict of interest.**

Commission Member Name: \_\_\_\_\_

As defined above, do you have a Conflict of Interest(s):  Yes  No

If yes, please describe: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



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### *Affiliation Disclosure*

Regarding Ryan White Program Part A funding, please check the entities with which you (or your ascendants, descendants, siblings, spouses, or domestic partners) have been professionally affiliated with in the past twelve (12) months. Regarding CDC HIV-prevention funding, please check the entities with which you have been professional affiliated with in the past twelve (12) months. **\*DO NOT CHECK AGENCIES WHERE YOU VOLUNTEER OR ARE A CLIENT**

<ul style="list-style-type: none"> <li><input type="checkbox"/> AIDS Healthcare Foundation</li> <li><input type="checkbox"/> African American AIDS Policy and Training Institute (d.b.a. Black AIDS Institute)</li> <li><input type="checkbox"/> Alliance for Housing and Healing</li> <li><input type="checkbox"/> AltaMed Health Services Corporation</li> <li><input type="checkbox"/> APLA Health &amp; Wellness</li> <li><input type="checkbox"/> Asian American Drug Abuse Program</li> <li><input type="checkbox"/> Automated Case Management Services, Inc.</li> <li><input type="checkbox"/> Being Alive: People with AIDS Coalition</li> <li><input type="checkbox"/> Bienestar Human Services, Inc.</li> <li><input type="checkbox"/> Center for Health Justice, Inc.</li> <li><input type="checkbox"/> Central City Community Health Center</li> <li><input type="checkbox"/> Charles R. Drew University of Medicine &amp; Science</li> <li><input type="checkbox"/> Children's Hospital of Los Angeles</li> <li><input type="checkbox"/> City of Long Beach, Dept of Health &amp; Human Services</li> <li><input type="checkbox"/> City of Pasadena Public Health Department</li> <li><input type="checkbox"/> Coachman Moore &amp; Associates, Inc.</li> <li><input type="checkbox"/> Community Health Alliance of Pasadena</li> <li><input type="checkbox"/> Dignity Health (dba St. Mary Medical Center)</li> <li><input type="checkbox"/> East Los Angeles Women's Center</li> <li><input type="checkbox"/> East Valley Community Health Center, Inc.</li> <li><input type="checkbox"/> El Centro del Pueblo</li> <li><input type="checkbox"/> El Proyecto del Barrio, Inc.</li> <li><input type="checkbox"/> Entercom California, LLC</li> <li><input type="checkbox"/> Essential Access Health</li> <li><input type="checkbox"/> Focus International, Inc. d.b.a. Focus Interpreting</li> <li><input type="checkbox"/> Friends Research Institute, Inc.</li> <li><input type="checkbox"/> Greater Los Angeles Agency on Deafness, Inc.</li> <li><input type="checkbox"/> Healthcare Staffing Solutions, Inc.</li> <li><input type="checkbox"/> Heluna Health</li> <li><input type="checkbox"/> In The Meantime Men's Group</li> <li><input type="checkbox"/> Inner City Law Center</li> </ul>	<ul style="list-style-type: none"> <li><input type="checkbox"/> JWCH Institute, Inc.</li> <li><input type="checkbox"/> LAC+USC Foundation Medical Center Foundation, Inc.</li> <li><input type="checkbox"/> Los Angeles Centers for Alcohol &amp; Drug Abuse</li> <li><input type="checkbox"/> Los Angeles LGBT Center</li> <li><input type="checkbox"/> Men's Health Foundation</li> <li><input type="checkbox"/> Minority AIDS Project</li> <li><input type="checkbox"/> Northeast Valley Health Corporation</li> <li><input type="checkbox"/> Project Angel Food</li> <li><input type="checkbox"/> Project New Hope</li> <li><input type="checkbox"/> Public Health Foundation Enterprises, Inc. (dba Heluna Health)</li> <li><input type="checkbox"/> Realistic Education in Action Coalition to Foster Health (dba REACH LA)</li> <li><input type="checkbox"/> Special Service for Groups</li> <li><input type="checkbox"/> St. John's Well Child and Family Center</li> <li><input type="checkbox"/> T.H.E. Clinic, Inc.</li> <li><input type="checkbox"/> Tarzana Treatment Centers, Inc.</li> <li><input type="checkbox"/> The Center Long Beach (One in Long Beach, Inc.)</li> <li><input type="checkbox"/> The Regents of California, University of Los Angeles (UCLA)</li> <li><input type="checkbox"/> The Salvation Army</li> <li><input type="checkbox"/> The Wall Las Memorias, Inc.</li> <li><input type="checkbox"/> University of Southern California</li> <li><input type="checkbox"/> USC- MCA Center Keck School of Medicine</li> <li><input type="checkbox"/> Venice Family Clinic</li> <li><input type="checkbox"/> Via Care Community Health Center, Inc.</li> <li><input type="checkbox"/> Watts Healthcare Corporation</li> <li><input type="checkbox"/> Westside Family Health Center</li> <li><input type="checkbox"/> Other Agency/Organization Not listed: _____</li> </ul>
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All members are expected to comply with the foregoing disclosure of conflicts of interest and affiliations, as defined and in accordance with governing authority, to ensure that planning activities and decisions by the Commission are performed in a manner that promotes transparency in meeting the needs of people living with and impacted by HIV in Los Angeles County.

By signing below, you are acknowledging that all the information provided on this form is true and accurate and that you have described any and all relationship with Ryan White Part A and CDC HIV-prevention funded providers. Additionally, you acknowledge that the information provided, aside from personal contact information and personal health information, cannot be kept confidential and may be discussed publicly or otherwise become part of a public record.

Print Name: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_