FORM CIS

(In	structions for completing and fillng	g this form are provided on the next p	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 Gove	Rentkey		1
2 Office Held	21/0571/2-02		
AE - Budge		Coordinator	
3 Name of vendor desc	ribed by Sections 176.001(7) ar	nd 176.003(a), Local Government	
	NA		(c)
4 Description of the na with vendor named i	iture and extent of each employ	ment or other business relationsh	p and each family relationship
With Vendor hamed	MA		
5 List gifts accepted to from vendor named	y the local government officer in item 3 exceeds \$100 during	and any family member, if aggreg the 12-month period described by	gate value of the gifts accepted Section 176.003(a)(2)(B).
Date Gift Accepted	Description of (	Gift	
Date Gift Accepted	Description of 6	GiftNA	
Date Gift Accepted _	Description of Gir	ftf	
	(attach additio	onal forms as necessary)	
		above statement is true and correct. I ack	
to e	each family member (as defined by Se acknowledge that this statement cov	ection 176.001(2), Local Government Cod ers the 12-month period described by Sec	e) of this local government officer. I
	vernment Code.	A Then Chan	mon 17 0.000 (u)(E)(D), E0001
CHARLE CHARLE	SMA TOLBERT	Signature of Apral	Government Officer
Notary Put	olic, State of Texas	- //	GOABILILIOU CHICAL
Notary Notary	ID 130990828 Please com	plete either option below:	
(1) Affidavit			
NOTARY STAMP/SEAL			
Sworn to and subscribed be	afore me by Bright T	Bentley this the	day of Scokenber
0.1	nich, witness my hand and seal of office.		7
( Ironam /	Ollow Charles	no lolled	Noter Publi
Signature of officer administering	g oath Printed name of c	officer administering oath	Title of officer administering oath
		DR	
(2) Unsworn Declaration	ı		
My name is		, and my date of birth is	
My address is			
	(street)	(city) (state	c) (zip code) (country)
Executed in	County, State of		, 20,
	e.	(month)	(year)
		Signature of Local Gover	nment Officer (Declarant)

FORM CIS

(Instructions for complet	ting and filing this form are provided on the next	page.)
This questionnaire reflects changes made to ti	ne law by H.B. 23, 84th Leg., Regular Session.	OFFICE USE ONLY
	governmental entity that the following local cts that require the officer to file this statement emment Code.	Date Received
1 Name of Local Government Officer 2 Office Held		21/05742-02
Carcle Value Wark 3 Name of vendor described by Sections 1:	76.001(7) and 176.003(a), Local Government	
NA		
4 Description of the nature and extent of ea with vendor named in Item 3.	ach employment or other business relationsh	ilp and each family relationship
5 List gifts accepted by the local governm from vendor named in Item 3 exceeds \$	ent officer and any family member, if aggre 100 during the 12-month period described b	gate value of the gifts accepted y Section 176.003(a)(2)(B).
Date Gift Accepted MA Des	cription of Gift	
	cription of Gift	The state of the s
Date Gift Accepted Desc	ription of Gift	
(a	ttach additional forms as necessary)	
Also acknowledge that this a Government Code.  CHARISMA TOLBERT Notary Public, State of Texas	defined by Section 176.001(2), Local Government Cocstatement covers the 12 month period described by Sesignature of Cocal Signature of Cocal ease complete either option below:	ction 176.003(a)(2)(B), Local
- 01	idia Magallan this the 7	1 day of Systember.
to ceptify which, witness my hand and	harisma Colhert	Motory Public
Signature of officer administering oath Pr	inted name of officer administering oath	Title of officer administering oath
	OR	
(2) Unsworn Declaration		
My name is	, and my date of birth is	<u> </u>
My address is		
(street)  Executed in County, State of	(city) (state	, , , , , , , , , , , , , , , , , , , ,
Journey, State Of	, of the day of(month)	, 20 (year)
	Signature of Local Gover	rnment Officer (Declarant)

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(Instructions for completing and filing this form are provided on the next p	age.)
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  HNAG Fehoko	Ollogona
2 Office Held Director - Adult Ed	01/057 yR-02
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.	
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 gifts 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 acknowledge	
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 the 12-month period described by Section 176.001(2), Local Government Code also acknowledge that the 12-month period described by Section 176.001(2), Local Government Code acknowledge that the 12-month period described by Section 176.001(2), Local Government Code acknowledge tha	Government Officer
NOTARY STAMP/SEAL  Sworm to and subscribed before me by	Water Public Title of officer administering oath
(2) Unsworn Declaration  Wy name is, and my date of birth is	
My address is, and my date of birth is	· · · · · · · · · · · · · · · · · · ·
(street) (city) (state)  Executed in County, State of, on the day of	(zip code) (country)
Signature of Local Govern	nment Officer (Declarant)

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	,
Yaritza Roman	21/0574R-02
2 Office Held	- 1 - P
Procurement Manager	
Name of vendor described by Sections 176.001(7) and 176.003(a), Local Government Code	
N/A	
Description of the nature and extent of each employment or other business relationship with vendor named in item 3.  N/A	and each family relationship
List gifts accepted by the local government officer and any family member, if aggrega	ate 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)	
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 Government Code.  CHARISMA TOLBERT  Notary Public, State of Texas  Comm. Expires 02-02-2025  Notary ID 130990828  Complete either option below:	ion 176.003(a)(2)(B), Local
NOTARY STAMP/SEAL  Sworn to and subscribed before me by 1/4 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	the day of September.
20121, to certify which, witness my hand and seal of office.  Char Isma Tollows  Signature of officer administering oath	John Public 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)	, 20 (year)
Signature of Local Govern	nment Officer (Declarant)