

**Conflict of Interest Statement: Calendar Year 2015**

List all sources of personal income anticipated during the upcoming calendar year, including wages, honoraria, consulting fees, royalties, and stock dividends that are from health-related companies. Should the Southeast Region conduct business with any of these companies, you will be asked to refrain from voting on issues pertaining to these companies.

None

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Please indicate if any member of your immediate family has a personal business interest in a health related business that may pose a potential conflict of interest for you during your term of office on the board of directors. Should the Southeast Region conduct business with any of these companies, you will be asked to refrain from voting on issues pertaining to these companies.

<b>Relative</b>	<b>Business Relationship</b>	<b>Company Name</b>
<u>None</u>		

This form may be amended at any time during the calendar year by notifying the President of a change in status and completing an updated form.

  
\_\_\_\_\_  
Signature of Board Member or Officer

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n/a

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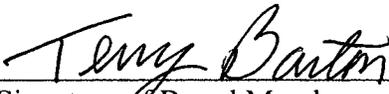
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*Jenna Beckham EW*  
Signature of Board Member or Officer

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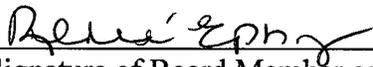
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<i>None</i>		

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*Madeline Mulligan RN CWCA*  
Signature of Board Member or Officer

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American Medical Technologies, Inc. (AMT Wound Care)

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N/A		

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Signature of Board Member or Officer

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Relative	Business Relationship	Company Name
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*None*

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*Pamela J. Whitley*  
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Signature of Board Member or Officer

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Vanderbilt Medical Center

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None		

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Marthe O'Connell      President  
Signature of Board Member or Officer

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Full Time Employee - Coloplast

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Relative	Business Relationship	Company Name
HUSBAND	SERWEN Society Association Management Company	BHe

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Patricia Heberer - Past President (Non-Voting Officer)  
Signature of Board Member or Officer

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