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	Name of Local Government Office	)r		10:30 AM
	David P. Welch			SEP 0 8 2020
2	Office Held			CHRISTIE WAKEFIELD
_	Constable Pct 4			BY LEON COUNTY, TEXAS
3	Name of person described by Sec	tions 176.002(a) an	d 176.003(a), Local Government	Code
	D&D Hardware, D&D Poultry Supp	ply, Inc, D&D Equipm	nent Auction	
4	Description of the nature and exte	ent of employment c	or other business relationship w	ith person named in item 3
	President			
5	List gifts accepted by the local g 176.003(a-1), if aggregate value of period described by Section 176.0	f the gifts accepted t		
	Date Gift Accepted	Description of Gift	None	
	Date Gift Accepted	Description of Gift		
	Date Gift Accepted	Description of Gift		
		(attach additions	al forms as necessary)	
6	AFFIDAVIT	that the disclosure Government Code)	alty of perjury that the above statement is e applies to a family member (as defin- of this local government officer. I also th perjod described by Section 176.003(	ed by Section 176.001(2), Local acknowledge that this statement
	JESSICA CAVENDER Notary Public, State of Te Comm. Expires 09-26-20 Notary ID 130836933	exas 2020	Signature of Local	Government Officer
	Swom to and subscribed before me, by the	ne said <u>DaVi</u>	d Welch	, this the 3rd day
	of September 20 20, too	Jessic	ca Cavender	Notary
	Signature of officer administering oath	Printed name	of officer administering oath T	Fitle of officer admin <b>f</b> stering oath

LOCAL GOVERNMENT OF	FORM CIS	
(Instructions for completing and filing this fo	rm are provided on the next page.)	
This questionnaire reflects changes made to t	he 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		
Molin Ander		AUG 3 1 2020
Office Held		CHRISTIE WAKEFIELD BY CLERK COUNTY COURT
Tax 1435 e 5505/Col	lector	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    State of the second of the local government	ment officer and any family member, exclud	ing gifts described by Section
176.003(a-1), if aggregate value of the g	lifts accepted from person named in item 3 ex	ceed \$250 during the 12-month
Date Gift Accepted _/// Des	cription of Git	
Date Gift Accepted Des	cription of Gift	
Date Gift Accepted Des	cription of Gift	
(	attach additional forms as necessary)	
tt G	swear under penalty of perjury that the above statement lat the disclosure applies to a family member (as defin overnment Code) of this local government officer. I also overs the 12-month period described by Section 176.003	ned by Section 176.001(2), Local o acknowledge that this statement
Tammy Chafins My Commission Expires 01/24/2022	Pahia Shafar	Government Officer
of	which, witness my hand and seal of office.	this the day

Adopted 06/29/2007

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.

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

lack Keelins

Office Held

OFFICE USE ONLY

Date Received

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

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)

Date Gift Accepted Negation of Gift\_\_\_\_\_

None 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 overs the 12-month period described by Section 175.003(a), Local Government Code.



TISHA M. SPINKS My Notary ID # 130080035 Expires January 18, 2023

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

COM ENGLO DIOCEO		
(Instructions for completing and filing	this form are provided on the next page.)	
This questionnaire reflects changes ma	ade to the law by H.B. 1491, 80th Leg., Regular Session.	OFFICE USE ONLY
	e local governmental entity that the following local re of facts that require the officer to file this statement al Government Code.	Date Received
Name of Local Government Offic	er	
		AUG 2 1 2020
Susanne	Leathers	CHRISTIE WAKEFIELD
2 Office Held		
		BYLEON COUNTY, TEXAS
de outes a	dministrator	
3 Name of person described by Se	ctions 176.002(a) and 176.003(a), Local Government	Code
none	ent of employment or other business relationship w	
Description of the nature and ext	ent of employment or other business relationship w	ith person named in item 3
nont		
5 List gifts accepted by the local	government officer and any family member, exclud	
176.003(a-1), if aggregate value of period described by Section 176.	of the gifts accepted from person named in item 3 excepted (a)(2)(B)	ceed \$250 during the 12-month
	Description of Gift	
Date Ont Accepted 1	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	is true and correct. Lacknowledge
	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 covers the 12-month period described by Section 176.003	-
		1
DONNA GOLDEN  Notary Public, State of T		millense
Comm. Expires 12-16-2	Signature of Local	Government Officer
AFFIX NOTARY STAMP / SEAL ABO		
	4 1 1.	215
Sworn to and subscribed before me by to	o certify which, witness my hand and seal of office.	this the day
2000	winds, withesa my hand and seal of office.	
Domes Jold	Donne Golden	Flect. Podmin, RED
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	AUG 2 0 2020		
	` I		
Donne Solder	CHRISTIE WAKEFIELD CLERK COUNTY COURT		
2 Office Held	LEON COUNTY, TEXAS		
Election Administrator			
Name of person described by Sections 176.002(a) and 176.003(a), Local Government	Code		
1 Cone			
Description of the nature and extent of employment or other business relationship with the second seco	th person named in item 3		
Slone			
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)	ceed \$250 during the 12-month		
Date Gift Accepted  Description of Gift  N			
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 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(	ed by Section 176.001(2), Local acknowledge that this statement		
Tammy Chafins My Commission Expires 01/24/2822 A FIX BEVARY STAMP SEAL ABOVE	Government Officer		
Sworn to and subscribed before me, by the said	, this the day		
of Windlist . 20 , to certify which, witness my hand and seal of office.			
Demmy Charles lampy Chatins			
Signature of officer administering oath Printed name of officer administering oath	itle of officer administering oath		

CONFLICTS DISCLO	SURE STATEMENT	
(Instructions for completing and filing	this form are provided on the next page.)	
This questionnaire reflects changes ma	ade to the law by H.B. 1491, 80th Leg., Regular Session.	OFFICE USE ONLY
	e local governmental entity that the following local re of facts that require the officer to file this statement al Government Code.	Ðate Redeived —
1 Name of Local Government Offic	er	AUC 0 0 2020
Donn	Dolden	AUG 2 0 2020 CHRISTIE WAKEFIELD
2 Office Held	BY.	LEON COUNTY, TEXAS
Election Ad	mini strator	
Name of person described by Se	ctions 176.002(a) and 176.003(a), Local Government	Code
None		
4 Description of the nature and ex	tent of employment or other business relationship w	ith person named in Item 3
None		
176.003(a-1), if aggregate value of period described by Section 176	1 -	
Date Gift Accepted	Description of Gift 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
Date Gift Accepted	Description of Gift	-
Date Gift Accepted	Description of Gift	
	(attach additional forms as necessary)	
6 AFFIDAVIT	I swear under penalty of perjury that the above statement is 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 acknowledge that this statement
Tammy Chafina My Commission Expires 01/24/2822 JD No. 128123828	Signature of Local	Government Officer
Sworn to and subscribed before me, by	the said Donga Golden	this the 19th day
of august 20 20 to	certify which, witness my hand and seal of office.	
Tammy Charl	in Tamny Chafins	
Signature of officer administering dath	Printed name of officer administering oath	Fitle 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	LILLI		
Carlton Lee Weiler 2 Office Held  Leon County, Tk.  Justice of the Peace- Precinct 4	AUG 1: 2020 CHRISTIE WAKEFIELD 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 v	vith 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 None Description of Gift			
Date Gift Accepted None 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 to the disclosure applies to the disclosure applies to the disclosure applies to a family member (as defined to the disclosure applies to the disclosure applies to the disclosure applies to the disclosure app	ned by Section 176.001(2), Local o acknowledge that this statement		
^	, this the day		
Michelle DuBois Michelle DuBois	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 AUG 1 1 2020 Melissa B. Alone CHRISTIE WAKEFIELD Office Held Name of person described by Sections 176.002(a) and 176.003(a), Local Government Code Allon D. Fredisell Description of the nature and extent of employment or other business relationship with person named in item 3 Employee of Mustana Fuels 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) NIA Description of Gift Date Gift Accepted \_\_ 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. DEBRA E. REEDER My Notary ID # 8370363 Expires August 4, 2022 Signature of Local Government Officer AFFIX NOTARY STAMP / SEAL ABOVE Mulissa B. Sworn to and subscribed before me, by the said to certify which, witness my hand and seal of office. 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.

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

AUG 1 1 2020

GOUNTY COMMISSIONER

LARRY GRIMES - GRIMES SERVICE CENTER

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

### LOCAL PURCHASES OF PARTS aTIRES

5	List gifts accepted by	y the local	government officer ar	nd any family member, o	excluding gifts described by	Section
	176.003(a-1), if aggre	egate value o	f the gifts accepted fr	om person named in ite	m 3 exceed \$250 during the 13	2-month
	period described by	Section 176.	003(a)(2)(B)		-	
	Date Gift Accepted	1/1		NIA		
	Date Gift Accepted	NIA	Description of Gift	NIA		

Date Gift Accepted Description of Gift Description

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.



DEBRA E. 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 seal of office.

Signature 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  Debra Reeder	AUG 1 1 2023  CHRISTIE WAKEFIELD  CLERK COUNTY COURT		
2 Office Held  1 St Assistant Auditor	LEON COUNTY TEXAS		
Name of person described by Sections 176.002(a) and 176.003(a), Local Government			
Description of the nature and extent of employment or other business relationship wi	ith person named in item 3		
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  Date Gift Accepted Description of Gift  (attach additional forms as necessary)	eed \$250 during the 12-month		
I swear under penalty of perjury that the above statement is 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(a Signature of Local Code)  AFFIX NOTARY STAMP / SEAL ABOVE  Sworn to and subscribed before me, by the said of Mana L. McMahon  Liana L. McMahon  Jiana L. McMahon  Jana L. McMahon	ed by Section 176.001(2), Local acknowledge that this statement a), Local Government Code.		
Circulation of off and desiring the six and the six an	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 Date Received in accordance with Chapter 176, Local Government Code. Name of Local Government Officer AUG 1 1 2029 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) Description of Gift \_\_\_\_\_ Date Gift Accepted 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 exvers 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 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

(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
1 Name of Local Government Officer	AUG 1 1 2020
Linda Richardson  2 Office Held	CHRISTIE WAKEFIELD CLERK COUNTY COURT LEON COUNTY TEXAS
Assistant Auditor	
Name of person described by Sections 176.002(a) and 176.003(a), Local Government	t Code
NA	
Description of the nature and extent of employment or other business relationship w	rith 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 experiod described by Section 176.003(a)(2)(B)	
Date Gift Accepted Description of Gift Description Description Description Description Description Description Description	
Date Gift Accepted MA Description of Gift MA	
(attach additional forms as necessary)	
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    DEBRA E. REEDER   My Notary ID # 8370363   Expires August 4, 2022   Signature of Local Signature of Loca	ned by Section 176.001(2), Local or acknowledge that this statement
Sworn to and subscribed before me, by the said Linda Richards or of Hugust, 20 30, to certify which, witness my hand and seal of office.  Albua A. Reeder	, this the day

(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 government officer has become aware of facts that require the officer to file this stin accordance with Chapter 176, Local Government Code.	
Name of Local Government Officer  assanda Noey  Office Held  District Clerk	AUG 1 0 2020  CHRIPTIE WAKEF E D  BY LEGN COUNTY. TE
Name of person described by Sections 176.002(a) and 176.003(a), Local Go	vernment Code
Nov	
Description of the nature and extent of employment or other business relat	ionship with person named in item 3
None	
List gifts accepted by the local government officer and any family member 176.003(a-1), if aggregate value of the gifts accepted from person named in 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 that the disclosure applies to a family memb Government Code) of this local government or covers the 12-month period described by Section	er (as defined by Section 176.001(2), Local fficer. I also acknowledge that this statement
LINDA C SHANNON Notary ID #4478210 My Commission Expires May 9, 2024 AFFIX NOTARY STAMP / SEAL Above	ire of Local Government Officer
Sworn to and subscribed before me, by the said Cassandra Nog	, this the day
of Hugust	1.
Signature of officer administering oath  Signature of officer administering oath	th 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			
Brandi S. Hill				
2 Office Held	AUG 1 0 2020			
Treasurer	CHRISTIE WAKEFIELD CLERK COUNTY COURT			
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 wi	th 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 N Description of Gift N				
Date Gift Accepted NA Description of Gift NA				
Date Gift Accepted NA Description of Gift NA				
(attach additional forms as necessary)				
I swear under penalty of perjury that the above statement is that the disclosure applies to a family member (as define Government Code) of this local government officer. I also several period described by Section 176.003(a	ed by Section 176.001(2), Local acknowledge that this statement			
DEBRA E. REEDER My Notary ID # 8370363 Expires August 4, 2022  Signature of Local Government Officer				
Sworn to and subscribed before me, by the said	, this the day  Notary Public tle 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 followir government officer has become aware of facts that require the officer to file this stain accordance with Chapter 176, Local Government Code.	
Name of Local Government Officer	
Kim Janning	AUG 1 0 2020
2 Office Held	CHRISTIE WAKEFIELD
Treasurers Office/Employee	LEON COUNTY, TEXAS
Name of person described by Sections 176.002(a) and 176.003(a), Local Gov	ernment Code
na	
Description of the nature and extent of employment or other business relation	onship with person named in item 3
ha	
List gifts accepted by the local government officer and any family member 176.003(a-1), if aggregate value of the gifts accepted from person named in it period described by Section 176.003(a)(2)(B)  Date Gift Accepted Description of Gift	tem 3 exceed \$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 so that the disclosure applies to a family member Government Code) of this local government office covers the 12-month period described by Section	cer. I also acknowledge that this statement
	of Local Government Officer
Sworn to and subscribed before me, by the said Sim Janning	, this the day
of, 20, to certify which, witness my hand and seal of office.	
Bliana L. McMahon Diana L. McMah	on Public Notary
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 Reseived			
1 Name of Local Government Officer	AUG 1 0 2020			
Diana L. McMahon By.	CHRISTIE WAKEFIELD			
2 Office Held	LEON COUNTY, TEXAS			
Deputy Treasurer				
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 wi	th person named in item 3			
NA				
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  Date Gift Accepted  Description of Gift  (attach additional forms as necessary)	eed \$250 during the 12-month			
I swear under penalty of perjury that the above statement is 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(at Legieres August 4, 2022    Linear Land Code	ad by Section 176.001(2), Local acknowledge that this statement a), Local Government Code.			
Sworn to and subscribed before me, by the said <u>Diana L. McMahon</u> of <u>Mayort</u> , 20 <u>30</u> , to certify which, witness my hand and seal of office.  Bluck Redu Debra E. Reeder Signature of officer administering oath  Printed name of officer administering oath	_, this the day  Notary Publitie of officer administering path			

(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
1 Name of Local Government Officer Employee	
Linda C. Shannon	AUG 1 0 2020
2 Office Held	CHRISTIE WAKEFIELD CLERK COUNTY COURT LEON COUNTY, TEXAS
District Court Coordinator	LEON COUNTY, TEXAS
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	th 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 excepted 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 is 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(state of Local Code) Signature of Local Code (Signature of Local Code)	ed by Section 176.001(2), Local acknowledge that this statement
AFFIX NOTARY STAMP / SEAL ABOVE  Sworn to and subscribed before me, by the said	this the 10th day
of HOUST, 20 ZO, to certify which, witness my hand and seal of office.	uay
Signature of officer administering oath  Printed name of officer administering oath  T	A O TAM 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 in accordance with Chapter 176, Local Government Code.	Date Received
Name of Local Government Officer	AUG - 8 2020
GEORGE Y. HOLLEMAN	OHRISTIE WAKEFIEL
Office Held	BY LEON COUNTY, TEXAS
CONSTABLE PCT. 2	
Name of person described by Sections 176.002(a) and 176.003(a), Local Government Co	ode
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 176.003(a-1), if aggregate value of the gifts accepted from person named in item 3 exceed period described by Section 176.003(a)(2)(B)	g gifts described by Section ed \$250 during the 12-month
Date Gift Accepted NONE Description of Gift NONE	
Date Gift Accepted NONE Description of Gift NONE	·
Date Gift Accepted NONE Description of Gift NONE	
(attach additional forms as necessary)	
AFFIDAVIT  I swear under penalty of perjury that the above statement is to that the disclosure applies to a family member (as defined Government Code) of this local government officer. I also accovers the 12-month period described by Section 176.003(a),	by Section 176.001(2), Local cknowledge that this statement
TERESA BATES Notary Public STATE OF TEXAS ID#124074571 My Comm. Exp. Sep. 2, 2022	overnment Officer
to certify which, witness my hand and seal of office.  Tersa Pates.	this the day day

FORM CIS

TI	his questionnaire reflects changes mad	e to the law by H.B. 1491, 80th Leg., Regular Session.	OFFICE USE ONLY
g		local governmental entity that the following local e of facts that require the officer to file this statement I Government Code.	Date Received E
1	Name of Local Government Office	· ·	AUG 1 0 2020
2	Office Held	BY_{	CHERT COUNTY, TEXAS
3	Name of person described by Sec	tions 176.002(a) and 176.003(a), Local Government	Code
4	Description of the nature and exte	nt of employment or other business relationship w	ith person named in item 3
5		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 defin Government Code) of this local government officer. I also covers the 12-month period described by Section 176.0030	ned by Section 176.001(2), Local o acknowledge that this statement
	AFFIX NOTATIVE CONTRACTOR	·	Government Officer
	Sworn to and subscribed before me, by the of, to define a definition of	e said <u>CARMEN THOMAS</u> certify which, witness my hand and seal of office. AMY KAISER	, this the day  DEPUTY CERK  Title of officer administering oath

### FORM CIS

Т	his questionnaire reflects	s changes made to	the law by H.B. 1491	80th Leg., Regular Ses	office use only	
g	his is the notice to the lovernment officer has b a accordance with Chap	become aware of fa	acts that require the			
1	Name of Local Gover	nment Officer			AUG 1 0 2020	
					100 1 0 2020	
_					CLIRK POWITY COURT	
2	Office Held				LEON COUNTY, TEXAS	
3	Name of person desc	cribed by Sections	s 176.002(a) and 17	6.003(a), Local Govern	nment Code	
4	Description of the na	iture and extent of	f employment or otl	ner business relations	ship with person named in item 3	
5	Liet gifte accented h		nment officer and	any family member e	excluding gifts described by Section	n
ت		gate value of the	gifts accepted from		m 3 exceed \$250 during the 12-mont	
	Date Gift Accepted	Des	scription of Gift			
	Date Gift Accepted	Des	scription of Gift			
	Date Gift Accepted	Des	scription of Gift			
6	AFFIDAVIT		(attach additional for	ms as necessary)		
لـــا	AFFIDAVII		•		tement is true and correct. I acknowledge as defined by Section 176.001(2), Local	
,		C	Sovernment Code) of the	is local government officer.	r. I also acknowledge that this statement	
		С	overs the 12-month per	od described by Section 1	176.003(a), Local Government Code.	
				$\mathcal{A}$		
				Signature of	of Local Government Officer	
	AFFIX NOTARY STAMI	P / SEAL ABOVE			. ~	
	Sworngo and subscribed l	before me, by the said	DENIE	E WINN	, this the day	,
	of AUG	20 <u>20</u> , to certify	which, witness my han	d and seal of office.		
	Junio Co	aish	AMY K	AISER	DEPUTY CLER	K
	Signature of officer adm	ninistering oath	Printed name of off	icer administering oath	Title of officer administering oath	•

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 Logal Government Officer			
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   AUG - 7 2020   August	This questionnaire reflects changes ma	de to the law by H.B. 1491, 80th Leg., Regular Session.	OFFICE USE ONLY
Aug - 7 2020    Conflice Held   Conflice Held	government officer has become awar	e of facts that require the officer to file this statement	Date Received
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-mon period described by Section 176.003(a)(2)(B)   Date Gift Accepted	Dyron K	Jev	AUG - 7 2020
Description of the nature and extent of employment or other business relationship with person named in item 3    Comparison of the nature and extent of employment or other business relationship with person named in item 3	County	Sadje	BY LEON COUNTY, TEXAS
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-mon 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 176.002(a), Local Government Code.  TAMMY GAYLE SANDERS   My Notary ID # 130608323   Expires April 5, 2024   Signature of Local Government Officer    AFFIX NOTARY STAMP / SEAL ABOVE   Sworn to and subscribed before me, by the said   BYRON RYDER   this the	Name of person described by Sec	tions 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-mon 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 176.002(a), Local Government Code.  TAMMY GAYLE SANDERS   My Notary ID # 130608323   Expires April 5, 2024   Signature of Local Government Officer    AFFIX NOTARY STAMP / SEAL ABOVE   Sworn to and subscribed before me, by the said   BYRON RYDER   this the		NAC	
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 Odde) 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.  TAMMY GAYLE SANDERS   My Notary ID # 130608323   Expires April 5, 2024   Signature of Local Government Officer   AFFIX NOTARY STAMP / SEAL ABOVE   Signature of Local Government Officer   AFFIX NOTARY STAMP / SEAL ABOVE   Signature of Local Government Officer   AFFIX NOTARY STAMP / SEAL ABOVE   Signature of Local Government Officer   AFFIX NOTARY STAMP / SEAL ABOVE   Signature of Local Government Officer   AFFIX NOTARY STAMP / SEAL ABOVE   Signature of Local Government Officer   AFFIX NOTARY STAMP / SEAL ABOVE   Signature of Local Government Officer   AFFIX NOTARY STAMP / SEAL ABOVE   Signature of Local Government Officer   AFFIX NOTARY STAMP / SEAL ABOVE   Signature of Local Government Officer   AFFIX NOTARY STAMP / SEAL ABOVE   Signature of Local Government Officer   AFFIX NOTARY STAMP / SEAL ABOVE   Signature of Local Government Officer   AFFIX NOTARY STAMP / SEAL ABOVE   Signature of Local Government Officer   AFFIX NOTARY STAMP / SEAL ABOVE   Signature of Local Government Officer   AFFIX NOTARY STAMP / SEAL ABOVE   Signature of Local Government Officer   AFFIX NOTARY STAMP / SEAL ABOVE   Signature of Local Government Officer   AFFIX NOTARY STAMP / SEAL ABOVE   Signature of Local Government Officer   AFFIX NOTARY STAMP / SEAL ABOVE   Signature of Local Government Officer   AFFIX NOTARY STAMP / SEAL ABOVE   Signature of Local Government Of	Description of the nature and exte	ent of employment or other business relationship wi	ith person named in item 3
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 Odde) 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.  TAMMY GAYLE SANDERS   My Notary ID # 130608323   Expires April 5, 2024   Signature of Local Government Officer   AFFIX NOTARY STAMP / SEAL ABOVE   Signature of Local Government Officer   AFFIX NOTARY STAMP / SEAL ABOVE   Signature of Local Government Officer   AFFIX NOTARY STAMP / SEAL ABOVE   Signature of Local Government Officer   AFFIX NOTARY STAMP / SEAL ABOVE   Signature of Local Government Officer   AFFIX NOTARY STAMP / SEAL ABOVE   Signature of Local Government Officer   AFFIX NOTARY STAMP / SEAL ABOVE   Signature of Local Government Officer   AFFIX NOTARY STAMP / SEAL ABOVE   Signature of Local Government Officer   AFFIX NOTARY STAMP / SEAL ABOVE   Signature of Local Government Officer   AFFIX NOTARY STAMP / SEAL ABOVE   Signature of Local Government Officer   AFFIX NOTARY STAMP / SEAL ABOVE   Signature of Local Government Officer   AFFIX NOTARY STAMP / SEAL ABOVE   Signature of Local Government Officer   AFFIX NOTARY STAMP / SEAL ABOVE   Signature of Local Government Officer   AFFIX NOTARY STAMP / SEAL ABOVE   Signature of Local Government Officer   AFFIX NOTARY STAMP / SEAL ABOVE   Signature of Local Government Officer   AFFIX NOTARY STAMP / SEAL ABOVE   Signature of Local Government Officer   AFFIX NOTARY STAMP / SEAL ABOVE   Signature of Local Government Officer   AFFIX NOTARY STAMP / SEAL ABOVE   Signature of Local Government Of		None	
Date Gift Accepted Description of Gift	1/6.003(a-1), if aggregate value of	the gifts accepted from person named in item 3 exc	ng gifts described by Section eed \$250 during the 12-month
Date Gift Accepted	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.  TAMMY GAYLE SANDERS My Notary ID # 130608323 Expires April 5, 2024  Signature of Local Government Officer  AFFIX NOTARY STAMP / SEAL ABOVE  Sworn to and subscribed before me, by the said of Local Government Code.  TAMMY GAYLE SANDERS  My Notary ID # 130608323 Expires April 5, 2024  Signature of Local Government Officer  AFFIX NOTARY STAMP / SEAL ABOVE  Sworn to and subscribed before me, by the said of Signature of Office.  Tammy Sanders  Notary States of States and States are states and states and states are states are states and states are states are states and states are states are states and states are states are states are states and states are states are states and states are stat	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.  TAMMY GAYLE SANDERS My Notary ID # 130608323 Explres April 5, 2024  Signature of Local Government Officer  AFFIX NOTARY STAMP / SEAL ABOVE Sworn to and subscribed before me, by the said of Michael Statement of Signature of Local Government Officer  AFFIX NOTARY STAMP / SEAL ABOVE Sworn to and subscribed before me, by the said of Michael Statement of Signature of Local Government Officer  AFFIX NOTARY STAMP / SEAL ABOVE Sworn to and subscribed before me, by the said of Michael Statement of Signature of Local Government Officer  AFFIX NOTARY STAMP / SEAL ABOVE Sworn to and subscribed before me, by the said of Michael Sworn of Signature of Local Government Officer  AFFIX NOTARY STAMP / SEAL ABOVE Sworn to and subscribed before me, by the said of Michael Sworn of Signature of Local Government Officer  AFFIX NOTARY STAMP / SEAL ABOVE Sworn to and subscribed before me, by the said of Michael Sworn of	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.  TAMMY GAYLE SANDERS My Notary ID # 130608323 Expires April 5, 2024  Signature of Local Government Officer  AFFIX NOTARY STAMP / SEAL ABOVE Sworn to and subscribed before me, by the said of Local Government Office.  Tammy Sanders  Notary Stamp / Seal Above Signature of Local Government Officer  AFFIX NOTARY STAMP / SEAL ABOVE Sworn to and subscribed before me, by the said of Office.  Tammy Sanders  Notary Stamp / Seal Above Signature of Local Government Officer  AFFIX NOTARY STAMP / SEAL ABOVE Signature of Local Government Officer  AFFIX NOTARY STAMP / SEAL ABOVE Signature of Local Government Officer  AFFIX NOTARY STAMP / SEAL ABOVE Signature of Local Government Officer  AFFIX NOTARY STAMP / SEAL ABOVE Signature of Local Government Officer  AFFIX NOTARY STAMP / SEAL ABOVE Signature of Local Government Officer  AFFIX NOTARY STAMP / SEAL ABOVE Signature of Local Government Officer  AFFIX NOTARY STAMP / SEAL ABOVE Signature of Local Government Officer  AFFIX NOTARY STAMP / SEAL ABOVE Signature of Local Government Officer  AFFIX NOTARY STAMP / SEAL ABOVE Signature of Local Government Officer  AFFIX NOTARY STAMP / SEAL ABOVE Signature of Local Government Officer  AFFIX NOTARY STAMP / SEAL ABOVE Signature of Local Government Officer  AFFIX NOTARY STAMP / SEAL ABOVE Signature of Local Government Officer  AFFIX NOTARY STAMP / SEAL ABOVE Signature of Local Government Officer  AFFIX NOTARY STAMP / SEAL ABOVE Signature of Local Government Officer  AFFIX NOTARY STAMP / SEAL ABOVE Signature of Local Government Officer		(attach additional forms as necessary)	
Sworn to and subscribed before me, by the said BYRON RYDER , this the	TAMMY GAYLE SANDERS My Notary ID # 130608323	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(a	ed by Section 176.001(2), Local acknowledge that this statement a), Local envernment Code.
	Sworn to and subscribed before me, by the of 100 to company of 100	e said BYRON RYDER  certify which, witness my hand and seal of office.  Trammy Sanders	Notary

FORM CIS

, and the second	ago.)
This questionnaire reflects changes made to the law by H.B. 23, 84th Leg., Regular Session.	OFFICE USE ONLY
This is the notice to the appropriate local governmental entity that the following local government officer has become aware of facts that require the officer to file this statement in accordance with Chapter 176, Local Government Code.	Date Received
Name of Local Government Officer	
KYCE WORKMAN	
2 Office Held	
2 Office Held COUNTY COMMISSIONS	
3 Name of vendor described by Sections 176.001(7) and 176.003(a), Local Government	
Code	
MONEEL PIPE 4 STEEL	
4 Description of the nature and extent of each employment or other business relationship with vendor named in item 3.  THE MOVAGE IS MY BUTTEN-W-LOW B	4 MALAKE
5 List gifts accepted by the local government officer and any family member, if aggregation vendor named in item 3 exceeds \$100 during the 12-month period described by	to value of the diffe eccented
Solution in the state of the during the 12-month period described by	Section 176.003(a)(2)(B).
Date Gift Accepted Description of Gift	
Date Gift Accepted Description of Gift	
Date Gift Accepted Description of Gift	
(attach additional forms as necessary)	
to each family member (as defined by Section 176.001(2), Logal Government Code, also acknowledge that this statement covers the 12-month period described by Section Government Code.	on 176.003(a)(2)(B), Local
Signature of Local G	lovernment Officer
Please complete either option below:	
(1) Affidavit	
NOTARY STAMP/SEAL	
Swom to and subscribed before me by this the	day of
20, 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
OR	
(2) Unsworn Declaration	
My name is KYCK WONKARD, and my date of birth is 0	6/10/75
My address is 49 PM 39 PM TSWEIT, TX	70914
Executed inCounty, State of, on the day of	(zip code) (country), 20 2/(year)
Signature / Jocal Government	nent Officer (Declarant)

FORM CIS

This questionnaire reflects changes made to the law by U.S. co. att.	
This questionnaire reflects changes made to the law by H.B. 23, 84th Leg., Regular Session.  This is the notice to the appropriate local governmental entity that the following local	OFFICE USE ONLY
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	
2 Office Held	
2 Office Held COUNTY COMMISSIONER	
3 Name of vendor described by Sections 176.001(7) and 176.003(a), Local Government Code	
PIONEEL PIPE 4 STEEL	
Description of the nature and extent of each employment or other business relationshi with vendor named in item 3.  THE MONAGE IS MY BROTHER-W-LAW B	SY MAINES
5 List gifts accepted by the local government officer and any family member, if aggreg from vendor named in item 3 exceeds \$100 during the 12-month period described by	ate value of the gifte accomted
	Section 176.003(a)(2)(B).
Date Gift Accepted Description of Gift	
Date Gift Accepted Note 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 ackn to each family member (as defined by Section 176.001(2), Logal Government Code also acknowledge that this statement covers the 12-month period described by Section Government Code.	e) of this local government officer. I iion 176.003(a)(2)(B), Local
Signature of Local C	Government Officer
Please complete either option below:	
(1) Affidavit	
NOTARY STAMP/SEAL	
Sworn to and subscribed before me by this the	day of,
20, 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
OR	Section 2001
2) Unsworn Declaration	
My name is KYCK WONKMAN, and my date of birth is	06/10/75
My address is 48 FM39N TSWETT TX	7094
(street) (city) (state)  Executed in County, State of TEXAS, on the day of MANUAL (city)	(zip code) (country)  , 20 Z / (year)
Signature of cocal Government	ment Officer (Declarant)