



CROP INSURANCE DIVISION  
49 EAST FOURTH STREET  
CINCINNATI, OH 45202

Name: (Please Print) \_\_\_\_\_

Profit Center/Position: \_\_\_\_\_

**EMPLOYEE CONFLICT OF INTEREST DISCLOSURE FORM**  
**2008 Reinsurance Year - Crop Insurance Division**  
(Form must be completed by June 30, 2008)

**IMPORTANT:** If you completed a COI Disclosure Form with Great American Insurance Companies (hereafter referred to as GAIC) last year and nothing has changed, please check this box, skip questions 1 through 12, read the disclosure information on the second page and sign at the bottom.

**Yes No**

- 1) Other than your stated company position, do you have any other involvement in the MPCCI program, which falls outside of your recognized job description that we should be concerned about because it may pose a conflict of interest? (e.g., adjusting, agency sales or service work, underwriting duties.)
- 2) Do you have a share in a MPCCI policy with GAIC?
- 3) Do any of your relatives have a MPCCI policy with GAIC?  
(See next page for the definition of familial, family and relative.)\*
- 4) Do you have a Power of Attorney to act on behalf of a policyholder with respect to a crop insurance policy with GAIC?
- 5) Do you have an ownership interest in any business (excluding stock in public corporations or other widely held entities with less than a 10% interest) in which a policyholder with GAIC also has an interest?
- 6) Do you have a loan, credit, barter, or agent compensation arrangement (excluding non-MPCCI insurance and commercial credit or goods or services covered in questions 8 & 10 below) with any GAIC policyholder?
- 7) Do you have a rental or leasing arrangement for land, buildings, or equipment with any GAIC policyholder?
- 8) Do you provide goods or services related to farming operations (custom farming, tractor sales, etc., but excluding insurance services or insignificant services or goods for which there is no incentive or ability to create or manipulate a loss, the guarantee, or eligibility for insurance) to clientele that include any GAIC policyholder?
- 9) Do you have a relative who works with GAIC's MPCCI Crop Division or affiliate?
- 10) Are you an employee of a financial institution and have you been involved in the processing (not including persons who exclusively perform clerical duties) of a financing agreement for any GAIC policyholder?
- 11) Do you provide any other goods or services (not related to farming operations and excluding insurance services) to clientele that include any GAIC policyholder?
- 12) Do you have a relationship with any GAIC policyholder, which may result in a Conflict of Interest that has not been identified above? (If **yes**, provide a short explanation of this relationship below.)

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