17-103 ASR Demonstration Well Study Amendment No 2

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

OFFICE USE ONLY

FORM CIS

Date Received

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
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 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

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said

20

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

Signature of officer administering oath

of

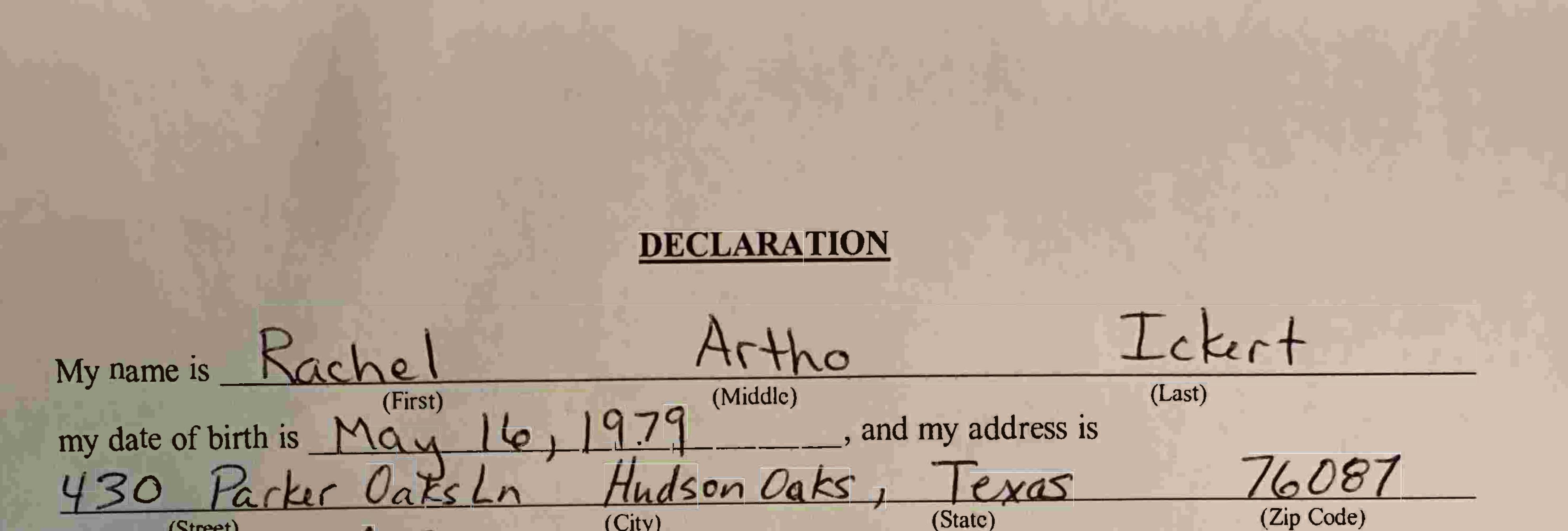
Printed name of officer administering oath

Title of officer administering oath

this the

Adopted 8/7/2015

day



(City) (State) (Zip Code) and Parke United States. I declare under penalty of per jury that the foregoing is true and correct. (Country)

on the 2Z day of era s Ulle 2

Declarant

Machul

