

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 Ched Buchholz - Principal in District

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

202 -4/11

I have no conflicts of interest to disclose.

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 Sarry

Printed Name

Fiscal Year

Please return this form to JT Anderson, Board Secretary/Treasurer 2999 N 10th 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

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.):

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

ENERS-1

All facts pertinent to the conflicting or financial interest:

I have no conflict of interest to disclose.

I hereby certify that I have read and understand <u>Policy 202.7 Board of Directors</u> <u>Conflict of Interest</u>, 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 <u>Policy 202.7 Board of Directors Conflict of Interest</u>.

Date: Board Member's Signature: Fiscal Year: 2023 Printed Name:

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

Please return this form to: LMCSD Board Secretary/Treasurer 2999 N 10th Street, Marion, IA 52302

Adopted: 1/22 Revised: 10/22 Related Policy: 202.7 IASB Reference: 203



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

First Lutheran Church Cedar Rapids ELCA Marin Parks and Rievention Foundation

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

All facts pertinent to the conflicting or financial interest:

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Board Member's Signature:	Date: 11/29/2023
Printed Name: Katie Lowe Lancaster	Fiscal Year: 23 -24

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Adopted: 1/22 Revised: 10/22 Related Policy: 202.7 IASB Reference: 203



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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

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

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Board Member's Signature

Morcy Hania rinted Name

Fiscal Year

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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

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

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Mohu Meller UC 1-308, ALLREGHTS DESERVED Board Member's Signature	4-11-2
Board Member's Signature	Date

ATHEW ROLLENGER Printed Name

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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.

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Board Member's Signature: Mula	Date: 2623
Printed Name: Melizsa Walker	Fiscal Year: <u>2</u> 2-23

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

Please return this form to: David Nicholson, School Board Secretary/Treasurer 2999 N 10th Street, Marion, IA 52302 or via email at: david.nicholson@Linnmar.k12.ia.us

Adopted: 1/22 Revised: 10/22 Related Policy: 202.7 IASB Reference: 203



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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 sivin instructor for Linn-Mar

At have no conflicts of interest to disclose.

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Board Member's Signature

Printed Name

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