

# LOCAL GOVERNMENT OFFICER CONFLICTS DISCLOSURE STATEMENT

FORM CIS

(Instructions for completing and filing this form are provided on the next page.)

This questionnaire reflects changes made to the law by H.B. 23, 84th Leg., Regular Session.

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.

**OFFICE USE ONLY**

Date Received

1 Name of Local Government Officer

Travis Faulkner

2 Office Held

Board Member

3 Name of vendor described by Sections 176.001(7) and 176.003(a), Local Government Code

N/A

4 Description of the nature and extent of each employment or other business relationship and each family relationship with vendor named in item 3.

N/A

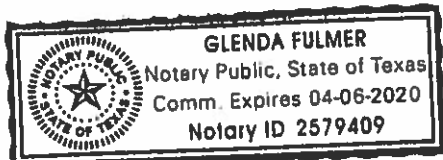
5 List gifts accepted by the local government officer and any family member, if aggregate value of the gifts accepted from vendor named in item 3 exceeds \$100 during the 12-month period described by Section 176.003(a)(2)(B).

Date Gift Accepted N/A Description of Gift \_\_\_\_\_  
 Date Gift Accepted N/A Description of Gift \_\_\_\_\_  
 Date Gift Accepted N/A Description of Gift \_\_\_\_\_

(attach additional forms as necessary)

6 AFFIDAVIT

I swear under penalty of perjury that the above statement is true and correct. I acknowledge that the disclosure applies to each family member (as defined by Section 176.001(2), Local Government Code) of this local government officer. I also acknowledge that this statement covers the 12-month period described by Section 176.003(a)(2)(B), Local Government Code.



APPLY NOTARY STAMP / SEAL ABOVE

Travis D. Faulkner  
Signature of Local Government Officer

Sworn to and subscribed before me, by the said Travis D. Faulkner, this the 6<sup>th</sup> day of July, 2017, to certify which, witness my hand and seal of office.

Glenda Fulmer  
Signature of officer administering oath

Glenda Fulmer  
Printed name of officer administering oath

Notary Public  
Title of officer administering oath

# LOCAL GOVERNMENT OFFICER CONFLICTS DISCLOSURE STATEMENT

FORM CIS

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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.

**OFFICE USE ONLY**

Date Received

1 Name of Local Government Officer

JOHN MCGUIRE

2 Office Held

BOARD MEMBER

3 Name of vendor described by Sections 176.001(7) and 176.003(a), Local Government Code

N/A

4 Description of the nature and extent of each employment or other business relationship and each family relationship with vendor named in item 3.

N/A

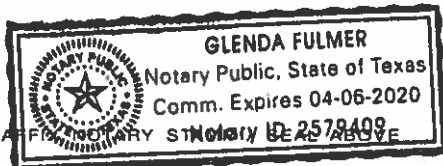
5 List gifts accepted by the local government officer and any family member, if aggregate value of the gifts accepted from vendor named in item 3 exceeds \$100 during the 12-month period described by Section 176.003(a)(2)(B).

Date Gift Accepted NO Description of Gift —  
 Date Gift Accepted NO Description of Gift —  
 Date Gift Accepted NO Description of Gift —

(attach additional forms as necessary)

6 AFFIDAVIT

I swear under penalty of perjury that the above statement is true and correct. I acknowledge that the disclosure applies to each family member (as defined by Section 176.001(2), Local Government Code) of this local government officer. I also acknowledge that this statement covers the 12-month period described by Section 176.003(a)(2)(B), Local Government Code.



*[Signature]*  
Signature of Local Government Officer

Sworn to and subscribed before me, by the said John McGuire, this the 16<sup>th</sup> day of July, 2017, to certify which, witness my hand and seal of office.

*[Signature]*  
Signature of officer administering oath

Glenda Fulmer  
Printed name of officer administering oath

Notary Public  
Title of officer administering oath

**LOCAL GOVERNMENT OFFICER  
CONFLICTS DISCLOSURE STATEMENT**

**FORM CIS**

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**OFFICE USE ONLY**

Date Received

1 Name of Local Government Officer

Cody B. Lane

2 Office Held

Board Member

3 Name of vendor described by Sections 176.001(7) and 176.003(a), Local Government Code

N/A

4 Description of the nature and extent of each employment or other business relationship and each family relationship with vendor named in item 3.

N/A

5 List gifts accepted by the local government officer and any family member, if aggregate 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 N/A Description of Gift \_\_\_\_\_

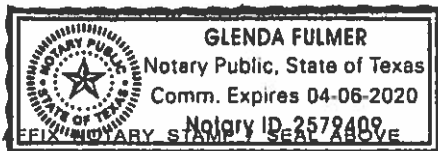
Date Gift Accepted N/A Description of Gift \_\_\_\_\_

Date Gift Accepted N/A Description of Gift \_\_\_\_\_

(attach additional forms as necessary)

6 **AFFIDAVIT**

I swear under penalty of perjury that the above statement is true and correct. I acknowledge that the disclosure applies to each family member (as defined by Section 176.001(2), Local Government Code) of this local government officer. I also acknowledge that this statement covers the 12-month period described by Section 176.003(a)(2)(B), Local Government Code.



Cody B. Lane  
Signature of Local Government Officer

Sworn to and subscribed before me, by the said Cody B. Lane, this the 16<sup>th</sup> day of July, 2017, to certify which, witness my hand and seal of office.

Glenda Fulmer  
Signature of officer administering oath

Glenda Fulmer  
Printed name of officer administering oath

Notary Public  
Title of officer administering oath

**LOCAL GOVERNMENT OFFICER  
CONFLICTS DISCLOSURE STATEMENT**

**FORM CIS**

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**OFFICE USE ONLY**

Date Received

1 Name of Local Government Officer

*Brent A. Gough*

2 Office Held

*BOARD MEMBER*

3 Name of vendor described by Sections 176.001(7) and 176.003(a), Local Government Code

*N/A*

4 Description of the nature and extent of each employment or other business relationship and each family relationship with vendor named in item 3.

*N/A*

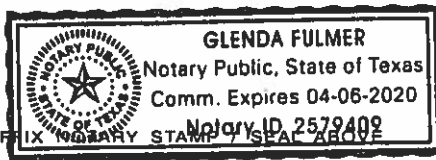
5 List gifts accepted by the local government officer and any family member, if aggregate value of the gifts accepted from vendor named in item 3 exceeds \$100 during the 12-month period described by Section 176.003(a)(2)(B).

Date Gift Accepted \_\_\_\_\_ Description of Gift *N/A*  
Date Gift Accepted \_\_\_\_\_ Description of Gift *N/A*  
Date Gift Accepted \_\_\_\_\_ Description of Gift *N/A*

(attach additional forms as necessary)

6 AFFIDAVIT

I swear under penalty of perjury that the above statement is true and correct. I acknowledge that the disclosure applies to each family member (as defined by Section 176.001(2), Local Government Code) of this local government officer. I also acknowledge that this statement covers the 12-month period described by Section 176.003(a)(2)(B), Local Government Code.



*Brent A. Gough*  
Signature of Local Government Officer

Sworn to and subscribed before me, by the said *Brent A. Gough*, this the *6<sup>th</sup>* day of *July*, 20 *17*, to certify which, witness my hand and seal of office.

*Glenda Fulmer* *Glenda Fulmer* *Notary Public*  
Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath

**LOCAL GOVERNMENT OFFICER  
CONFLICTS DISCLOSURE STATEMENT**

**FORM CIS**

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**OFFICE USE ONLY**

Date Received

1 Name of Local Government Officer

MARTIN J IVEY DVM

2 Office Held

Board Member

3 Name of vendor described by Sections 176.001(7) and 176.003(a), Local Government Code

NA

4 Description of the nature and extent of each employment or other business relationship and each family relationship with vendor named in item 3.

NA

5 List gifts accepted by the local government officer and any family member, if aggregate 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 NA Description of Gift \_\_\_\_\_

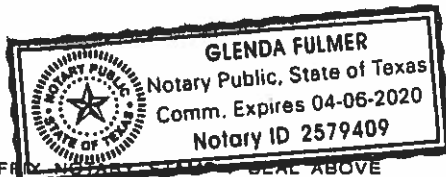
Date Gift Accepted | Description of Gift \_\_\_\_\_

Date Gift Accepted | Description of Gift \_\_\_\_\_

(attach additional forms as necessary)

6 AFFIDAVIT

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AFFIDAVIT NOTARY PUBLIC SEAL ABOVE

*Martin J. Ivey*

Signature of Local Government Officer

Sworn to and subscribed before me, by the said Martin J. Ivey, this the 16<sup>th</sup> day of July, 2017, to certify which, witness my hand and seal of office.

*Glenda Fulmer*

Signature of officer administering oath

Glenda Fulmer

Printed name of officer administering oath

Notary Public

Title of officer administering oath

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### OFFICE USE ONLY

Date Received

1 Name of Local Government Officer

John T Brunner

2 Office Held

Board Member

3 Name of vendor described by Sections 176.001(7) and 176.003(a), Local Government Code

N/A

4 Description of the nature and extent of each employment or other business relationship and each family relationship with vendor named in item 3.

N/A

5 List gifts accepted by the local government officer and any family member, if aggregate 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 N/A

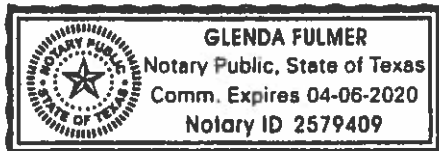
Date Gift Accepted \_\_\_\_\_ Description of Gift N/A

Date Gift Accepted \_\_\_\_\_ Description of Gift N/A

(attach additional forms as necessary)

6 AFFIDAVIT

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AFFIX NOTARY STAMP / SEAL ABOVE

[Signature]  
Signature of Local Government Officer

Sworn to and subscribed before me, by the said John T. Brunner, this the 16<sup>th</sup> day of July, 2017, to certify which, witness my hand and seal of office.

Glenda Fulmer  
Signature of officer administering oath

Glenda Fulmer  
Printed name of officer administering oath

Notary Public  
Title of officer administering oath

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**OFFICE USE ONLY**

Date Received

1 Name of Local Government Officer

Shanna J. Boleman

2 Office Held

Board of Trustees, Vice President

3 Name of vendor described by Sections 176.001(7) and 176.003(a), Local Government Code

N/A

4 Description of the nature and extent of each employment or other business relationship and each family relationship with vendor named in item 3.

N/A

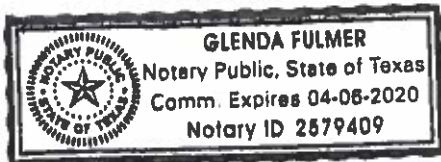
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Date Gift Accepted N/A Description of Gift \_\_\_\_\_  
 Date Gift Accepted \_\_\_\_\_ Description of Gift \_\_\_\_\_  
 Date Gift Accepted \_\_\_\_\_ Description of Gift \_\_\_\_\_

(attach additional forms as necessary)

6 AFFIDAVIT

I swear under penalty of perjury that the above statement is true and correct. I acknowledge that the disclosure applies to each family member (as defined by Section 176.001(2), Local Government Code) of this local government officer. I also acknowledge that this statement covers the 12-month period described by Section 176.003(a)(2)(B), Local Government Code.



AFFIX NOTARY STAMP / SEAL ABOVE

Shanna J. Boleman  
Signature of Local Government Officer

Sworn to and subscribed before me, by the said Shanna J. Boleman, this the 17th day of July, 20 17, to certify which, witness my hand and seal of office.

Glenda Fulmer  
Signature of officer administering oath

Glenda Fulmer  
Printed name of officer administering oath

Notary Public  
Title of officer administering oath