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.	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 One of Local Government Officer	0
2 Office Held	21-067 IA
Assistant Director of Eurchusing	
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 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	
Date Gift Accepted Description of Gift	
Date Gift Accepted Description of Gift	
Date Gift Accepted Description of Gift	
(attach additional forms as necessary) 6 SIGNATURE I swear under penalty of perjury that the above statement is true and correct. I acknowledge to the statement is true and correct. I acknowledge to the statement is true and correct.	
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 Sec Government Code. BRANDY D. BULLOCK Notary Public, State of Texass Comm. Expires 02-28-2025 Notary ID 129327325 Please complete either option below:	
NOTARY STAMP/SEAL Sworm to and subscribed before me by £ana Jannson this the	7th day of August
20 21, to certify which, witness my hand and seal of office. Brandy & Bullock Drandy D., Bullock	Notary
Signature of other 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 the day of (month)	e) (zip code) (country) , 20 (year)
Signature of Local Gover	nment Officer (Declarant)

LOCAL GOVERNMENT OFFICER CONFLICTS DISCLOSURE STATEMENT

FORM CIS

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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 How's Grunty of Education 2 Office Held Asst Supt for Business	21/067 IA
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 glfts 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)	
SIGNATURE 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 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 Secti	e) of this local government officer. I
NOTARY STAMP/SEAL Sworn to and subscribed before me by Jesus America this the // to certify which witness my hand and seal of office. Source District Control of the con	7th day of August.
Signature of officer administering oath Printed name of officer administering oath	Title of officer administering oath
(2) Unsworn Declaration	
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	nment Officer (Declarant)

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.	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	1
Natasha Truitt	21/067IA
2 Office Held	05.700
Executive Director-Human Resources	
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
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	
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 ackr 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 Sec Government Code. BRANDY D. BULLOCK Notary Public, State of Texas Comm. Expires 02-28-2025 Notary ID 129327325 Please complete either option below: (1) Affidavit	e) of this local government officer. I
NOTARY STAMP/SEAL Sworn to and subscribed before me by \(\lambda \) \(1th day of August.
signature of afficer administering oath Printed name of officer administering oath	Title of officer administering oath
Signature of officer administering oath Printed name of officer administering oath	and entire administrating data
2) Unsworn Declaration	10 0 00
My name is, and my date of birth is	·
Viy address is,,,	_,
(street) (city) (state) (zip code) (country)
Executed in County, State of , on the day of (month)	, 20
(month)	(year)
Signature of Local Govern	nment Officer (Declarant)

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. OFFICE USE ONLY 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 Office Held 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 relationship and each family relationship with vendor named in item 3. 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 Description of Gift Date Gift Accepted _ __ Description of Gift Date Gift Accepted _ (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 SIGNATURE tion 178.001(2), Local Government Code) of this local government officer. I alsopprovide the BAN streeth court is the 12-month period described by Section 176.003(a)(2)(B), Local Notary Public, State of Texas Comm. Expires 02-28-2025 Signalus of Local Government Notary ID 129327325 blete either option below: (1) Affidavit NOTARY STAMP/SEAL (2) Unsworn Declaration My name is , and my date of birth is My address is

Form provided by Texas Ethics Commission

Executed in

(street)

County, State of

Signature of Local Government Officer (Declarant)
www.ethics.state.tx.us Revise

__ day of ____(month)

Revised 8/17/2020

(country)

(zip code)