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				
Deisy Rubio				
2 Office Held				
Buyer				
3 Name of vendor described by Sections 176.001(7) and 176.003(a), Local Government	RFP# 23/034IA-3			
Code				
N/H				
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)				
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. 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 Delsy Rubio this the 20 , to certify which, witness my hand and seal of office. Notation this the 20 har Is my 101bed Signature of officer administering oath Printed name of officer administering oath	day of March, Notary Title of officer administering oath			
OR OR				
(2) Unsworn Declaration				
My name is, and my date of birth is	·			
My address is				
	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

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This questionnaire refle	ects changes made to the law by H.B.	23, 84th Leg., Regular Session.	OFFICE USE ONLY
government officer ha	the appropriate local governmental as become aware of facts that require napter 176, Local Government Code.	the officer to file this statement	Date Received
1 Name of Local Gov			
Jesselyn	Arceneaux		
2 Office Held			
Assistant !	Director		
3 Name of vendor des	scribed by Sections 176.001(7) and	176.003(a), Local Government	RFP# 23/034IA-3
Code			
N/A Description of the	nature and extent of each employme	ent or other husiness relationsh	in and each family relationship
with vendor name		ent of other business relationsh	ip and each family relationship
	by the local government officer and in item 3 exceeds \$100 during the		
Date Gift Accepted		ft	
Date Gift Accepted	Description of Gift		
6 SIGNATURE I	swear under penalty of perjury that the abo	al forms as necessary)	
CHARISM Notary Public Comm. Expir	Also acknowledge that this statement covering the coverin	Desila N	Government Officer
NOTARY STAMP/SEA			. th
Sworn to and subscribed	before me by Ssayn	this the	day of March.
80 01 , to certify	which, witness my hand and seal of office.		
Charrie Ol	to Charism	e lolland	Notcry
Signature of officer administe	Printed name of off	icer administering oath	Title of officer administering oath
		OR	
(2) Unsworn Declarati	on		
My name is		, and my date of birth is	
My address is		, and my date of bitti is	
	(street)	(city) (stat	(country)
Executed in	County, State of	` ''	, 20
		(monut)	(year)
		Signature of Local Gove	ernment 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 MARK PEVEZ	
Office Held Cavecy fathary Manager 3 Name of vendor described by Sections 176.001(7) and 176.003(g), Local Government	
Name of vendor described by Sections 176.001(7) and 176.003(4), Local Government Code	RFP# 23/034IA-3
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 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)	
CHARISMA TOLBERT Notary Public, State of Texas Comm. Expires 02-02-2025 Notary ID 130990828 Please complete either option below:	Government\Otticer
NOTARY STAMP/SEAL	with AA
-01	day of March.
no certify which, witness my hand and sealer office.	Notary
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) (stat	e) (zip code) (country)
Executed in County, State of, on the day of(month)	, 20
Clamabian of Legal Cours	imment Officer (Declerant)

LOCAL GOVERNMENT OFFICER CONFLICTS DISCLOSURE STATEMENT

FORM CIS

(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 V A & L C 2 Office Held			
OUTREACH CORDINGTOR			
3 Name of vendor described by Sections 176.001(7) and 176.003(a), Local Government Code	RFP# 23/034IA-3		
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 Glft Accepted Description of Gift			
(attach additional forms as necessary)			
to each lamily member (as defined by Section 176.00](2), Local Government Code also acknowledge that this statement covers the 12-month period described by Section 176.00](2), Local Government Code also acknowledge that this statement covers the 12-month period described by Section 176.00](2), Local Government Code also acknowledge that this statement covers the 12-month period described by Section 176.00](2), Local Government Code also acknowledge that this statement covers the 12-month period described by Section 176.00](2), Local Government Code also acknowledge that this statement covers the 12-month period described by Section 176.00](2), Local Government Code also acknowledge that this statement covers the 12-month period described by Section 176.00](2), Local Government Code also acknowledge that this statement covers the 12-month period described by Section 176.00](2), Local Government Code also acknowledge that this statement covers the 12-month period described by Section 176.00](2), Local Government Code also acknowledge that this statement covers the 12-month period described by Section 176.00](2), Local Government Code also acknowledge that this statement covers the 12-month period described by Section 176.00](2), Local Government Code also acknowledge that this statement covers the 12-month period described by Section 176.00](2), Local Government Code also acknowledge that this statement covers the 12-month period described by Section 176.00](2), Local Government Code also acknowledge that this statement covers the 12-month period described by Section 176.00](2), Local Government Code acknowledge that this statement covers the 12-month period described by Section 176.00](2), Local Government Code acknowledge that this statement covers the 12-month period described by Section 176.00](2), Local Government Code acknowledge that this statement covers the 12-month period described by Section 176.00](2), Local Government Code acknowledge that this statement covers the 12-month period described by Sectio	Government Officer		
NOTARY STAMP/SEAL Sworm to and subscribed before me by Michael Wilson this the 6	11. th day of March.		
haven Older Charisma Tolkert	Notary		
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	A defendable described		
(street) (city) (state of on the day of (month)			
Signature of Local Gove	rnment Officer (Declarant)		