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, Name of Local Government Officer MAR **19** 2019 CHRISTIE WAKEFIELO CLERK COUNTY COL LEON COUNTY 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 1 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 LINDA C SHANNON covers the 12-month period described by Section 176.003(a), Local Government Code. Notary ID # 4478210 My Commission Expires May 9, 2020 Signature of Local Government Officer AFFIX NOTARY STAMP / SEAL ABOVE Sworn to and subscribed before me, by the said , to certify which, witness my hand and seal of office. Signature of officer administering oath Title of officer administering oath

Signature of officer administering oath

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. Name of Local Government Officer 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 _____ N/ R Date Gift Accepted _______ Description of Gift _______ \(\mathcal{N} \seta \) Date Gift Accepted M/a Description of Gift M/a (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 176.003(a), Local Government Code. DEBRA E. REEDER My Notary ID # 8370363 Signatule of Local Government Officer Expires August 4, 2022 AFFIX NOTARY STAMP / SEAL ABOVE Sworn to and subscribed before me, by the said William Dean , to certify which, witness my hand and seal of office.

Printed name of officer administering oath

Title of officer administering oath

ignature of officer administering oath

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 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 David P. Welch Office Held Constable Pct. 4 Name of person described by Sections 176.002(a) and 176.003(a), Local Government Code D&D Hardware Description of the nature and extent of employment or other business relationship with person named in item 3 I am President of D&D Hardware, a retail store that County Commissioners do business with for supplies. 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 176.003(a), Local Government Code. JESSICA CAVENDER Notary Public, State of Texas Comm. Expires 09-26-2020 Signature of Local Government Officer Notary ID 130836933 NOTARY STAMP / SEAL ABOVE Sworn to and subscribed before me, by the said _ , to certify which, witness my hand and seal of office

Printed name of officer administering oath

r administering oath

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. Name of Local Government Officer TOBY WINN Office Held ALEY 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 176.003(a), Local Government Code. STEPHEN R. DICKER My Notary ID # 10843199 Expires December 4, 2022 Signature of Local Government Officer AFFIX NOTARY STAMP / SEAL ABOVE Sworn to and subscribed before me, by the said 10BY WINN , 20 <u>/9</u> , to certify which, witness my hand and seal of office. STEPHEN R. DILKER This ADMINISTRATOR Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath

FORM CIS

| Description of the nature and extent of employment or other business relationship with person named in item 3 | (indudations for completing that find are p | | |
|---|---|---|---|
| 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 | This questionnaire reflects changes made to the law b | y H.B. 1491, 80th Leg., Regular Session. | OFFICE USE ONLY |
| Office Held JALEK 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 with person named in item 3 NA List gifts accepted by the local government officer and any family member, excluding gifts described by Section 176.003(a), I, 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 (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 a family member (as defined by Section 176.001(2), Local Government Code) of this local government officer. I also acknowledge that the statement officer in the school of Signature of Local Government Code. STEPHENR DICKER My Notary D # 10643199 Exprise December 4, 2012 Signature of Local Government-Officer AFFIX NOTARY STAMP / SEAL ABOVE Sworn to and subscribed before me, by the said TISHA PISKS this the | government officer has become aware of facts that | require the officer to file this statement | Date Received |
| Office Held JALER 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 with person named in item 3 NA 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 | Name of Local Government Officer | | ruld |
| 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 with person named in item 3 NA 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 | TISHA SPINKS | | MAR 1 4 2019 |
| 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 with person named in item 3 NA 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 | | В | CANADA TOPE |
| Description of the nature and extent of employment or other business relationship with person named in item 3 Description of the nature and extent of employment or other business relationship with person named in item 3 Description of Gift | JAILER | | LECK COUNTY TO GS |
| Description of the nature and extent of employment or other business relationship with person named in item 3 **Mathematical District Properties 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 (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 176.003(a), Local Government Code. **STEPHEN R. DICKER** My Notary D # 10843199 Expires December 4, 2022 Signature of Local Government Officer AFFIX NOTARY STAMP / SEAL ABOVE Sworn to and subscribed before me, by the said \$\int \text{STATA} \text{SPLNS} \text{Signature of Local Government Officer} AFFIX NOTARY STAMP / SEAL ABOVE Sworn to and subscribed before me, by the said \$\int \text{STATA} \text{SPLNS} \text{Signature of Local Government Officer} AFFIX NOTARY STAMP / SEAL ABOVE Sworn to and subscribed before me, by the said \$\int \text{STATA} \text{SPLNS} \text{Signature of Local Government Officer} AFFIX NOTARY STAMP / SEAL ABOVE Sworn to and subscribed before me, by the said \$\int \text{STATA} \text{SPLNS} \text{Signature of Local Government Officer} AFFIX NOTARY STAMP / SEAL ABOVE Sworn to and subscribed before me, by the said \$\int \text{STATA} \text{SPLNS} \text{Signature of Local Government Officer} AFFIX APPLIANCE THE | Name of person described by Sections 176.002 | (a) and 176.003(a), Local Government | Code |
| 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 (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 176.003(a), Local Government Code. STEPHEN R. DICKER My Notary ID # 10434199 Expires December 4, 2022 Signature of Local Government-Officer AFFIX NOTARY STAMP / SEAL ABOVE Sworn to and subscribed before me, by the said 715HA SPISKS this the 147 day of MARCH 2018 AMAIN ISTAMED. TAKE AMAIN ISTAMED. | N/A | | |
| 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 | Description of the nature and extent of employ | ment or other business relationship w | ith person named in item 3 |
| 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 | N/A | | |
| Date Gift Accepted Description of Gift | 176.003(a-1), if aggregate value of the gifts acc | | |
| 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 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 176.003(a), Local Government Code. STEPHEN R. DICKER My Notary ID # 10843199 Expires December 4, 2022 Signature of Local Government Officer AFFIX NOTARY STAMP / SEAL ABOVE Sworn to and subscribed before me, by the said 7/5HA 5PINICS, this the 4TH day of MANEH, 2019, to certify which, witness my hand and seal of office. STECHEN R. DICKEN TAIL ADMINISTRATOR | Date Gift Accepted Description | of Gift | |
| 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 176.003(a), Local Government Code. STEPHEN R. DICKER My Notary ID # 10843199 Expires December 4, 2022 Signature of Local Government Officer AFFIX NOTARY STAMP / SEAL ABOVE Sworn to and subscribed before me, by the said TISHA SPINICS, this the YTA day of MANCH, 20 19, to certify which, witness my hand and seal of office. STEPHEN R. DICKEN TANK APPLIANTEMENT | Date Gift Accepted Description | of Gift | |
| 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 176.003(a), Local Government Code. STEPHEN R. DICKER My Notary ID # 10843199 Expires December 4, 2022 Signature of Local Government Officer AFFIX NOTARY STAMP / SEAL ABOVE Sworn to and subscribed before me, by the said TISHA SPINICS , this the HTM day of MANCH , 20 19 , to certify which, witness my hand and seal of office. STRIKEN R. DICKEN TARL APPLIANCE APPLIANCE TARL APPLIANCE | (attach a | dditional forms as necessary) | • |
| Signature of Local Government Officer AFFIX NOTARY STAMP / SEAL ABOVE Sworn to and subscribed before me, by the said TISHA SPINICS , this the 14Th day of MANCH , 20 19 , to certify which, witness my hand and seal of office. Sporthan C. Dicken This Application | STEPHEN R. DICKER My Notary ID # 10843199 | sclosure applies to a family member (as defir t Code) of this local government officer. I also | ned by Section 176.001(2), Local by acknowledge that this statement |
| Sworn to and subscribed before me, by the said TISHA SPINICS , this the 14Th day of MANCH , 20 19 , to certify which, witness my hand and seal of office. Sporthan C. Dicken This ADMINISTRATOR | ************************************** | Signature of Local | Government Officer |
| of MANCH, 20 19, to certify which, witness my hand and seal of office. Sporthan C. Dicken JAIL ADMINISTRATOR | | | |
| STEPHEN R. DICKEN JAIL ADMINISTRATOR | Sworn to and subscribed before me, by the said 115H | 4 Spiles | , this the/\frac{\frac{1}{4}T^4}{} day |
| | 1 | | |
| Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath | | Dicker JAIL | ADMINISTRATOR |
| | Signature of officer administering oath Printe | d name of officer administering oath | Title of officer administering oath |

AFFIX NOTARY STAMP / SEAL ABOVE

Signature of officer administering oath

of Marien

Sworn to and subscribed before me, by the said

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 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 MARYA CABRERA Office Held 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 176.003(a), Local Government Code, STEPHEN R. DICKER My Notary ID # 10843199 Maya J. Caluua
Stanature of Local Government Officer Expires December 4, 2022

, to certify which, witness my hand and seal of office.

MANYA CABRERA , this the 14TH

STEPHEN R. DICKER Thi ADMINISTRATION

Printed name of officer administering oath

Title of officer administering oath

| LOCAL GOVERNMENT OFFICER | FORM CIS |
|--|--|
| CONFLICTS DISCLOSURE STATEMENT | er and |
| (Instructions for completing and filing this form are provided on the next page.) | 142 a 226 d |
| 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. | Pate I received FILED |
| Name of Local Government Officer | 91/am |
| ALICE MILLER | MAR 1 2 2019 CHRISTIE WAMEFIELD |
| Office Held | BY PHOUGHANDER |
| COMMUNICATIONS/JAILER | LEÓN COUNTY, TEXAS |
| Name of person described by Sections 176,002(a) and 176,003(a), Local Governmen | t Code |
| N/A | - term - renta is a produced della - |
| Star) | ilth person named in item 3 |
| Description of the nature and extent of employment or other business relationship values in the mature and extent of employment or other business relationship values in the mature and extent of employment or other business relationship values and extent of employment or other business relationship values and extent of employment or other business relationship values and extent of employment or other business relationship values. | The Section |
| talement N/A | um i seria e su me L |
| | |
| List gifts accepted by the local government officer and any family member, exclusion 176,003(a-1), if aggregate value of the gifts accepted from person named in Item 3 experiod described by Section 176,003(a)(2)(B) Date Gift Accepted Description of Gift | |
| | • |
| Date Gift Accepted Description of Gift | The state of the s |
| Date Gift Accepted Description of Gift | 46 |
| (attach additional forms as necessary) | New Carrier Carryllants |
| I swear under penalty of perjury that the above statetine that the disclosure applies to a family member (as de Government Code) of this local government officer. The covers the 12-month penal described by Section 176.0 My Notary D # 131841033 Express January 3, 2023 Signature of Lo | nt is true. Indicomect lacknowledge fined by Section 176.001(2), Local ilso acknowledge that this statement |
| AFFIX NOTARY STAMP / SEAL ABOVE | |
| Sworn to and subscribed before me, by the said ALICE MILLER of MARCH 20 19 , to certify which, witness my hand and seal of office. | inis the 4TH day |
| Outto wells batton wells | Jasiler |
| Signature of officer administering oath Printed name of officer administering oath | Title of officer administering oath |

9035364357

| LOCAL GOVERNME | NT OFFICER | FORM CIS |
|--|--|--|
| CONFLICTS DISCLO | | |
| | g this form are provided on the next page.) | OF CEUSEONLY |
| | acts to the law by H.B. 1491, Both Leg., Regular Seasion. | OFFICEUSEURCE |
| This is the notice to the appropriate government officer has become awar in accordance with Chapter 176, Lorentz and the contract of the contr | te local governmental entity that the following local are of facts that require the officer to file this statement call Government Code. | Data Received |
| Name of Local Government Office | | [] John |
| APRIL EH | | MAR 1 2 2019 |
| | *** | CHRISTIE WAYSELED |
| Communication | s Supervisor, Leon County Sheriffs Office | LEON COUNTY, TEXAS |
| 7 Was at a see described by 9 | actions 176,002(a) and 176,003(a), Local Governmen | t Cade |
| | all applied a large and a larg | |
| - minuscription | xtent of employment or other business relationship. | with partice named in Itam 3 |
| Description of the nature and s | • | ^} |
| N/A | ng local noment | m i samus |
| period described by Section 17 | of the gifts accepted from person named in Item 3 e r6.003(e)(Z)(B) Description of Gift | |
| S-1- Ditt Asserted | Description of Gift | |
| Date Gltt Accebied | | |
| Date Gift Accepted | | A STATE OF THE STA |
| | (attach additional forms as necessary) | |
| 6 AFPIDAVIT | I swear under penalty of perjury that the above statement that the disclosure applies to a family mamber (and Government Code) of this local government officer: I a covers the 12-month period described by Section 1766. | elimited by: Section 176001(2), Local |
| PAT GIFFORD My Notary ID # 957/ Expires November 30 | 2008 And Care | GIL Coveran in Officer in |
| APRIX NOTARY STAMP I SEAL Sworn to and subscribed before me, | A Land & Which | this the day |
| of March 2019 | _, to certify which witness my hand and soal of office. | |
| Signature of officer sommistaring | bath Printed name of officer administering cath | Tile of pricer atiministeding onth |
| | | Adopted 06/29/200 |

FORM CIS

| 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. Name of Local Government Officer | |
|---|----------------|
| MAR 0 8 2019 2 Office Held Deputy Shevier 3 Name of person described by Sections 176.002(a) and 176.003(a), Local Government Code | |
| 2 Office Held Deputy Shevier Name of person described by Sections 176.002(a) and 176.003(a), Local Government Code | , |
| 2 Office Held Deputy Shevier 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 |
| NIA | |
| List gifts accepted by the local government officer and any family member, excluding gifts described by Se 176.003(a-1), if aggregate value of the gifts accepted from person named in item 3 exceed \$250 during the 12-m period described by Section 176.003(a)(2)(B) | ction ionth |
| Date Gift Accepted Description of Gift/ | |
| 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 a family member (as defined by Section 176.001(2), Loc Government Code) of this local government officer. I also acknowledge that this stateme covers the 12-month period described by Section 176.003(a), Local Government Code. PAT GIFFORD My Notary ID # 3670209 Expires November 30, 2021 | al |
| Signature of Local Government Officer | _ |
| Swom to and subscribed before me, by the said <u>Jaskel Foster</u> , this the 4 | |
| of Thursen, 20 19, to certify which, witness my hand and seal of office. | day |

Signature of officer administering oath

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. Name of Local Government Officer and W Faraus-MAR 0 8 2019 Office Held ommission Petz 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 1/76.003(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 176.003(a), Local Government Code. DEBRAE. REEDER My Notary ID # 8370363 Expires August 4, 2022 Signature of Local Government Officer AFFIX NOTARY STAMP / SEAL ABOVE Sworn to and subscribed before me, by the said _ to certify which, witness my hand and sea

Printed name of officer administering oath

agen of this for your elikien no arize a . Elikum id lo bud. នួចក្រុម្បីផ្ LOCAL GOVERNMENT OFFICER FORM CIS Si to the ansplay. C. Natifally CONFLICTS DISCLOSURE STATEMENT and Joseph and the States · (基) 产生10世 (6) 135 5 7 (Instructions for completing and filing this form are provided on the next page.) त्र र अ**स्ट्रिक्ट र**हत 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 Date Received government officer has become aware of facts that require the officer to file this statement, grandad. ्र_ा्री (विकर् in accordance with Chapter 176, Local Government Code. Second. Name of Local Government Officer n villigijin evid (v Chara) ulie R. Mullins 地加美国 17. MAR 0-8-2019 Office Held Dispatcher / Jailer Name of person described by Sections 176.002(a) and 176.003(a), Local Government Code **Hostor** Jan Jenas, ar all lighter Description of the nature and extent of employment or other business relationship with person named in item 3 NA William Fra billio membe The America 1986 9344 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 (W. 74) period described by Section 176.003(a)(2)(B) A. Alesto Cas ny, indian (6)中海航上外域 等 學的學科學 Art to Serve and the Date Gift Accepted Description of Gift Date Gift Accepted Description of Gift a∰i ortondarii d forman up ber Date Gift Accepted Description of Gift 100 Mars nano, (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 175 001(2), Local Government Code) of this local government officer. Lalso acknowledge that this statement covers the 12-month period described by Section 176:003(a), Local Government Code. DEBRAE, REEDER My Notary ID #8370363 Expires August 4, 2022 of Local Government Officer AFFIX NOTARY STAMP / SEAL ABOVE

of March, 20 19 to certify which, witness my hand and seal of office.

Signature of officer administering oath

Title of officer administering oath

ueran alam, darakat

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 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 RONNIE WATERS MAR 08 2019 JALER 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 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 176.003(a), Local Government Code. STEPHEN R. DICKER My Notary ID # 10843199 Expires December 4, 2022 AFFIX NOTARY STAMP / SEAL ABOVE Sworn to and subscribed before me, by the said KONNIE WATENS , to certify which, witness my hand and seal of office. STEPHEN (L DICKEN Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath

FORM CIS

| (more account for completing and ming and i | om are provided on the flext page.) | |
|--|---|---|
| | the law by H.B. 1491, 80th Leg., Regular Session. | OFFICE USE ONLY |
| | al governmental entity that the following local acts that require the officer to file this statement vernment Code. | Date Received |
| Name of Local Government Officer | ······································ | THE THE |
| Hilton D. George | | FILED |
| 2 Office Held | | MAR 0 8 2019 |
| County Jailer | • | B CLIFIC WALEFULD LEON COUNTY, TEXAS |
| Name of person described by Section | s 176.002(a) and 176.003(a), Local Government | Code |
| NA | | |
| 4 Description of the nature and extent o | f employment or other business relationship w | rith person named in item 3 |
| NA | | |
| List gifts accepted by the local governous 176.003(a-1), if aggregate value of the period described by Section 176.003(a-1). | rnment officer and any family member, exclud gifts accepted from person named in item 3 ex a)(2)(B) | ling gifts described by Section ceed \$250 during the 12-month |
| Date Gift Accepted De | scription of Gift | |
| Date Gift Accepted De | scription of Gift | |
| Date Gift Accepted De | scription of Gift | |
| | (attach additional forms as necessary) | |
| • | I swear under penalty of perjury that the above statement that the disclosure applies to a family member (as defi Government Code) of this local government officer. I als covers the 12-month period described by Section 176.003 | ned by Section 176.001(2), Local to acknowledge that this statement |
| HARRY VANSKIKE My Notary ID # 125143307 Expires April 18, 2021 | Signature of Loca | I Government Officer |
| awam. | | |
| AFFIX NOTARY STAMP / SEAL ABOVE | id HILTON D. GEORGE | , this the $\frac{1/\frac{1}{2}}{2}$ day |
| Sworn to and subscribed before me, by the sa of March , 20 19 , to certi | fy which, witness my hand and seal of office. | , this the day |
| Harry Vanakis | HARRY VANSKIRE | NOTARY |
| Signature of officer administering oath | Printed name of officer administering oath | Title of officer administering oath |

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 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 ROBERT STANFORD MAR 08 2019 Office Held JAILER Name of person described by Sections 176.002(a) and 176.003(a), Local Government Code NIA 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 176.003(a), Local Government Code. STEPHEN R. DICKER My Notary ID # 10843199 Expires December 4, 2022 Signature of Local Government Officer AFFIX NOTARY STAMP / SEAL ABOVE ROBERT STANFORD, this the GTH day Sworn to and subscribed before me, by the said MARCH 2019, to certify which, witness my hand and seal of office. JAIC ADMINISTRATION Signature of officer administering oath Title of officer administering oath Printed name of officer administering oath

FORM CIS

| • | e to the law by H.B. 1491, 80th Leg., Regular Session. | OFFICE USE ONLY |
|--|--|---|
| | 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 | | FILED |
| PAT GIFFOR | | MAR 0 8 2019 |
| 2 Office Held | | CHRETE! |
| JAILER | <u> </u> | LEON COUNTY, TEXAS |
| Name of person described by Sect | tions 176.002(a) and 176.003(a), Local Government | t Code |
| N/A | | |
| Description of the nature and exte | nt of employment or other business relationship w | vith person named in item 3 |
| N/A | | |
| | overnment officer and any family member, exclud 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) | |
| 6 AFFIDAVIT | I swear under penalty of perjury that the above statement that the disclosure applies to a family member (as defined as defined as the following statement of the following statement o | ned by Section 176.001(2), Local to acknowledge that this statement |
| STEPHEN R. DICKER My Notary ID # 10843199 Expires December 4, 2022 APPLY NOTARY STAMP / SEAL ABOV | 4 | 1 Government Officer |
| Sworn to and subscribed before me, by the | De Cigno | , this the day |
| De 5 | TEPHEN R Dicker JA | hi Apprinistration |
| Signature of officer administering oath | Printed name of officer administering oath | Title of officer administering oath |

FORM CIS

| This questionnaire reflects changes mad | e to the law by H.B. 1491, 80th Leg., Regular Session. | OFFICE USE ONLY |
|--|--|---|
| | 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 Office | • | FILED |
| HARRY VANSK | IKE | MAR 08 2019 |
| 2 Office Held | | AND STEVENS TENDER |
| JAIL SERGEAN | Г | LEON COUNTY, TEXAS |
| Name of person described by Sec | tions 176.002(a) and 176.003(a), Local Government | Code |
| NA | | |
| Description of the nature and exte | nt of employment or other business relationship w | ith person named in item 3 |
| N/A | | |
| List gifts accepted by the local graph 176.003(a-1), if aggregate value of period described by Section 176.0 | overnment officer and any family member, exclud the gifts accepted from person named in item 3 ex 03(a)(2)(B) | ing gifts described by Section ceed \$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) | |
| 6 AFFIDAVIT | I swear under penalty of perjury that the above statement that the disclosure applies to a family member (as defin Government Code) of this local government officer. I also covers the 12-month period described by Section 176.003 | ned by Section 176.001(2), Local o acknowledge that this statement |
| STEPHEN R. DICKER My Notary ID # 10843199 Expires December 4, 2022 AFFIX NOTARY STAMP / SEAL ABO | R Harry Vanskik Signature of Local | Government Officer |
| Sworn to and subscribed before me, by the | | , this the day |
| | STEPHEN R. Dicker JAN | - ADMINISTMEN |
| Signature of officer administering oath | | Title of officer administering oath |

| (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 | FILED |
| STEPHEN R. DICKER 2 Office Held | MAR 08 2019 |
| JAIL ADMINISTRATOR | CRISTIE WAXE TO BE |
| Name of person described by Sections 176.002(a) and 176.003(a), Local Government | Code |
| N/A | |
| Description of the nature and extent of employment or other business relationship w | rith person named in item 3 |
| N/A | |
| List gifts accepted by the local government officer and any family member, excluded 176.003(a-1), if aggregate value of the gifts accepted from person named in item 3 experiod 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 that the disclosure applies to a family member (as defined Government Code) of this local government officer. I also covers the 12-month period described by Section 176.003 | ned by Section 176.001(2), Local o acknowledge that this statement |
| DALTON WELLS My Notary ID # 131841033 Expires Jenuery 3, 2023 | - |
| Signature of Local | I Government Officer |
| AFFIX NOTARY STAMP / SEAL ABOVE | , (C) |
| Sworn to and subscribed before me, by the said <u>STEPHEN</u> R. DICKEN of MANCH, 20 19, to certify which, witness my hand and seal of office. | , this the day |
| Botton wells Dalton wells | Jailer |
| Signature of officer administering oath Printed name of officer administering oath | Title of officer administering oath |

| (Instructions for completing and filing th | is 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 |
| | 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 | | FILED |
| ANTHONY STE | RNS | MAR 0 8 2019 |
| 2 Office Held | | CARISTEWARTER |
| JAIL SERGEANT | - | B LEON COUNTY, TEXAS |
| Name of person described by Secti | ons 176.002(a) and 176.003(a), Local Government | Code |
| N/A | | |
| Description of the nature and exter | t of employment or other business relationship w | ith person named in item 3 |
| N/A | | |
| | vernment officer and any family member, exclud the gifts accepted from person named in item 3 ex 3(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) | |
| 6 AFFIDAVIT | I swear under penalty of perjury that the above statement that the disclosure applies to a family member (as defin Government Code) of this local government officer. I also covers the 12-month period described by Section 176.003 | ned by Section 176.001(2), Local or acknowledge that this statement |
| 8TEPHEN R. DICKER My Notary ID # 10843199 Expires December 4, 2022 | | Government Officer |
| Sworn to and subscribed before me, by the | I I | , this the day |
| of MARCH , 20 19 , to a | ertify which, witness my hand and seal of office. | |
| 10 57 | PHEN R. DICKER JAIL | 40MINISTUTION |
| Signature of officer administering oath | Printed name of officer administering oath | Title of officer administering oath |

FORM CIS

| | e to the law by H.B. 1491, 80th Leg., Regular Session. | OFFICE USE ONLY |
|---|--|--|
| | local governmental entity that the following local e of facts that require the officer to file this statement l Government Code. | Date Received |
| Name of Local Government Office | r | FILED |
| DALTON WELL | 5 | MAR 0 8 2019 |
| 2 Office Held | | . OURIGIE WAS ACTED D. A |
| JALER | | THE MARKET |
| Name of person described by Sec | tions 176.002(a) and 176.003(a), Local Government | Code |
| NA | | |
| Description of the nature and exte | ent of employment or other business relationship w | ith person named in item 3 |
| N/A | | |
| | overnment officer and any family member, exclud 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) | |
| 6 AFFIDAVIT | I swear under penalty of perjury that the above statement that the disclosure applies to a family member (as defir Government Code) of this local government officer. I also covers the 12-month period described by Section 176.003 | ned by Section 176.001(2), Local o acknowledge that this statement |
| STEPHEN R. DICKER My Notary ID # 1084319 Expires December 4, 20 | y Datte well | and the second s |
| | Signature of Local | Government Officer |
| AFFIX NOTARY STAMP / SEAL ABO | | , this the day |
| | certify which, witness my hand and seal of office. | |
| Signature of officer administering oath | STEPHEN R. DICKEN. TA | Title of officer administering oath |
| | | |

FORM CIS

| (mediation of competing and iming the formatio provided on the flexibage.) | |
|--|-------------------------------------|
| 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 | FILED |
| Joey 5 Wlivan | MAR 0 8 2019 |
| 2 Office Held | AUDIOTIC WAYERIELA |
| Commissioner ##2 | LEGN COUNTY, YEXAS |
| Name of person described by Sections 176.002(a) and 176.003(a), Local Government | . Code |
| η/ω | |
| Description of the nature and extent of employment or other business relationship w | ith person named in item 3 |
| η/ω | |
| List gifts accepted by the local government officer and any family member, exclud 176.003(a-1), if aggregate value of the gifts accepted from person named in item 3 ex | |
| period described by Section 176.003(a)(2)(B) | coca 9200 daring the 12-month |
| Date Gift Accepted Description of Gift | |
| Date Gift Accepted Description of Gift N / C | |
| Date Gift Accepted Description of Gift N / C | |
| (attach additional forms as necessary) | |
| AFFIDAVIT I swear under penalty of perjury that the above statement | is true and correct I asknowledge |
| that the disclosure applies to a family member (as defin | ned by Section 176.001(2), Local |
| Government Code) of this local government officer. I also present the 12-month period described by Section 176.003 | |
| DEBRAE, REEDER | |
| My Notary ID # 8370363 Expires August 4, 2022 | hllm |
| Signature of Local | Government Officer |
| AFFIX NOTARY STAMP / SEAL ABOVE | 1.44 |
| Sworn to and subscribed before me, by the said Joe y Juliu van | this the 6 day |
| of | 1. 0 |
| Nibrat. Reedy Debra E. Reeder 1 | ptarytublic |
| Signature of officer administering oath Printed name of officer administering oath | Title of officer administering oath |

FORM CIS

| 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 1 | |
| 1 Name of Local Government Officer | | |
| Jofran Edwards | MAR 07 2019 CHRISTIE WAKEFIELD | |
| 2 Office Held | BY FEON COUNTY TEVES | |
| Office manager | LEON COUNTY, TEXAS | |
| Name of person described by Sections 176.002(a) and 176.003(a), Local Government | Code | |
| none | | |
| Description of the nature and extent of employment or other business relationship w | ith person named in item 3 | |
| $C \mid A$ | | |
| 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 \(\bigcap \frac{1}{12} \) Description of Gift \(\bigcap \frac{1}{12} \) | | |
| Date Gift Accepted N A Description of Gift N A | | |
| (attach additional forms as necessary) | | |
| 6 AFFIDAVIT | **** | |
| I swear under penalty of perjury that the above statement that the disclosure applies to a family member (as define Government Code) of this local government officer. I also covers the 12-month period described by Section 176.003 | ned by Section 176.001(2), Local co acknowledge that this statement | |
| DONNA GOLDEN Notary Public, State of Texas My Commission Expires December 16, 2019 Donna Golden Signature of Local | Wards Government Officer | |
| Sworn to and subscribed before me, by the said | this the 17 day | |
| Donne Golden | Election Polministrato | |
| Signature of officer administering oath Printed name of officer administering oath | Title of officer administering oath | |

| (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. | FILED |
| Name of Local Government Officer | |
| Laura Petty Parrish | MAR 0.7 2019 CARISTIE WAKEFIELD |
| 2 Office Held | JEON COUNTY TEYAS |
| Courty Extension Agent Name of person described by Sections 176.002(a) and 176.003(a), Local Government | LCON GOO VIII, TEXAS |
| 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 w | ith person named in item 3 |
| NA | · |
| List gifts accepted by the local government officer and any family member, excluded 176.003(a-1), if aggregate value of the gifts accepted from person named in item 3 ex | |
| period described by Section 176.003(a)(2)(B) | |
| Date Gift Accepted Nik Description of Gift Nik Description of Gift | |
| Date Gift Accepted NA Description of Gift NA | <u> </u> |
| Date Gift Accepted UA Description of Gift UA | |
| (attach additional forms as necessary) | |
| AFFIDAVIT I swear under penalty of perjury that the above statement that the disclosure applies to a family member (as defined overnment Code) of this local government officer. I als covers the 12-month period described by Section 176.003 | ned by Section 176.001(2), Local o acknowledge that this statement |
| JOFRAN EDWARDS ID #6548729 My Commission Expires July 16, 2022 Signature of Local | |
| AFFIX NOTARY STAMP / SEAL ABOVE | |
| Sworn to and subscribed before me, by the said Laura Pethy Parrist | this the 7th day |
| of <u>March</u> , 20 <u>l</u> , to certify which, witness my hand and seal of office. | |
| Leaves Johnston of Edwards | notary Rublic |
| Signature of officer administering oath Printed name of officer administering oath | Title of officer administering oath |

| (Instructions for completing and filing thi | s 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 |
| | ocal governmental entity that the following local of facts that require the officer to file this statement Government Code. | FILED |
| Name of Local Government Officer | | |
| Richard Parrish | • · · · · · · · · · · · · · · · · · · · | MAR 07 2019 CHRISTIE WAKEFIELD |
| 2 Office Held | | EY (SELECTIVE COUNTY DOUBLE |
| County Extension A | gent | ELON COUNTY, TEXAS |
| Name of person described by Section | ons 176.002(a) and 176.003(a), Local Governmen | t Code |
| None | | |
| 4 Description of the nature and exten | t of employment or other business relationship v | vith person named in item 3 |
| nla | | |
| 176.003(a-1), if aggregate value of t period described by Section 176.00 | • | sceed \$250 during the 12-month |
| Date Gift Accepted | Description of Gift | |
| | Description of Gift | |
| Date Gift Accepted <u>N/a</u> | Description of Gift | |
| | (attach additional forms as necessary) | |
| JOFRAN EDWARDS ID #6548729 My Commission Expires July 16, 2022 | I swear under penalty of perjury that the above statement that the disclosure applies to a family member (as def Government Code) of this local government officer. I also covers the 12-month period described by Section 176.00 Signature of Local | ined by Section 176.001(2), Local so acknowledge that this statement |
| AFFIX NOTARY STAMP / SEAL ABOV | | |
| Sworn to and subscribed before me, by the | said Kichard Harrish | , this the day |
| of march, 20/0, to a | ertify which, witness my hand and seal of office. | |
| C/Edwards | J. Edwards | notary Public |
| Signature of officer administering oath | Printed name of officer administering oath | Title of officer administering oath |

FORM CIS

| (instructions for completing and filling this form are provided on the flext 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 | | |
| Cassie L. Ferguson | MAR 07 2019 | |
| 2 Office Held | CHRISTIE WAKEFIELD CURRICHUM DESCURT | |
| County Extension Agent | LEON COUNTY, TEXAS | |
| Name of person described by Sections 176.002(a) and 176.003(a), Local Government | Code | |
| None | | |
| 4 Description of the nature and extent of employment or other business relationship w | ith person named in item 3 | |
| nla | · | |
| List gifts accepted by the local government officer and any family member, exclud 176.003(a-1), if aggregate value of the gifts accepted from person named in item 3 experiod described by Section 176.003(a)(2)(B) | | |
| Date Gift Accepted $\frac{n/a}{a}$ Description of Gift $\frac{n/a}{a}$ | - m - n/m | |
| Date Gift Accepted $\frac{n/a}{}$ Description of Gift $\frac{n/a}{}$ | | |
| Date Gift Accepted $\frac{n/\alpha}{}$ Description of Gift $\frac{n/\alpha}{}$ | | |
| (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 176.003(a), Local Government Code. JOFRAN EDWARDS iD #6548729 My Commission Expires July 16, 2022 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). Government Code) of this local government officer. I also acknowledge that this statement covers the 12-month period described by Section 176.003(a), Local Government Code. | | |
| | Government Officer | |
| AFFIX NOTARY STAMP / SEAL ABOVE | , this the \2+\ day | |
| Sworn to and subscribed before me, by the said <u>Cassie L. Krguson</u> of <u>march</u> , 20 <u>19</u> , to certify which, witness my hand and seal of office. | , this the <u>\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\</u> | |
| (XEdwards J. Edwards | notary Public | |
| gnature of officer administering oath Printed name of officer administering oath | Title of officer administering oath | |

FORM CIS

| This questionnaire reflects changes made to the la | w by H.B. 1491, 80th Leg., Regular Session | OFFICE USE ONLY |
|--|--|--|
| This is the notice to the appropriate local gov government officer has become aware of facts to in accordance with Chapter 176, Local Government | hat require the officer to file this statemen | |
| Name of Local Government Officer | | |
| Deneice Win | Λ Ν | MAR 07 2019 CHRILATIF WAKEEIELD |
| 2 Office Hold Juvenile Prof | | BY LEON COUNTY, TEXAS |
| 3 Name of person described by Sections 176. | | |
| Description of the nature and extent of emp | | |
| | | |
| List gifts accepted by the local governmer 176.003(a-1), if aggregate value of the gifts period described by Section 176.003(a)(2)(E | accepted from person named in item 3 | |
| Date Gift Accepted Descripti | ion of Gift | |
| Date Gift Accepted Descript | ion of Gift | |
| Date Gift Accepted Descripti | ion of Gift | |
| ` | ch additional forms as necessary) | |
| that the | r under penalty of perjury that the above statement disclosure applies to a family member (as disclosure applies t | efined by Section 176.001(2), Local also acknowledge that this statement |
| AFFIX NOTARY STAMP / SEAL ABOVE | | / H |
| Sworn to and subscribed before me, by the said | eh, witness my hand and seal of office. | , this the day |
| Signature of officer administering oath F | CINDAC. Channey Printed name of officer administering oath | Title of officer administering oath |
| | | - |

| (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. | OI TOU DOE OIGHT |
| 1 Name of Local Government Officer | |
| JERRY L. KLAWINSKY | MAR 0 5 2019 |
| MAINTENANCE DEPT | CHRISTIE WAKEFIELD CUERK COUNTY FEXAS |
| 3 Name of parent desired in the state of the | |
| Name of person described by Sections 176.002(a) and 176.003(a), Local Governmen | t Code |
| JERRY KLAWINSKY | |
| Description of the nature and extent of employment or other business relationship w | vith person named in item 3 |
| • | |
| | |
| List gifts accepted by the local government officer and any family member, excluding 176.003(a-1), if aggregate value of the gifts accepted from person named in item 3 experiod described by Section 176.003(a)(2)(B) | ling gifts described by Section ceed \$250 during the 12-month |
| 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 that the disclosure applies to a family member (as defin Government Code) of this local government officer. I also covers the 12-month period described by Section 176.003(| ned by Section 176,001(2), Local |
| LINDA C SHANNON Notary ID # 4478210 My Commission Expires May 9, 2020 Signature of Local | wristy |
| AFFIX NOTARY STAMP / SEAL ABOVE | \mathcal{U} |
| of Notch, 20 19, to certify which, witness my hand and seal of office. | , this the day |
| Signature of officer administering oath Printed name of officer administering oath T | itle of officer administering oath |

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 Date Received in accordance with Chapter 176, Local Government Code. Name of Local Government Officer Daundi L. Boren MAR 05 2019 Office Held CHRISTIE WAKEFIELD 911 Coordinator 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 NA 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 **EMMA CARRIGAN** covers the 12-month period described by Section 176,003(a), Local Government Code. Notary ID # 130523352 My Commission Expires February 3, 2020 Signature of Local Government Officer AFFIX NOTARY STAMP / SEAL ABOVE Sworn to and subscribed before me, by the said _ , to certify which, witness my hand and seal of office. Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath

| - | (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 |
| 1 3 | 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 n accordance with Chapter 176, Local Government Code. | Date Received |
| 1 | Name of Local Government Officer JAMES 5, CARRIGAN | FILED |
| | - CANCELYTTO | MAR 0 5 2019 |
| 2 | Office Held EMERGENCY MANUGEMENT COORDINATOR | CHRISTIE WAKEFIELD BY OF THE COUNTY COURT LECY COUNTY, TEXAS |
| 3 | Name of person described by Sections 176.002(a) and 176.003(a), Local Government | Code |
| 4 | Description of the nature and extent of employment or other business relationship with the second se | ith person named in Item 3 |
| 5 | 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) Date Gift Accepted Description of Gift | eed \$250 during the 12-month |
| | Date Gift Accepted Description of Gift | |
| | Date Gift Accepted Description of Gift | |
| 6 | (attach additional forms as necessary) | |
| | AFFIX NOTARY STAMP / SEAL ABOVE Sworm to and subscribed before me, by the said of March, 20 to certify which, witness my hand and seal of office. I swear under penalty of perjury that the above statement is that the disclosure applies to a family member (as define experiment Code) of this local government officer. I also covers the 12-month period described by Section 176.003(at the said of March, 20 to certify which, witness my hand and seal of office) **EMMA CARRIGAN** By Vernment Code) of this local government officer. I also covers the 12-month period described by Section 176.003(at the said of the said | ack by Section 176.001(2), Local acknowledge that this statement a), Local Government Code. |
| | Signature of officer administrator acet | tle of officer administering oath |
| | | |

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 ED |
| Name of Local Government Officer | 66AD o 4 o - |
| | MAR 0 4 2019 |
| Donne Solder | PHRY IE WAKEFIELD |
| | BY 1 200 1 |
| | LEON COUNTY, TEXAS |
| Office Held Election Administrator | |
| Name of person described by Sections 176.002(a) and 176.003(a), Local Government | Code |
| • | |
| lone | |
| Description of the nature and extent of employment or other business relationship w | ith person named in item 3 |
| | |
| lone | |
| List gifts accepted by the local government officer and any family member, exclud 176.003(a-1), if aggregate value of the gifts accepted from person named in item 3 experiod described by Section 176.003(a)(2)(B) | |
| Ω | |
| Date Gift Accepted - CII U Description of Gift - CI - | |
| 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 that the disclosure applies to a family member (as define Government Code) of this local government officer. | ned by Section 176.001(2), Local o acknowledge that this statement |
| covers the 12-month period described by Section 176.003 | (a), Local Government Code. |
| Notary Public, State of Texas My Commission Expires | _)0d _ |
| May 08, 2019 | Coverament Officer |
| Signature of Local | Government Officer |
| AFFIX NOTARY STAMP / SEAL ABOVE | |
| Sworn to and subscribed before me, by the said <u>Jonna Golden</u> | , this theday |
| of $Mach$, 20 19 , to certify which, witness my hand and seal of office. | |
| Motor Spelu Rober Shafer | Notary |
| Signature of officer administering oath Printed name of officer administering oath | Title of officer administering oath |
| V | |

| (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 Reseived |
| Name of Local Government Officer | MAR 0 4 2019 |
| Juganne Leathers 2 Office Help | CHRISTYE WAKEFIELD YEAR COUNTY OURS LEON COUNTY, TEXAS |
| Name/of person described by Sections 176.002(a) and 176.003(a), Local Government | t Code |
| None | |
| Description of the nature and extent of employment or other business relationship w | vith person named in item 3 |
| None | |
| List gifts accepted by the local government officer and any family member, excluding 176.003(a-1), if aggregate value of the gifts accepted from person named in item 3 experiod 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) | |
| I swear under penalty of perjury that the above statement that the disclosure applies to a family member (as defined by Section 176.003) ROBIN SHAFER Notary Public, State of Texas My Commission Expires May 08, 2019 I swear under penalty of perjury that the above statement that the disclosure applies to a family member (as defined by Section 176.003) ROBIN SHAFER Covers the 12-month period described by Section 176.003 May 08, 2019 Signature of Local | ned by Section 176.001(2), Local so acknowledge that this statement |
| Sworn to and subscribed before me, by the said <u>Suzanne Leathers</u> of <u>March</u> , 20 19, to certify which, witness my hand and seal of office. | 5 this the 4th day |
| Signature of officer administering oath Printed name of officer administering oath | No fary Title of officer administering oath |

| (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 Employee | |
| Lind C. Shannon | MAR 0 4 2019 |
| 2 Office Held Job title | CARISTNE WAKEFIELD |
| District Court Coordinator | LEON COUNTY, TEXAS |
| Name of person described by Sections 176.002(a) and 176.003(a), Local Government | t Code |
| N/A | |
| Description of the nature and extent of employment or other business relationship w | ith person named in item 3 |
| N/A | |
| List gifts accepted by the local government officer and any family member, excluding 176.003(a-1), if aggregate value of the gifts accepted from person named in item 3 experiod described by Section 176.003(a)(2)(B) | |
| Date Gift Accepted N/A Description of Gift | |
| Date Gift Accepted Description of Gift | · |
| Date Gift Accepted N/A Description of Gift | |
| (attach additional forms as necessary) | |
| I swear under penalty of perjury that the above statement that the disclosure applies to a family member (as defined by Notary ID # 130608323 Expires April 5, 2020 I swear under penalty of perjury that the above statement that the disclosure applies to a family member (as defined by Section 176.003) AFFIDAVIT I swear under penalty of perjury that the above statement that the disclosure applies to a family member (as defined by Section 176.003) AFFIDAVIT I swear under penalty of perjury that the above statement that the disclosure applies to a family member (as defined by Section 176.003) AFFIDAVIT I swear under penalty of perjury that the above statement that the disclosure applies to a family member (as defined by Section 176.003) AFFIDAVIT I swear under penalty of perjury that the above statement that the disclosure applies to a family member (as defined by Section 176.003) AFFIDAVIT I swear under penalty of perjury that the above statement that the disclosure applies to a family member (as defined by Section 176.003) AFFIDAVIT I swear under penalty of perjury that the above statement that the disclosure applies to a family member (as defined by Section 176.003) AFFIDAVIT I swear under penalty of perjury that the above statement that the disclosure applies to a family member (as defined by Section 176.003) | ned by Section 176.001(2), Local o acknowledge that this statement |
| Sworn to and subscribed before me, by the said Linds Shonns of Mouth, 20 1, to certify which, witness my hand and seal of office. | , this the day |
| Jammy Sanders Tammy Sanders | Notivey |
| Signature of officer administering oath Printed name of officer administering oath | Title of officer administering oath |

| CONFLICTS DISCLOSURE STATEMENT | |
|--|-------------------------------------|
| (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 | مسلد استلا استاد المساوريان |
| | MAR 0 1 2019 |
| Cassandra Noey 2 Office Held | |
| 1 | CHRISTIE WAKEFIELD |
| Icon County District Clerk | LEON COUNTY, TEXAS |
| Name of person described by Sections 176.002(a) and 176.003(a), Local Government | Code |
| None | |
| Description of the nature and extent of employment or other business relationship w | rith person named in item 3 |
| None | |
| 5 List gifts accepted by the local government officer and any family member, exclud | |
| 176.003(a-1), if aggregate value of the gifts accepted from person named in item 3 ex period described by Section 176.003(a)(2)(B) | ceed \$250 during the 12-month |
| Ar 1 A | |
| Date Gift Accepted Description of Gift | |
| Date Gift Accepted NA 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 that the disclosure applies to a family member (as defi | • |
| Government Code) of this local government officer. I also acknowledge that this statement | |
| tovers the 12-month period described by Section 176.003 | i(a), Local Government Code. |
| My Notary ID # 130608323 | // |
| Expires April 5, 2020 / Manala / | Government Officer |
| (Signature of Local | Government Onicer |
| AFFIX NOTARY STAMP / SEAL ABOVE | 154 |
| Sworn to and subscribed before me, by the said ASOMR NOEU | , this the day |
| of MACO, 20 11, to certify which, witness my hand and seal of office. | |
| James Sandara Tonancii Sandara | Notary |
| Signature of officer administering eath Printed name of officer administering oath | Title of officer administering oath |

| (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 Sessi | on. OFFICE USE ONLY |
| This is the notice to the appropriate local governmental entity that the following logovernment officer has become aware of facts that require the officer to file this statement in accordance with Chapter 176, Local Government Code. | OTTIOE OSE ONLY |
| 1 Name of Local Government Officer | - FILED |
| TAMMY Garders | MAR 0 1 2019 |
| 2 Office Held | CHRISTIE WAKEFIELD |
| County Judge Assistant | BY CLERK COUNTY COURT LEON COUNTY, TEXAS |
| Name of person described by Sections 176.002(a) and 176.003(a), Local Government | ent Code |
| None | |
| Description of the nature and extent of employment or other business relationshi | p with person named in item 3 |
| none | |
| List gifts accepted by the local government officer and any family member, exc 176.003(a-1), if aggregate value of the gifts accepted from person named in item 3 period described by Section 176.003(a)(2)(B) | exceed \$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) | |
| ROBIN SHAFER Notary Public, State of Texas My Commission Expires May 08, 2019 I swear under penalty of perjury that the above statement that the disclosure applies to a family member (as discovernment Code) of this local government officer. I covers the 12-month period described by Section 176.0 | lefined by Section 176.001(2), Local also acknowledge that this statement |
| AFFIX NOTARY STAMP / SEAL ABOVE | |
| sworn to and subscribed before me, by the said <u>Tammy Sanders</u> of <u>March</u> , 20 19, to certify which, witness my hand and seal of office. | this the day |
| Molin Shope Robin & hafer | Notary |
| Signature of officer administering oath Printed name of officer administering oath | Title of officer administering oath |

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 | |
| Pat Jalufka | MAR 0 1 2019 |
| 2 Office Held | CHRISTIE WAKEFIELD |
| Deputy County Clerk | LEÓN COUNTY, TEXAS |
| Name of person described by Sections 176.002(a) and 176.003(a), Local Government | t Code |
| N/A | |
| Description of the nature and extent of employment or other business relationship w | vith person named in item 3 |
| N/A | |
| List gifts accepted by the local government officer and any family member, excluded 176.003(a-1), if aggregate value of the gifts accepted from person named in item 3 experiod described by Section 176.003(a)(2)(B) | |
| Date Gift Accepted Description of Gift | |
| Date Gift AcceptedDescription of Giff | |
| 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 as defi | |
| govers the 12-month period described by Section 176.003 | 5 |
| TAMMY GAYLE SANDERS My Notary ID # 130608323 | /)/ |
| Expires April 5, 2020 | Course and Ciffeen |
| Signature of Local | Government Officer |
| AFFIX NOTARY STAMP / SEAL ABOVE | 1 St |
| Sworn to and subscribed before me, by the said HQT JQIUTKA | , this the day |
| of MYCCO, 20 1 1, to certify which, witness my hand and seal of office. | |
| Sammosandem TAMMy Sanders | Notary |
| Signature of officer administering oath Printed name of officer administering oath | Title of officer administering oath |

FORM CIS

CONFLICTS DISCLOSURE STATEMENT (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 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 MAR 0 1 2019 CHRISTIE WAKEFIELD Office Held 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** Date Gift Accepted (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 givers the 12-month period described by Section 176.003(a), Local Government Code. TAMMY GAYLE SANDERS My Notary ID # 130608323 Expires April 5, 2020 Signature of Local Government Office AFFIX NOTARY STAMP / SEAL ABOVE Sworn to and subscribed before me, by the said <u>HMQndQ</u> to certify which, witness my hand and seal of office.

മ്മമ്പ

Printed name of officer administering oath

Signature of officer administering oath

Title of officer administering oath

| (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 | FILED | |
| Christie Warrefield | MAR 0 1 2019 | |
| 2 Office Held Leon County Clerk | CHRISTIE VAKEFIELD (LERK GOUNTY COURT LEON COUNTY TEXAS | |
| | Codo | |
| Name of person described by Sections 176.002(a) and 176.003(a), Local Government | Code | |
| none | | |
| Description of the nature and extent of employment or other business relationship w | ith person named in item 3 | |
| | | |
| none | | |
| 5 List gifts accepted by the local government officer and any family member, exclud | ing gifts described by Section | |
| 176.003(a-1), if aggregate value of the gifts accepted from person named in item 3 experiod described by Section 176.003(a)(2)(B) | ceed \$250 during the 12-month | |
| Date Gift Accepted | | |
| Date Gift Accepted NONE Description of Gift NONE | | |
| Date Gift Accepted None Description of Gift None | | |
| (attach additional forms as necessary) | | |
| 6 AFFIDAVIT | | |
| I swear under penalty of perjury that the above statement that the disclosure applies to a family member (as defined that the disclosure applies the disclosure applies that the disclosure applies the | | |
| Government Code) of this local government officer. I also covers the 12-month period described by Section 176.003 | · · | |
| TAMMY GAYLE SANDERS | (a), Local Government Godo. | |
| My Notary ID # 130608323 Expires April 5, 2020 | celle fin | |
| Signature of Local | Government Officer | |
| AFFIX NOTARY STAMP / SEAL ABOVE | • | |
| Sworn to and subscribed before me, by the said Christie Wave Field | , this the day | |
| of Warrh, 20 19, to certify which, witness my hand and seal of office. | | |
| James Janders Tanny Janders | Mortage | |
| | Title of officer administering oath | |
| | | |

FORM CIS

| This questionnaire reflects changes made to the law by | y H.B. 1491, 80th Leg., Regular Session. | OFFICE USE ONLY |
|--|--|---|
| This is the notice to the appropriate local government officer has become aware of facts that r in accordance with Chapter 176, Local Government | require the officer to file this statement | Date Receives N38 pm |
| Name of Local Government Officer | | MAR 0 1 2019 |
| Mobin Shafer | • | CHRISTIE WAKEFIELD |
| 2 Office Held | / | LEON COUNTY, YEXAS |
| 2 Office Held Tax Absebsor / Collec | tor | |
| Name of person described by Sections 176.002 | (a) and 176.003(a), Local Government | Code |
| None | | |
| Description of the nature and extent of employ | ment or other business relationship w | rith person named in item 3 |
| None | | |
| List gifts accepted by the local government of 176.003(a-1), if aggregate value of the gifts accepted by Section 176.003(a)(2)(B) | | |
| Date Gift Accepted None Description | of Gift None | |
| Date Gift Accepted None Description | of Gift <u>None</u> | |
| Date Gift Accepted None Description | of Gift None | |
| (attach a | dditional forms as necessary) | |
| that the dis Governmen | der penalty of perjury that the above statement sclosure applies to a family member (as definit Code) of this local government officer. I als 12-month period described by Section 176.003 | ned by Section 176.001(2), Local to acknowledge that this statement |
| Tammy Chafins My Commission Expires 01/24/2022 PERMIND 12/14/2022 PERMIND 12/14/2029 SEAL ABOVE | Molin And Signature of Local | Sovernment Officer |
| 2.44.44.44.44.44.44.44.44.44.44.44.44.44 | phin Shafer | , this the day |
| of March , 20 19, to certify which, w | ritness my hand and seal of office. | |
| anny bustion 1 | anny Chatins | Notary |
| Signature of officer administering oath Print | ed name of officer administering oath | Title of officer administering oath |

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. Name of Local Government Officer Janet Wilson eputy Tax Assessor Collector Office Held Name of person described by Sections 176.002(a) and 176.003(a), Local Government Code llone 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 None Description of Gift None Date Gift Accepted None Description of Gift None Date Gift Accepted Now 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 **ROBIN SHAFER** Notary Public, State of Texas covers the 12-month period described by Section 176.003(a), Local Government Code. My Commission Expires May 08, 2019 AFFIX NOTARY STAMP / SEAL ABOVE Sworn to and subscribed before me, by the said <u>Tanet</u> Wilson , to certify which, witness my hand and seal of office. Title of officer administering oath Signature of officer administering oath Printed name of officer administering oath

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

Deputy tax assessor collector

Name of person described by Sections 176.002(a) and 176.003(a), Local Government Code

none

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

none

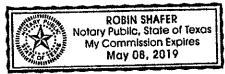
List gifts accepted by the local government officer and any family member, excluding gifts described by Section 176.003(a-1), if aggregate value of the gifts accepted from person named in item 3 exceed \$250 during the 12-month period described by Section 176.003(a)(2)(B)

__ Description of Gift ________ON e

Date Gift Accepted NONC 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 176.003(a), Local Government Code.

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Brittany Black Stock, this the It day

, to certify which, witness my hand and seal of office.

Signature of officer administering/oath

Mobin Shafer Notas

FORM CIS

| 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 | 17:38 pm | | |
| Emma Carrigan | MAR 0 1 2019 | | |
| 2 Office Held | 1 THAT ME POLICE | | |
| Deputy Tax Assessor Collector | LEON COUNTY, TEXAS | | |
| Name of person described by Sections 176.002(a) and 176.003(a), Local Government | Code | | |
| None | | | |
| Description of the nature and extent of employment or other business relationship w | ith person named in item 3 | | |
| None | | | |
| List gifts accepted by the local government officer and any family member, exclude 176.003(a-1), if aggregate value of the gifts accepted from person named in item 3 experiod described by Section 176.003(a)(2)(B) Date Gift Accepted Description of Gift Date Gift Accepted Descrip | | | |
| (attach additional forms as necessary) | | | |
| I swear under penalty of perjury that the above statement that the disclosure applies to a family member (as defined by Commission Expires May 08, 2019 I swear under penalty of perjury that the above statement that the disclosure applies to a family member (as defined by Commission Expires Covernment Code) of this local government officer. I also covers the 12-month period described by Section 176.003 | ned by Section 176.001(2), Local so acknowledge that this statement | | |
| orgination of Essa | . Sereningin Gillon | | |
| AFFIX NOTARY STAMP / SEAL ABOVE | 151 | | |
| Sworn to and subscribed before me, by the said <u>Emma Carrigan</u> of <u>March</u> , 20 19, to certify which, witness my hand and seal of office. | this the 137 day | | |
| of 7/10/01/2), 20 / 7 , to certify which, witness my hand and seal of office. | | | |
| 170tm Shofen Tobin Shafer | Notary | | |
| Signature of officer administering oath Printed name of officer administering oath | Title of officer administering oath | | |
| | | | |

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 Date Received in accordance with Chapter 176, Local Government Code. Name of Local Government Officer Office Held Tax Assessor Collector Name of person described by Sections 176.002(a) and 176.003(a), Local Government Code NONE Description of the nature and extent of employment or other business relationship with person named in item 3 MONE 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 NONE Description of Gift Date Gift Accepted Work Description of Gift No Date Gift Accepted None 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 **ROBIN SHAFER** Notary Public, State of Texas covers the 12-month period described by Section 176.003(a), Local Government Code. My Commission Expires May 08, 2019 Signature of Local Government Officer AFFIX NOTARY STAMP / SEAL ABOVE Sworn to and subscribed before me, by the said 12mmy , to certify which, witness my hand and seal of office. Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath

| (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 Adriance Asadu | 1-32 pm MAR 0 1 2019 |
| 2 Office Held Leputy Transport | B CLAND COUNTY, VEXA |
| Name of person described by Sections 176.002(a) and 176.003(a), Local Government | t Code |
| Description of the nature and extent of employment or other business relationship w | vith person named in item 3 |
| NA | |
| List gifts accepted by the local government officer and any family member, exclude 176.003(a-1), if aggregate value of the gifts accepted from person named in item 3 experiod described by Section 176.003(a)(2)(B) Date Gift Accepted Description of Gift Date Gift Accepted Description of Gift (attach additional forms as necessary) | ceed \$250 during the 12-month |
| AFFIDAVIT I swear under penalty of perjury that the above statement that the disclosure applies to a family member (as defined on the covernment of the family member (as defined on the covernment of the family member (as defined on the family member (as defined o | ned by Section 176.001(2), Local of acknowledge that this statement |
| Oublack. Rudu Debra E. Reeder Signature of officer administering oath Printed name of officer administering oath | Notary Public Title of officer administering oath |

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. Name of Local Government Officer 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) Description of Gift Date Gift Accepted _ Description of Gift Date Gift Accepted Description of Gift _____ Date Gift Accepted (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 176.003(a), Local Government Code. JOFRAN EDWARDS 1D #6548729 Commission Expires July 16, 2022 AFFIX NOTARY STAMP / SEAL ABOVE selora E. Reeder this the Sworn to and subscribed before me, by the said _, to certify which, witness my hand and seal of office. Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath

| (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 Lanie Cannon | 1:32 pm MAR 0 1 2019 |
| office Held What: auditor | CARISTIE WAKEFIELD LEON COUNTY, TEXAS |
| Name of person described by Sections 176.002(a) and 176.003(a), Local Governmen | t Code |
| Description of the nature and extent of employment or other business relationship w | vith person named in item 3 |
| List gifts accepted by the local government officer and any family member, excluded 176.003(a-1), if aggregate value of the gifts accepted from person named in item 3 experiod 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 | ceed \$250 during the 12-month |
| (attach additional forms as necessary) | |
| I swear under penalty of perjury that the above statement that the disclosure applies to a family member (as defigovernment Code) of this local government officer. I also overs the 12-month period described by Section 176.003 Expires August 4, 2022 Signature of Local | ned by Section 176.001(2), Local o acknowledge that this statement |
| Sworn to and subscribed before me, by the said Lanic Cannon of March, 20 19, to certify which, witness my hand and seal of office. Abbat. Redu Debra E. Reeder Signature of officer administering oath Printed name of officer administering oath | Natary Public Title of officer diministering oath |
| | |

| CONFLICTS DISCLOSURE STATEMENT |
|---|
| (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. |
| Name of Local Government Officer |
| MAR 0 1 20/9 |
| Linda Richardson undustris MANAGERIA |
| 2 Office Held B LEON COUNTY, TEXAS |
| HR + Asst. Auditor |
| Name of person described by Sections 176.002(a) and 176.003(a), Local Government Code |
| Λ / L |
| 4 Description of the nature and extent of employment or other business relationship with person named in item 3 |
| |
| NIA |
| 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 A Description of Gift |
| Date Gift Accepted W 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 |
| DEBRA E. REEDER My Notary ID # 8370363 Covers the 12-month period described by Section 176.003(a), Local Government Code. |
| Expires August 4, 2022 Signature of Local Government Officer |
| Sworn to and subscribed before me, by the said Linda Richardson, this the day of March 20/9, to certify which, witness my hand and seal of office. |
| of March, 2019, to certify which, witness my hand and seal of office. What. Reedu Debra E. Reeder Natary Publ |
| Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath |

monde

Signature of officer admin(Stering oath

FORM CIS

LOCAL GOVERNMENT OFFICER CONFLICTS DISCLOSURE STATEMENT (Instructions for completing and filing this form are provided on the back.) 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 Date Receive Government Code. Name of Local Government Officer Office Held 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 business relationship with person named in item 3 List gifts if aggregate value of the gifts received from person named in item 3 exceed \$250 Date Gift Received _____ Description of Gift _____ Did Not Accept Gift Date Gift Received _____ Description of Gift _____ Did Not Accept Gift Date Gift Received _____ Description of Gift _____ Did Not Accept 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 a government officer. I also acknowledge that this statement covers the 12-month period described by Section 176,003(a)(\$)(b), Local Government Code. TAMMY GAYLE SANDERS My Notary ID # 130608323 Signature of Local Government Officer Expires April 5, 2020 AFFIX NOTARY STAMP / SEAL ABOVE Sworn to and subscribed before me by the said _ , to certify which, witness my hand and seal of office.

Printed name of officer administering oath

Title of officer administering oath

FORM CIS

| 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 | <u>.a.</u> |
| AMY KAISER | MAR 0 1 2019 CHRISTIE WAKEFIELD |
| OFFICE Held COUNTY DEPUTY CLERK | BY CLERK COUNTY COURT LEON COUNTY, TEXAS |
| 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 w | ith person named in item 3 |
| List gifts accepted by the local government officer and any family member, exclud 176.003(a-1), if aggregate value of the gifts accepted from person named in item 3 experiod described by Section 176.003(a)(2)(B) Date Gift Accepted Description of Gift Description of Gift (attach additional forms as necessary) | ceed \$250 during the 12-month |
| I swear under penalty of perjury that the above statement that the disclosure applies to a family member (as defin Government Code) of this local government officer. I also covers the 12-month period described by Section 176.003 My Commission Empires Fobrumy 3, 2020 AFFIX NOTARY STAMP / SEAL ABOVE Sworn to and subscribed before me, by the said of March, 20 19, to certify which, witness my hand and seal of office. | ned by Section 176.001(2), Local o acknowledge that this statement |
| Signature of officer administering oath Printed name of officer administering oath | Title of officer administering oath |