



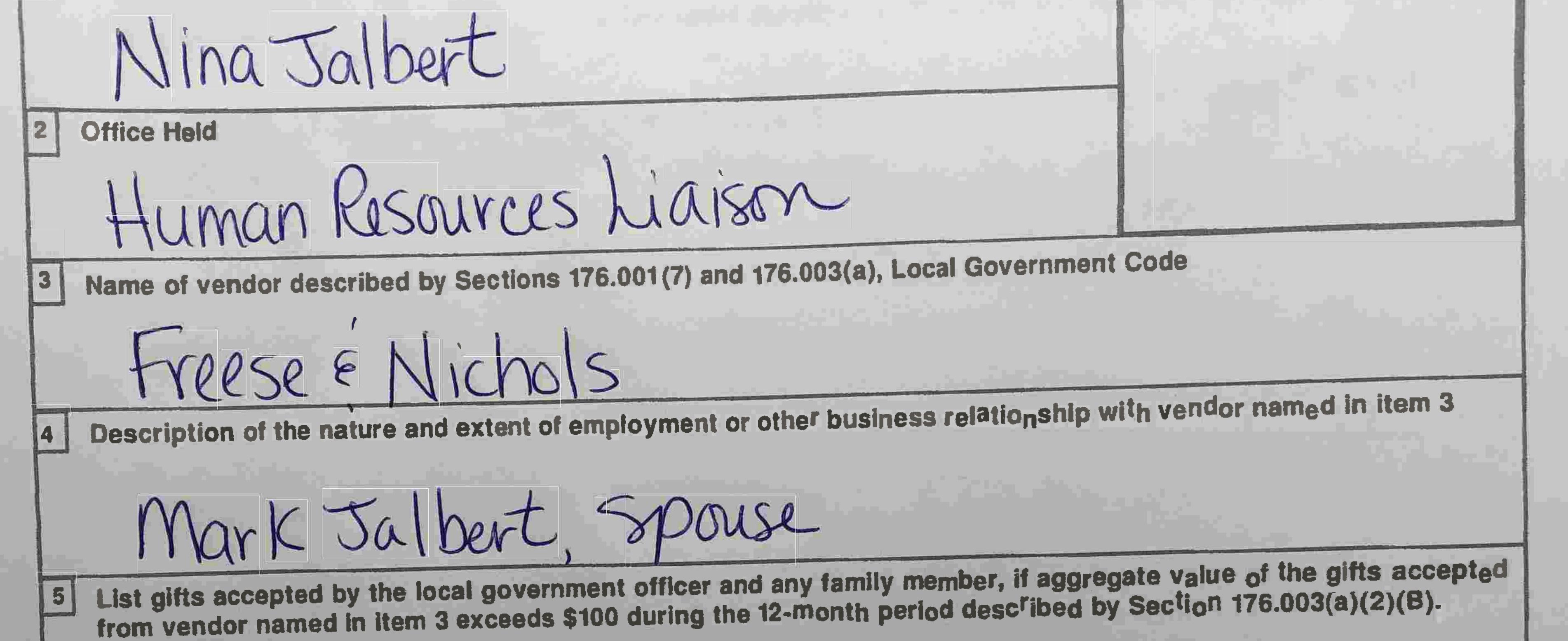
LOCAL GOVERNMENT OFFICER **CONFLICTS DISCLOSURE STATEMENT**

(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.

Name of Local Government Officer



Date Gift Accepted

Date Gift Accepted

Description of Gift

Date Gift Accepted

Description of Gift

(attach additional forms as necessary)

Description of Gift

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

, this the

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said

, to certify which, witness my hand and seal of office.

Signature of officer administering oath

Printed name of officer administering oath

Title of officer administering oath

Adopted 8/7/2015

day

FORM CIS

OFFICEUSE ONLY

Date Received