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.			
1 Name of Local Govern			⊣ ∣
Joe Carreon	War-	D.A.	
2 Office Held Construction Dir	ector	73-	
3 Name of vendor descr Code	ibed by Sections 176.001(7) and 1	76.003(a), Local Governme	nt T
N/A			REG24-040YR
4 Description of the nat with vendor named in	ture and extent of each employment item 3.	t or other business relation	
	y the local government officer and nitem 3 exceeds \$100 during the		regate value of the gifts accepted by Section 176.003(a)(2)(B).
			-, -, -, -, -, -, -, -, -, -, -, -, -, -,
Date Gift Accepted _	Description of Gift	2/2	
Date Gift Accepted _	Description of Gift		
Date Gift Accepted	Description of Gift		
	10.00	forms as necessary)	
to e also Gov	ear under penalty of perjury that the above ach family member (as defined by Section acknowledge that this statement covers to ernment Code.	n 176.001(2), Local Government the 12-month period described by Signature of Lo	Code) of this local government officer. I Section 176.003(a)(2)(B), Local Covernment Officer
(1) Affiday to My (AURA ESPINOZA Pease completely ID #132148184 Commission Expires obtember 21, 2027	ete either option belov	v.
Sworn to and subscribed be	fore me by JOE CARR	EON this the	13 day of June.
A 1	ich, witness my hand and seal of office.		
Dauro Espira	in LAURA ESPI	NOZA	NOTARYPUBLIC
Signature of officer administering	Toath Printed name of office	er administering oath	Title of officer administering oath
	· · · · · · · · · · · · · · · · · · ·	OR	
(2) Unsworn Declaration			
My name is		, and my date of birth is	i
My address is			
	(street)		(state) (zip code) (country)
Executed in	County, State of	, on the day of(mont	h) 20
		Signature of Local G	Sovernment Officer (Declarant)

LOCAL GOVERNMENT OFFICER CONFLICTS DISCLOSURE STATEMENT (Instructions for completing and filing this form are provided on the next page.)

FORM CIS

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 RFQ 24/040YR
Name of Local Government Officer	Engineering Services
Deisy Rubio	
2 Office Held	
Buyer	
3 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 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	Section 176.003(a)(2)(B).
Date Gift Accepted Description of Gift	
Date Gift Accepted Description of Gift	
(attach additional forms as necessary)	
also acknowledge that this statement covers the 12-month period described by Sec Government Code. CHARISMA TOLBERT Notary Public, State of Texas Comm. Expires 02-02-2025 Notary ID 130990828 Please complete either option below:	
Sworn to and subscribed before me by Deisy Rubio this the Lagrange to certify which, witness my hand and seal of office.	the day of June.
Signature of officer 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	e) (zip code) (country)
Executed in County, State of , on the day of (month)	, 20 (year)
Signature of Local Gove	rnment Officer (Declarant)

LOCAL GOVERNMENT OFFICER CONFLICTS DISCLOSURE STATEMENT (Instructions for completing and filing this form are provided on the next page.)

FORM CIS

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	0- 1
EDNA E. Johnson	RF9 24/0404R
Director of Procurement Services	
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.	p and each family relationship
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)	
also acknowledge that this statement covers the 12-month period described by Second Government Code. CHARISMA TOLBERT Notary Public, State of Texas Comm. Expires 02-02-2025 Notary ID 130990828 Please complete either option below:	Gavernment Officer
NOTARY STAMP/SEAL Sworn to and subscribed before me by Edha E. Johnson this the	th T
-11	day of June
Signature of officer administering oath Printed name of officer administering oath	Notary Title of officer administering oath
OR THE RESERVE OF THE PROPERTY	Entitle State of the State of Ball
(2) Unsworn Declaration	
My name is, and my date of birth is	<u> </u>
My address is,,	
(street) (city) (started in County, State of on the day of (month)	(country) (zip code) (country) (year)
Signature of Local Gove	ernment Officer (Declarant)

LOCAL GOVERNMENT OFFICER CONFLICTS DISCLOSURE STATEMENT (Instructions for completing and filling this form are provided on the next page.)

FORM CIS

This is the notice to the conversity lead assume and authority that the first the notice to the conversity lead assume and authority that the first the conversity lead assume and authority that the first the conversity lead as a second authority that the first	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	0 -1 10
Michelle Williams	RFQ 24/0401/2
2 Office Held	<i>t</i>
Executive DIRECTOR OF FAGLITIES	
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.	p and each family relationship
5 List gifts accepted by the local government officer and any family member, if aggreg	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 Description of Gift	
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 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 acknowledge that this statement covers the 12-month period described by Section 176.001(2), Local Government Code acknowledge that this statement covers the 12-month period described by Section 176.001(2), Local Government Code acknowledge that this statement covers the 12-month period described by Section 176.001(2), Local Government Code acknowledge that this statement covers the 12-month period described by Section 176.001(2), Local Government Code acknowledge that this statement covers the 12-month period described by Section 176.001(2), Local Government Code acknowledge the 176.001(2), Local Government Code acknowledge the 176.001(2), Local Gove	
NOTARY STAMP/SEAL	
Swom to and subscribed before me by Michaele Williams this the	day of June
20, to certify which, witness my hand and seel of office.	A \ 1
Signature of officer administering cath Printed game of officer administering cath	Motory
The state of the s	Title of officer administering oath
(2) Unsworn Declaration	
My name is, and my date of birth is	
My address is	
(street) (city) (state	e) (zip code) (country)
Executed in, on theday of	, 20 (year)
Signature of Local Gover	nment Officer (Declarant)