

REQUEST FOR STATE BOARD WAIVER

THIS IS A PUBLIC DOCUMENT

Date: November 15, 2016

Name of Board Member or Former Board Member: Susan Aguilar

Name of Board, Authority or Commission: South Dakota Board of Education

Brief explanation of your potential conflict of interest:

My husband is on the board of directors of Feeding South Dakota. Feeding South Dakota is a party to a potential contract with the South Dakota Department of Education (SD DOE) regarding administration of the Commodity Supplemental Food Program.

Brief explanation of the current or anticipated business transaction with a State agency or with a political subdivision of the State and your role in the transaction:

I have no role in the transaction, nor does my husband. I am requesting a waiver because he sits on the board of directors for Feeding South Dakota, a party which is potentially entering into a contract with the SD DOE.

Brief explanation of the essential terms of the contract or transaction:

The contract is attached as Exhibit A. This agreement provides grant funds to Feeding South Dakota for administration of the Commodity Supplemental Food Program in accordance with federal regulations and DOE guidance.

Brief explanation of why you believe a waiver should be granted:

I played no role in the award of this contract, and my household does not receive income or benefit as a result of these contracts. There is no significant conflict of interest as a result of the contract. In addition, the services provided under the contract serve the public interest.

Signature of Person Requesting Waiver: _____

STATE OF SOUTH DAKOTA

SOUTH DAKOTA BOARD OF EDUCATION

STATE BOARD DISCLOSURE LAWS
WAIVER AUTHORIZATION
PURSUANT TO SDCL 3-23-3 (current member)

A written request for waiver of conflict, dated November 15, 2016, was received from Susan Aguilar. The request was acted upon by the members of the South Dakota Board of Education during a meeting held on November 15, 2016.

(check one)

_____The request for waiver was denied for the following reasons:

_____The request for waiver was authorized for the following reasons:

_____The request for waiver was authorized subject to the following conditions:

Signature of Chairperson or Authorized Member

Date

Date mailed to Auditor-General: _____