



Dr. Bryan Wilson
President

John G. Kloss
Executive Director

Eastern PA EMS Council Conflict of Interest Policy

Acknowledgment:

By signing, the individual named below acknowledges what constitutes a Conflict of Interest and understands the procedure for addressing them with the leadership of The Eastern PA EMS Council, including their duty to disclose any known or potential conflicts of interest.

The signee agrees to abide by the procedures set forth by this policy for the duration of their relationship with The Eastern PA EMS Council.

Name (printed): _____ Date: ____/____/____

Signature: _____

EMS Council Representative _____

Forwarded to Bureau of EMS ____/____/____

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Eastern PA EMS Council Conflict of Interest Acknowledgement – February 26, 2023