

LOCAL GOVERNMENT OFFICER CONFLICTS DISCLOSURE STATEMENT

FORM CIS

(Instructions for completing and filing this form are provided on the next page.)

This questionnaire reflects changes made to the law by H.B. 1491, 80th Leg., Regular Session.

This is the notice to the appropriate local governmental entity that the following local government officer has become aware of facts that require the officer to file this statement in accordance with Chapter 176, Local Government Code.

OFFICE USE ONLY

Date Received

1 Name of Local Government Officer

MIKE BARKOWSKY

2 Office Held

Klondike ISD Board Of Trustees

3 Name of person described by Sections 176.002(a) and 176.003(a), Local Government Code

Mike Barkowsky

4 Description of the nature and extent of employment or other business relationship with person named in item 3

N/A

5 List gifts accepted by the local government officer and any family member, excluding gifts described by Section 176.003(a-1), if aggregate value of the gifts accepted from person named in item 3 exceed \$250 during the 12-month period described by Section 176.003(a)(2)(B)

Date Gift Accepted N/A Description of Gift _____

Date Gift Accepted N/A Description of Gift _____

Date Gift Accepted N/A Description of Gift _____

(attach additional forms as necessary)

6 AFFIDAVIT

I swear under penalty of perjury that the above statement is true and correct. I acknowledge that the disclosure applies to a family member (as defined by Section 176.001(2), Local Government Code) of this local government officer. I also acknowledge that this statement covers the 12-month period described by Section 176.003(a), Local Government Code.



[Handwritten Signature]

Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said MIKE BARKOWSKY, this the 9th day of January, 20 23, to certify which, witness my hand and seal of office.

[Handwritten Signature]

Signature of officer administering oath

Steve McLaren

Printed name of officer administering oath

Superintendent

Title of officer administering oath

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OFFICE USE ONLY

Date Received

1 Name of Local Government Officer

RICKY BARKOWSKY

2 Office Held

Klondike ISD Board Of Trustees

3 Name of person described by Sections 176.002(a) and 176.003(a), Local Government Code

Ricky BARKOWSKY

4 Description of the nature and extent of employment or other business relationship with person named in item 3

NA

5 List gifts accepted by the local government officer and any family member, excluding gifts described by Section 176.003(a-1), if aggregate value of the gifts accepted from person named in item 3 exceed \$250 during the 12-month period described by Section 176.003(a)(2)(B)

Date Gift Accepted NA Description of Gift NA

Date Gift Accepted NA Description of Gift NA

Date Gift Accepted NA Description of Gift NA

(attach additional forms as necessary)

6 AFFIDAVIT

I swear under penalty of perjury that the above statement is true and correct. I acknowledge that the disclosure applies to a family member (as defined by Section 176.001(2), Local Government Code) of this local government officer. I also acknowledge that this statement covers the 12-month period described by Section 176.003(a), Local Government Code.



[Signature]
Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said RICKY BARKOWSKY, this the 9th day of January, 2023, to certify which, witness my hand and seal of office.

[Signature]
Signature of officer administering oath

Steve McLaren
Printed name of officer administering oath

Superintendent
Title of officer administering oath

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OFFICE USE ONLY

Date Received

1 Name of Local Government Officer

KENNY FERGUSON

2 Office Held

Klondike ISD Board Of Trustees

3 Name of person described by Sections 176.002(a) and 176.003(a), Local Government Code

Kenny Ferguson

4 Description of the nature and extent of employment or other business relationship with person named in item 3

N/A

5 List gifts accepted by the local government officer and any family member, excluding gifts described by Section 176.003(a-1), if aggregate value of the gifts accepted from person named in item 3 exceed \$250 during the 12-month period described by Section 176.003(a)(2)(B)

Date Gift Accepted *N/A* Description of Gift _____

Date Gift Accepted _____ Description of Gift _____

Date Gift Accepted _____ Description of Gift _____

(attach additional forms as necessary)

6 AFFIDAVIT

I swear under penalty of perjury that the above statement is true and correct. I acknowledge that the disclosure applies to a family member (as defined by Section 176.001(2), Local Government Code) of this local government officer. I also acknowledge that this statement covers the 12-month period described by Section 176.003(a), Local Government Code.



Kenny Ferguson
Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said KENNY FERGUSON, this the 9th day of January, 20 23, to certify which, witness my hand and seal of office.

Steve McLaren

Signature of officer administering oath

Steve McLaren

Printed name of officer administering oath

Superintendent

Title of officer administering oath

**LOCAL GOVERNMENT OFFICER
CONFLICTS DISCLOSURE STATEMENT**

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OFFICE USE ONLY

Date Received

1 Name of Local Government Officer

QUINTON KEARNEY

2 Office Held

Klondike ISD Board Of Trustees

3 Name of person described by Sections 176.002(a) and 176.003(a), Local Government Code

Quinton Kearney

4 Description of the nature and extent of employment or other business relationship with person named in item 3

N/A

5 List gifts accepted by the local government officer and any family member, excluding gifts described by Section 176.003(a-1), if aggregate value of the gifts accepted from person named in item 3 exceed \$250 during the 12-month period described by Section 176.003(a)(2)(B)

Date Gift Accepted N/A Description of Gift _____

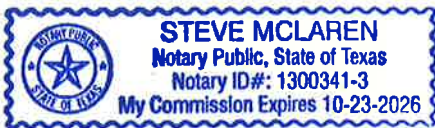
Date Gift Accepted _____ Description of Gift _____

Date Gift Accepted _____ Description of Gift _____

(attach additional forms as necessary)

6 AFFIDAVIT

I swear under penalty of perjury that the above statement is true and correct. I acknowledge that the disclosure applies to a family member (as defined by Section 176.001(2), Local Government Code) of this local government officer. I also acknowledge that this statement covers the 12-month period described by Section 176.003(a), Local Government Code.



[Signature]
Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said QUINTON KEARNEY, this the 9th day of January, 2023, to certify which, witness my hand and seal of office.

[Signature]
Signature of officer administering oath

Steve McLaren
Printed name of officer administering oath

Superintendent
Title of officer administering oath

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OFFICE USE ONLY

Date Received

1 Name of Local Government Officer

KELLEY O'BRIEN

2 Office Held

Klondike ISD Board Of Trustees

3 Name of person described by Sections 176.002(a) and 176.003(a), Local Government Code

KELLEY O'BRIEN

4 Description of the nature and extent of employment or other business relationship with person named in item 3

5 List gifts accepted by the local government officer and any family member, excluding gifts described by Section 176.003(a-1), if aggregate value of the gifts accepted from person named in item 3 exceed \$250 during the 12-month period described by Section 176.003(a)(2)(B)

Date Gift Accepted NA Description of Gift _____

Date Gift Accepted NA Description of Gift _____

Date Gift Accepted NA Description of Gift _____

(attach additional forms as necessary)

6 AFFIDAVIT

I swear under penalty of perjury that the above statement is true and correct. I acknowledge that the disclosure applies to a family member (as defined by Section 176.001(2), Local Government Code) of this local government officer. I also acknowledge that this statement covers the 12-month period described by Section 176.003(a), Local Government Code.



Kelley O'Brien
Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said KELLEY O'BRIEN, this the 9th day of January, 2023, to certify which, witness my hand and seal of office.

Steve McLaren
Signature of officer administering oath

Steve McLaren
Printed name of officer administering oath

Superintendent
Title of officer administering oath

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OFFICE USE ONLY

Date Received

1 Name of Local Government Officer

CODY KING

2 Office Held

Klondike ISD Board Of Trustees

3 Name of person described by Sections 176.002(a) and 176.003(a), Local Government Code

4 Description of the nature and extent of employment or other business relationship with person named in item 3

5 List gifts accepted by the local government officer and any family member, excluding gifts described by Section 176.003(a-1), if aggregate value of the gifts accepted from person named in item 3 exceed \$250 during the 12-month period described by Section 176.003(a)(2)(B)

Date Gift Accepted _____ Description of Gift _____

Date Gift Accepted _____ Description of Gift _____


Date Gift Accepted _____ Description of Gift _____

(attach additional forms as necessary)

6 AFFIDAVIT

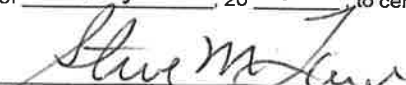
I swear under penalty of perjury that the above statement is true and correct. I acknowledge that the disclosure applies to a family member (as defined by Section 176.001(2), Local Government Code) of this local government officer. I also acknowledge that this statement covers the 12-month period described by Section 176.003(a), Local Government Code.




Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said CODY KING, this the 9th day of January, 20 23, to certify which, witness my hand and seal of office.



Signature of officer administering oath

Steve McLaren

Printed name of officer administering oath

Superintendent

Title of officer administering oath

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OFFICE USE ONLY

Date Received

1 Name of Local Government Officer

CLAY THIXTON

2 Office Held

Klondike ISD Board Of Trustees

3 Name of person described by Sections 176.002(a) and 176.003(a), Local Government Code

Clay Thixton

4 Description of the nature and extent of employment or other business relationship with person named in item 3

N/A

5 List gifts accepted by the local government officer and any family member, excluding gifts described by Section 176.003(a-1), if aggregate value of the gifts accepted from person named in item 3 exceed \$250 during the 12-month period described by Section 176.003(a)(2)(B)

Date Gift Accepted _____ Description of Gift *N/A*

Date Gift Accepted _____ Description of Gift *N/A*

Date Gift Accepted _____ Description of Gift *N/A*

(attach additional forms as necessary)

6 AFFIDAVIT

I swear under penalty of perjury that the above statement is true and correct. I acknowledge that the disclosure applies to a family member (as defined by Section 176.001(2), Local Government Code) of this local government officer. I also acknowledge that this statement covers the 12-month period described by Section 176.003(a), Local Government Code.



[Handwritten Signature]

Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said CLAY THIXTON, this the 9th day of January, 2023, to certify which, witness my hand and seal of office.

[Handwritten Signature]

Steve McLaren

Superintendent

Signature of officer administering oath

Printed name of officer administering oath

Title of officer administering oath