

NORTH DAKOTA ETHICS COMMISSION SFN 62343 (2-2024)

#### Case Number

Article XIV of the North Dakota Constitution prohibits gifts from lobbyists to public officials. Pursuant to its constitutional authority, the Ethics Commission has adopted exclusions in the Commission's rules regarding this lobbyist-gift prohibition. Under these rules, "food and beverage served for immediate consumption at any private or public social or educational event" is excluded from the lobbyist-gift prohibition.

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If you have questions about this form or would like to request the form in an alternate format, contact the Ethics Commission at (701) 328-5325. We will take reasonable steps to accommodate your needs.

#### CONTACT INFORMATION

Name Cale Dunwoody

Address 3312 42nd Street South, St. 101

Fargo, ND, 58104

Email Address cdunwoody@fmwfchamber.com

**Phone Number** (701) 306-2235

Are you a registered lobbyist?

Lobbyist Badge Number 1329

**EVENT INFORMATION** 

**Event Name** FMWF Chamber's Day at the Capitol Educational Social

**Event Start Date** Tuesday, February 11, 2025

**Event End Date** Tuesday, February 11, 2025

**Location** First International Bank & Trust (1601 N. 12th St., Bismarck,

ND 58501)

## **Type of Event**

Private Social and Educational Event

## **Educational Component of Event (describe with detail)**

The Chamber Day at the North Dakota Capitol is a two-day event where Cass County community and business leaders attend a variety of meetings with elected/ appointed officials to learn about topics including workforce development, infrastructure, education, military priorities, and tax reform. This event will take place Feb. 11-12, with an educational private event taking place on the evening of Feb. 11. This educational event offers attendees a unique opportunity to engage in conversation with other attendees from across the state and deepen their understanding of challenges facing North Dakota as well as the solutions put forward to address them. By deepening their understanding of complex, statewide concerns our regional leaders can work to better support the well-being and growth of North Dakota and their local community.

A verbal briefing will be provided by our President and CEO describing the mission of The Chamber, the importance of our public policy work and other key cornerstones, and highlighting our 2025 Legislative Priorities, Public Policy Guide, Bridge Magazine and other printed educational materials. In addition to these verbal remarks and printed materials, participants engage in one-on-one discussions to discuss their priorities and issues central to the business community. Topics that will be covered include workforce, childcare, housing, taxes, education, military, etc. These activities, accompanied by the printed materials provided at the event, will allow attendees to better understand the mission of The FMWF Chamber and the work that we do, along with the challenges and opportunities faced by the business community in Cass County and across the state.

Additional speakers may include:

- Governors Office
- House and Senate Majority and Minority Leaders
- Chamber Sponsor/ Board Member

### **Number of Total Projected Attendees** 75

# Number of Projected Attendees who 40 are Public Officials \*

# Number of Projected Attendees who 5 are Registered Lobbyists

# Total Estimated Cost of Event per 25 Attendee

# Description of Costs Associated with the Event (e.g. venue rental, educational materials, food/beverage)

Food and beverages for immediate consumption.

The venue was rented at no cost.

Educational materials have already been printed and are free to the public at our office. We will provide these at the event and online.

Reminder: Food and beverage must be for immediate consumption ONLY.

#### Additional Comments (optional)

Event Page: https://business.fmwfchamber.com/events/details/chamber-day-at-the-north-dakota-capitol-1286332

Public Policy Guide: https://issuu.com/fmwfchamber.com/docs/publicpolicy\_2023

Public Policy Priorities: https://www.fmwfchamber.com/public-policy/

January - February Bridge Magazine: https://issuu.com/fmwfchamber.com/docs/thebridge\_january-february25-issuu

## **Add Supporting Documents**

Certification

I certify that the information provided in this meeting notice is true, correct, complete, and of my own personal knowledge. I will fully cooperate in the process regarding this meeting notice.

Signature (typed name is acceptable) Cale Dunwoody



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#### CONTACT INFORMATION

Name Micky Huntington

Address 1611 E. Century Ave, Suite 100

Bismarck, ND, 58503

Email Address mickyh@medora.com

**Phone Number** (701) 223-4800

Are you a registered lobbyist?

**Lobbyist Badge Number** 

**EVENT INFORMATION** 

**Event Name** A night with the Theodore Roosevelt Medora Foundation

**Board of Directors** 

**Event Start Date** Wednesday, February 19, 2025

**Event End Date** Wednesday, February 19, 2025

**Location** Heritage Center atrium

Theodore Roosevelt Medora Foundation Board of Directors

## **Type of Event**

Private Social and Educational Event

## **Educational Component of Event (describe with detail)**

The TR Medora Foundation Board of Directors would like to share how they plan to continue to connect people to Historic Medora for positive, life-changing experiences.

There will be an update on the Medora Musical 60th anniversary celebrations and all that is going on in Medora.

Number of	f Total Pro	iected Attendees	60
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Number of Projected Attendees who are Public Officials \*

35

Number of Projected Attendees who are Registered Lobbyists

10

Total Estimated Cost of Event per Attendee

60

# Description of Costs Associated with the Event (e.g. venue rental, educational materials, food/beverage)

Venue rental, food/beverage

Reminder: Food and beverage must be for immediate consumption ONLY.

## Additional Comments (optional)

The TR Medora Foundation Board will be in town for their annual meeting, February 20th-21st.

#### Add Supporting Documents

**Certification**I certify that the information provided in this meeting

notice is true, correct, complete, and of my own personal knowledge. I will fully cooperate in the process regarding

this meeting notice.

Signature (typed name is acceptable) Micky Huntington



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#### CONTACT INFORMATION

Name Stephanie Engebretson

Address 410 E Front Ave

Bismarck, ND, 58503

Email Address stephanie@ndlc.org

**Phone Number** (701) 223-3518

Are you a registered lobbyist?

Lobbyist Badge Number 1257

**EVENT INFORMATION** 

**Event Name**Local Government Capitol Connection

**Event Start Date** Tuesday, February 18, 2025

**Event End Date** Wednesday, February 19, 2025

**Location** Bismarck Event Center and North Dakota Capitol

North Dakota Association of Counties, North Dakota League of Cities, North Dakota Recreation and Park Association, North Dakota School Boards Association, North Dakota Township Officers Association

Type of Event

Private Social and Educational Event

## **Educational Component of Event (describe with detail)**

At the social on February 18, each type of political subdivision will have a table with information about the particular political subdivision and political subdivision constituents will have the opportunity to provide information and education to the legislators regarding political subdivisions.

At the luncheon on February 19, political subdivision representatives will be talking to their legislators and providing education about pressing issues regarding political subdivisions and public safety needs.

Number of Total Projected Attendees 531

Number of Projected Attendees who are Public Officials \*

175

Number of Projected Attendees who are Registered Lobbyists

30

Total Estimated Cost of Event per

48.50

Attendee

# Description of Costs Associated with the Event (e.g. venue rental, educational materials, food/beverage)

Food for social, beverages for social, Bismarck Event Center Rental, and food for lunch at the capitol.

Reminder: Food and beverage must be for immediate consumption ONLY.

Additional Comments (optional)

**Add Supporting Documents** 

Certification

I certify that the information provided in this meeting notice is true, correct, complete, and of my own personal knowledge. I will fully cooperate in the process regarding

this meeting notice.

**Signature (typed name is acceptable)** Stephanie Engebretson



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#### CONTACT INFORMATION

Name Mary Korsmo

Address 1661 Capitol Way

Bismarck, ND, 58501

Email Address Mary.Korsmo@ndaco.org

**Phone Number** (701) 471-2264

Are you a registered lobbyist?

Lobbyist Badge Number 42

**EVENT INFORMATION** 

**Event Name** Public Health Day at the Legislature

Event Start Date Thursday, February 13, 2025

**Event End Date** Thursday, February 13, 2025

Location ND Capitol - Memorial and Legislative Halls

ND State Assoc of City & County Health Officials (SACCHO),

ND Public Health Association (NDPHA), NDHHS

**Type of Event** 

Private Social and Educational Event

## **Educational Component of Event (describe with detail)**

Information (flyers, public health trivia questions, one-on-one conversations) provided by ND local public health units, ND Public Health Association members and ND Dept of Health and Human Services. The event is an opportunity for entities to meet with their respective legislators to provide education and awareness of public health purpose and associated activities. Refreshments and boxed lunches will be available for legislators and staff.

Number of Total Projected Attendees 250

Number of Projected Attendees who

are Public Officials \*

145

1

Number of Projected Attendees who

are Registered Lobbyists

16.00

Total Estimated Cost of Event per Attendee

Description of Costs Associated with the Event (e.g. venue rental, educational materials, food/beverage)

Informational flyers, posters, signs, granola bars, Skinny Pop popcorn, bottled water, boxed lunches, lifesavers & smarties bags for trivia game.

Reminder: Food and beverage must be for immediate consumption ONLY.

Additional Comments (optional)

**Add Supporting Documents** 

notice is true, correct, complete, and of my own personal knowledge. I will fully cooperate in the process regarding

this meeting notice.

Signature (typed name is acceptable) Mary Korsmo



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#### CONTACT INFORMATION

Name John Ward

Address 1100 College Dr., Ste 5

Bismarck, ND, ND, 58501

**Email Address** jward@esattorneys.com

**Phone Number** (701) 471-4723

Are you a registered lobbyist?  $_{\text{Yes}}$ 

Lobbyist Badge Number 118

**EVENT INFORMATION** 

**Event Name**Bistro Dinner with PCMA and Prime Therapeutics

**Event Start Date** Wednesday, February 5, 2025

**Event End Date** Wednesday, February 5, 2025

**Location** 1103 E Front Ave

PCMA and Prime Therapeutics

Type of Event

Private Social and Educational Event

## **Educational Component of Event (describe with detail)**

PBM 101 and HB 1584 Cost Analysis

**Number of Total Projected Attendees** 17

**Number of Projected Attendees who** 

are Public Officials \*

11

**Number of Projected Attendees who** 

are Registered Lobbyists

5

**Total Estimated Cost of Event per** 

Attendee

50

# Description of Costs Associated with the Event (e.g. venue rental, educational materials, food/beverage)

food/beverage

Reminder: Food and beverage must be for immediate consumption ONLY.

## **Additional Comments (optional)**

## **Add Supporting Documents**



North Dakota HB 1584 Cost Analysis.pdf



PBM-101\_2nd-Edition\_2025.pdf

#### Certification

I certify that the information provided in this meeting notice is true, correct, complete, and of my own personal knowledge. I will fully cooperate in the process regarding this meeting notice.

Signature (typed name is acceptable) John Ward

**Date** Tuesday, February 4, 2025



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#### CONTACT INFORMATION

Name Tony Burke

Address 7416 S. Homan Place, Unit 6

Sioux Falls, SD, 57108

Email Address tony.burke@heart.org

**Phone Number** (605) 351-5939

Are you a registered lobbyist?

Lobbyist Badge Number 1300

**EVENT INFORMATION** 

**Event Name** You're the Cure Day at the Capitol - January 31, 2025

**Event Start Date** Wednesday, February 5, 2025

**Event End Date** Wednesday, February 5, 2025

**Location** Memorial Hall - North Dakota State Capitol - 600 E Blvd Ave,

Bismarck, ND 58505

American Heart Association

Type of Event

Public Social and Educational Event

## **Educational Component of Event (describe with detail)**

Educate and inform attendees on issues important to North Dakotans that directly relate to the work of the American Heart Association. The theme is Investing in Youth to become the healthiest state in the nation. Focus on the North Dakota Multi-Partner Health Collaborative, Cardiac Emergency Response Plans, Commercial Tobacco Tax and Parity on Other Tobacco Products (OTP)/Electronic Nicotine Delivery Systems (ENDS), Healthy School Meals, and cardiac and stroke systems of care.

Number of Total Projected Attendees		
Number of Projected Attendees who are Public Officials *	150	
Number of Projected Attendees who are Registered Lobbyists	2	
Total Estimated Cost of Event per	4	

# Description of Costs Associated with the Event (e.g. venue rental, educational materials, food/beverage)

Costs associated with the event will from the healthy breakfast/water/coffee service that will be consumed on location and not removed from the meeting.

Educational takeaways are written, printed and paid for by the American Heart Association.

Reminder: Food and beverage must be for immediate consumption ONLY.

### Additional Comments (optional)

Please note the event was hosted on January 31, 2025, and were not aware this form needed to be completed till after the event.

## **Add Supporting Documents**

Certification

Attendee

I certify that the information provided in this meeting notice is true, correct, complete, and of my own personal knowledge. I will fully cooperate in the process regarding this meeting notice.

Signature (typed name is acceptable) Tony Burke

Date Wednesday, February 5, 2025



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#### CONTACT INFORMATION

Name Scott Staudinger

Address 1815 Schafer Street, Suite 200

Bismarck, ND, 58501

Email Address scott.staudinger@krausanderson.com

**Phone Number** (701) 989-7150

Are you a registered lobbyist?

**Lobbyist Badge Number** 

**EVENT INFORMATION** 

**Event Name** Facility Condition Assessment Education Presentation

**Event Start Date** Thursday, February 20, 2025

**Event End Date** Thursday, February 20, 2025

**Location** North Dakota Heritage Center & State Museum

## Type of Event

Private Social and Educational Event

## **Educational Component of Event (describe with detail)**

Facility condition assessments should be the foundation when leaders of K-12 institutions start planning capital improvements. FCAs ascertain the estimated life of a school building and key physical features, calculate replacement costs and implement a workable program to maintain assets over time. When conducted well, this process enriches facility investment, deepens stewardship among stakeholders and improves educational outcomes.

Now more than ever, educators are fine-tuning their learning environments to keep pace with emerging technologies and methodologies. Studies have shown that healthy learning environments are clean, quiet. safe and comfortable. The condition of school facilities impacts on student performance and attendance. Schools in better condition report better student behavior, and teachers with appropriate resources report more effective student performances.

School buildings across the U.S. range in age and design. Some are relatively new and feature energyefficient windows and a digital infrastructure, while others were built in the early to mid-20th century and need to be retrofitted to meet today's architectural and technology standards. An FCA helps school leaders understand the immediate and long-term needs of a school, regardless of the age and condition of the building and its assets.

FCAs start with an evaluation of the general health of physical facilities by identifying and prioritizing deficiencies and forecasting costs based on multiple scenarios. They incorporate proven deficiency and lifecycle standards to help prioritize maintenance and repair needs, identifying the current or anticipated condition of real property assets to establish a comparative evaluation protocol for a large inventory of features—from roofs to flooring, windows to lighting and HVAC systems to communications infrastructure. This data-based framework provides school administrators with actionable and defensible data to make informed, cost-effective planning decisions.

When conducted by an independent third party, FCAs provide unbiased, expert evaluations that integrate and leverage internal school facility knowledge. Before a firm is hired to perform an FCA, there are measures school administrators and facility managers can take to prepare. The more information a school district has on its facilities, the more streamlined an FCA can be. Districts that have well-organized information and reliable and updated equipment inventories—detailing characteristics such as size, age and renovation timing—have a head start.

By using FCA information to prioritize spending, school administrators can proactively plan for renovating and replacing facilities and assets. School buildings of all ages are vital hubs for communities, and leadership must plan accordingly to ensure they remain thriving learning and activity centers for years to come.

**Number of Total Projected Attendees** 30

**Number of Projected Attendees who** 20 are Public Officials \*

**Number of Projected Attendees who** 0 are Registered Lobbyists

45 Total Estimated Cost of Event per

## Attendee

## Description of Costs Associated with the Event (e.g. venue rental, educational materials, food/beverage)

Venue rental, food/beverage for immediate consumption, printing costs for handouts, Save the Date Cards, invitations and stickers.

Reminder: Food and beverage must be for immediate consumption ONLY.

## **Additional Comments (optional)**

## **Add Supporting Documents**



2024 KA-BIS Facility Assessments.pdf

Certification

I certify that the information provided in this meeting notice is true, correct, complete, and of my own personal knowledge. I will fully cooperate in the process regarding this meeting notice.

Signature (typed name is acceptable)

**Scott Staudinger** 

**Date** 

Wednesday, February 5, 2025



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#### CONTACT INFORMATION

Name Tim Eissinger

Address 2200 20th St. SW

Jamestown, North Dakota, 58401

Email Address tim.eissinger@annecenter.org

**Phone Number** (701) 269-7355

Are you a registered lobbyist?

Lobbyist Badge Number 029

**EVENT INFORMATION** 

**Event Name** Anne Carlsen Center Board Dinner

**Event Start Date** Wednesday, February 19, 2025

**Event End Date** Wednesday, February 19, 2025

**Location** First International Bank and Trust, Bismarck

Anne Carlsen Center

Type of Event

Private Social and Educational Event

## **Educational Component of Event (describe with detail)**

During this Anne Carlsen Board Dinner, Anne Carlsen Board members and management staff will discuss unique opportunities and challenges for children and adolescents with intellectual and developmental disabilities in the State of North Dakota. We will focus on children and adolescents who also face complex medical and behavioral challenges and improving options for young adults transitioning out of the services of providers like Anne Carlsen.

Number of Total Projected Attendees 35

Number of Projected Attendees who are Public Officials \*

11

Number of Projected Attendees who are Registered Lobbyists

8

Total Estimated Cost of Event per Attendee

30

Description of Costs Associated with the Event (e.g. venue rental, educational materials, food/beverage)

Food and beverages the event

Reminder: Food and beverage must be for immediate consumption ONLY.

Additional Comments (optional)

**Add Supporting Documents** 

Certification

I certify that the information provided in this meeting notice is true, correct, complete, and of my own personal knowledge. I will fully cooperate in the process regarding

this meeting notice.

**Signature (typed name is acceptable)** Tim Eissinger

Date Thursday, February 6, 2025



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#### CONTACT INFORMATION

Name Dale Lennon

Address 612 E Boulevard Ave

Bismarck, ND, 58505

Email Address dale@statehistoricalfoundation.org

**Phone Number** (701) 471-4014

Are you a registered lobbyist?

**Lobbyist Badge Number** 1295

**EVENT INFORMATION** 

**Event Name** Military Gallery Reception

**Event Start Date** Thursday, April 3, 2025

**Event End Date** Thursday, April 3, 2025

**Location** ND Heritage Center & State Musuem

State Historical Society of North Dakota Foundation

## Type of Event

Private Social and Educational Event

## **Educational Component of Event (describe with detail)**

This reception celebrates North Dakota's rich military heritage while providing policymakers and legislators with valuable insights into the ongoing development of the Military Gallery.

- -Explore North Dakota's military history from Native American military societies to present-day service.
- -Receive updates on the Military Gallery's progress from the North Dakota National Guard and project architects.
- -Learn about the gallery's innovative design, including a 20,000-square-foot exhibition space, regimental room, and outdoor amphitheater.
- -Gain understanding of the project's \$78 million investment and funding structure.
- -Preview plans for immersive exhibits showcasing personal stories of North Dakota servicemembers

#### **Number of Total Projected Attendees** 150

## **Number of Projected Attendees who** are Public Officials \*

100

## **Number of Projected Attendees who** are Registered Lobbyists

1

## **Total Estimated Cost of Event per**

35

## Attendee

## Description of Costs Associated with the Event (e.g. venue rental, educational materials, food/beverage)

**Estimated Total:** Venue Rental: \$500 Security: \$350 Liquor License: \$150

Food: \$4.000

Total Estimated Cost: \$5,000

Reminder: Food and beverage must be for immediate consumption ONLY.

#### Additional Comments (optional)

### **Add Supporting Documents**

#### Certification

I certify that the information provided in this meeting notice is true, correct, complete, and of my own personal knowledge. I will fully cooperate in the process regarding this meeting notice.

Signature (typed name is acceptable) Dale Lennon

Friday, February 7, 2025 Date