

## Lessard Outdoor Heritage Council Conflict of Interest Disclosure Form

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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.

**Description of conflicts of interest-** A conflict of interest shall be deemed to exist when a review of the situation by the grant reviewer or other agency personnel determines any one of the following conditions to be present:

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- (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.

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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.)

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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: Allen Anderson

Reviewer's signature: [Signature]

Date: 2/23/09

**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.
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Staff signature: [Signature]

Date: 2-23-09

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Minnesota Valley National Wildlife Trust

OR

I am unable to participate in this review process.

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Reviewer's printed name:

James Cox

Reviewer's signature:

James Cox

Date:

2-23-09

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Staff signature:

Walter Brubaker

Date:

2-25-09

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OR

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Reviewer's printed name: WAYNE ENGER

Reviewer's signature: 

Date: 2-23-09

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Staff signature: 

Date: 2-23-09



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OR

I am unable to participate in this review process.

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Reviewer's printed name: Rosita A Schroeder

Reviewer's signature: Rosita A Schroeder

Date: 2/23/09

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Staff signature: William H. Jones

Date: 2-23-09



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OR

I am unable to participate in this review process.

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Reviewer's printed name: Rick Hansen

Reviewer's signature: Rick Hansen

Date: 2/23/09

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Staff signature: Wanda B...

Date: Feb. 23, 2009

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Audubon - I am a board member.

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: [Signature]

Date: 3/9/08

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Staff signature: William H. Becker

Date: March 9, 2009

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*Cloquet Forestry*

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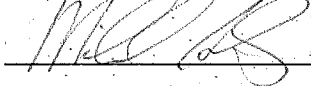
Cloquet Forestry Center is part of the College of Food, Agriculture & Natural Resource Sciences, which is the College in the U of MN that I am affiliated with.

OR Blandin Foundation - I am a member of an advisory board to the Foundation that has discussed the Blandin Pape Company easement proposal & supported.

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: Michael Kilgore

Reviewer's signature: 

Date: 2/23/09

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Staff signature: 

Date: 2-23-09



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Reviewer's printed name: Darby Nelson

Reviewer's signature: Darby Nelson

Date: 2/23/09

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Staff signature: [Signature]

Date: 2-23-09

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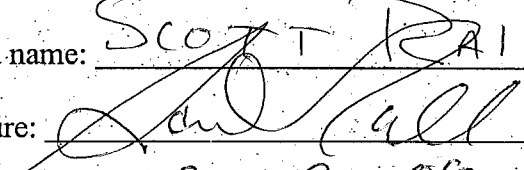
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OR

I am unable to participate in this review process.

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Reviewer's printed name: SCOTT RAIL

Reviewer's signature: 

Date: 2-23-09

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Staff signature:  2-23-09

Date: \_\_\_\_\_