

I, Alice Russo, hereby acknowledge that I have received, read, and understand the Conflict of Interest Policy for the IETF Administration LLC (the "Policy") provided to me. I also understand and acknowledge my responsibilities as a Covered Individual under the Policy which is, at all times, to adhere to the Policy and the Policy's purpose and intent.

I hereby certify that the information contained below is true, complete, and accurate.

If additional space is needed in any section, please attach additional pages.

I. The name of my current employer(s) or parties for whom I contract:

Organization	Position
Association Management Solutions (AMS)	Associate RPC Director

II. The names of organizations for which I, a family member, or a related party serves as a board member, officer, or director, or organizations for which I, a family member, or a related party is the sole owner, co-owner, controlling shareholder, or significant shareholder (under the US Securities and Exchange Commission's definition), other than for the IETF Administration LLC:

Organization	Organization Type	Position

III. Other activities I participate in that may be in a similar area of activity as the IETF Administration LLC, or other potential conflicts of interests with my IETF Administration LLC responsibilities:

Organization	Organization Type	Involvement

(if additional space is needed, please attach additional sheets)

Alice Russo

Signature: _____

Name: Alice Russo

Date: 2/13/20

I, Liz Flynn, hereby acknowledge that I have received, read, and understand the Conflict of Interest Policy for the IETF Administration LLC (the “Policy”) provided to me. I also understand and acknowledge my responsibilities as a Covered Individual under the Policy which is, at all times, to adhere to the Policy and the Policy’s purpose and intent.

I hereby certify that the information contained below is true, complete, and accurate.

(If additional space is needed in any section, please attach additional pages. This text can be removed when your form is filed.)

I. The name of my current employer(s) or parties for whom I contract:


Organization	Position
Association Management Solutions (AMS)	Project Manager

II. The names of organizations for which I or a family member serves as a board member, officer, or director, or organizations for which I or a family member is the sole owner, co-owner, controlling shareholder, or significant shareholder (under the US Securities and Exchange Commission’s definition), other than for the IETF Administration LLC for which there is an actual or potential perceived conflict of interest:

Organization	Organization Type	Position
N/A	N/A	N/A

III. Other activities I participate in that may be in a similar area of activity as the IETF Administration LLC, or other potential conflicts of interests with my IETF Administration LLC responsibilities:

Organization	Organization Type	Involvement
N/A	N/A	N/A

Signature: 
Name: Liz Flynn
Date: Jan. 14, 2020

I, Stephanie McCammon, hereby acknowledge that I have received, read, and understand the Conflict of Interest Policy for the IETF Administration LLC (the “Policy”) provided to me. I also understand and acknowledge my responsibilities as a Covered Individual under the Policy which is, at all times, to adhere to the Policy and the Policy’s purpose and intent.

I hereby certify that the information contained below is true, complete, and accurate.

(If additional space is needed in any section, please attach additional pages. This text can be removed when your form is filed.)

I. The name of my current employer(s) or parties for whom I contract:

Organization	Position
Association Management Solutions, LLC	Senior Project Manager


II. The names of organizations for which I or a family member serves as a board member, officer, or director, or organizations for which I or a family member is the sole owner, co-owner, controlling shareholder, or significant shareholder (under the US Securities and Exchange Commission’s definition), other than for the IETF Administration LLC for which there is an actual or potential perceived conflict of interest:

Organization	Organization Type	Position
N/A	N/A	N/A

III. Other activities I participate in that may be in a similar area of activity as the IETF Administration LLC, or other potential conflicts of interests with my IETF Administration LLC responsibilities:

Organization	Organization Type	Involvement
N/A	N/A	N/A

(If additional space is needed in any section, please attach additional pages. This text can be removed when your form is filed.)

Signature: 

Name: Stephanie McCammon

Date: 01/16/2020

I, Sandy Ginoza, hereby acknowledge that I have received, read, and understand the Conflict of Interest Policy for the IETF Administration LLC (the "Policy") provided to me. I also understand and acknowledge my responsibilities as a Covered Individual under the Policy which is, at all times, to adhere to the Policy and the Policy's purpose and intent.

I hereby certify that the information contained below is true, complete, and accurate.

If additional space is needed in any section, please attach additional pages.

I. The name of my current employer(s) or parties for whom I contract:

Organization	Position
Association Management Solutions (AMS)	RPC Director

II. The names of organizations for which I, a family member, or a related party serves as a board member, officer, or director, or organizations for which I, a family member, or a related party is the sole owner, co-owner, controlling shareholder, or significant shareholder (under the US Securities and Exchange Commission's definition), other than for the IETF Administration LLC:

Organization	Organization Type	Position

III. Other activities I participate in that may be in a similar area of activity as the IETF Administration LLC, or other potential conflicts of interests with my IETF Administration LLC responsibilities:

Organization	Organization Type	Involvement

(if additional space is needed, please attach additional sheets)

Signature: _____  _____

Name: _____ Sandy Ginoza _____

Date: _____ 19 Feb 2020 _____

I, [INSERT NAME], hereby acknowledge that I have received, read, and understand the Conflict of Interest Policy for the IETF Administration LLC (the "Policy") provided to me. I also understand and acknowledge my responsibilities as a Covered Individual under the Policy which is, at all times, to adhere to the Policy and the Policy's purpose and intent.

I hereby certify that the information contained below is true, complete, and accurate.

(If additional space is needed in any section, please attach additional pages. This text can be removed when your form is filed.)

I. The name of my current employer(s) or parties for whom I contract:

Organization	Position
Association Management Solutions (AMS)	Executive Director
IETF Administration LLC	Managing Director, IETF Secretariat

II. The names of organizations for which I or a family member serves as a board member, officer, or director, or organizations for which I or a family member is the sole owner, co-owner, controlling shareholder, or significant shareholder (under the US Securities and Exchange Commission's definition), other than for the IETF Administration LLC for which there is an actual or potential perceived conflict of interest:


Organization	Organization Type	Position
Association Management Solutions (AMS)	Association Management Company	Founder (spouse)

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III. Other activities I participate in that may be in a similar area of activity as the IETF Administration LLC, or other potential conflicts of interests with my IETF Administration LLC responsibilities:

Organization	Organization Type	Involvement

(If additional space is needed in any section, please attach additional pages. This text can be removed when your form is filed.)

Signature: 
 Name: *Alexa Morris*
 Date: *15 January 2020*

I, [Karen Moreland], hereby acknowledge that I have received, read, and understand the Conflict of Interest Policy for the IETF Administration LLC (the "Policy") provided to me. I also understand and acknowledge my responsibilities as a Covered Individual under the Policy which is, at all times, to adhere to the Policy and the Policy's purpose and intent.

I hereby certify that the information contained below is true, complete, and accurate.

(If additional space is needed in any section, please attach additional pages. This text can be removed when your form is filed.)

I. The name of my current employer(s) or parties for whom I contract:

Organization	Position
Association Management Solutions	Founder
IETF Administration LLC	Accounting

II. The names of organizations for which I or a family member serves as a board member, officer, or director, or organizations for which I or a family member is the sole owner, co-owner, controlling shareholder, or significant shareholder (under the US Securities and Exchange Commission's definition), other than for the IETF Administration LLC for which there is an actual or potential perceived conflict of interest:

Organization	Organization Type	Position
Association Management Solutions	Association Management Company	Founder

III. Other activities I participate in that may be in a similar area of activity as the IETF Administration LLC, or other potential conflicts of interests with my IETF Administration LLC responsibilities:

Organization	Organization Type	Involvement

(If additional space is needed in any section, please attach additional pages. This text can be removed when your form is filed.)

Signature: *Karen Moreland*

Name: Karen Moreland

Date: January 13, 2020

I, Laura Nugent, hereby acknowledge that I have received, read, and understand the Conflict of Interest Policy for the IETF Administration LLC (the "Policy") provided to me. I also understand and acknowledge my responsibilities as a Covered Individual under the Policy which is, at all times, to adhere to the Policy and the Policy's purpose and intent.

I hereby certify that the information contained below is true, complete, and accurate.

(If additional space is needed in any section, please attach additional pages. This text can be removed when your form is filed.)

I. The name of my current employer(s) or parties for whom I contract:

Organization	Position
Association Management Solutions, LLC	Director, Meetings and Events

II. The names of organizations for which I or a family member serves as a board member, officer, or director, or organizations for which I or a family member is the sole owner, co-owner, controlling shareholder, or significant shareholder (under the US Securities and Exchange Commission's definition), other than for the IETF Administration LLC for which there is an actual or potential perceived conflict of interest:

Organization	Organization Type	Position
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III. Other activities I participate in that may be in a similar area of activity as the IETF Administration LLC, or other potential conflicts of interests with my IETF Administration LLC responsibilities:

Organization	Organization Type	Involvement
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(If additional space is needed in any section, please attach additional pages. This text can be removed when your form is filed.)

Signature:



Name:

Laura Nugent

Date:

2 Mar 2020