FORM CIS

	- 15 - 15 - 17 - 17 - 17 - 17 - 17 - 17		
		to the law by H.B. 23, 84th Leg., Regular Session.	OFFICE USE ONLY
This is the notice to government officer hin accordance with C	as become aware o	ocal governmental entity that the following local of facts that require the officer to file this statement Government Code.	Date Received
1 Name of Local Go	overnment Officer		
Stephanie Mo	endoza		
2 Office Held			
General Acc	ountant		
3 Name of vendor	described by Section	ons 176.001(7) and 176.003(a), Local Government	Code
N/A			
4 Description of th with vendor nam		of each employment or other business relationshi	p and each family relationship
N/A			
5 List gifts accepte from vendor nam	ed by the local gov ned in item 3 excee	ernment officer and any family member, if aggreg ds \$100 during the 12-month period described by	ate value of the gifts accepted Section 176.003(a)(2)(B).
Date Gift Accepte	edN/A	Description of GiftN/A	
Date Gift Accepte	ed	Description of Gift	
Date Gift Accepte	ed	Description of Gift	
_		(attach additional forms as necessary)	
3/0/1/6	ANETTE WILEY FRENCH TARY PUBLIC - STATE OF TEXAS D# 13066682-1 MM. EXP. 05-18-2020	I swear under penalty of perjury that the above statement that the disclosure applies to each family member (as def Government Code) of this local government officer. I also covers the 12-month period described by Section 176.003(ined by Section 176.001(2), Local acknowledge that this statement
	STAMP / SEAL ABOV	CHEDNANIE IV landoza	this the 10th day
Signature of office	er administering gath	Printed name of officer administering oath	Title of officer administering oath

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	
Julieta G. Rodriguez	
2 Office Held	
Payroll Accountant	
Name of vendor described by Sections 176.001(7) and 176.003(a), Local Government	Code
N/A	
Description of the nature and extent of each employment or other business relationsh with vendor named in item 3.	ip and each family relationship
N/A	
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 that the disclosure applies to each family member (as de Government Code) of this local government officer. I als covers the 12-month period described by Section 176.003 JEANETTE WILEY FRENCH NOTARY PUBLIC-STATE OF TEXAS IDE 1 3 0 6 6 6 8 2 - 1 COMM. EXP. 05-18-2020 Signature of Local	fined by Section 176.001(2), Local o acknowledge that this statement
AFFIX NOTARY STAMP / SEAL ABOVE	Inth
of MWCh , 20 17 , to certify which, witness my hand and seal of office.	, this the day
Canotte Wisherel Jeanette W. French	tirchasing ecretur
Signature of officer administering oath Printed name of officer administering oath	Title of officer administering oath

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	
Rosanna McDonald	is the second of
2 Office Held	distant for a long of the
Federal Programs Accountant	ett
Name of vendor described by Sections 176.001(7) and 176.003(a), Local Government	Code
N/A	Section 1 1 1 1 1 2 1 1 1 1 1 1 1 1 1 1 1 1 1
Description of the nature and extent of each employment or other business relationshi with vendor named in item 3. N/A	p and each family relationship
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 N/A	
Date Gift Accepted Description of Gift	170 man in the property of the party of the
Date Gift Accepted Description of Gift	of the stop paris to
(attach additional forms as necessary)	n in the state of
I swear under penalty of perjury that the above statement that the disclosure applies to each family member (as def Government Code) of this local government officer. I also covers the 12-month period described by Section 176.0036 Comm. Exp. 05-18-2020 Signature of Local code	ined by Section 176.001(2), Local b acknowledge that this statement
Sworn to and subscribed before me, by the said Rosanna McDonald of March, 2015, to certify which, witness my hand and seal of office.	, this the day
Signature of officer administering oath Printed name of officer administering oath	Wallsing Secretary Title of officer administering oath



LOCAL GOVERNMENT OFFICER FORM CIS 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. **OFFICEUSEONLY** This is the notice to the appropriate local governmental entity that the following local Date Received 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 lope M. Acosta - Federal Accountant SPE 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 and each family relationship with vendor named in item 3. NONE List gifts accepted by the local government officer and any family member, if aggregate value of the gifts accepted from vendor named in item 3 exceeds \$100 during the 12-month period described by Section 176.003(a)(2)(B). Description of Gift _____ Date Gift Accepted Description of Gift _____ Date Gift Accepted Date Gift Accepted Description of Gift ___ (attach additional forms as necessary) **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. CRISTINA C. MORE NOTARY PUBLIC - STATE OF TEXAS 101 13088732-1 COMB. EXP. 05-18-2020 Signature of Local Government Officer AFFIX NOTARY STAMP / SEAL ABOVE Sworn to and subscribed before me, by the said of MARKLA , 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

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	
Amanda Martinez	
Office Held	
Accounts Payable Accountant	
Name of vendor described by Sections 176.001(7) and 176.003(a), Local Government	Code
N/A	
Description of the nature and extent of each employment or other business relationshi with vendor named in item 3.	p and each family relationship
N/A	
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 AcceptedN/A Description of GiftN/A	
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 that the disclosure applies to each family member (as defined as	ned by Section 176.001(2), Local acknowledge that this statement
Sworn to and subscribed before me, by the said amanda Marthez	, this the day
of March, 20 17, to certify which, witness my hand and seal of office.	W.Clame Man
Signature of officer administering oath Printed name of officer administering oath	Fitle of officer administering oath

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	
Cris Morales	
2 Office Held	
Staff accountant	
Name of vendor described by Sections 176.001(7) and 176.003(a), Local Government	Code
MA	
Description of the nature and extent of each employment or other business relationshi with vendor named in item 3.	ip and each family relationship
NA	
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	
from vendor named in item 3 exceeds \$100 during the 12-month period described by	Section 170.003(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)	
AFFIDAVIT I swear under penalty of perjury that the above statement that the disclosure applies to each family member (as def	
Government Code) of this local government officer. I also covers the 12-month period described by Section 176.003(
IDS 1306682-1 COMM. EXP. 05-18-2020	mle
Signature of Local	Government Officer
AFFIX NOTARY STAMP / SEAL ABOVE	
Sworn to and subscribed before me, by the said CVIS MOVALES	, this the day
of ADVII , 20 17 , to certify which, wifness my hand and seal of office.	
Sanotter Sound Franctic W. French.	Hurchosina Seretan
Signature of officer administering oath Printed name of officer administering oath	Title of officer administering oath

FORM CIS

(Instructions for completing and ming this form are provided on the next page.)	
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	
Cristma C. Miveno	
Office Held	
CFO Secretary	
Name of vendor described by Sections 176.001(7) and 176.003(a), Local Government	Code
NA	
Description of the nature and extent of each employment or other business relationship with vendor named in item 3.	p and each family relationship
NIA	nger i gen 1991 tel org
List gifts accepted by the local government officer and any family member, if aggregation wender 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	The state of the s
Date Gift Accepted Description of Gift	
Date Gift Accepted Description of Gift	
(attach additional forms as necessary)	
AFFIDAVIT I swear under penalty of perjury that the above statement is	s true and correct. I acknowledge
that the disclosure applies to each family member (as defined as d	ned by Section 176.001(2), Local
covers the 12-month period described by Section 176.003(a	
JEANETTE WILEY FRENCH NOTARY PUBLIC - STATE OF TEXAS	Maria
COMM. EXP. 05-18-2020 Signature of Local C	Government Officer
AFFIX NOTARY STAMP / SEAL ABOVE	anth
Sworn to and subscribed before me, by the said Styll Well Well Well Well Well Well Well W	, this the day
Oparotte W. French Tura	chasina Secretary
Signature of officer administering oath Printed name of officer administering oath T	Title of officer administering oath

FORM CIS

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 Name of Local Government Officer	(Instructions for completing and filing this form are provided on the next page.)	
Date Gift Accepted	This questionnaire reflects changes made to the law by H.B. 23, 84th Leg., Regular Session.	OFFICE USE ONLY
Office Held Purchasing Secretary Name of vendor described by Sections 176.001(7) and 176.003(a), Local Government Code NA Description of the nature and extent of each employment or other business relationship and each family relationship with vendor named in item 3. NA List glits accepted by the local government officer and any family member, if aggregate value of the glits accepted 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 Glit	government officer has become aware of facts that require the officer to file this statement	
Office Held Purchasing Secretary Name of vendor described by Sections 176.001(7) and 176.003(a), Local Government Code NA Description of the nature and extent of each employment or other business relationship and each family relationship with vendor named in item 3. NA List gifts accepted by the local government officer and any family member, if aggregate value of the gifts accepted 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) 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), Dotal Government Code. STEPHANIE MENDOZA Government Code) STEPHANIE MENDOZA 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), Dotal Government Code. Signature of Local Government Officer AFFIX NOTARY STAMP / SEAL ABOVE Sworn to and subscribed before me, by the said Lawred Handle , this the John day of March 20 7, to certify which, witness my hand and seal of office. Sworn to and subscribed before me, by the said Lawred Handle , this the John day of March 20 7, to certify which, witness my hand and seal of office.	Name of Local Government Officer	1
Name of vendor described by Sections 176.001(7) and 176.003(a), Local Government Code NA Description of the nature and extent of each employment or other business relationship and each family relationship with vendor named in item 3. NA List gifts accepted by the local government officer and any family member, if aggregate value of the gifts accepted 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	Jeanette W. French	
Name of vendor described by Sections 176.001(7) and 176.003(a), Local Government Code NA Description of the nature and extent of each employment or other business relationship and each family relationship with vendor named in item 3. NA List gifts accepted by the local government officer and any family member, if aggregate value of the gifts accepted 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 Description of Gift The property of Gift		<i>\</i> .
Description of the nature and extent of each employment or other business relationship and each family relationship with vendor named in item 3. NA List gifts accepted by the local government officer and any family member, if aggregate value of the gifts accepted 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 the nature and extent of each employment or other business relationship and each family relationship with vendor named in item 3. N	Name of vendor described by Sections 176.001(7) and 176.003(a), Local Governme	nt Code
List gifts accepted by the local government officer and any family member, if aggregate value of the gifts accepted from vendor named in item 3 exceeds \$100 during the 12-month period described by Section 176.003(a)(2)(B). Date Gift Accepted		
List gifts accepted by the local government officer and any family member, if aggregate value of the gifts accepted from vendor named in item 3 exceeds \$100 during the 12-month period described by Section 176.003(a)(2)(B). Date Gift Accepted		ship and each family relationship
Date Gift Accepted Description of Gift Description of Gift (attach additional forms as necessary) 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	NIA	
Date Gift Accepted Description of Gift		
Description of Gift Description of Gift (attach additional forms as necessary) 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 Planeth Franch , this the both day of March , 20 7 , to certify which, witness my hand and seal of office. ALAMAN Many Alaman Mandara General Accordant		2) 000
Date Gift Accepted	Date Gift Accepted Description of Gift	
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. AFFIX NOTARY STAMP / SEAL ABOVE Sworn to and subscribed before me, by the said Handle of March 20 17, to certify which, witness my hand and seal of office. ALMANN Many Many Many Many Many Many Many Many	Date Gift Accepted 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. AFFIX NOTARY STAMP / SEAL ABOVE Sworn to and subscribed before me, by the said Planeth Franch , this the day of March , 20 7 , to certify which, witness my hand and seal of office. Supply that the above statement is true and correct. I acknowledge that this statement covers the 12-month period described by Section 176.001(2), Local Government Code. Signature of Local Government Officer AFFIX NOTARY STAMP / SEAL ABOVE Sworn to and subscribed before me, by the said Planeth Franch , this the day of March , 20 7 , to certify which, witness my hand and seal of office. Supply that the above statement is true and correct. I acknowledge that this statement cover in the disclosure applies to each family member (as defined by Section 176.001(2), Local Government Code. Signature of Local Government Officer AFFIX NOTARY STAMP / SEAL ABOVE Sworn to and subscribed before me, by the said Planeth Franch , this the disclosure applies to each family member (as defined by Section 176.001(2), Local Government Code.	Date Gift Accepted 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. STEPHANIE MENDOZA NOTARY PUBLIC-STATE OF TEXAS COMM. EXP. 05-18-2020 AFFIX NOTARY STAMP / SEAL ABOVE Sworn to and subscribed before me, by the said Signature of Local Government Officer AFFIX NOTARY STAMP / SEAL ABOVE Sworn to and subscribed before me, by the said Office. AFFIX NOTARY STAMP / SEAL ABOVE Sworn to and subscribed before me, by the said AFFIX NOTARY STAMP / SEAL ABOVE Sworn to and subscribed before me, by the said AFFIX NOTARY STAMP / SEAL ABOVE Sworn to and subscribed before me, by the said AFFIX NOTARY STAMP / SEAL ABOVE Sworn to and subscribed before me, by the said AFFIX NOTARY STAMP / SEAL ABOVE Sworn to and subscribed before me, by the said AFFIX NOTARY STAMP / SEAL ABOVE Sworn to and subscribed before me, by the said AFFIX NOTARY STAMP / SEAL ABOVE Sworn to and subscribed before me, by the said AFFIX NOTARY STAMP / SEAL ABOVE Sworn to and subscribed before me, by the said AFFIX NOTARY STAMP / SEAL ABOVE Sworn to and subscribed before me, by the said AFFIX NOTARY STAMP / SEAL ABOVE Sworn to and subscribed before me, by the said AFFIX NOTARY STAMP / SEAL ABOVE Sworn to and subscribed before me, by the said AFFIX NOTARY STAMP / SEAL ABOVE Sworn to and subscribed before me, by the said AFFIX NOTARY STAMP / SEAL ABOVE Sworn to and subscribed before me, by the said AFFIX NOTARY STAMP / SEAL ABOVE Sworn to and subscribed before me, by the said AFFIX NOTARY STAMP / SEAL ABOVE AFFIX NOTARY STAMP / SEAL ABOVE Sworn to and subscribed before me, by the said AFFIX NOTARY STAMP / SEAL ABOVE AFFIX NOTARY STAMP / S	(attach additional forms as necessary)	
Sworn to and subscribed before me, by the said Jeaneth French, this the 15th day of Moral, 20 17, to certify which, witness my hand and seal of office. Supher Mend Suphana Mendora General Accordant	I swear under penalty of perjury that the above statement that the disclosure applies to each family member (as Government Code) of this local government officer. I a covers the 12-month period described by Section 176.00 covers th	defined by Section 176.001(2), Local also acknowledge that this statement 03(a)(2)(B), Local Government Code.
Elyhow Ment Stephenie Mendora General Accordant	Sworn to and subscribed before me, by the said Jequette Fronch	, this the day
	Elyhow Ment Stephenie Mendora C	Peneral Accordant Title of officer administering oath

FORM CIS

	And the second s
This questionnaire reflects changes made to the law by H.B. 23, 84th Leg., Regular Session	to the period of the account of the period o
This is the notice to the appropriate local governmental entity that the following loc government officer has become aware of facts that require the officer to file this statement in accordance with Chapter 176, Local Government Code.	cal Date Received
Name of Local Government Officer	
Naomi Diaz	
2 Office Held Budget Specialist	
Name of vendor described by Sections 176.001(7) and 176.003(a), Local Government	nent Code
NIA	
Description of the nature and extent of each employment or other business relatio with vendor named in item 3.	nship and each family relationship
NA	
List gifts accepted by the local government officer and any family member, if agreem vendor named in item 3 exceeds \$100 during the 12-month period describe	gregate value of the gifts accepted d 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)	
I swear under penalty of perjury that the above stater that the disclosure applies to each family member (a Government Code) of this local government officer. covers the 12-month period described by Section 176 DIAM 13 0 6 6 6 8 2 - 1 COMM. EXP. 05-18-2020 Signature of L	s defined by Section 176.001(2), Local I also acknowledge that this statement
Sworn to and subscribed before me, by the said	title of officer administering oath

FORM CIS

A \$77,074 A 4,576 A 199,079 A 199,07	
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	
Marisol Reyes	
Office Held	
BOOKKeeper	
Name of vendor described by Sections 176.001(7) and 176.003(a), Local Government	Code
N/A	
Description of the nature and extent of each employment or other business relationshi with vendor named in item 3.	p and each family relationship
NA	
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 that the disclosure applies to each family member (as defined by Section 176.003). JEANETTE WILEY FRENCH NOTARY PUBLIC - STATE OF TEXAS ID# 13 0 6 6 8 2 - 1 COMM. EXP. 05-18-2020	ned by Section 176.001(2), Local acknowledge that this statement
AFFIX NOTARY STAMP / SEAL ABOVE	Government Officer
of March, 20 1, to certify which, witness my hand and seal of office.	, this the day
Signature of officer administering oath Printed name of officer administering oath	Title of officer administering oath

FORM CIS

(Instructions for completing and fining this form are provided on the next page)	
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	
Genevieve Perez	
2 Office Held	
Accounts Payable Clerk	
Name of vendor described by Sections 176.001(7) and 176.003(a), Local Government	Code
N/A	
Description of the nature and extent of each employment or other business relationshi with vendor named in item 3.	p and each family relationship
MA	
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 that the disclosure applies to each family member (as def Government Code) of this local government officer. I also covers the 12-month period described by Section 176.003(ined by Section 176.001(2), Local o acknowledge that this statement
Signature of Local AFFIX NOTARY STAMP / SEAL ABOVE Sworn to and subscribed before me, by the said	Government Officer
of Waven, 20, to certify which, witness my hand and seal of office.	, this the day
Signature of officer administering oath Printed name of officer administering oath	Title of officer administering oath

FORM CIS

(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.	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			
Victoria N. Garcia	*		
2 Office Held	,		
Accounts Payable Clerk			
Name of vendor described by Sections 176.001(7) and 176.003(a), Local Government	Code		
NA			
Description of the nature and extent of each employment or other business relationshi with vendor named in item 3.	p and each family relationship		
NA			
List gifts accepted by the local government officer and any family member, if aggregate value of the gifts accepted 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)			
Swear under penalty of perjury that the above statement is that the disclosure applies to each family member (as defined by Government Code) of this local government officer. I also covers the 12-month period described by Section 176.003(a) ID# 13066882-1 COMM. EXP. 05-18-2020 Signature of Local	ned by Section 176.001(2), Local acknowledge that this statement		
Sworn to and subscribed before me, by the said VICTOYA N. CAVCA of MAN , 20 , to certify which, witness my hand and seal of office. Higher than the said of officer administering oath Printed name of officer administering oath	this the and day		

FORM CIS

(Instructions for completing and filing thi	s form are provided on the next page.)	
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 logovernment officer has become aware of in accordance with Chapter 176, Local G	ocal governmental entity that the following local of facts that require the officer to file this statement Government Code.	Date Received
Name of Local Government Officer		
anna Mani	1	,
2 Office Held	Inlola classe	
Occounts Pay	JUNIE CIERK	
Name of vendor described by Section	ons 176.001(7) and 176.003(a), Local Government	Code
and a NA special section of	in the second of	
Description of the nature and extent with yendor named in item 3.	of each employment or other business relationsh	
NA		
List gifts accepted by the local gove from vendor named in item 3 except	ernment officer and any family member, if aggree ds \$100 during the 12-month period described by	ate value of the gifts accepted Section 176.003(a)(2)(B).
A distribution by a second	Description of Gift	And the second s
Maria Lance Street Land	Description of Gift	
	(attach additional forms as necessary)	1.1
JEANETTE WILEY FRENCH NOTARY PUBLIC - STATE OF TEXAS ID# 1 3 0 6 6 8 2 - 1 COMM. EXP. 05-18-2020	I swear under penalty of perjury that the above statement that the disclosure applies to each family member (as def Government Code) of this local government officer. I also covers the 12-month period described by Section 176.003(ined by Section 176.001(2), Local o acknowledge that this statement
Sworn to and subscribed before me, by the soft and subscribed before m	said Unna Mann rtify which, witness my hand and seal of office.	this the 10th day