

21/019SG

LOCAL GOVERNMENT OFFICER CONFLICTS DISCLOSURE STATEMENT

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.

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.

OFFICE USE ONLY

Date Received

1 Name of Local Government Officer

Mary Causey

2 Office Held

Contract Compliance Manager, Choice Partners, HCDE

3 Name of vendor described by Sections 176.001(7) and 176.003(a), Local Government Code

Acrylic Source+, Ascend Performance Materials, Inc., Assad Khoury Group, C-Bond Systems, LLC, Competitive Choice Inc., Complete Supply Inc., Controlled Environments, Inc., Diamond Business Services, Inc., Epic Solar Control, LLC, Fastsigns #14201 & #10701, Healthy School Supply LLC, JF Filtration, Inc. dba Joe W. Fly Co., Inc., Laird Plastics Inc., Liberty Office Products, LY Electronics USA (dba LY Global), LyncVerse Technologies, Medicaleshop Inc., National Signs, LLC, Neutex Advanced Energy Group INC. dba Neutex Lighting, Opal R. Helm, LLC, Pyramid School Products, R.I.G.O.R., Resilience Inc., Seekr Global Inc., Simply Sophisticate DBA Reveal Suits and Reveal Medical Inc., TabletKiosk, Texas Medical Center Supply, LLC, Universal Custom Display

4 Description of the nature and extent of employment or other business relationship with vendor named in item 3

Evaluator on RFP 21/019SG

5 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 _____ N/A

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

My name is (First, Middle, Last Name), my date of birth is _____ N/A _____, and my address is _____ 6005 Westview Drive, Houston TX 77055 _____.

_____, (Street) (City) (State) (Zip Code) and _____ N/A _____. I declare under penalty of perjury that the foregoing is true (Country) and correct. Executed in Harris County, State of TX, on the 15 day of December 2020, (Month) (Year) Mary Causey Declarant