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Please read the definition of conflict of interest below and mark the boxes pertaining to you and your status as a council member recommending requests for funding from the Outdoor Heritage Fund.

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	that I have read and understand the above description of conflict of interest (check one of the exes below):
□ II th	DO NOT have any conflicts of interest related to the requests for funding and I will participate in ne recommendation process.
w <u>m</u> ai	have reviewed the list of applicants, and I have an ACTUAL OR POTENTIAL conflict of interest. I ill still participate in the recommendation process and I will abstain from scoring, discussing and taking decisions on any issues related to the applicants listed below. (The councilor may state any and all applicants with which they have a conflict of interest. The applicant may describe the nature of the conflict in the space below. Detailed disclosure is not required. Data provided is considered

public information.)

☐ I have a possible PERCEIVED conflict of interest.(Describe the nature of the perceived conflict of interest.)
Describe Here:
☐ I am UNABLE to participate in this recommendation process.
If at any time during the recommendation process I discover a conflict of interest, I will disclose that conflict immediately to appropriate Council personnel.
Council member's printed name: Robert "Bob" W. ANDERSON
Council member's signature: Robert W. Anderson
Council member's printed name: Robert "Bob" W. ANDERSON Council member's signature: Robert W. Anderson Date: July 6, 2018
This section to be completed by council staff:
l certify that the issue of Conflicts of Interest has been discussed with this councilor and the following actions have been taken:
Councilor has no conflict(s) and will fully participate in the recommendation process.
Councilor has disclosed an <u>actual</u> , <u>potential or perceived</u> conflict(s) but will continue to participate in the recommendation process. The councilor has been instructed to avoid discussing with other councilors the applicant and / or requests from agencies with which the councilor has a conflict of interest of some form.
Councilor has disclosed a conflict(s) and will not be participating in the recommendation process in any manner.
Staff signature: Mallagla
Date: 7/26/2018 Revised: June, 2014

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4		tify that I have read and understand the above description of conflict of interest (check one of the boxes below):
	d	I DO NOT have any conflicts of interest related to the requests for funding and I will participate in the recommendation process.
		I have reviewed the list of applicants, and I have an ACTUAL OR POTENTIAL conflict of interest. I will still participate in the recommendation process and I will abstain from scoring, discussing and

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	Describe Here:
	☐ I have a possible PERCEIVED conflict of interest.(Describe the nature of the perceived conflict of interest.)
	Describe Here:
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If at a	ny time during the recommendation process I discover a conflict of interest, I will disclose that conflict diately to appropriate Council personnel.
Cound	cil member's printed name: July Bladdown
	cil member's signature: Date: 1218
Th	is section to be completed by council staff:
	ertify that the issue of Conflicts of Interest has been discussed with this councilor and the following actions we been taken:
立	Councilor has no conflict(s) and will fully participate in the recommendation process.
	Councilor has disclosed an <u>actual</u> , <u>potential or perceived</u> conflict(s) but will continue to participate in the recommendation process. The councilor has been instructed to avoid discussing with other councilors the applicant and / or requests from agencies with which the councilor has a conflict of interest of some form.
	Councilor has disclosed a conflict(s) and will not be participating in the recommendation process in any manner.
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-	
Sta	aff signature: Mah 44 M
	ite: 7/26/20/8
	Revised: June, 2014

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I certify that I have read and understand the above description of conflict of interest (check one of the four boxes below):



I DO NOT have any conflicts of interest related to the requests for funding and I will participate in the recommendation process.

I have reviewed the list of applicants, and I have an ACTUAL OR POTENTIAL conflict of interest. I
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Staff signature: $\frac{\sqrt{MMM}}{\sqrt{26/2018}}$		
Date: $\frac{7}{26/2018}$		clinte and shorte) traveled to collings to recognize above some and brack and traveled to the collines of the
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	Stat	f signature: Malayla —
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X		rtify that I have read and understand the above description of conflict of interest (check one of the boxes below):
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	ľΩ′	I have reviewed the list of applicants, and I have an ACTUAL OR POTENTIAL conflict of interest.

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	Describe Here:
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imm Cou	any time during the recommendation process I discover a conflict of interest, I will disclose that conflict ediately to appropriate Council personnel. ncil member's printed name: Date: 7 15 18
Т	his section to be completed by council staff:
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S	taff signature:
D	Pate: 7/26/20/8 Revised: June, 2014
	Revised. June, 2014

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×		tify that I have read and understand the above description of conflict of interest (check one of the boxes below):
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	Describe Here:
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	ny time during the recommendation process I discover a conflict of interest, I will disclose that conflict liately to appropriate Council personnel.
	il member's printed name: Date: JANE H KINGSTON KINGSTON 06/27/18
Thi	s section to be completed by council staff:
1111	s section to be completed by council static
I ce	rtify that the issue of Conflicts of Interest has been discussed with this councilor and the following actions e been taken:
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	Describe Here:
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Cou	uncil member's printed name: Sen Andrew Language uncil member's signature:
	Date: 747/18
-	This section to be completed by council staff:
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	Staff signature:
43	Revised: June 2014

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- (a) A council member uses his/her status or position to obtain <u>special</u> advantage, benefit, or access to the person making a request for funding or the requesting entity's time, services, facilities, equipment, supplies, badge, uniform, prestige, or influence.
- (b) A council member receives or accepts money or anything of value from someone making a request for funding or has equity or a financial interest in or partial or whole ownership of an applicant organization.
- (c) A council member is an employee or board member of an organization requesting funding or is a family member of anyone employed by or a board member of the applying organization.
- (d) Specific to LSOHC council members, statute provides **M.S.97A.056**, **Subd. 4**. **Conflict of interest.**(a) A council member may not be an advocate for or against a council action or vote on any action that may be a conflict of interest. A conflict of interest must be disclosed as soon as it is discovered. The council shall follow the policies and requirements related to conflicts of interest developed by the Office of Grants Management under section 16B.98. (See above)
 - (b) For the purposes of this section, a "conflict of interest" exists when a person has an organizational conflict of interest or direct financial interests and those interests present the appearance that it will be difficult for the person to impartially fulfill the person's duty. An "organizational conflict of interest" exists when a person has an affiliation with an organization that is subject to council activities, which presents the appearance of a conflict between organizational interests and council member duties. An "organizational conflict of interest" does not exist if the person's only affiliation with an organization is being a member of the organization.
 - I certify that I have read and understand the above description of conflict of interest (check one of the four boxes below):
 I DO NOT have any conflicts of interest related to the requests for funding and I will participate in the recommendation process.
 I have reviewed the list of applicants, and I have an ACTUAL OR POTENTIAL conflict of interest. I will still participate in the recommendation process and I will abstain from scoring, discussing and making decisions on any issues related to the applicants listed below. (The councilor may state any and all applicants with which they have a conflict of interest. The applicant may describe the nature of the conflict in the space below. Detailed disclosure is not required. Data provided is considered public information.)

×	☐ I have a possible PERCEIVED conflict of interest. (Describe the nature of the perceived conflict of interest.)
	Describe Here:
	□ I am UNABLE to participate in this recommendation process.
	y time during the recommendation process I discover a conflict of interest, I will disclose that conflict liately to appropriate Council personnel.
Counc	il member's printed name: M. Lilt.r_
Counc	il member's signature: Date: July 9, 2018
Thi	s section to be completed by council staff:
	rtify that the issue of Conflicts of Interest has been discussed with this councilor and the following actions e been taken:
×	Councilor has no conflict(s) and will fully participate in the recommendation process.
	Councilor has disclosed an <u>actual</u> , <u>potential or perceived</u> conflict(s) but will continue to participate in the recommendation process. The councilor has been instructed to avoid discussing with other councilors the applicant and / or requests from agencies with which the councilor has a conflict of interest of some form.
	Councilor has disclosed a conflict(s) and will not be participating in the recommendation process in any manner.
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Date	Revised: June, 2014

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Please read the definition of conflict of interest below and mark the boxes pertaining to you and your status as a council member recommending requests for funding from the Outdoor Heritage Fund.

Description of conflicts of interest- A conflict of interest occurs when the council member or others affiliated with the council believes any one of the following conditions exists:

- (a) A council member uses his/her status or position to obtain <u>special</u> advantage, benefit, or access to the person making a request for funding or the requesting entity's time, services, facilities, equipment, supplies, badge, uniform, prestige, or influence.
- (b) A council member receives or accepts money or anything of value from someone making a request for funding or has equity or a financial interest in or partial or whole ownership of an applicant organization.
- (c) A council member is an employee or board member of an organization requesting funding or is a family member of anyone employed by or a board member of the applying organization.
- (d) Specific to LSOHC council members, statute provides M.S.97A.056, Subd. 4. Conflict of interest.
 (a) A council member may not be an advocate for or against a council action or vote on any action that may be a conflict of interest. A conflict of interest must be disclosed as soon as it is discovered. The council shall follow the policies and requirements related to conflicts of interest developed by the Office

of Grants Management under section 16B.98. (See above)

(b) For the purposes of this section, a "conflict of interest" exists when a person has an organizational conflict of interest or direct financial interests and those interests present the appearance that it will be difficult for the person to impartially fulfill the person's duty. An "organizational conflict of interest" exists when a person has an affiliation with an organization that is subject to council activities, which presents the appearance of a conflict between organizational interests and council member duties. An "organizational conflict of interest" does not exist if the person's only affiliation with an organization is being a member of the organization.

×		tify that I have read and understand the above description of conflict of interest (check one of the boxes below):
	A	I DO NOT have any conflicts of interest related to the requests for funding and I will participate in the recommendation process.
		I have reviewed the list of applicants, and I have an ACTUAL OR POTENTIAL conflict of interest. I will still participate in the recommendation process and I will abstain from <u>scoring</u> , <u>discussing and making decisions</u> on any issues related to the applicants listed below. (<i>The councilor may state any</i>

and all applicants with which they have a conflict of interest. The applicant may describe the nature of the conflict in the space below. Detailed disclosure is not required. Data provided is considered

public information.)

	Describe Here:
	□ I have a possible PERCEIVED conflict of interest.(Describe the nature of the perceived conflict of interest.)
	Describe Here:
,	□ I am UNABLE to participate in this recommendation process.
	time during the recommendation process I discover a conflict of interest, I will disclose that conflict ately to appropriate Council personnel.
	member's printed name: Denny McNamara member's signature:
Journal	Date: 6-28-2018
This	section to be completed by council staff:
	tify that the issue of Conflicts of Interest has been discussed with this councilor and the following actions been taken:
X	Councilor has no conflict(s) and will fully participate in the recommendation process.
en la chaire chiese	Councilor has disclosed an <u>actual</u> , <u>potential or perceived</u> conflict(s) but will continue to participate in the recommendation process. The councilor has been instructed to avoid discussing with other councilors the applicant and / or requests from agencies with which the councilor has a conflict of interest of some form.
	Councilor has disclosed a conflict(s) and will not be participating in the recommendation process in any manner.
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aside	Signature: $\frac{1}{2} \frac{1}{2} \frac$
Date	Revised: June, 2014



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Please read the definition of conflict of interest below and mark the boxes pertaining to you and your status as a council member recommending requests for funding from the Outdoor Heritage Fund.

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	tify that I have read and understand the above description of conflict of interest (check one of the boxes below):
D	I DO NOT have any conflicts of interest related to the requests for funding and I will participate in the recommendation process.
	I have reviewed the list of applicants, and I have an ACTUAL OR POTENTIAL conflict of interest. I will still participate in the recommendation process and I will abstain from scoring, discussing and making decisions on any issues related to the applicants listed below. (The councilor may state any and all applicants with which they have a conflict of interest. The applicant may describe the nature of the conflict in the space below. Detailed disclosure is not required. Data provided is considered public information.)

_	Describe Here:
	☐ I have a possible PERCEIVED conflict of interest.(Describe the nature of the perceived conflict of interest.)
	Describe Here:
-	
	☐ I am UNABLE to participate in this recommendation process.
mmedia	time during the recommendation process I discover a conflict of interest, I will disclose that conflict ately to appropriate Council personnel member's printed name:
	member's signature:
20011011	Date: June 28' 20/8
This	section to be completed by council staff:
	ify that the issue of Conflicts of Interest has been discussed with this councilor and the following actions been taken:
M	Councilor has no conflict(s) and will fully participate in the recommendation process.
od im stava stuese	Councilor has disclosed an <u>actual</u> , <u>potential or perceived</u> conflict(s) but will continue to participate in the recommendation process. The councilor has been instructed to avoid discussing with other councilors the applicant and / or requests from agencies with which the councilor has a conflict of interest of some form.
	Councilor has disclosed a conflict(s) and will not be participating in the recommendation process in any manner.
00	da i certiv that disea coad and understand the above description of conflict of interest icheck one and
71/19	D. 7 DO NOT have any continue of interest related to the equipment of tending pind 1 will participate
Stoff	signature: Mali-9L_
COLUMBIC	and of applicable work which they have a conflict of felement.
Date:	Revised: June, 2014

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V		tify that I have read and understand the above description of conflict of interest (check one of the boxes below):
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	Describe Here:
	☐ I am UNABLE to participate in this recommendation process.
edi	y time during the recommendation process I discover a conflict of interest, I will disclose that conflict iately to appropriate Council personnel.
ınci	I member's printed name: JAMIE SWENSON
ınci	I member's signature:
	Date: 27-JUNE 2018
This	s section to be completed by council staff:
cer	s section to be completed by council staff: rtify that the issue of Conflicts of Interest has been discussed with this councilor and the following actions been taken:
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	Describe Here:
	□ I have a possible PERCEIVED conflict of interest.(Describe the nature of the perceived conflict of interest.)
	Describe Here:
	□ I am UNABLE to participate in this recommendation process.
	y time during the recommendation process I discover a conflict of interest, I will disclose that conflict iately to appropriate Council personnel.
	il member's signature: Date: 7/19/18
Thi	s section to be completed by council staff:
	rtify that the issue of Conflicts of Interest has been discussed with this councilor and the following actions e been taken:
A	Councilor has no conflict(s) and will fully participate in the recommendation process.
- - 100 1 211112	Councilor has disclosed an <u>actual</u> , <u>potential or perceived</u> conflict(s) but will continue to participate in the recommendation process. The councilor has been instructed to avoid discussing with other councilors the applicant and / or requests from agencies with which the councilor has a conflict of interest of some form.
	Councilor has disclosed a conflict(s) and will not be participating in the recommendation process in any manner.
	SZ Learning that I have read and understand the above description of northwarf interest chack one of the four bodge below:
(d)	gy inclinations any condition of missest electron in energian for turouguerd and the penceronal
1 100	
Staf	if signature: MM/4//-
Date	
	Revised: June, 2014

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	tify that I have read and understand the above description of conflict of interest (check one of the boxes below):
X	I DO NOT have any conflicts of interest related to the requests for funding and I will participate in the recommendation process.
	I have reviewed the list of applicants, and I have an ACTUAL OR POTENTIAL conflict of interest. I will still participate in the recommendation process and I will abstain from <u>scoring</u> , <u>discussing and making decisions</u> on any issues related to the applicants listed below. (The councilor may state any and all applicants with which they have a conflict of interest. The applicant may describe the nature of the conflict in the space below. Detailed disclosure is not required. Data provided is considered public information.)

	Describe Here:
	□ I have a possible PERCEIVED conflict of interest.(Describe the nature of the perceived conflict of interest.)
	Describe Here:
	☐ I am UNABLE to participate in this recommendation process.
f at ar mmed	y time during the recommendation process I discover a conflict of interest, I will disclose that conflict liately to appropriate Council personnel.
Counc	il member's printed name: <u>Javid J. Tomassoni</u>
Counc	il member's signature:
	Date:
Thi	s section to be completed by council staff:
	rtify that the issue of Conflicts of Interest has been discussed with this councilor and the following actions e been taken:
M	Councilor has no conflict(s) and will fully participate in the recommendation process.
	Councilor has disclosed an <u>actual</u> , <u>potential or perceived</u> conflict(s) but will continue to participate in the recommendation process. The councilor has been instructed to avoid discussing with other councilors the applicant and / or requests from agencies with which the councilor has a conflict of interest of some form.
	Councilor has disclosed a conflict(s) and will not be participating in the recommendation process in any manner.
Sta	ff signature: $1000000000000000000000000000000000000$
Dat	e: 7/26/2018
	Revised: June, 201