UNIFORM CONFLICT OF INTEREST DISCLOSURE STATEMENT  
(Pursuant to and in Compliance with Indiana Code §35-44-1-3)

A public servant that knowingly or intentionally has a pecuniary interest in or derives a profit from a contract or purchase connected with an action by the governmental entity served by the public servant has a conflict of interest subject to disclosure. A public servant has a pecuniary interest in a contract or purchase if the contract or purchase will result or is intended to result in an ascertainable increase in the income or net worth of the public servant or a dependent of the public servant. “Dependent” means any of the following: the spouse of a public servant; a child, stepchild, or adoptee (as defined in I.C. 31-9-2-2) of a public servant who is unemancipated and less than eighteen (18) years of age; and any individual more than one-half (1/2) of whose support is provided during a year by the public servant.

1. Name and address of Public Servant submitting statement: 
   JEANNING BUTLER,  
   514 N. Fess Ave, Bloomington, IN 47405

2. Title or position with Governmental Entity: 
   President, School Board Member

3. a. Governmental Entity: MCCSC
   b. County: Monroe

4. This statement is submitted (check one):
   a. ___ as a “single transaction” disclosure statement, as to my financial interest in a specific contract or purchase connected with the governmental entity which I serve, proposed to be made by the governmental entity with or from a particular contractor or vendor; or
   b. X as an “annual” disclosure statement, as to my financial interest connected with any contracts or purchases of the governmental entity, which I serve, which are made on an ongoing basis with or from particular contractors or vendors.

5. Name(s) of Contractor(s) or Vendor(s): CENTER ON EDUCATION AND LIFELONG LEARNING (CELL), IJ DC, BLOOMINGTON, IN

6. Description of Contract(s) or Purchase(s) [Describe the kind of contract involved, and the effective date and term of the contract or purchase if reasonably determinable. Dates required if 4(a) is selected above. If “dependent” is involved, provide dependent’s name and relationship]:
   Contracts for Educational Services between Cell and MCCSC.


7. **Description of My Financial Interest**: [Describe in what manner the public servant or "dependent" expects to derive a profit or financial benefit from, or otherwise has a pecuniary interest in, the above contract(s) or purchase(s); if reasonably determinable, state the approximate dollar value of such profit or benefit.]

   **NONE - RESIDE WITH DIRECTOR OF CELL.**

   (Attach extra pages if additional space is needed.)

8. **Approval of Appointing Officer or Body**: [To be completed if the public servant was appointed by an elected public servant or the Board of Trustees of a state-supported college or university]: I (We) being the **Board of School Trustees of the Monroe County Community School Corporation** and having the power to appoint the above named public servant to the public position to which he or she holds, hereby approve the participation of the appointed disclosing public servant in the above described contract(s) or purchase(s) in which said public servant has a conflict of interest as defined in Indiana Code §35-44-1-3; however, this approval does not waive any objection to any conflict prohibited by statute, rule, or regulation and is not to be construed as a consent to any illegal act.

   President, Board of Trustees

   __________

   Vice President, Board of Trustees

   __________

   Secretary, Board of Trustees

9. **Effective Dates**: [Conflict of Interest statements must be submitted to the governmental entity prior to final action on the contract or purchase.]

   **12/2/07**

   Date Submitted

   **12/2/07**

   Date of Action on Contract or Purchase

10. **Affirmation of Public Servant**: This disclosure was submitted to the governmental entity prior to final action on the contract or purchase. I affirm, under penalty of perjury, the truth and completeness of the statements made above, and that I am the above named public servant.

   **Signature of Public Servant**

   **12/2/07**

   Date

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**Filing Requirements**: Within fifteen (15) days following execution, copies of this statement must be filed with the State Board of Accounts, Room 912 State Office Building, Indianapolis, Indiana 46204, and the Clerk of the Circuit Court of the county in which the governmental entity executed the contract or purchase. A copy of this disclosure will be forwarded to the Indiana State Ethics Committee.

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**Revised: March 2003**
A public servant that knowingly or intentionally has a pecuniary interest in or derives a profit from a contract or purchase connected with an action by the governmental entity served by the public servant has a conflict of interest subject to disclosure. A public servant has a pecuniary interest in a contract or purchase if the contract or purchase will result or is intended to result in an ascertainable increase in the income or net worth of the public servant or a dependent of the public servant. “Dependent” means any of the following: the spouse of a public servant; a child, stepchild, or adoptee (as defined in I.C. 31-9-2-2) of a public servant who is unemancipated and less than eighteen (18) years of age; and any individual more than one-half (1/2) of whose support is provided during a year by the public servant.

1. Name and address of Public Servant submitting statement: KEITH K. KLEIN 1046 S. Graywell Dr. Bloomington, IN 47401

2. Title or position with Governmental Entity: Board Member

3. a. Governmental Entity: Monroe County Community School Corporation
   b. County: Monroe

4. This statement is submitted (check one):
   a. ____ as a “single transaction” disclosure statement, as to my financial interest in a specific contract or purchase connected with the governmental entity which I serve, proposed to be made by the governmental entity with or from a particular contractor or vendor; or
   b. √ as an “annual” disclosure statement, as to my financial interest connected with any contracts or purchases of the governmental entity, which I serve, which are made on an ongoing basis with or from particular contractors or vendors.

5. Name(s) of Contractor(s) or Vendor(s):

6. Description of Contract(s) or Purchase(s) [Describe the kind of contract involved, and the effective date and term of the contract or purchase if reasonably determinable. Dates required if 4(a) is selected above. If “dependent” is involved, provide dependent’s name and relationship]:


7. **Description of My Financial Interest** [Describe in what manner the public servant or "dependent" expects to derive a profit or financial benefit from, or otherwise has a pecuniary interest in, the above contract(s) or purchase(s); if reasonably determinable, state the approximate dollar value of such profit or benefit.]:

I AM A IHRA OFFICIAL AND COULD WORK AT AN MCCSC SCHOOL - HOME OR AWAY

(Attach extra pages if additional space is needed.)

8. **Approval of Appointing Officer or Body** [To be completed if the public servant was appointed by an elected public servant or the Board of Trustees of a state-supported college or university]: I (We) being the **Board of School Trustees of the Monroe County Community School Corporation** and having the power to appoint the above named public servant to the public position to which he or she holds, hereby approve the participation of the appointed disclosing public servant in the above described contract(s) or purchase(s) in which said public servant has a conflict of interest as defined in Indiana Code §35-44-1-3; however, this approval does not waive any objection to any conflict prohibited by statute, rule, or regulation and is not to be construed as a consent to any illegal act.

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President, Board of Trustees  
Vice President, Board of Trustees  
Secretary, Board of Trustees

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9. **Effective Dates** [Conflict of Interest statements must be submitted to the governmental entity prior to final action on the contract or purchase.]:

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Date Submitted  
Date of Action on Contract or Purchase

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10. **Affirmation of Public Servant**: This disclosure was submitted to the governmental entity prior to final action on the contract or purchase. I affirm, under penalty of perjury, the truth and completeness of the statements made above, and that I am the above named public servant.

Signed: [Signature of Public Servant]  
Date: 12-15-09

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**Filing Requirements**: Within fifteen (15) days following execution, copies of this statement must be filed with the State Board of Accounts, Room 912 State Office Building, Indianapolis, Indiana 46204, and the Clerk of the Circuit Court of the county in which the governmental entity executed the contract of or purchase. A copy of this disclosure will be forwarded to the Indiana State Ethics Committee.

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Revised: March 2003
UNIFORM CONFLICT OF INTEREST DISCLOSURE STATEMENT  
(Pursuant to and in Compliance with Indiana Code §35-44-1-3)

A public servant that knowingly or intentionally has a pecuniary interest in or derives a profit from a contract or purchase connected with an action by the governmental entity served by the public servant has a conflict of interest subject to disclosure. A public servant has a pecuniary interest in a contract or purchase if the contract or purchase will result or is intended to result in an ascertainable increase in the income or net worth of the public servant or a dependent of the public servant. “Dependent” means any of the following: the spouse of a public servant; a child, stepchild, or adoptee (as defined in I.C. 31-9-2-2) of a public servant who is unemancipated and less than eighteen (18) years of age; and any individual more than one-half (1/2) of whose support is provided during a year by the public servant.

1. Name and address of Public Servant submitting statement:  
   
   [Signature]  
   
   [Address]

2. Title or position with Governmental Entity:  
   [Position]

3. a. Governmental Entity:  
   [Name]

   b. County:  
   [County]

4. This statement is submitted (check one):
   a. ___ as a “single transaction” disclosure statement, as to my financial interest in a specific contract or purchase connected with the governmental entity which I serve, proposed to be made by the governmental entity with or from a particular contractor or vendor; or

   b. X ___ as an “annual” disclosure statement, as to my financial interest connected with any contracts or purchases of the governmental entity, which I serve, which are made on an ongoing basis with or from particular contractors or vendors.

5. Name(s) of Contractor(s) or Vendor(s):  
   [Name]

6. Description of Contract(s) or Purchase(s) [Describe the kind of contract involved, and the effective date and term of the contract or purchase if reasonably determinable. Dates required if 4(a) is selected above. If “dependent” is involved, provide dependent’s name and relationship]:  
   [Description]

7. Signature:  
   [Signature]
7. **Description of My Financial Interest** [Describe in what manner the public servant or “dependent” expects to derive a profit or financial benefit from, or otherwise has a pecuniary interest in, the above contract(s) or purchase(s), if reasonably determinable, state the approximate dollar value of such profit or benefit.]

(NONE)

(Attach extra pages if additional space is needed.)

8. **Approval of Appointing Officer or Body** [To be completed if the public servant was appointed by an elected public servant or the Board of Trustees of a state-supported college or university; I (We) being the Board of School Trustees of the Monroe County Community School Corporation and having the power to appoint the above named public servant to the public position to which he or she holds, hereby approve the participation of the appointed disclosing public servant in the above described contract(s) or purchase(s) in which said public servant has a conflict of interest as defined in Indiana Code §35-44-1-3; however, this approval does not waive any objection to any conflict prohibited by statute, rule, or regulation and is not to be construed as a consent to any illegal act.]

President, Board of Trustees

Vice President, Board of Trustees

Secretary, Board of Trustees

9. **Effective Dates** [Conflict of Interest statements must be submitted to the governmental entity prior to final action on the contract or purchase.]

**12/1/09**

_Date Submitted_ 

_Date of Action on Contract or Purchase_

10. **Affirmation of Public Servant:** This disclosure was submitted to the governmental entity prior to final action on the contract or purchase I affirm, under penalty of perjury, the truth and completeness of the statements made above, and that I am the above named public servant.

_Signed:_

(Signature of Public Servant)

_Date:_

(Date)

**Filing Requirements:** Within fifteen (15) days following execution, copies of this statement must be filed with the State Board of Accounts, Room 912 State Office Building, Indianapolis, Indiana 46204, and the Clerk of the Circuit Court of the county in which the governmental entity executed the conflict of or purchase. A copy of this disclosure will be forwarded to the Indiana State Ethics Committee.

Revised: March 2003
UNIFORM CONFLICT OF INTEREST DISCLOSURE STATEMENT
(Pursuant to and in Compliance with Indiana Code §35-44-1-3)

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1. Name and address of Public Servant submitting statement: Victoria J. Streiff
   1136 W Pine Meadows Dr, Bloomington IN 47403

2. Title or position with Governmental Entity: Trustee

3. a. Governmental Entity: MCCSC
   b. County: Monroe

4. This statement is submitted (check one):
   a. _____ as a “single transaction” disclosure statement, as to my financial interest in a specific contract or purchase connected with the governmental entity which I serve, proposed to be made by the governmental entity with or from a particular contractor or vendor; or
   b. ☑ as an “annual” disclosure statement, as to my financial interest connected with any contracts or purchases of the governmental entity, which I serve, which are made on an ongoing basis with or from particular contractors or vendors.

5. Name(s) of Contractor(s) or Vendor(s): N/A

6. Description of Contract(s) or Purchase(s) [Describe the kind of contract involved, and the effective date and term of the contract or purchase if reasonably determinable. Dates required if 4(a) is selected above. If “dependent” is involved, provide dependent’s name and relationship]: N/A
7. **Description of My Financial Interest** [Describe in what manner the public servant or "dependent" expects to derive a profit or financial benefit from, or otherwise has a pecuniary interest in, the above contract(s) or purchase(s); if reasonably determinable, state the approximate dollar value of such profit or benefit.]

N/A

(Attach extra pages if additional space is needed.)

8. **Approval of Appointing Officer or Body** [To be completed if the public servant was appointed by an elected public servant or the Board of Trustees of a state-supported college or university: I (We) being the Board of School Trustees of the Monroe County Community School Corporation and having the power to appoint the above named public servant to the public position to which he or she holds, hereby approve the participation of the appointed disclosing public servant in the above described contract(s) or purchase(s) in which said public servant has a conflict of interest as defined in Indiana Code §35-44-1-3; however, this approval does not waive any objection to any conflict prohibited by statute, rule, or regulation and is not to be construed as a consent to any illegal act.

President, Board of Trustees

Vice President, Board of Trustees

Secretary, Board of Trustees

9. **Effective Dates** [Conflict of Interest statements must be submitted to the governmental entity prior to final action on the contract or purchase.]

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10. **Affirmation of Public Servant**: This disclosure was submitted to the governmental entity prior to final action on the contract or purchase I affirm, under penalty of perjury, the truth and completeness of the statements made above, and that I am the above named public servant.

Signed: [Signature of Public Servant]

Date: December 1, 2009

**Filing Requirements**: Within fifteen (15) days following execution, copies of this statement must be filed with the State Board of Accounts, Room 912 State Office Building, Indianapolis, Indiana 46204, and the Clerk of the Circuit Court of the county in which the governmental entity executed the conflict of or purchase. A copy of this disclosure will be forwarded to the Indiana State Ethics Committee.