AGENDA

9:00 AM CALL MEETING TO ORDER

PLEDGE OF ALLEGIANCE

ADOPTION OF AGENDA

MINUTES OF OCTOBER 27, 2021 BOARD MEETING

PUBLIC ACCESS FORUM (10-minute agenda time, two-minute limit/person)

CONFLICT OF INTEREST DECLARATION

A conflict of interest, whether actual, potential, or perceived, occurs when someone in a position of trust has competing professional or personal interests, and these competing interests make it difficult to fulfill professional duties impartially. At this time, members are requested to declare conflicts of interest they may have regarding today’s business. Any member who declares an actual conflict of interest must not vote on that agenda item. All actual, potential, and perceived conflicts of interest will be announced to the board by staff before any vote.

REPORTS

- Chair & Administrative Advisory Committee – Gerald Van Amburg
- Executive Director – John Jaschke
- Audit & Oversight Committee – Joe Collins
- Dispute Resolution and Compliance Report – Travis Germundson/Rich Sve
- Grants Program & Policy Committee – Todd Holman
- RIM Reserve Committee – Jayne Hager Dee
- Water Management & Strategic Planning Committee – Andrea Date
- Wetland Conservation Committee – Jill Crafton
- Buffers, Soils & Drainage Committee – Kathryn Kelly
- Drainage Work Group – Neil Peterson/Tom Gile

AGENCY REPORTS

- Minnesota Department of Agriculture – Thom Petersen
- Minnesota Department of Health – Steve Robertson
- Minnesota Department of Natural Resources – Sarah Strommen
- Minnesota Extension – Joel Larson
- Minnesota Pollution Control Agency – Katrina Kessler

ADVISORY COMMENTS

- Association of Minnesota Counties – Brian Martinson
- Minnesota Association of Conservation District Employees – Nicole Bernd
- Minnesota Association of Soil & Water Conservation Districts – LeAnn Buck
• Minnesota Association of Townships – Eunice Biel
• Minnesota Association of Watershed Districts – Emily Javens
• Natural Resources Conservation Service – Troy Daniell

COMMITTEE RECOMMENDATIONS

RIM Committee
1. Amendment to Board Order #19-34 Wellhead Protection Partner Grants (Pilot) – Sharon Doucette – **DECISION ITEM**

Grants Program and Policy Committee
1. Habitat Enhancement Landscape Pilot (HELP) – Dan Shaw – **DECISION ITEM**
2. Cooperative Weed Management Areas (CWMA) – Dan Shaw – **DECISION ITEM**
3. FY 2022 Clean Water Fund Competitive Grant Award – Shaina Keseley and Mark Hiles – **DECISION ITEM**
4. General Fund Feedlot Grant to TSA 7 – Kevin Bigalke – **DECISION ITEM**

Water Management and Strategic Planning Region Committee
1. Revision of the Nonpoint Priority Funding Plan (NPFP) – Brad Wozney – **DECISION ITEM**

Central Region Committee
1. Lower Rum River Watershed Management Organization Watershed Management Plan – Steve Christopher – **DECISION ITEM**

UPCOMING MEETINGS
• Southern Region Committee is scheduled for Monday, December 20, 2021, at 9:00 a.m. at Murray Soil and Water Conservation District, 2740 22nd Street, Slayton and by Microsoft Teams
• Audit and Oversight Committee is scheduled for January 20, 2022, at 3:00 p.m. in Conference Room 101 at 520 Lafayette Road, North, St. Paul and by WebEx.
• BWSR Board meeting is scheduled for Wednesday, January 26, 2022, at 9:00 a.m. in the Lower Level Conference Rooms at 520 Lafayette Road North, St. Paul and by WebEx.

ADJOURN
December 8, 2021

Executive Assistant
Board of Water and Soil Resources
520 Lafayette Rd
St Paul, MN  55155-4101

From: Campaign Finance and Public Disclosure Board

Subject: Requirement for public officials to annually recertify statement of economic interest

You are receiving this notice because you are the contact person for an agency that has members or employees who are public officials. All public officials must update their statements of economic interest annually. The Board is asking for your help in reminding the public officials in your agency of this requirement. In doing so, please keep these things in mind:

- A public official must review and recertify his or her statement even if he or she left the public official position during 2021, or if nothing on it has changed. Please be sure that the public officials who left your agency during the year are aware of the filing requirement.

- The annual recertification must be filed after January 1, 2022, but no later than January 31, 2022. A public official who does not file a recertification by the deadline will be subject to the imposition of late filing fees and a potential civil penalty.

- The Board will send letters directly to all public officials in late December notifying them of the requirement and giving them the information necessary to file online. Paper copies of the statement may be printed from the Board’s website by any official unable to file online.

If you are not sure who in your agency is considered a public official, you can view the list of the public officials in your agency by entering your agency’s name into the search box at https://cfb.mn.gov/reports-and-data/officials-financial-disclosure/agency/.

If you need to correct any inaccuracies on the list for your agency, or if you have questions about the reporting requirements in general, please contact Jodi Pope at 651-539-1183, 800-657-3889 or jodi.pope@state.mn.us or Erika Ross at 651-539-1187 or erika.t.ross@state.mn.us.

Thank you in advance for your assistance.
#### SEMA4 EMPLOYEE EXPENSE REPORT

**Check if advance was issued for these expenses:**

<table>
<thead>
<tr>
<th>IN-STATE</th>
<th>OUT-OF-STATE</th>
<th>RECURRING ADVANCE</th>
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**Include:**
- Home Address (Include City and State)
- Permanent Work Station (Include City and State)
- Agency
- 1-Way Commute Miles
- Job Title

**Employee Name:**

**Employee ID:**

**Rcd #:**

**Trip Start Date:**

**Trip End Date:**

**Reason for Travel/Advance (30 Char. Max):** (example: XYZ Conference, Dallas, TX)

**Agency:**

**Barg. Unit:**

**Expense Group ID (Agency Use):**

**Chart String:**

**Accounting Date:**

**Fund:**

**Fin DeptID:**

**AppropID:**

**SW Cost:**

**Sub Acct:**

**Agency Cost 1:**

**Agency Cost 2:**

**PC BU:**

**Project:**

**Activity:**

** sage Type:**

**Category:**

**Sub-Cat:**

**Disarb %:**

**Expense Group ID:**

**A. Description:**

**B. Description:**

<table>
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<tr>
<th>Date</th>
<th>Daily Description</th>
<th>Time</th>
<th>Location</th>
<th>Trip Miles</th>
<th>Total Trip &amp; Local Miles</th>
<th>Mileage Rate</th>
<th>Meals ✓</th>
<th>Total Meals (overnight stay)</th>
<th>Total Meals (no overnight stay)</th>
<th>Lodging</th>
<th>Personal Telephone</th>
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**MILEAGE REIMBURSEMENT CALCULATION**

Enter the rates, miles, and total amounts for the mileage listed above. Get the IRS rate from your agency business expense contact.

1. Enter rate, miles, and amount being claimed at **equal to the IRS rate.**
   - Rate: 0.00
   - Total Miles: 0.00
   - Total Mileage Amt.: 0.00

2. Enter rate, miles, and amount being claimed at **less than the IRS rate.**
   - Rate: 0.00
   - Total Miles: 0.00
   - Total Mileage Amt.: 0.00

3. Enter rate, miles, and amount being claimed at **greater than the IRS rate.**
   - Rate: 0.00
   - Total Miles: 0.00
   - Total Mileage Amt.: 0.00

4. Add the total mileage amounts from lines 1 through 3.
   - Total Miles: 0.00

5. Enter IRS mileage rate in place at the time of travel.
   - Rate: 0.00
   - Total Miles: 0.00
   - Total Mileage Amt.: 0.00

6. Subtract line 5 from line 3.
   - Subtotal Other Expenses: (B) 0.00

7. Enter total miles from line 3.
   - Total Miles: 0.00

8. Multiply line 6 by line 7. This is **taxable** mileage.
   - Total taxable mileage greater than IRS rate to be reimbursed: (C) 0.00 **MIT or MOT**

9. Subtract line 8 from line 4. If line 8 is zero, enter mileage amount from line 4.
   - Total nontaxable mileage less than or equal to IRS rate to be reimbursed: (D) 0.00 **MLI or MLO**

**Grand Total (A + B + C + D):** 0.00

**OTHER EXPENSES** – See reverse for list of Earn Codes.

**I declare, under penalty of perjury, that this claim is just, correct and that no part of it has been paid or reimbursed by the state of Minnesota or by another party except with respect to any advance amount paid for this trip. I AUTHORIZE PAYROLL DEDUCTION OF ANY SUCH ADVANCE. I have not accepted personal travel benefits.**

**Employee Signature:**

**Date:**

**Work Phone:**

**Approved:** Based on knowledge of necessity for travel and expense and on compliance with all provisions of applicable travel regulations.

**Appointing Authority Designee (Needed for Recurring Advance and Special Expenses):**

**Signature:**

**Date:**

**Work Phone:**

**Supervisor Signature:**

**Date:**

**Work Phone:**

**Less Advance issued for this trip:**

**Total amount to be reimbursed to the employee:**

**Amount of Advance to be returned by the employee by deduction from paycheck:**

**FI-00529-09 (11/13) Page 1 of 2**
EMPLOYEE EXPENSE REPORT (Instructions)

DO NOT PAY RELOCATION EXPENSES ON THIS FORM.
See form FI-00568 Relocation Expense Report. Relocation expenses must be sent to Minnesota Management & Budget, Statewide Payroll Services, for payment.

USE OF FORM: Use the form for the following purposes:
1. To reimburse employees for authorized travel expenses.
2. To request and pay all travel advances.
3. To request reimbursement for small cash purchases paid for by employees.

COMPLETION OF THE FORM: Employee: Complete, in ink, all parts of this form. If claiming reimbursement, enter actual amounts you paid, not to exceed the limits set in your bargaining agreement or compensation plan. If you do not know these limits, contact your agency's business expense contact. Employees must submit an expense report within 60 days of incurring any expense(s) or the reimbursement comes taxable.

All of the data you provide on this form is public information, except for your home address. You are not legally required to provide your home address, but the state of Minnesota cannot process certain mileage payments without it.

Supervisor: Approve the correctness and necessity of this request in compliance with existing bargaining agreements or compensation plans and all other applicable rules and policies. Forward to the agency business expense contact person, who will then process the payments. Note: The expense report form must include original signatures.

Final Expense For This Trip?: Check this box if there will be no further expenses submitted for this trip. By doing this, any outstanding advance balance associated with this trip will be deducted from the next paycheck that is issued.

1-Way Commute Miles: Enter the number of miles from your home to your permanent workstation.

Expense Group ID: Entered by accounting or payroll office at the time of entering expenses. The Expense Group ID is a unique number that is system-assigned. It will be used to reference any advance payment or expense reimbursement associated with this trip.

Earn Code: Select an Earn Code from the list that describes the expenses for which you are requesting reimbursement. Be sure to select the code that correctly reflects whether the trip is in state or out-of-state. Note: Some expense reimbursements may be taxable.

Travel Advances, Short-Term and Recurring: An employee can only have one outstanding advance at a time. An advance must be settled before another advance can be issued.

Travel Advance Settlement: When the total expenses submitted are less than the advance amount or if the trip is cancelled, the employee will owe money to the state. Except for rare situations, personal checks will not be accepted for settlement of advances; a deduction will be taken from the employee's paycheck.

FMS ChartStrings: Funding source(s) for advance or expense(s)

Mileage: Use the Mileage Reimbursement Calculation table to figure your mileage reimbursement. Mileage may be authorized for reimbursement to the employee at one of three rates (referred to as the equal to, less than, or greater than rate). The rates are specified in the applicable bargaining agreement/compensation plan. Note: If the mileage rate you are using is above the IRS rate at the time of travel (this is not common), part of the mileage reimbursement will be taxed.

Vehicle Control #: If your agency assigns vehicle control numbers follow your agency’s internal policy and procedure. Contact your agency’s business expense contact for more information on the vehicle control number procedure.

Personal Travel Benefits: State employees and other officials cannot accept personal benefits resulting from travel on state business as their own. These benefits include frequent flyer miles/points and other benefits (i.e. discounts issued by lodging facilities.) Employees must certify that they have not accepted personal travel benefits when they apply for travel reimbursement.

Receipts: Attach itemized receipts for all expenses except meals, taxi services, baggage handling, and parking meters, to this reimbursement claim. The Agency Designee may, at its option, require attachment of meal receipts as well. Credit card receipts, bank drafts, or cancelled checks are not allowable receipts.

Copies and Distribution: Submit the original document for payment and retain a copy for your employee records.