



Code: 202.7-E

**BOARD OF DIRECTORS**  
**CONFLICT OF INTEREST DISCLOSURE FORM**

I hereby certify that I have, or may have, a financial interest or conflicting interest as noted below. The potential conflict is with the following individual and/or organization with which the Linn-Mar CSD has, or might reasonably have in the future, a relationship with; or which Linn-Mar CSD may enter into a transaction with or compete with.

**Name of conflicting or financial interest (individual or company, etc.):** Please print

**Reason for potential conflict (e.g. family relationship, financial relationship, etc.):** Please print

Son Chad Buchholz - Principal in District

**All facts pertinent to the conflicting or financial interest:** Please print

BLS - 4/11/2022

☒ I have no conflicts of interest to disclose.

☒ I hereby certify that I have read and understand Policy 202.7-Board of Directors Conflict of Interest, which I received a copy of, and that the above information is true, correct, and complete to the best of my knowledge, information, and belief. I further certify that I will comply with the requirements of Policy 202.7- Board of Directors Conflict of Interest.

Board Member's Signature

Date

Printed Name

Fiscal Year

Please return this form to JT Anderson, Board Secretary/Treasurer  
2999 N 10<sup>th</sup> Street, Marion IA 52302 or via email to: jtanderson@Linnmar.k12.ia.us

**Complete additional forms for multiple conflicts/financial interests, as needed.**



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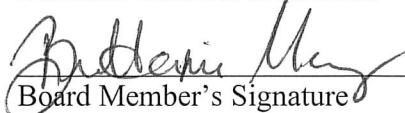
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Board Member's Signature

4-11-2022  
Date

Brittania Moray  
Printed Name

2022  
Fiscal Year

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Board Member's Signature

Date

Printed Name

Fiscal Year

*Sondra Nelson*

4/11/22

Sondra Nelson

2021-22

Please return this form to JT Anderson, Board Secretary/Treasurer  
2999 N 10<sup>th</sup> Street, Marion IA 52302 or via email to: [jtanderson@Linnmar.k12.ia.us](mailto:jtanderson@Linnmar.k12.ia.us)

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**Name of conflicting or financial interest (individual or company, etc.): Please print**

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**Reason for potential conflict (e.g. family relationship, financial relationship, etc.): Please print**

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**All facts pertinent to the conflicting or financial interest: Please print**

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Mathew Rollinger LLC 1-308, ALL RIGHTS RESERVED  
Board Member's Signature

4-11-22  
Date

MATHEW ROLLINGER  
Printed Name

Fiscal 2022  
Fiscal Year

Please return this form to JT Anderson, Board Secretary/Treasurer  
2999 N 10<sup>th</sup> Street, Marion IA 52302 or via email to: jtanderson@Linnmar.k12.ia.us

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**Policy 202.7-E Board of Directors Conflict of Interest Disclosure Form**

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**Name of conflicting or financial interest (individual or company, etc.):**

Big Brothers Big Sisters, Todd Walker

**Reason for potential conflict (e.g. family relationship, financial relationship, etc.):**

BBBS - employer

Todd - spouse

**All facts pertinent to the conflicting or financial interest:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_ I have no conflict of interest to disclose.

Y I hereby certify that I have read and understand [Policy 202.7 Board of Directors Conflict of Interest](#), which I received a copy of, and that the above information is true, correct, and complete to the best of my knowledge, information, and belief. I further certify that I will comply with the requirements of [Policy 202.7 Board of Directors Conflict of Interest](#).

**Board Member's Signature:**

Melissa Walker

**Date:**

2/6/23

**Printed Name:**

Melissa Walker

**Fiscal Year:**

22-23

**Complete additional forms for multiple conflicts/financial interests, as needed.**

Please return this form to:

David Nicholson, School Board Secretary/Treasurer

2999 N 10<sup>th</sup> Street, Marion, IA 52302 or via email at: david.nicholson@linnmar.k12.ia.us



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**Name of conflicting or financial interest (individual or company, etc.): Please print**

Hannah Meadows

**Reason for potential conflict (e.g. family relationship, financial relationship, etc.): Please print**

Family Relationship

**All facts pertinent to the conflicting or financial interest: Please print**

Hannah is a seasonal swim instructor for Linn-Mar

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Rachel Wall

Board Member's Signature

4/11/22

Date

Rachel Wall

Printed Name

2021/2022

Fiscal Year

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2999 N 10<sup>th</sup> Street, Marion IA 52302 or via email to: [jtanderson@Linnmar.k12.ia.us](mailto:jtanderson@Linnmar.k12.ia.us)

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**All facts pertinent to the conflicting or financial interest: Please print**

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Clark Weaver  
Board Member's Signature

4/11/2022  
Date

Clark Weaver  
Printed Name

4/11/2022  
Fiscal Year

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