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. 1491, 89th Log , 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 21/05474 Andrea Garaves Office Held Director of special Proxido - Teaching Hearing Name of person described by Sections 176.002(a) and 176.003(a), Local Government Code Description of the nature and extent of employment or other business relationship with person named in Item 3 List gifts accepted by the local government officer and any family member, excluding gifts described by Section 176.003(a-1), if aggregate value of the gifts accepted from person named in item 3 exceed \$250 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) AFFIDAVIT I swear under penalty of perjury that the above statement is true and correct. I acknowledge that the disclosure applies to a 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 178 003(a). Local Government Code CHARISMA TOLBERT Notary Public, State of Texas Comm. Expires 02-02-2025 Notary ID 130990828 AFFIX NOTARY STAMP ESEAL ABOVE Swom to and subscribed before me, by the said Hndrea to certify which, witness my nature of officer administering oath

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. 1491, 80th 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 | | |
| Colina Populard | 21/054 IA | | |
| 2 Office Held | | | |
| Divector of Digital Ed | | | |
| Name of person described by Sections 176.002(a) and 176.003(a), Local Government | Code | | |
| NA | | | |
| Description of the nature and extent of employment or other business relationship wi | th person named in item 3 | | |
| NIA | | | |
| List gifts accepted by the local government officer and any family member, excludi 176.003(a-1), if aggregate value of the gifts accepted from person named in item 3 excepted described by Section 176.003(a)(2)(B) | ng gifts described by Section seed \$250 during the 12-month | | |
| 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 a family member (as define | d by Section 176.001(2), Local | | |
| Government Code) of this local government officer. I also CHARISMA TOLBERT evers the 12-month period described by Section 176.003(a | | | |
| Notary Public, State of Texas | Λ | | |
| Comm. Expires 02-02-2025 Notary ID 130990828 | X. | | |
| Signature of Local G | Sovernment Officer | | |
| AFFIX NOTARY STAMP / SEAL ABOVE | 11 | | |
| Sworn to and subscribed before me, by the said Qine Poulland | this theday | | |
| of July, 20, to certify which, witness my hand and seal of office | uay | | |
| Charin Jother Charisma Tothers 1 | Votage Public | | |
| Signature of officer administering oath Printed name of officer administering oath Ti | tle of officer administering oath | | |
| | | | |

LOCAL GOVERNMENT OFFICER CONFLICTS DISCLOSURE STATEMENT

FORM CIS

OFFICE USE ONLY

(Instructions for completing and filing this form are provided on the next page.)

This questionnaire reflects changes made to the law by H.B. 1491, 80th Leg., Regular Session.

| | local 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 | | |
| EDNA E. JO | hnson | 21 054IA |
| 2 Office Held | | |
| Assistant D | irector | |
| Name of person described by Sect | ions 176.002(a) and 176.003(a), Local Government | Code |
| | NA | |
| 4 Description of the nature and exter | nt of employment or other business relationship w | ith person named in item 3 |
| | NIA | |
| | overnment officer and any family member, excluding the gifts accepted from person named in item 3 ex 03(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) | |
| CHARISMA TOLBERT Notary Public, State of Tex. Comm. Expires 02-02-202 | | ned by Section 176.001(2), Local by acknowledge that this statement |
| Notary ID 130990828 | Signature of Local | Government Officer |
| AFFIX NOTARY STAMP / SEAL ABOV | F | J |
| Sworn to and subscribed before me, by the | | , this the |
| of July , 20 2) , to compare the signature of officer administering oath | Printed name of officer administering oath | Notary Public Title of officer administering oath |

LUCAL GOVERNMENT OFFICER CONFLICTS DISCLOSURE STATEMENT

FORM CIS

| (Instructions for completing and filing thi | is form are provided on the next page.) | 15 |
|---|---|---|
| This questionnaire reflects changes made | to the law by H.B. 1491, 80th Leg., Regular Session. | OFFICE USE ONLY |
| • • • • | 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 EVILLA DOSON | oper . | 21/054IA |
| Office Held Managur, TLC | -, HCDE | ec., |
| Name of person described by Section | ons 176.002(a) and 176.003(a), Local Government | Code |
| Description of the nature and exten | t of employment or other business relationship w | ith person named in item 3 |
| NA | | |
| | vernment officer and any family member, excluding the gifts accepted from person named in item 3 excepted (a)(2)(B) | |
| Date Gift Accepted I | Description of Gift | |
| Date Gift Accepted I | Description of Gift | |
| Date Gift Accepted | Description of Gift | <u> </u> |
| | (attach additional forms as necessary) | |
| CHARISMA TOLBERT Notary Public, State of Texas Comm. Expires 02-02-2025 Notary ID 130990828 | 00011 | ned by Section 176.001(2), Local acknowledge that this statement |
| Swom to and subscribed before me, by the | said Errica Dotson Hooper | this the day |
| harism Tolton | rtify which, witness my hand and seal of office. | John Public |
| Signature of officer administering oath | Printed name of officer administering oath | Title of officer administering oath |