Conflict of Interest Policy – Board of Directors
PEDERNALES ELECTRIC COOPERATIVE, INC.

Conflict of Interest Certification and Disclosure Form

As defined in the Pedernales Electric Cooperative, Inc. Conflict of Interest Policy (Policy), the undersigned Official states:

1.   I affirm that I have received or have access to, have read, and understand the most current version of the Policy;

2.   I agree to comply with the Policy;

3.   Based upon my good faith belief, to the best of my knowledge, and except as disclosed below, I certify that I currently comply with the Policy;

4.   I disclose the following information or facts regarding any Potential Conflict or any actual income, employment, compensation, Conflicting Interest Transaction, Business Opportunity, or pecuniary benefit, or other information or fact, that could impact my compliance with the Policy:

> *Pedernales Electric Cooperative is deliberating a potential real estate transaction within the City of Marble Falls. A potential party to that transaction is an entity owned in part by a member of the Burnet County Commissioners Court. Although I have no financial interest in the transaction, I am recusing myself from deliberation and participation on the contemplated transaction to avoid the suggestion that my objectivity would be impaired.*

5.   Upon discovering any information or fact regarding any Potential Conflict or any actual income, employment, compensation, Conflicting Interest Transaction, Business Opportunity, or pecuniary benefit, or other information or fact, that could impact my compliance, or another Official's compliance, with the Policy, I agree to disclose this information or fact to the Cooperative's President or Chief Executive Officer; and

Upon not complying with the Policy, I agree to any sanction, disqualification, removal, or other action taken under the Policy, consistent with law and the Cooperative Bylaws.

Printed Name of Official: James Oakley

Position of Official: Director, District 5

Date: September 18, 2020

Signature of Official: _____