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	
DAVID BELDINGED.D.	MECEIVE
2 Office Held	AUG 1 9 2024
Midlothian ISD Superintendent of Schools	H00 ( 3 302
Name of vendor described by Sections 176.001(7) and 176.003(a), Local Government Code	Imcz Ru
Description of the nature and extent of each employment or other business relationshi with vendor named in item 3.	p and each family relationship
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	
Date Gift Accepted Description of Gift	
Date Gift Accepted Description of Gift	A
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 Code also acknowledge that this statement covers the 12-month period described by Section 12-month period d	e) of this local government officer. I
Theda C. McGrewease complete either option below: Notary Public. State of Texas Notary ID 126504594 My Commission Exp. 05-01-2028 NOTARY STAMP/SEAL	
Sworn to and subscribed before me by DAVID BELding this the	9 day of August.
20 24, to certify which, witness my hand and seal of office.	
	No tary
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,,	
(street) (city) (state	
Executed in County, State of, on theday of(month)	, 20 (year)
Signature of Local Gover	nment Officer (Declarant)

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

FORM CIS

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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	
Mike Dillow	AFCEIVER
2 Office Held	
Midlothian ISD Trustee	AUG 1 9 2024
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.	and each family relationship
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	
Date Gift Accepted Description of Gift	
Date Gift Accepted Description of Gift	
Date Gift Accepted Description of Gift	
(attach additional forms as necessary)	
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 Government Code  Theda C. McGrew Notary Public. State of Texas Notary ID 126504594 My Commission Exp. 05-01Puga se complete either option below:  (1) Afficavit	ion 176.003(a)(2)(B), Local
NOTARY STAMP/SEAL	Λ.
Sworn to and subscribed before me by Mike Fill()() this the 1	ay of Angust,
20, to certify which, witness my hand and seal of office.	
Theda C. M. GREW Theda C. M. GREW	Notary
Signature of officer administering oath Printed name of officer administering oath	Title of officer administering oath
OR	
(2) Unsworn Declaration	10.00
My name is, and my date of birth is	
My address is,,,	
	) (zip code) (country)
Executed in County, State of , on the day of (month)	, 20 (year)
Signature of Local Govern	mment 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	
Ed Harrison	- WIVER
2 Offic :eHeld	<b>NELWIVE</b>
Midlothian ISD Trustee	AUG 1 9 2024
Name of vendor described by Sections 176.001(7) and 176.003(a), Local Government Code	<b>3</b>
Description of the nature and extent of each employment or other business relationshi with vendor named in item 3.	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  Date Gift Accepted	Section 176.003(a)(2)(B).
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 ackreto 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 Signature of Local Signature of Local Notary Public. State of Texas Notary ID 12650 lease complete either option below:  My Commission Exp. 05-01-2028	e) of this local government officer. I
NOTARY STAMP/SEAL	
Sworn to and subscribed before me by <u>Ed Harrison</u> this the <u>I</u>	19 day of August,
20 <u>24</u> , to certify which, witness my hand and seal of office.	
	Notarii
Signature of officer administering oath  Printed name of officer administering oath	Title of officer administering oath
OR	<b>经验证证明</b>
(2) Unsworn Declaration	
My name is, and my date of birth is	
My address is,,,	
(street) (city) (state	(zip code) (country)
Executed in County, State of , on the day of (month)	, 20
Signature of Local Govern	nment Officer (Declarant)

FORM CIS

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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	
Richard Pena	7
2 Office Held	
Midlothian ISD Trustee	1 - 4.3 Jan 1 - 1
Name of vendor described by Sections 176.001(7) and 1 76 .03(a), Local Government Code	AUG 2 1 2024 - Amagrew
Description of the nature and extent of each employment or other business relationshi with vendor named in item 3.	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	
Troil vender named in item 6 exceeds \$100 xaring the 12 month period decorbed by	0.000(4)(2)(3).
Date Gift Accepted Description of Gift	
Date Gift Accepted Description of Gift	
Date Gift Accepted Description of Gift	
(attach additional forms as necessary)	4 04
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 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 the 12-month period covers the 12-month p	
NOTARY STAMP/SEAL	1
	1
	1 day of August,
20 <u>3+</u> , to certify which, witness my hand and seal of office.	1/ 1-0
Signature of officer administering oath  Printed name of officer administering oath	Title of officer administering oath
OR	This of officer administrating out
(2) Unsworn Declaration	
(-) - · · · · · · · · · · · · · · · · · ·	
My name is, and my date of birth is	
My address is	·
(street) (city) (state	
Executed in County, State of, on the day of(month)	, 20 (year)
Signature of Local Gover	nment Officer (Declarant)

FORM CIS

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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	
Ryan Timm	4 4 4 4
2 Office Held	RECEIVER
Midlothian ISD Trustee	
Name of vendor described by Sections 176.001(7) and 176.003(a), Local Government Code	AUG 1 9 2024
Description of the nature and extent of each employment or other business relationshing with vendor named in item 3.	1 = 1 = 2
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	
Date Gift Accepted Description of Gift	
Date Gift Accepted	
Date Gift Accepted Description of Gift	
(attach additional forms as necessary)	
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 Cod also acknowledge that this statement covers the 12-month period described 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 Cod also acknowledge that this statement covers the 12-month period described 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 Cod also acknowledge that this statement covers the 12-month period described 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 Cod also acknowledge that this statement covers the 12-month period described 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 Cod also acknowledge that this statement covers the 12-month period described 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 Cod also acknowledge that this statement covers the 12-month period described 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 Cod also acknowledge that this statement covers the 12-month period described 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 Cod acknowledge that this statement covers the 12-month period cove	·
- Angles and the second	
NOTARY STAMP/SEAL	
Sworn to and subscribed before me by Rivan Tirm this the	9 day of August,
20 _ 24, to certify which, witness my hand and seal of office.	
Theda C. McGrew	Notary
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	<del></del>
My address is,	
	e) (zip code) (country)
Executed in County, State of , on the day of (month)	, 20 (year)
Signature of Local Gover	rnment Officer (Declarant)

FORM CIS

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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	1
Tami Tobey	RECEIVER
2 Office Held	AUC 4 o 2021
Midlothian ISD Trustee	AUG 1 9 2024
3 Name of vendor described by Sections 176.001(7) and 176.003(a), Local Government Code	tonczrew.
Description of the nature and extent of each employment or other business relationsh with vendor named in item 3.	ip and each family relationship
5 List gifts accepted by the local government officer and any family member, if aggree 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)	100000000000000000000000000000000000000
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 Codalso acknowledge that this statement covers the 12-month period described by Section 176.001(2) Local Government Codalso acknowledge that this statement covers the 12-month period described by Section 176.001(2) Local Government Codalso acknowledge that this statement covers the 12-month period described by Section 176.001(2) Local Government Codalso acknowledge that this statement covers the 12-month period described by Section 176.001(2) Local Government Codalso acknowledge that this statement covers the 12-month period described by Section 176.001(2) Local Government Codalso acknowledge that this statement covers the 12-month period described by Section 176.001(2) Local Government Codalso acknowledge that this statement covers the 12-month period described by Section 176.001(2) Local Government Codalso acknowledge that this statement covers the 12-month period described by Section 176.001(2) Local Government Codalso acknowledge that this statement covers the 12-month period described by Section 176.001(2) Local Government Codalso acknowledge that this statement covers the 12-month period described by Section 176.001(2) Local Government Codalso acknowledge that this statement covers the 12-month period described by Section 176.001(2) Local Government Codalso acknowledge that the 176.001(2) Lo	le) of this local government officer. I
Theda C. McGrew Notary Public. State of Please complete either option below: Notary ID 126504594 My Commission Exp. 05-01-2028	
a figure of a series	10
Sworn to and subscribed before me by this the	1_ day of Hugust,
20 <u>24</u> , to certify which, witness my hand and seal of office.	. / - 1
Signature of officer administering oath  Printed name of officer administering oath	No tary  Title of officer administering oath
Signature of officer administering beth Printed name of officer administering oath  OR	Title of officer administering oath
(2) Unsworn Declaration	
(2) disworn beclaration	
My name is, and my date of birth is	<i></i>
My address is,,	
(street)       (city)       (state)         Executed in on the day of	e) (zip code) (country) , 20 (year)
	rnment Officer (Declarant)

FORM CIS

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Name of Local Government Officer	
Gary Vineyard	
2 Office Held	PELEVER
Midlothian ISD Trustee	AUG 1 9 2024
Name of vendor described by Sections 176.001(7) and 176.003(a), Local Government Code	A00 1 9 2024
Description of the nature and extent of each employment or other business relationshi with vendor named in item 3.	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	
Date Gift Accepted Description of Gift	wash at
Date Gift Accepted Description of Gift	
Date Gift Accepted Description of Gift	
(attach additional forms as necessary)	
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NOTARY STAMP/SEAL	
Sworm to and subscribed before me byGARY_ViNeVARD this the!	9 day of August,
20 24 to certify which, witness my hand and seal of office.	
Theda C. Mª Grew Theda C. Mª Grew	Notary
Signature of officer administering oath Printed name of officer administering oath	Title of officer administering oath
OR	<b>美工程,除</b> 加强基础工
(2) Unsworn Declaration	
My name is, and my date of birth is	
My address is	
(street) (city) (state of, on the day of(month)	e) (zip code) (country) , 20 (year)
Signature of Local Gover	nment Officer (Declarant)

FORM CIS

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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	
Jessica Ward	
2 Office Held	AEGHIVE
Midlothian ISD Trustee	AUC 4 a pop
Name of vendor described by Sections 176.001(7) and 176.003(a), Local Government Code	AUG 1 9 2024
Description of the nature and extent of each employment or other business relationshi with vendor named in item 3.	p and each family relationship
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	
Date Gift Accepted Description of Gift	
Date Gift Accepted Description of Gift	1 4 14 14
Date Gift Accepted Description of Gift	
(attach additional forms as necessary)	
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NOTARY STAMP/SEAL	Λ
Sworn to and subscribed before me by	day of August_,
20 _2^_, to certify which, witness my hand and seal of office.	_
Skeda C. Mc Sun Thoda C. McGrew	Noterry
Signature of officer administering oath  Printed name of officer administering oath	Title of officer administering oath
OR	
(2) Unsworn Declaration	Active Complete Control of
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)	
Signature of Local Gover	nment Officer (Declarant)