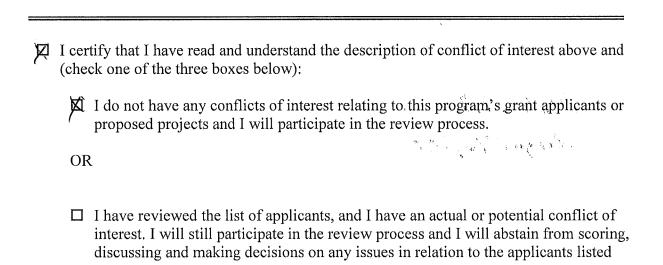
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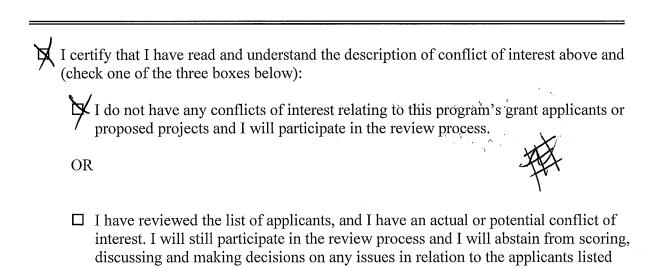


below. (The grant reviewer may state any and all applicants with which they have a conflict of interest and describe the nature of the conflict in the space below, but it is not required since this form is considered public information.)
OR
☐ I am unable to participate in this review process.
If at any time during the review process I discover a conflict of interest, I will disclose that conflict immediately to appropriate agency personnel.
Reviewer's printed name: Darby Welson
Reviewer's signature: Darly When
Date:
This section to be completed by RFP contact person or grant program supervisor:
I certify that the issue of Conflicts of Interest has been discussed with this reviewer and the following actions have been taken:
Reviewer has no conflict(s) and will fully participate in the review process.
Reviewer has disclosed a conflict(s) but will continue to participate in the review process. The reviewer will not be given any applications to review from those applicants with whom he/she has a conflict. The reviewer has been instructed to avoid discussing the applicant and / or applications from agencies with which the reviewer has a conflict of interest with other reviewers.
Reviewer has disclosed a conflict(s) and will not be participating in the review process in any manner.
Staff signature: Wch. U. Mar.
Staff signature: Wch // Date:

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	conflict of interest and describe the nature of the conflict in the space below, but it is not required since this form is considered public information.)
	OR
	☐ I am unable to participate in this review process.
	by time during the review process I discover a conflict of interest, I will disclose that immediately to appropriate agency personnel.
Reviev	ver's printed name: Bill Insphrightsen
Reviev	ver's signature:
Date:	8/6/10
	, , , , , , , , , , , , , , , , , , ,
This section t	to be completed by RFP contact person or grant program supervisor:
certify that t	he issue of Conflicts of Interest has been discussed with this reviewer and the following actions en:
Review	er has no conflict(s) and will fully participate in the review process.
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□ Review	er has disclosed a conflict(s) and will not be participating in the review process in any manner.
Staff signatur	e: Wirling U. Bed
Date:	e: Wirling H. Beck

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	certify that I have read and understand the description of conflict of interest above and heck one of the three boxes below):
	I do not have any conflicts of interest relating to this program's grant applicants or proposed projects and I will participate in the review process.
(OR
	☐ I have reviewed the list of applicants, and I have an actual or potential conflict of interest. I will still participate in the review process and I will abstain from scoring, discussing and making decisions on any issues in relation to the applicants listed

	conflict of interest and describe the nature of the conflict in the space below, but it is not required since this form is considered public information.)
•	
Ol	₹
	I am unable to participate in this review process.
•	ime during the review process I discover a conflict of interest, I will disclose that nmediately to appropriate agency personnel.
Reviewer	's printed name: Michael Kikore
Reviewer	es signature:
Date:	Jugust 6, 2010
certify that the nave been taken:	be completed by RFP contact person or grant program supervisor: assue of Conflicts of Interest has been discussed with this reviewer and the following actions as no conflict(s) and will fully participate in the review process.
☐ Reviewer l will not be reviewer h	has disclosed a conflict(s) but will continue to participate in the review process. The reviewer given any applications to review from those applicants with whom he/she has a conflict. The has been instructed to avoid discussing the applicant and / or applications from agencies with reviewer has a conflict of interest with other reviewers.
□ Reviewer l	as disclosed a conflict(s) and will not be participating in the review process in any manner.
Staff signature:	Willy. Baler
Date:	augut 16, 2010

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☑ I certify that I have read and understand the description of conflict of interest (check one of the three boxes below):	t above and
I do not have any conflicts of interest relating to this program's grant approposed projects and I will participate in the review process.	oplicants or
OR	
☐ I have reviewed the list of applicants, and I have an actual or potential of interest. I will still participate in the review process and I will abstain for discussing and making decisions on any issues in relation to the application.	om scoring,

	below. (The grant reviewer may state any and all applicants with which they have a conflict of interest and describe the nature of the conflict in the space below, but it is not required since this form is considered public information.)
	OR
	☐ I am unable to participate in this review process.
conf	any time during the review process I discover a conflict of interest, I will disclose that lict immediately to appropriate agency personnel.
Revi	ewer's printed name: Lester & Bensch
Revi	ewer's printed name: Lester & Bensch ewer's signature: Lester & Bensch
Date	: 3 ang 2000
This section	n to be completed by RFP contact person or grant program supervisor:
certify tha	t the issue of Conflicts of Interest has been discussed with this reviewer and the following actions aken:
Revie	wer has no conflict(s) and will fully participate in the review process.
will n reviev	wer has disclosed a conflict(s) but will continue to participate in the review process. The reviewer of be given any applications to review from those applicants with whom he/she has a conflict. The wer has been instructed to avoid discussing the applicant and / or applications from agencies with the reviewer has a conflict of interest with other reviewers.
□ Revie	wer has disclosed a conflict(s) and will not be participating in the review process in any manner.
Staff signat	ure: Will W. Bechin
Date:	are: Will H. Becher. august 16, 2010

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I certify that I have read and understan (check one of the three boxes below):	d the description of conflict of interest above and
I do not have any conflicts of integroposed projects and I will parti	erest relating to this program's grant applicants or cipate in the review process.
OR	
interest. I will still participate in t	ants, and I have an actual or potential conflict of the review process and I will abstain from scoring, on any issues in relation to the applicants listed

below. (The grant reviewer may state any and all applicants with which they have a conflict of interest and describe the nature of the conflict in the space below, but it is not required since this form is considered public information.)
OD
OR I am unable to participate in this review process.
If at any time during the review process I discover a conflict of interest, I will disclose that conflict immediately to appropriate agency personnel.
Reviewer's printed name: David Hartwell
Reviewer's signature:
Date: 8/16/10
This section to be completed by RFP contact person or grant program supervisor:
I certify that the issue of Conflicts of Interest has been discussed with this reviewer and the following actions have been taken:
Reviewer has no conflict(s) and will fully participate in the review process.
Reviewer has disclosed a conflict(s) but will continue to participate in the review process. The reviewer will not be given any applications to review from those applicants with whom he/she has a conflict. The reviewer has been instructed to avoid discussing the applicant and / or applications from agencies with which the reviewer has a conflict of interest with other reviewers.
Reviewer has disclosed a conflict(s) and will not be participating in the review process in any manner.
Staff signature: Wilh: H. Bech. Date: Cugust 16, 2010
Date:

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	y that I have read and understand the description of conflict of interest above and one of the three boxes below):
	do not have any conflicts of interest relating to this program's grant applicants or oposed projects and I will participate in the review process.
OR	
in	have reviewed the list of applicants, and I have an actual or potential conflict of terest. I will still participate in the review process and I will abstain from scoring, scussing and making decisions on any issues in relation to the applicants listed

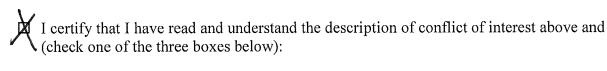
	conflict of interest and describe the nature of the conflict in the space below, but it is not required since this form is considered public information.)	
	OR	
	☐ I am unable to participate in this review process.	
	f at any time during the review process I discover a conflict of interest, I will disclose that conflict immediately to appropriate agency personnel.	
	Reviewer's printed name: WAYNE ENGER	
	Reviewer's signature:	
	Date: 8-16-10	
cer	that the issue of Conflicts of Interest has been discussed with this reviewer and the following actions en taken:	
	eviewer has no conflict(s) and will fully participate in the review process.	
]	eviewer has disclosed a conflict(s) but will continue to participate in the review process. The reviewer ill not be given any applications to review from those applicants with whom he/she has a conflict. The viewer has been instructed to avoid discussing the applicant and / or applications from agencies with hich the reviewer has a conflict of interest with other reviewers.	
	eviewer has disclosed a conflict(s) and will not be participating in the review process in any manner.	
Staff	gnature: WWW-U-Barlan	
Date	angust 16, 2010	

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I do not have any conflicts of interest relating to this program's grant applicants or proposed projects and I will participate in the review process.

OR

I have reviewed the list of applicants, and I have an actual or potential conflict of
interest. I will still participate in the review process and I will abstain from scoring,
discussing and making decisions on any issues in relation to the applicants listed

below. (The grant reviewer may state any and all applicants with which they have a conflict of interest and describe the nature of the conflict in the space below, but it is not required since this form is considered public information.)
OR
☐ I am unable to participate in this review process.
If at any time during the review process I discover a conflict of interest, I will disclose that conflict immediately to appropriate agency personnel.
Reviewer's printed name: Ryan Bronson
Reviewer's printed name: Ryan Bronson Reviewer's signature: Ryan Bronson
Date: 8-16-10
This section to be completed by RFP contact person or grant program supervisor:
I certify that the issue of Conflicts of Interest has been discussed with this reviewer and the following actions have been taken:
Reviewer has no conflict(s) and will fully participate in the review process.
Reviewer has disclosed a conflict(s) but will continue to participate in the review process. The reviewer will not be given any applications to review from those applicants with whom he/she has a conflict. The reviewer has been instructed to avoid discussing the applicant and / or applications from agencies with which the reviewer has a conflict of interest with other reviewers.
☐ Reviewer has disclosed a conflict(s) and will not be participating in the review process in any manner.
Staff signature: WML H. Berba
Date: August 16, 2010

Lisa A. Fobbe

Lessard Outdoor Heritage Council Conflict of Interest Disclosure Form

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X	I certify that I have read and understand the description of conflict of interest above and (check one of the three boxes below):
	I do not have any conflicts of interest relating to this program's grant applicants or proposed projects and I will participate in the review process.
	OR
	☐ I have reviewed the list of applicants, and I have an actual or potential conflict of interest. I will still participate in the review process and I will abstain from scoring, discussing and making decisions on any issues in relation to the applicants listed.

		conflict of interest and describe the nature of the conflict in the space below, but it is not required since this form is considered public information.)
	On	
	OR _	
		I am unable to participate in this review process.
	conflict im	me during the review process I discover a conflict of interest, I will disclose that mediately to appropriate agency personnel.
	Reviewer's	s printed name: Usa A. Fobbe
	Reviewer's	s printed name: Usa A. Fobbe s signature: Ang. 14, 2010
	Date:	Aug. 16, 2010
Γhis	section to be	e completed by RFP contact person or grant program supervisor:
	tify that the is been taken:	ssue of Conflicts of Interest has been discussed with this reviewer and the following actions
9	Reviewer ha	as no conflict(s) and will fully participate in the review process.
	will not be greviewer has	as disclosed a conflict(s) but will continue to participate in the review process. The reviewer given any applications to review from those applicants with whom he/she has a conflict. The s been instructed to avoid discussing the applicant and / or applications from agencies with eviewer has a conflict of interest with other reviewers.
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Staff	signature:	Will Bur
Date	: /	anur 16,2010

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O.	t
	I have reviewed the list of applicants, and I have an actual or potential conflict of interest. I will still participate in the review process and I will abstain from scoring discussing and making decisions on any issues in relation to the applicants listed

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OR
☐ I am unable to participate in this review process.
If at any time during the review process I discover a conflict of interest, I will disclose that conflict immediately to appropriate agency personnel.
Reviewer's printed name: SCOTT RALL
Reviewer's signature:
Date: 08-04-10
This section to be completed by RFP contact person or grant program supervisor:
I certify that the issue of Conflicts of Interest has been discussed with this reviewer and the following actions have been taken:
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Staff signature: Willin H. Bochen Date: August 16, 2010
Date: Rugar 16, 2010

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OR
I have reviewed the list of applicants, and I have an actual or potential conflict of interest. I will still participate in the review process and I will abstain from scoring, discussing and making decisions on any issues in relation to the applicants listed

Page 1 of 2

Conflict of Interest Form

	below. (The grant reviewer may state any and all applicants with which they have a conflict of interest and describe the nature of the conflict in the space below, but it is not required since this form is considered public information.)
÷	Metro Big Rivers
	Benton Lake Restoration
(OR .
Ţ	☐ I am unable to participate in this review process.
lf at any conflict	time during the review process J discover a conflict of interest, I will disclose that immediately to appropriate agency personnel.
Review	er's printed name:
Review	er's signature:
Date:	8-5-18
This section to	o be completed by RFP contact person or grant program supervisor:
	e issue of Conflicts of Interest has been discussed with this reviewer and the following actions
	or has no conflict(s) and will fully participate in the review process.
will not	be given any applications to review from those applicants with whom he/she has a conflict. The has been instructed to avoid discussing the applicant and / or applications from agencies with the reviewer has a conflict of interest with other reviewers.
□ Reviewe	er has disclosed a conflict(s) and will not be participating in the review process in any manner.
Staff signatur	august 16,2010
D .	angur 16,2010

6/08

HANSEN 08-06-2010

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I certify that I have read and understand the description of confl	ct of interest	above and
(check one of the three boxes below):		

I do not have any conflicts of interest relating to this program's grant applicants or proposed projects and I will participate in the review process.

OR

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OR
☐ I am unable to participate in this review process.
If at any time during the review process I discover a conflict of interest, I will disclose that conflict immediately to appropriate agency personnel.
Reviewer's printed name: Rick Hansen
Reviewer's printed name: Reviewer's signature: Reviewer's signature:
Date:8/6/1•
,
This section to be completed by RFP contact person or grant program supervisor:
I certify that the issue of Conflicts of Interest has been discussed with this reviewer and the following actions have been taken:
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Reviewer has disclosed a conflict(s) and will not be participating in the review process in any manner.
Staff signature: William 11-Beach
Staff signature: Willin 11-Beacher Date: August 16, 2010

This form gives grant application reviewers an opportunity to disclose any conflicts of interest, or potential for conflicts of interest that exist during a grant review process. It is the grant reviewer's obligation to be familiar with the Conflict of Interest Policy for State Grant-Making and to disclose any conflicts of interest. The grant reviewer is not required to explain the reason for the conflict of interest as this form is considered public data under Minn. Statute 13.599-Grants. A disclosure does not automatically result in the grant application reviewer being removed from the review process.

Please read the definition of conflict of interest below and mark the appropriate boxes that pertain to you and your status as a reviewer of applications for recommendation for funding from the Outdoor Heritage Fund.

- (a) A state employee or a grant reviewer uses his/her status or position to obtain special advantage, benefit, or access to the grantee or grant applicant's time, services, facilities, equipment, supplies, badge, uniform, prestige, or influence.
- (b) A state employee or a grant reviewer receives or accepts money or anything else of value from a state grantee or grant applicant or has equity or a financial interest in or partial or whole ownership of an applicant organization.
- (c) A state employee or a grant reviewer is an employee or board member of a grant applicant or grantee applicants or is a family member of anyone involved in the grantee or grant applicant's agency.

Ø	I certify that I have read and understand the description of conflict of interest above and (check one of the three boxes below):
	I do not have any conflicts of interest relating to this program's grant applicants or proposed projects and I will participate in the review process.
	OR
	☐ I have reviewed the list of applicants, and I have an actual or potential conflict of interest. I will still participate in the review process and I will abstain from scoring, discussing and making decisions on any issues in relation to the applicants listed

below. (The grant reviewer may state any and all applicants with which they have a conflict of interest and describe the nature of the conflict in the space below, but it is not required since this form is considered public information.)	
OR	
☐ I am unable to participate in this review process.	
If at any time during the review process I discover a conflict of interest, I will disclose that conflict immediately to appropriate agency personnel.	
Reviewer's printed name: Robert Guyther	
Reviewer's printed name: Robert Quitter Reviewer's signature: Robert Quitter	
Date: 7-31-7010	
This section to be completed by RFP contact person or grant program supervisor:	ion.
certify that the issue of Conflicts of Interest has been discussed with this reviewer and the following actions tave been taken:	•
Reviewer has no conflict(s) and will fully participate in the review process.	
Reviewer has disclosed a conflict(s) but will continue to participate in the review process. The reviewer will not be given any applications to review from those applicants with whom he/she has a conflict. The reviewer has been instructed to avoid discussing the applicant and / or applications from agencies with which the reviewer has a conflict of interest with other reviewers.	
I Reviewer has disclosed a conflict(s) and will not be participating in the review process in any manner.	
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Staff signature: All 1. Del	
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