Lessard-Sams Outdoor Heritage Council
Conflict of Interest Disclosure Form

This form gives council members an opportunity to disclose any actual, potential or perceived conflicts of interest that exist during the upcoming recommendation process. It is the council member's obligation to be familiar with the Conflict of Interest Policy for the Lessard-Sams Outdoor Heritage Council (LSOHC) and to disclose any conflicts of interest. The council member is not required to explain the reason for a conflict of interest. The information is considered public data under Minn. Statute 13.599. This completed form will be posted to the LSOHC website. **A disclosure does not automatically result in the council member being removed from the council recommendation process.**

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 special 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.)*

(OVER)

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.

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: Ron Schara

Council member's signature: Ron Schara

Date: 7/17/25

This section to be completed by council staff:

I 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 actual, potential or perceived 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: _____

Date: _____

Revised: June, 2014