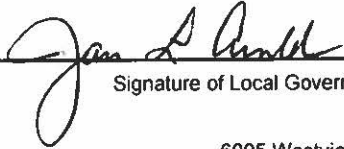


# LOCAL GOVERNMENT OFFICER CONFLICTS DISCLOSURE STATEMENT

**FORM CIS**

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

<p>This questionnaire reflects changes made to the law by H.B. 23, 84th Leg., Regular Session.</p> <p>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.</p>	<p><b>OFFICE USE ONLY</b></p>
<p><b>1</b> Name of Local Government Officer</p> <p style="text-align: center; font-size: 1.2em;"><i>JAN L. ARNOLD</i></p>	<p>Date Received</p>
<p><b>2</b> Office Held</p> <p style="text-align: center; font-size: 1.2em;"><i>CLIENT SERVICES MANAGER</i></p>	
<p><b>3</b> Name of vendor described by Sections 176.001(7) and 176.003(a), Local Government Code</p> <p style="text-align: center;">N/A</p>	
<p><b>4</b> Description of the nature and extent of employment or other business relationship with vendor named in item 3</p> <p style="text-align: center;">N/A</p>	
<p><b>5</b> 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).</p> <p>Date Gift Accepted <u>  N/A  </u> Description of Gift <u>  N/A  </u></p> <p>Date Gift Accepted _____ Description of Gift _____</p> <p>Date Gift Accepted _____ Description of Gift _____</p> <p style="text-align: center;">(attach additional forms as necessary)</p>	
<p><b>6</b> <b>AFFIDAVIT</b></p> <p style="text-align: center;">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.</p> <div style="text-align: right; margin-right: 20%;">               _____              Signature of Local Government Officer         </div> <p style="text-align: right; margin-right: 20%;">6005 Westview Drive</p> <p>My name is (First, Middle, Last Name), my date of birth is <u>  1-07-56  </u>, and my address is <u>  6005 WESTVIEW  </u></p> <p><u>  Houston, TX  </u>, (Street) (City) (State) (Zip Code) and <u>  77055  </u>. I declare under penalty of perjury that the foregoing is true (Country) and correct. Executed in <u>  Harris  </u> County, State of <u>  Texas  </u>, on the <u>  21st  </u> day of <u>  September  </u>, (Month) (Year) <u>  2020  </u> Declarant"</p>	

# 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

1 Name of Local Government Officer

Mary Causey

2 Office Held

Contract Compliance Specialist

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

N/A

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

N/A

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	<u>N/A</u>	Description of Gift	<u>N/A</u>
Date Gift Accepted	<u>N/A</u>	Description of Gift	<u>N/A</u>
Date Gift Accepted	<u>N/A</u>	Description of Gift	<u>N/A</u>

(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.

Mary Causey  
Signature of Local Government Officer

6005 Westview Drive

My name is (First, Middle, Last Name), my date of birth is 09-10-58, and my address is 6005 Westview,

Houston, TX, (Street) (City) (State) (Zip Code) and 77055. I declare under penalty of perjury that the foregoing is true (Country) and

correct. Executed in Harris County, State of Texas, on the 21st day of September (Month) (Year) 2020 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

1 Name of Local Government Officer

*Steve Gibson*

2 Office Held

*Contract Manager, Choice Partners*

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

N/A

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

N/A

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 N/A Description of Gift N/A

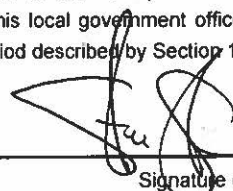
Date Gift Accepted \_\_\_\_\_ Description of Gift \_\_\_\_\_

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

6005 Westview Drive

My name is Stephen Edwin Gibson, my date of birth is N/A and my address is 6005 Westview Dr.

Houston, TX, (Street) (City) (State) (Zip Code) and 77055. I declare under penalty of perjury that the foregoing is true (Country) and

correct. Executed in Harris County, State of Texas, on the 21 day of September, (Month) (Year) 2020 Declarant"