FORM CIS

This questionnaire reflects changes made to the law by H.B. 23, 84th Leg., Regular Session.	OFFICE USE ONLY
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.	Date Received
Name of Local Government Officer	
Mark Aldrich Trustee	
2 Office Held	
Truston	
3 Name of vendor described by Sections 176.001(7) and 176.003(a), Local Government	
Code	
4 Description of the nature and extent of each employment or other business relationshi	p and each family relationship
with vendor named in item 3.	
5 List gifts accepted by the local government officer and any family member, if aggreg from vendor named in item 3 exceeds \$100 during the 12-month period described by	ate value of the gifts accepted Section 176.003(a)(2)(B).
Description of Oith M/A	
Date Gift Accepted Description of Gift	
Date Gift Accepted Description of Gift	
Date Gift Accepted Description of Gift	
(attach additional forms as necessary)	
I swear under penalty of perjury that the above statement is true and correct. I ackrete to each family member (as defined by Section 176.001(2), Local Government Codalso acknowledge that this statement covers the 12-month period described by Section 176.001(2).	e) of this local government officer. I tion 176.003(a)(2)(B), Local
40' 1 R F 0 - W	Government Officer
NOTARY STAMP/SEAL Sworn to and subscribed before me by A Wich this the	St day of March.
20 to certify which, witness my hand and seal of office.	Motor
Yullu fun	Title of officer administering oath
Signature of officer administering oath Printed name of officer administering oath	The dramat deministring sum
OR	
(2) Unsworn Declaration	7.
My name is Mark Aldrich, and my date of birth is	11/25/61
My address is 4707 FM (009 , Nome, T	X. 7764 Jetterson
(street) (city) (state of TX , on the 18th day of May (month)	991
Signature of Local Gove	rnment Officer (Declarant)

FORM CIS

This questionnaire reflects changes made to the law by H.B. 23, 84th Leg., Regular Session.	OFFICE USE ONLY
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.	Date Received
1 Name of Local Government Officer	
HNOREN BROOKS	
2 Office Held	
TRUST EE	
3 Name of vendor described by Sections 176.001(7) and 176.003(a), Local Government	
Code	
Description of the nature and extent of each employment or other business relationshi with vendor named in item 3.	
5 List gifts accepted by the local government officer and any family member, if aggreg from vendor named in item 3 exceeds \$100 during the 12-month period described by	ate value of the gifts accepted 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)	
I swear under penalty of perjury that the above statement is true and correct. I ack to each family member (as defined by Section 176.001(2), Local Government Cod also acknowledge that this statement covers the 12-month period described by Section 176.001(2). Signature of Local Please complete either option below:	e) of this local government officer.
Signature of Local	Government Officer
Please complete either option below:	
NOTARY STAMP/SEAL MOCKA DOCAL DOCAL	Str. March
Sworn to and subscribed before me by ALOROW DIOUNS this the	day of I'W'CC
20 to certify which, witness my hand and seal of office.	MALAVII
James Jans Laure Starr	Notarg
Signature of officer administering oath Printed name of officer administering oath	Title of officer administering oath
OR	
(2) Unsworn Declaration	
My name is, and my date of birth is	
My address is	
	e) (zip code) (country)
Executed in county, State of, on the day of (month)	, 20
(month)	(yeai <i>)</i>
Signature of Local Gove	rnment Officer (Declarant)

LOCAL GOVERNMENT OFFICER CONFLICTS DISCLOSURE STATEMENT (Instructions for completing and filing this form are provided on the next page.)

FORM CIS

This questionnaire reflects changes made to the law by H.B. 23, 84th Leg., Regular Session.	OFFICE USE ONLY
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.	Date Received
Name of Local Government Officer Jason T. Dickerson	
Board Trustee	
Name of vendor described by Sections 176.001(7) and 176.003(a), Local Government Code	
Description of the nature and extent of each employment or other business relationshi with vendor named in item 3.	
List gifts accepted by the local government officer and any family member, if aggreg from vendor named in item 3 exceeds \$100 during the 12-month period described by	ate value of the gifts accepted Section 176.003(a)(2)(B).
Date Gift Accepted Description of Gift	f
Date Gift Accepted Description of Gift	
Date Gift Accepted Description of Gift	-
(attach additional forms as necessary)	
Please complete either option below:	
(2) Unsworn Declaration	
(a) Chonom Bookitation	
My name is, and my date of birth is	
My address is,,,	_1
(street) (city) (state	e) (zip code) (country)
Executed in County, State of, on the day of (month)	, 20 (year)
Signature of Local Gover	nment Officer (Declarant)

FORM CIS

This questionnaire reflects changes made to the law by H.B. 23, 84th Leg., Regular Session.	OFFICE USE ONLY
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.	Date Received
Name of Local Government Officer	
Jonathan E Horkett Jr	
2 Office Held	
Board Trustee	
3 Name of vendor described by Sections 176.001(7) and 176.003(a), Local Government Code	
Description of the nature and extent of each employment or other business relationshi with vendor named in item 3.	
List gifts accepted by the local government officer and any family member, if aggreg from vendor named in item 3 exceeds \$100 during the 12-month period described by	gate value of the gifts accepted 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)	
I swear under penalty of perjury that the above statement is true and correct. I ack to each family member (as defined by Section 176.001(2), Local Government Cod also acknowledge that this statement covers the 12-month period described by Section 176.001 (2), Local Government Code.	e) of this local government officer. I
Please complete either option below:	Government Officer
Sworn to and subscribed before the by MAH Has helt Jr. this the J	8th day of Mrch.
20 to certify which, witness my hand and seal of office.	Molavi
Julio Jan Lulie Starr	MUKUY
Signature of officer administering oath Printed name of officer administering oath	Title of efficer administering oath
OR	
(2) Unsworn Declaration	
My name is, and my date of birth is	
My address is	
	e) (zip code) (country)
Executed in County, State of on the day of (month)	, 20
Signature of Local Gove	ernment Officer (Declarant)

LOCAL GOVERNMENT OFFICER CONFLICTS DISCLOSURE STATEMENT (Instructions for completing and filing this form are provided on the next page.)

FORM CIS

This questionnaire reflects changes made to the law by H.B. 23, 84th Leg., Regular Session.	OFFICE USE ONLY
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.	Date Received
Name of Local Government Officer James Padgett	
2 Office Held	
Name of vendor described by Sections 176.001(7) and 176.003(a), Local Government	
Code	
Description of the nature and extent of each employment or other business relationship with vendor named in item 3.	
List gifts accepted by the local government officer and any family member, if aggregation from vendor named in item 3 exceeds \$100 during the 12-month period described by	ate value of the gifts accepted Section 176.003(a)(2)(B).
Date Gift Accepted Description of Gift	<u> </u>
Date Gift Accepted Description of Gift	
Date Gift Accepted Description of Gift	
(attach additional forms as necessary) SIGNATURE I swear under penalty of perjury that the above statement is true and correct. I ackn	
to each family member (as defined by Section 176.001(2), Local Government Code also acknowledge that this statement covers the 12-month period described by Section 176.001(2), Local Government Code also acknowledge that this statement covers the 12-month period described by Section 176.001(2), Local Government Code also acknowledge that this statement covers the 12-month period described by Section 176.001(2), Local Government Code also acknowledge that this statement covers the 12-month period described by Section 176.001(2), Local Government Code also acknowledge that this statement covers the 12-month period described by Section 176.001(2), Local Government Code also acknowledge that this statement covers the 12-month period described by Section 176.001(2), Local Government Code also acknowledge that this statement covers the 12-month period described by Section 176.001(2), Local Government Code also acknowledge that this statement covers the 12-month period described by Section 176.001(2), Local Government Code also acknowledge that this statement covers the 12-month period described by Signature of Local Government Code also acknowledge that this statement covers the 12-month period described by Signature of Local Government Code also acknowledge that this statement covers the 12-month period described by Signature of Local Government Code also acknowledge that this statement covers the 12-month period described by Signature of Local Government Code also acknowledge that this statement covers the 12-month period described by Signature of Local Government Code also acknowledge that this statement covers the 12-month period described by Signature of Local Government Code also acknowledge that the 12-month period described by Signature of Local Government Code also acknowledge that the 12-month period described by Signature of Local Government Code also acknowledge the 12-month period described by Signature of Local Government Code also acknowledge that the 12-month period described by Signature of Local Gove	tion 176.003(a)(2)(B), Local
(2) Unsworn Declaration	
My name is, and my date of birth is	
My address is,	(rin code) (squartru)
(5.35)	e) (zip code) (country)
Executed in County, State of on the day of (month)	(year)
Signature of Local Gover	nment Officer (Declarant)

FORM CIS

This questionnaire reflects changes made to the law by H.B. 23, 84th Leg., Regular Session.	OFFICE USE ONLY
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.	Date Received
Name of Local Government Officer	
ALEX J. STELLY JR.	
2 Office Held	
BOARD MEMBER	
Name of vendor described by Sections 176.001(7) and 176.003(a), Local Government	
Code	
Description of the nature and extent of each employment or other business relationshi with vendor named in item 3.	
List gifts accepted by the local government officer and any family member, if aggreg from vendor named in item 3 exceeds \$100 during the 12-month period described by	ate value of the gifts accepted 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)	
Please complete either option below: NOTARY STAMPISEAL Sworn to and subscribed before me by Alex Selly W. this the	Government Officer
20 27 , to certify which, witness my hand and seal of office.	Notari
Signature of officer administering oath Printed name of officer administering oath	Title of officer administering oath
OR	
(2) Unsworn Declaration	
My name is, and my date of birth is	
My address is,,	J
(street) (city) (state	e) (zip code) (country)
Executed in County, State of, on the day of(month)	, 20
Signature of Local Gove	rnment Officer (Declarant)

LOCAL GOVERNMENT OFFICER CONFLICTS DISCLOSURE STATEMENT (Instructions for completing and filing this form are provided on the

FORM CIS

-	(Inst	tructions for completing and filin	g this form are provided on the next	I ONW C
		made to the law by H	D 22 0441 4	
T	This is the notice to the government officer has be	appropriate local governmen	tal entity that the following local	OFFICE USE ONLY
ir	n accordance with Chapte	ecome aware of facts that requ er 176, Local Government Cod	tal entity that the following local ire the officer to file this statement	Date Received
1	Name of Local Govern	ment Office	le.	
	BEAT	ment Officer		
2	Office Held	ulters	€.	1
	^			-
-	Position			
3 (Name of vendor describe	ed by Sections 176.001(7) and	d 176.003(a), Local Government	
		, , , , , , , , , , , , , , , , , , , ,	(a), Local Government	
4	Decorinties			
	with vendor named in its	e and extent of each employm	ent or other business roleties in	
	manned III (to	em 3.	ent or other business relationshi	p and each family relationsh
5 1	List gifts accomtad to it			
1	rom vendor named in it	em 3 exceeds \$100 during the	nd any family member, if aggrega e 12-month period described by	ate value of the nifts account
r	Data Citt A	and the same of th	12-month period described by	Section 176.003(a)(2)(B).
		———— Description of Gif	4	
	Date Gift Accepted	Description of Off	t	
		Description of Gift _		
		(attach aughinna)	TOTME OF THE	
		TIUCI DENAITY OF POPULAR ALEXAN		
	also asker	imily member (as defined by Section	n 176.001(2), Local Government Code	vledge that the disclosure applies
	Governme	owledge that this statement covers t	e statement is true and correct. I acknown 176.001(2), Local Government Code) the 12-month period described by Section	of this local government officer.
	22111166811111		A Section	176.003(a)(2)(B), Local
	ENIN DRIE	STATING	#/////	
	MARY A	0. 9	signature of Local Go te either option below:	vernment Officer
N. alem	. 10	Please comple	te either option bolows	
Atti	davit 2	SO	and option below:	2
Mor	ARY STAMP/SEAL 03/28/	~~/ I		
NOI	ARY STAMP/SEAL 03/28/	2077 2 3		
vorn t	o, and subscribed before 3	by Brent Walter	1010	
21	1	BUNCHALT WALLY	this the	March
1	to certify which with	less my hand and seal of office.		day of March
nature	ama puo	Lallvie	Shr	Malax
loture	of officer administering oath	Printed name of officer a	administering out	NOYCUY
				Title of officer administering oath
Unsv	worn Declaration	OR		
name	is			
			, and my date of birth is	
	is ss is		, and my date of birth is	-
addres	ss is	(street)		
addres	ss is	(street)	(city) (state) (z	rip code) (country)
addres	ss is			rip code) (country)
addres	ss is	(street) Dunty, State of, or	(city) (state) (z	rip code) (country) , 20 (year)