

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. 23, 84th 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 (employee) and ID#

Bret A. Champion

42778

2 Office Held (position)

Superintendent

3 Name of vendor described by Sections 176.001(7) and 176.003(a), Local Government Code (person related to that does business with KISD)

Show N/A if not applicable Lone Star College System

4 Description of the nature and extent of each employment or other business relationship and each family relationship with vendor named in item 3.

Show N/A if not applicable

Spouse, Marcee Champion, is an adjunct professor with Lone Star College/University Park

5 List gifts accepted by the local government officer and any family member, if aggregate value of the gifts accepted from vendor named in item 3 exceeds \$100 during the 12-month period described by Section 176.003(a)(2)(B).

Show N/A if not applicable

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

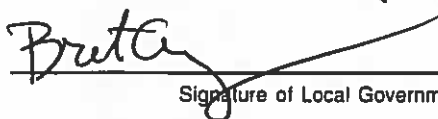
Date Gift Accepted N/A Description of Gift N/A

Date Gift Accepted N/A 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 each 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)(2)(B), Local Government Code.


Signature of Local Government Officer (employee)

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Bret Champion, this the 9th day of Sept., 20 16, to certify which, witness my hand and seal of office.


Signature of officer administering oath

Beverly McGlasson
Printed name of officer administering oath

Notary Public
Title of officer administering oath

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OFFICE USE ONLY

Date Received

1 Name of Local Government Officer

Bret A. Champion

2 Office Held

Superintendent

3 Name of vendor described by Sections 176.001(7) and 176.003(a), Local Government Code

The College Board

4 Description of the nature and extent of each employment or other business relationship and each family relationship with vendor named in item 3.

Bret Champion is a member of the Superintendent's Advisory Council of The College Board and will attend advisory council meetings out of state for which travel expenses are reimbursed by The College Board.

5 List gifts accepted by the local government officer and any family member, if aggregate value of the gifts accepted from vendor named in item 3 exceeds \$100 during the 12-month period described by Section 176.003(a)(2)(B).

Date Gift Accepted _____ Description of Gift _____

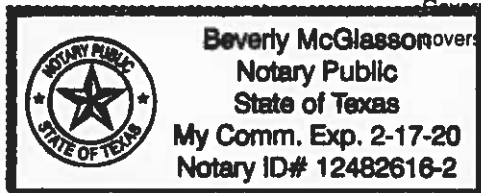
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Date Gift Accepted _____ Description of Gift _____

(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 each 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)(2)(B), Local Government Code.



Bret A. Champion
Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Bret A. Champion, this the 12th day of Dec., 2016, to certify which, witness my hand and seal of office.

Beverly McGlasson
Signature of officer administering oath

Beverly McGlasson
Printed name of officer administering oath

Notary Public
Title of officer administering oath