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 Christic Workefield Office Held Leon County Clerk Name of vendor described by Sections 176.001(7) and 176.003(a), Local Government Code	SEP 13 2022 OHRUSTJE WAKEFJELD OLEON COONTY, MEXAS
NONE	
 Description of the nature and extent of each employment or other business relationshi with vendor named in item 3. None List gifts accepted by the local government officer and any family member, if aggreg 	ate value of the gifts accepted
from vendor named in item 3 exceeds \$100 during the 12-month period described by Date Gift Accepted Description of Gift	`````
Date Gift Accepted Description of Gift	
Date Gift Accepted Note Description of Gift	
(attach additional forms as necessary)	
to each family member (as defined by Section 176.001(2), Local Government Code also acknowledge that this statement covers the 12-month period described by Sec Government Code. Signature of Local	-
Please complete either option below: One of the part	5th day of <u>September</u> ,
20 22, to certify which, witness my hand and seal of office. Dana K Platt Pachuca Signature of officer administering oath Printed name of officer administering oath	Paralegal Title of officer administering oath
OR	
(2) Unsworn Declaration	
My name is, and my date of birth is, My address is	
(street) (city) (state	c) (zip code) (country)
Executed in County, State of, on the day of(month)	, 20
Signature of Local Govern	nment Officer (Declarant)

FORM CIS

This questionnaire re	eflects changes made to the law by H.B. 23, 84th Leg., Regular Session.	OFFICE USE ONLY
government officer h	to the appropriate local governmental entity that the following local has become aware of facts that require the officer to file this statement Chapter 176, Local Government Code.	
1 Name of Local G	Rovernment Officer	- I
Carme	in Foley Thomas	SEP 13 2022
Office Held	I Turonile Probation Officer	CHARL COUNTY COURT
3 Name of vendor d	described by Sections 176.001(7) and 176.003(a), Local Government	LEON COUNTY. TEXAS
Code		
Description of the with vendor nam	ne nature and extent of each employment or other business relation ned in item 3.	ship and each family relationship
	ed by the local government officer and any family member, if agg ned in item 3 exceeds \$100 during the 12-month period described	
Date Gift Accepte	ted Description of Gift	
Date Gift Accepte	ted Description of Gift	January Co., All St.
Date Gift Accepte	ed Description of Gift	
	(attach additional forms as necessary)	
	also acknowledge that this statement covers the 12-month period described by Government Code. Signature of Lo	Cal Government Officer
	Please complete either option below	
(1) Affidavit		DANA KATHLEEN PACHUCA Notary Public, State of Texa Comm. Expires 03-18-2023 Notary ID 131934754
Sworn to and subscribe	ed before me by Carmen Thomas this the	13th day of September.
	ify which, witness my hand and seal of office.	,,
0.44	Pachuca Dana KPlatt Pachuca	Paral-ega Title of office administering oath
	OR	
(2) Unsworn Declara	ation	
My name is	, and my date of birth is	
My address is		
	(street) (city) (s	tate) (zip code) (country)
Executed in	County, State of, on theday of(month)	, 20 (year)
Name of the last o	Signature of Local Go	vernment Officer (Declarant)

FORM CIS

	de to the law by H.B. 23, 84th Leg., Regular Session.	OFFICE USE ONLY
	local governmental entity that the following loc e of facts that require the officer to file this stateme I Government Code.	
Name of Local Government Officer		FILED ?
AMY KAISER		-X:03am
2 Office Held		SEP 3 0 2022
DEPUTY CLERK		Condia TENNAKEP 150P//
Name of vendor described by Secti Code	ions 176.001(7) and 176.003(a), Local Governme	Int HANGOUNTY, TEXAS
NORMANGEE TRACTOR (WA	SHINGTON TRACTOR)	
Description of the nature and exter with vendor named in item 3. SPOUSE OF SALES REPR	nt of each employment or other business relation	nship and each family relationship
	vernment officer and any family member, if agg eds \$100 during the 12-month period described	
Date Gift Accepted N/A	Description of Gift	
Date Gift Accepted N/A		
Date Gift Accepted N/A	Description of Gift	•
	(attach additional forms as necessary)	
	per (as defined by Section 176.001(2), Local Government of the statement covers the 12-month period described by Signature of Local Signature of Local Covernment of L	
	Please complete either option below	v:
VICTORIA NICHOLE DOWNIE VICTORIA NICHOLE VICTORIA NICHOLE DOWNIE VIC	1	13th day of Syptener,
AAAA	Victima Dunie	Motory
Signature of officer administering oath	Printed name of officer administering oath	Title of offiger administering oath
	OR	
(2) Unsworn Declaration		
My name is	, and my date of birth is	
My address is		
(stree Executed in County, S	eet) (city) (s State of, on the day of(month	state) (zip code) (country) , 20 (year)
	Signature of Local Go	overnment Officer (Declarant)

FORM CIS

This questionnaire reflects changes made to the law by H.B. 23, 84th Leg., Regular Session.	OFFICE USE ONLY
This is the notice to the appropriate local governmental entity that the following local government officer has become aware of facts that require the officer to file this statement in accordance with Chapter 176, Local Government Code.	Date Received
1 Name of Local Government Officer	FILED
2 Office Held OUNT UNGE	SEP 13 2022
3 Name of vendor described by Sections 176.001(7) and 176.003(a), Local Government Code	BY LEON COUNTY TEXAS
Description of the nature and extent of each employment or other business relationshi with vendor named in item 3.	
5 List gifts accepted by the local government officer and any family member, if aggreg from vendor named in item 3 exceeds \$100 during the 12-month period described by	ate value of the gifts accepted Section 176.003(a)(2)(B).
Date Gift Accepted Description of Gift	
Date Gift Accepted Description of Gift	
Date Gift Accepted Description of Gift	
(attach additional forms as necessary)	
to each family member (as defined by Section 176.001(2), Local Government Code also acknowledge that this statement covers the 12-month period described by Section 176.001(2), Local Government Code also acknowledge that this statement covers the 12-month period described by Section 176.001(2), Local Government Code also acknowledge that this statement covers the 12-month period described by Section 176.001(2), Local Government Code also acknowledge that this statement covers the 12-month period described by Section 176.001(2), Local Government Code also acknowledge that this statement covers the 12-month period described by Section 176.001(2), Local Government Code also acknowledge that this statement covers the 12-month period described by Section 176.001(2), Local Government Code also acknowledge that this statement covers the 12-month period described by Section 176.001(2), Local Government Code also acknowledge that this statement covers the 12-month period described by Section 176.001(2), Local Government Code also acknowledge that the statement covers the 12-month period described by Section 176.001(2), Local Government Code also acknowledge that the statement covers the 12-month period described by Section 176.001(2), Local Government Code also acknowledge that the statement covers the 12-month period described by Section 176.001(2), Local Government Code also acknowledge that the 176.001(2) acknowledge that	or 176.003(a)(2)(B), Local
Please complete either option below:	
(1) Affidavit NOTARY STAMP/SEAL	WMMY GAYLE SANDERS y Notary ID # 130608323 Expires April 5, 2024
Sworn to and subscribed before me by this the this the	D day of September
20 a.d., to certify which, witness my hand and seal of office. Signature of officer administering oath Printed name of officer administering oath	Notay
Signature of officer administering oath Printed name of officer administering oath OR	Title of officer administering oath
(2) Unsworn Declaration	
My name is, and my date of birth is	
My address is,,,	_,
(street) (city) (state) Executed in County, State of, on the day of	(zip code) (country) , 20 (year)
Signature of Local Govern	ment Officer (Declarant)

FORM CIS

This quest	ionnaire refle	cts changes mad	le to the law by H.B	3. 23, 84th Leg	., Regular Session.	OFFICE USE ONLY
governme	ent officer ha	s become aware	local government of facts that requi	re the officer t		nt Date Received
		ernment Office				FILED
Donna	Golden					
2 Office I	leld					SEP 13 2022
Electio	n Administra	tor, REO, CERA	·			CHRISTIE MACKETON A
3 Name of Code	vendor des	cribed by Secti	ons 176.001(7) an	d 176.003(a),	Local Governmen	THE BY CHERN COUNTY, TEXAS
None						
	otion of the r ndor named		it of each employn	nent or other	business relation	ship and each family relationship
5 List gift from ve	ts accepted endor named	by the local go I in item 3 exce	vernment officer a eds \$100 during t	and any fami he 12-month	ly member, if agg period described	regate value of the gifts accepted by Section 176.003(a)(2)(B).
Date G	ift Accepted	N/A	Description of G	Aift	N/	Α
Date G	ift Accepted		Description of G	aift		
Date Gi	ft Accepted		Description of Gift	t		= 1,1,
			(attach addition			
	als				period described by	Section 176,003(a)(2)(B), Local cal Government Officer
			Please com	plete eithe	r option below	78 •
(1) Affida vital v	Notary II Notary II Octob	Y S CHAFINS D #133419497 hission Expires er 28, 2025 Delote me by		lden	·	13th day of September.
20 22 Talmh	, to certify	which, writness my ha	and and seal of office.	y Chai	fins	
Signáture of of	ficer administeri	ng / bath	Printed name of of	ficer administerir	g oath	Title of officer administering oath
(0) 11				OR		
(2) Unswor	n Declaratio	n				
My name is _				, an	d my date of birth is	
My address is	·			1	1	11
Executed in _		(stre County, S	tate of	, on the	, ,,	tate) (zip code) (country), 20 (year)
						vernment Officer (Declarant)

	his questionnaire r		_	•				OFFICE	USEONLY
g	his is the notice overnment officer accordance with	has beco	me aware of facts	that require	•			Date Received	
1	Name of Local C							FI	LED
	Suzanne Leathe	rs							
2	Office Held Deputy Adminis	trator						SEP 1	3 2022
_	Name of vendor of Code	described	by Sections 176.	001(7) and 1	76.003(a	, Local Govern	nment	LEON COUNT	WEST TO STATE OF THE STATE OF T
	None								
4	with vendor nan None		and extent of eac n 3.	n employmei	nt or othe	r business rela	itionshi	p and each fan	nily relationship
5			local government of the second						ne gifts accepted 03(a)(2)(B).
	Date Gift Accep	tedN	I <u>/A</u> Descr	iption of Gift			N/A		
	Date Gift Accep	ted	Descr	ption of Gift					
	Date Gift Accept	ed	Descrip	tion of Gift _					
			(atta	ch additional	forms as	necessary)			
			mily member (as dei owledge that this sta ent Code.			th period describe	d by Sect		(B), Local
	Notar	MMY S CHAP ry ID #1334 promission E tober 28, 20 ed before in	INS 19497 xpires 025	·	ì	er option be		31/h < 3	September
20	22 , to gen	tify/wh/ch, wi	ness my hand and se	at of office.	Cha	Gas			•
Sigi	nature of officer admini	stering oath	Printe	ed name of office	er administer	ing oath		Title of office	r administering oath
				(OR .				
(2)	Unsworn Declara	ation							
Му	name is				, a	nd my date of birt	th is		*
Му	address is				,		.1	_,,	·
Exe	ecuted in		(street) County, State of	·····	, on the	(city) day of	(state)		(country)
						Signature of Loca	al Govern	ment Officer (De	clarant)

FORM CIS

This questionnaire reflects changes made to the law by H.B. 23, 84th Leg., Regular Session.	OFFICE USE ONLY
This is the notice to the appropriate local governmental entity that the following local government officer has become aware of facts that require the officer to file this statement in accordance with Chapter 176, Local Government Code.	Date Received
Name of Local Government Officer	FILED
GLENIN M. HIGHTOWER	a Glain
2 Office Held	SEP 14 2022
LEON COUNTY CONSTABLE PET 1	SLI II ZUZZ
Name of vendor described by Sections 176.001(7) and 176.003(a), Local Government	CHRISTIE WAKEFIELD
Code	LEON COUNTY, TEXAS
Description of the nature and extent of each employment or other business relationshi with vendor named in item 3.	p and each family relationship
List gifts accepted by the local government officer and any family member, if aggreg from vendor named in item 3 exceeds \$100 during the 12-month period described by	
Date Gift Accepted Description of Gift	
Date Gift Accepted Description of Gift	
Date Gift Accepted Description of Gift	
(attach additional forms as necessary)	
to each family member (as defined by Section 176.001(2), Local Government Cod also acknowledge that this statement covers the 12-month period described by Sec Government Code. Signature of Local	-
JENNIFER LEA MCKET Rase complete either option below: Notary Public, State of Texas Comm. Expires 05-13-2026 Notary ID 129539533	
Sworn to and subscribed before me by this the this the	4th day of September.
20 to certify which, witness my hand and seal of office.	Notary/Court Clerk
	Title of officer administering oath
(2) Unsworn Declaration	
My name is	
My name is, and my date of birth is	•
My address is,,,	(zin code) (country)
(street) (city) (state of, on the day of(month)	e) (zip code) (country) , 20 (year)
Signature of Local Government	roment Officer (Declarant)

LOCAL GOVERNMENT OFFICER CONFLICTS DISCLOSURE STATEMENT (Instructions for completing and filing this form are provided on the next)	CHRISTIE WAJERIE CI CLERKI ODWAT COURT CLERKI ODWAT COURT AGE COUNTY, TEXAS
This questionnaire reflects changes made to the law by H.B. 23, 84th Leg., Regular Session.	OFFICE USE ONLY
This is the notice to the appropriate local governmental entity that the following local government officer has become aware of facts that require the officer to file this statement in accordance with Chapter 176, Local Government Code.	Date Received
1 Name of Local Government Officer	ELLED
2 Office Held Justice of Peace Pet 2	SEP 1/2 2022
3 Name of vendor described by Sections 176.001(7) and 176.003(a), Local Government	CHRISTIE WAKEFIELD
Code	LEON COUNTY, TEXAS
4 Description of the nature and extent of each employment or other business relationshi with vendor named in item 3.	p and each family relationship
5 List gifts accepted by the local government officer and any family member, if aggreg from vendor named in item 3 exceeds \$100 during the 12-month period described by	
Date Gift Accepted None Description of Gift	
Date Gift Accepted None Description of Gift N	
Date Gift Accepted None Description of Gift NA	
(attach additional forms as necessary)	
I swear under penalty of perjury that the above statement is true and correct. I ackrete to each family member (as defined by Section 176.001(2), Local Government Code also acknowledge that this statement covers the 12-month period described by Section 12-month period described by Section 12-month period described by Section 13-month period d	e) of this local government officer. I
JOFRAN EDWARDS My Notary ID # 6548729 Expires July 16, 2026 NOTARY STAMP/SEAL	
Sworn to and subscribed before me by <u>Tack Keeiing</u> this the <u>13</u>	3th day of September
Dofran Edwards	
Signature of officer administering oath Printed name of officer administering oath	Title of officer administering oath
OR	
(2) Unsworn Declaration	
My name is, and my date of birth is	
My address is,,	
(street) (city) (state	' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '
Executed in County, State of , on the day of (month)	, 20 (year)
Signature of Local Gover	7
Signature of Local Gover	minorit Onicer (Deciarant)

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 FILED				
Name of Local Government Officer	TILLED				
GEORGE Y. HOLLEMAN	SEP 14 2022				
2 Office Held	SEP 14 2022				
CONSTABLE PCT. 2	CHRISTIE WAKEFIELD				
Name of vendor described by Sections 176.001(7) and 176.003(a), Local Government Code	LEON COUNTY. TEXAS				
NONE					
Description of the nature and extent of each employment or other business relationshi with vendor named in item 3. NONE	p and each family relationship				
List gifts accepted by the local government officer and any family member, if aggreg- from vendor named in item 3 exceeds \$100 during the 12-month period described by	ate value of the gifts accepted Section 176.003(a)(2)(B).				
Date Gift Accepted 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)					
to each family member (as defined by Section 176.001(2), Local Government Code) of this local government officer. I also acknowledge that this statement covers the 12-month period described by Section 176.003(a)(2)(B), Local Government Code.					
GING PREASE Complete either option below: Notary Public, State of Texas Comm. Expires 07-12-2024 Notary ID 124985622 NOTARY STAMP/SEAL					
Sworn to and subscribed before me by <u>Eesese Holleman</u> this the <u>18</u>	+ day of Sextense				
20 22, togertify which, witness my happen and seal of office.	,				
Signature of office administering oath Printed name of officer administering oath	Title of officer administering oath				
OR					
2) Unsworn Declaration					
My name is, and my date of birth is	·				
My address is,,,	_,,				
(street) (city) (state)	(zip code) (country)				
Executed in County, State of , on the day of (month)	, 20 (year)				
Signature of Local Govern					

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	FILED ?
DALGED C DELLE	
2 Office Held	SEP 20 2022
COUNTY COMMISSIONER	CHRISTIE WAKEFIELD CLERK, COUNTY COURT
3 Name of vendor described by Sections 176.001(7) and 176.003(a), Local Government	LEON COUNTY, TEXAS
Code	
LARRY GRIMES - GRIMES SERVICE CTA	
4 Description of the nature and extent of each employment or other business relationship with vendor named in item 3.	and each family relationship
LOCAL PURCHASES OF PAATS ATI	RES
5 List gifts accepted by the local government officer and any family member, if aggrega	ate value of the gifts accepted
from vendor named in item 3 exceeds \$100 during the 12-month period described by	Section 176.003(a)(2)(B).
Date Gift Accepted Description of Gift	
Date Gift Accepted Description of Gift	
Date Gift Accepted Description of Gift	
(attach additional forms as necessary)	
6 SIGNATURE I swear under penalty of perjury that the above statement is true and correct. I acknow	owledge that the disclosure applies
to each family member (as defined by Section 176.001(2), Local Government Code) of this local government officer. I
also acknowledge that this statement covers the 12-manth period described by Secti	on 176.003(a)(2)(B), Local
Government Code.	9-19-22
Signature of Local C	Government Officer
DIANAL MCMAHON Please complete either option below:	
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
(1) Affida Hi Expires October 15, 2023	
NOTARY STAMP/SEAL	
	1th Chala
Sworn to and subscribed before me by <u>David Grimes</u> this the	day of <u>September</u> ,
20 22 , to certify which, witness my hand and seal of office.	day of September,
Miana & Mellahon Diana L. McMahon Dep	ity reasurer
Signature of officer administering oath Printed name of officer administering oath	File of officer administering oath
OR	
(2) Unsworn Declaration	
My name is, and my date of birth is	•
My address is,,,,	· · · · · · · · · · · · · · · · · · ·
	(zip code) (country)
Executed in County, State of , on the day of (month)	, 20 (year)
Signature of Local Govern	ment Officer (Declarant)

(instructions for completing and filing this form are provided on the next p	age.)
This questionnaire reflects changes made to the law by H.B. 23, 84th Leg., Regular Session.	OFFICE USE ONLY
This is the notice to the appropriate local governmental entity that the following local government officer has become aware of facts that require the officer to file this statement in accordance with Chapter 176, Local Government Code.	Date Received
1 Name of Local Government Officer Enployee	FILED
Linda C. Shannon	
2 Office Held	SEP 3 0 2022
District Court Coordinator	CHRISTIFAUAKEEIT.
3 Name of vendor described by Sections 176.001(7) and 176.003(a), Local Government Code	CLERK, COUNTY COURT
NIA	CEPN COUNTY, TEXAS
Description of the nature and extent of each employment or other business relationshi with vendor named in item 3.	
5 List gifts accepted by the local government officer and any family member, if aggreg	ate value of the gifts accepted
from vendor named in item 3 exceeds \$100 during the 12-month period described by	Section 176.003(a)(2)(B).
Date Gift Accepted Description of Gift	
Date Gift Accepted Description of Gift	
Date Gift Accepted Description of Gift	
(attach additional forms as necessary)	
I swear under penalty of perjury that the above statement is true and correct. I acknown to each family member (as defined by Section 176.001(2), Local Government Code also acknowledge that this statement covers the 12-month period described by Sect Government Code TAMMY GAYLE SANDERS My Notary ID # 130608323 Expires April 5, 2024 Please complete either option below:	e) of this local government officer. I ion 176.003(a)(2)(B), Local
(1) Affidavit	
NOTARY STAMP/SEAL	_
Sworn to and subscribed before me by Linda C. Hannon this the 21	day of Systanber
20 , to certify which, witness my hand and seal of office.	U
Signature of officer administering oath Printed name of officer administering oath	Notary
C Third Island C. Shibar Edining Calif	Title of officer administering oath
(2) Unsworn Declaration	
My name is, and my date of birth is	·
My address is,,,,	-1
(street) (city) (state)	(zip code) (country)
executed in County, State of, on theday of (month)	, 20 (year)
Signature of Local Governr	ment Officer (Declarant)

, and a second displacement and a second dis	.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	Date Received
in accordance with Chapter 176, Local Government Code.	FILED
Name of Local Government Officer	
Carol Johnson	SFP 3 0 2022
Deputy Clerk	ALI A LOLL
3 Name of vendor described by Sections 176.001(7) and 176.003(a), Local Government	CHRISTIE WAKEFIELD
Code	LEON COUNTY, TEXAS
Description of the nature and extent of each employment or other business relationshi with vendor named in item 3.	p and each family relationship
5 List gifts accepted by the local government officer and any family member, if aggreg	ate value of the gifts accepted
from vendor named in item 3 exceeds \$100 during the 12-month period described by	Section 176.003(a)(2)(B).
Date Gift Accepted Description of Gift	
Date Gift Accepted Description of Gift	
Date Gift Accepted Description of Gift	
(attach additional forms as necessary)	
I swear under penalty of perjury that the above statement is true and correct. I ackrete to each family member (as defined by Section 176.001(2), Local Government Code also acknowledge that this statement covers the 12-month period described by Sec Government Code.	e) of this local government officer. I
Signature of Local	Government Officer
•	Government Onice
Please complete either option below: (1) Afficial Linda C SHANNON Notary ID #4478210 My Commission Expires AMP / SEMBy 9, 2024 Sworn to and subscribed before me by Carol Towns this the 2	st day of September.
20 22, to cartify which, witness my hand and seal of office.	day of the factories.
Luda C. Shannon Linda C. Shannon	Motory
Signature of officer administering oath Printed name of officer administering oath	Title of officer administering oath
OR	
(2) Unsworn Declaration	
My name is, and my date of birth is	
My address is,,	
· · · · · · · · · · · · · · · · · · ·	(zip code) (country)
Executed in County, State of , on the day of (month)	, 20 (year)
Signature of Local Govern	ument Officer (Declarent)
Organization of Codal Govern	mion (Donalall)

(Instructions for completing and filing the	nis form are provided on the next page.)
This questionnaire reflects changes made to the law by H.B.	23, 84th Leg., Regular Session. OFFICE USE ONLY
This is the notice to the appropriate local governmental government officer has become aware of facts that require in accordance with Chapter 176, Local Government Code.	the officer to file this statement
1 Name of Local Government Officer ASSA A DOMESTICATION OF THE PROPERTY OF TH	FILED
2 Office Held Name of vendor described by Sections 176.001(7) and	SEP 3 0 2022 176.003(a), Local Government CLERK SOUNT COURT
Code N A	BY LEGN COUNTY, TEXAS
with vendor named in item 3.	ent or other business relationship and each family relationship
from vendor named in item 3 exceeds \$100 during the	ed any family member, if aggregate value of the gifts accepted a 12-month period described by Section 176.003(a)(2)(B).
	t
Date Gift Accepted Description of Gif	t
Date Gift Accepted Description of Gift _	
(attach additiona	I forms as necessary)
6 SIGNATURE I swear under penalty of perjury that the abo	ve statement is true and correct. I acknowledge that the disclosure applies
to each family member (as defined by Section also acknowledge that this statement covers	on 175.001(2), Local Government Code) of this local government officer. I the 12-month period described by Section 176.003(a)(2)(B), Local
Government Code.	the terminal period described by Section 170.005(a)(c)(b), Local
1	ananga y www
·	Signature of Local Government Officer
LINDA C SHANNON Notary ID #4478210 My Commission Expires May 9, 2024	ete either option below:
Sworn to and subscribed before me by Lossandra	Joey this the 218 day of September,
20 82 , to certify which, witness my hand and seal of office. Buda C. Hamen Linda C.	Shannon Notary
Signature of officer administering oath Printed name of officer	er administering oath Title of officer administering oath
	OR
(2) Unsworn Declaration	
My name is	, and my date of birth is
My address is	
(street)	(city) (state) (zip code) (country)
Executed in County, State of	_ , on the day of, 20 (month) (year)
	(Mondi) (year)
	Signature of Local Government Officer (Declarant)

FORM CIS

(whether the constraint of the provided of the flext)	,age.)
This questionnaire reflects changes made to the law by H.B. 23, 84th Leg., Regular Session.	OFFICE USE ONLY
This is the notice to the appropriate local governmental entity that the following local government officer has become aware of facts that require the officer to file this statement	Date Received
in accordance with Chapter 176, Local Government Code. Name of Local Government Officer NOTEL WERVE	FILED
191101EL WERVET	CED 2.0.0000
2 Office Held Deputy Clerk	SEP 3 0 2022
3 Name of vendor described by Sections 176.001(7) and 176.003(a), Local Governmenty	CLERIC COUNTY COURT
N/A	ELON COUNTY, TEXAS
4 Description of the nature and extent of each employment or other business relationshi with vendor named in item 3.	p and each family relationship
5 List gifts accepted by the local government officer and any family member, if aggreg	ate value of the gifts accepted
from vendor named in item 3 exceeds \$100 during the 12-month period described by	Section 176.003(a)(2)(B).
Date Gift Accepted Description of Gift	
Date Gift Accepted Description of Gift	
Date Gift Accepted Description of Gift	
Date Gift Accepted Description of Gift (attach additional forms as necessary)	· · · · · · · · · · · · · · · · · · ·
6 SIGNATURE I swear under penalty of perjury that the above statement is true and correct. I acknowledge	souladge that the displacare position
to each family member (as defined by Section 176.001(2)—Local Government Code also acknowledge that this statement covers the 12-month period described by Section 12-month period described by Section 12-month period des	e) of this local government officer. I tion 176.003(a)(2)(B), Local
Signature of Local	Government Officer
Please complete either option below:	
(1) Affidavit	
() Amade is	
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	
(2) Unsworn Declaration	11/2/12
My name is 10190 PR 4130 May date of birth is My address is 10190 PR 4130 May Aut 2 TX	119/1969
Executed in LEON (street) (state) , on the 2 day of 10/10/10	(country) 10/20 2 (country)
Signature of Local Govern	Imment Officer (Declarant)
Giginative of Cocal Govern	mon Omea (Decidiant)

FORM CIS

(in the second of 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	11:07am
Kichard Parrish	SEP 23 2022
2 Office Held Extension Agent BY_	HRISTIE WAKEFIELD CLERK, COUNTY COURT LEON COUNTY, TEXAS
3 Name of vendor described by Sections 176.001(7) and 176.003(a), Local Government	
Code	
4 Description of the nature and extent of each employment or other business relationshi with vendor named in item 3.	p and each family relationship
List gifts accepted by the local government officer and any family member, if aggreg from vendor named in item 3 exceeds \$100 during the 12-month period described by	ate value of the gifts accepted Section 176,003(a)(2)(B).
A / I A	
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 ackret to each family member (as defined by Section 176.001(2), Local Government Code also acknowledge that this statement covers the 12-month period described by Sec Government Code. JOFRAN EDWARDS My Notary ID # 6548729 Expires July 16, 2026 Please complete either option below:	e) of this local government officer. I
NOTARY STAMP/SEAL	
NOTARY STAMP/SEAL Sworn to and subscribed before me by Richard Parrish this the 20 20 22, to certify which, witness my hand and seal of office.	th day of September,
20 2 , to certify which, witness my hand and seal of office.	,
Uphan Edwards Jofran Edwards	U/B
Signature of officer administering oath Printed name of officer administering oath	Title of officer administering oath
OR	
(2) Unsworn Declaration	
My name is, and my date of birth is	
My address is,,,	·
	(zip code) (country)
Executed in County, State of , on the day of (month)	, 20
(monut)	(3001)
Signature of Local Govern	nment Officer (Declarant)

FORM CIS

This questionnaire reflects changes made to the law by H.B. 23, 8	4th Leg., Regular Session.	OFFICE USE ONLY	
This is the notice to the appropriate local governmental ent government officer has become aware of facts that require the in accordance with Chapter 176, Local Government Code.	•	Date Received	
Name of Local Government Officer	9	מיז דוה	
Michael McBride		11:01 11:00	
2 Office Held		Molam	
County Extension Agent-FCH		EP 23 2022	
3 Name of vendor described by Sections 176.001(7) and 176.	003(a), Local Government	RISTIE WAKEFIELD ERK, COUNTY COURT	
Code NA	DV DV	EON COUNTY, TEXAS	
4 Description of the nature and extent of each employment o	r other business relationshi	p and each family relationship	
with vendor named in item 3. \nearrow \nearrow			
5 List gifts accepted by the local government officer and ar	y family member, if aggreg	ate value of the gifts accepted	
from vendor named in item 3 exceeds \$100 during the 12-	month period described by	Section 176.003(a)(2)(B).	
Date Gift Accepted Description of Gift			
Date Gift Accepted Description of Gift			
Date Gift Accepted Description of Gift			
(attach additional for	ms as necessary)		
to each family member (as defined by Section 17 also acknowledge that this statement covers the Government Code.	12-month period described by Sec Michael M Bri	tion 176.003(a)(2)(B), Local	
JOFRAN EDWARDS My Notary ID # 6548729 Expires July 16, 2026 NOTARY STAMP/SEAL			
Sworn to and subscribed before me by michael me	Bride this the 20	th day of Sentember	
20 23 , to certify which, witness my hand and seal of office.	_		
	dwards	A.10	
Signature diofficer administering oath Printed name of officer ad		Title of officer administering oath	
OR			
(2) Unsworn Declaration			
My name is	, and my date of birth is		
My address is	,,	_,,	
(street)) (zip code) (country)	
Executed in County, State of , or	theday of	, 20 (year)	
	(month)	(year)	
	Signature of Local Govern	nment Officer (Declarant)	

FORM CIS

This questionnaire reflects changes made to the law by H.B. 23, 84th Leg., Regular Session.	OFFICE USE ONLY
This is the notice to the appropriate local governmental entity that the following local government officer has become aware of facts that require the officer to file this statement in accordance with Chapter 176, Local Government Code.	Date Received
Name of Local Government Officer	FILED
Cassie L. Ferguson	1/:07 MM SEP 23 2022
2 Office Held	CURISTIS WAKEFIELD
4-H Youth Development CEA "	CHRISTIE WAKEFIELD CLERK, COUNTY COURT LEON COUNTY, TEXAS
Name of vendor described by Sections 176.001(7) and 176.003(a), Local Government	Code
Description of the nature and extent of each employment or other business relationshi with vendor named in item 3.	p and each family relationship
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	Section 176.003(a)(2)(B).
Data Gift Assented Department of Cife	
Date Gift Accepted Description of Gift	
Date Gift Accepted Description of Gift	
Date Gift Accepted Description of Gift	
Bate diff Accepted Bescription of diff	
(attach additional forms as necessary)	
6 AFFIDAVIT	
I swear under penalty of perjury that the above statement that the disclosure applies to each family member (as defi	
Government Code) of this local government officer. I also	
JOFRAN EDWARDS pvers the 12-month period described by Section 176.003(a)(2)(B), Local Government Code.
My Notary ID # 6548729 Expires July 16, 2026 Casu 7	erguaon
Signature of Local	Government Officer
AFFIX NOTARY STAMP / SEAL ABOVE	
Sworn to and subscribed before me, by the said COSS'IC FERGUSON	, this the day
of September, 20 33 , to certify which, witness my hand and seal of office.	
Ophon Edwards Johran Edwards	AIR
Signature of officer administering oath Printed name of officer administering oath	Fitle of officer administering oath

FORM CIS

This questionnaire reflects changes made to the law by H.B. 23, 84th Leg., Regular Session.	OFFICE USE ONLY
This is the notice to the appropriate local governmental entity that the following local government officer has become aware of facts that require the officer to file this statement in accordance with Chapter 176, Local Government Code.	Date Received
1 Name of Local Government Officer	11-07am
Jofran Edwards	SEP 23 2022
2 Office Held	CHRISTIE WAKEFIELD CLERK, COUNTY COURT
Office manager	LEON COUNTY, TEXAS
Name of vendor described by Sections 176.001(7) and 176.003(a), Local Government C	Code
$A \cap A$	
Description of the nature and extent of each employment or other business relationship with vendor named in item 3.	and each family relationship
n/A	
5 List gifts accepted by the local government officer and any family member, if aggrega from vendor named in item 3 exceeds \$100 during the 12-month period described by \$	ate value of the gifts accepted Section 176.003(a)(2)(B).
Date Gift Accepted	
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 each family member (as define Government Code) of this local government officer. I also a covers the 12-month period described by Section 176.003(a) TAMMY GAYLE SANDERS My Notary ID # 130608323 Expires April 5, 2024 Signature of Local G	ed by Section 176.001(2), Local acknowledge that this statement 0(2)(B), Local Government Code.
Sworn to and subscribed before me, by the said 50 For Edward S of Sept , 20 22, to certify which, witness my hand and seal of office.	, this the day
Signature of officer administering oath Printed name of officer administering oath Tit	Nothing tle of officer administering oath