

Conflict of Interest Disclosure Form

Note: A potential or actual conflict of interest exists when commitments and obligations are likely to be compromised by the nominator(s)' other material interests, or relationships (especially economic), particularly if those interests or commitments are not disclosed.

This Conflict of Interest Form should indicate whether the nominator(s) has an economic interest in, or acts as an officer or a director of, any outside entity whose financial interests would reasonably appear to be affected by the addition of the nominated condition to the newborn screening panel. The nominator(s) should also disclose any personal, business, or volunteer affiliations that may give rise to a real or apparent conflict of interest. Relevant Federally and organizationally established regulations and guidelines in financial conflicts must be abided by. Individuals with a conflict of interest should refrain from nominating a condition for screening.

Date: 3/4/26

Name: Rebecca Batty

Position: Town Recorder

Please describe below any relationships, transactions, positions you hold (volunteer or otherwise), or circumstances that you believe could contribute to a conflict of interest:

I have no conflict of interest to report.

I have the following conflict of interest to report (please specify other nonprofit and for-profit boards you (and your spouse) sit on, any for-profit businesses for which you or an immediate family member are an officer or director, or a majority shareholder, and the name of your employer and any businesses you or a family member own:

1. _____

2. _____

3. _____

I hereby certify that the information set forth above is true and complete to the best of my knowledge.

Signature: 

Date: 3/4/26

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Date: 3/4/26

Name: Brenda Warner

Position: Deputy Town Recorder

Please describe below any relationships, transactions, positions you hold (volunteer or otherwise), or circumstances that you believe could contribute to a conflict of interest:

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1. _____

2. _____

3. _____

I hereby certify that the information set forth above is true and complete to the best of my knowledge.

Signature: B Warner

Date: 3/4/26

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Date: 3/4/26
Name: DAVID CHARLES
Position: CITY COUNCIL

Please describe below any relationships, transactions, positions you hold (volunteer or otherwise), or circumstances that you believe could contribute to a conflict of interest:

- I have no conflict of interest to report.
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1. _____
2. _____
3. _____

I hereby certify that the information set forth above is true and complete to the best of my knowledge.

Signature: [Handwritten Signature]
Date: 3/4/26

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Date: 3-5-26

Name: Sharon Bascom

Position: Town Council

Please describe below any relationships, transactions, positions you hold (volunteer or otherwise), or circumstances that you believe could contribute to a conflict of interest:

I have no conflict of interest to report.

I have the following conflict of interest to report (please specify other nonprofit and for-profit boards you (and your spouse) sit on, any for-profit businesses for which you or an immediate family member are an officer or director, or a majority shareholder, and the name of your employer and any businesses you or a family member own:

1. _____

2. _____

3. _____

I hereby certify that the information set forth above is true and complete to the best of my knowledge.

Signature: Sharon Bascom

Date: 3-5-26

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Date: 2/18/26

Name: Wade Mentore

Position: Mayor

Please describe below any relationships, transactions, positions you hold (volunteer or otherwise), or circumstances that you believe could contribute to a conflict of interest:

I have no conflict of interest to report.

I have the following conflict of interest to report (please specify other nonprofit and for-profit boards you (and your spouse) sit on, any for-profit businesses for which you or an immediate family member are an officer or director, or a majority shareholder, and the name of your employer and any businesses you or a family member own:

1. Renovation of the Old School House into a reception center which will require a change in zoning

2. _____

3. _____

I hereby certify that the information set forth above is true and complete to the best of my knowledge.

Signature: Wade R. Mentore

Date: 2/19/26

Conflict of Interest Disclosure Form

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Date: 2-18-2026

Name: ROBERT E. JUDD

Position: COUNCIL MEMBER (SPRING LAKE TOWN)

Please describe below any relationships, transactions, positions you hold (volunteer or otherwise), or circumstances that you believe could contribute to a conflict of interest:

I have no conflict of interest to report.

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1. SPRING LAKE TROUT FARM LLC.

2. _____

3. _____

I hereby certify that the information set forth above is true and complete to the best of my knowledge.

Signature: 

Date: 2-18-2026

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Date: 2-18-26

Name: ROBERT C MARSH

Position: SPRING LAKE TOWN COUNCIL MEMBER

Please describe below any relationships, transactions, positions you hold (volunteer or otherwise), or circumstances that you believe could contribute to a conflict of interest:

I have no conflict of interest to report.

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I hereby certify that the information set forth above is true and complete to the best of my knowledge.

Signature: 

Date: 2-18-26