**Oregon Tobacco Prevention and Education Program**

**Tribal Grants 2016-2017**

Please provide the information requested below for program contact information, disclosure of tobacco relationships, and local policies adopted.

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| Program Contact Information | |
| Tribe/Confederation Name |  |
| TPEP Coordinator Name  (Main point of contact) |  |
| Phone |  |
| E-mail |  |
| Program Supervisor  Name |  |
| Phone |  |
| E-mail |  |
| Administrator  Name |  |
| Phone |  |
| E-mail |  |

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| Disclosure of Tobacco Relationships |
| Oregon Administrative Rules 333-010-0320 requires disclosure of any and all direct and indirect organizational or business relationships between the TPEP grant applicant or its subcontractors, including its owners, parent company or subsidiaries, and companies involved in any way in the production, processing, distribution, promotion, sale or use of tobacco. |
| Does the Tribe/Confederation have any direct or indirect relationship with tobacco-related companies, as described above?  🞏 Yes 🞏 No  If yes, please disclose any such relationships: |