FORM CIS

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

This questionnaire reflects changes made to the law by H.B. 23, 84th Leg., Regular Session.	OFFICE USE ONLY
This is the notice to the appropriate local governmental entity that the following local government officer has become aware of facts that require the officer to file this statement in accordance with Chapter 176, Local Government Code.	Date Received
Name of Local Government Officer	
Pam Seipp 2 Office Held	
Interim Superintendent	
Name of vendor described by Sections 176.001(7) and 176.003(a), Local Government	Code
no conflict disclosures	
Description of the nature and extent of each employment or other business relationship 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)	
AFFIDAVIT I swear under penalty of perjury that the above statement is that the disclosure applies to each family member (as defined to be a control of the	
JUANITA G. SANCHEZ Notary Public, State of Texas My Commission Expires January 24, 2017 Government Code) of this local government officer. I also covers the 12-month period described by Section 176:003(a)	acknowledge that this statement
- Sandary 24, 2017	12/14/15
Signature of Local C	Government Officer
AFFIX NOTARY STAMP / SEAL ABOVE	11
Sworn to and subscribed before me, by the said am Supp	, this the 4 1
of, 20_15, to certify which, witness my hand and seal of office.	
Junita Saylez Julita Souther	Notary
Signature of officer administering oath Printed name of officer administering oath Ti	itle of officer administering oath

COM LICIS DISCLOSE	THE STATEMENT	
(Instructions for completing and filing this	s 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
	cal governmental entity that the following local facts that require the officer to file this statement overnment Code.	Date Received
1 Name of Local Government Officer		
Randy Ramire	Z-	
2 Office Held		
Business Many	19er	
Name of vendor described by Sectio	ns 176.001(7) and 176.003(a), Local Government	Code
no cont	lict disclosures	
Description of the nature and extent of with vendor named in item 3.	of each employment or other business relationship	and each family relationship
	A - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	
List gifts accepted by the local gove from vendor named in item 3 exceed	rnment officer and any family member, if aggrega s \$100 during the 12-month period described by	ate value of the gifts accepted Section 176.003(a)(2)(B).
· · · · · · · · · · · · · · · · · · ·	escription of Gift	
Date Gift Accepted De	escription of Gift	
Date Gift Accepted N A De	escription 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 each family member (as defin	
A SANCHEZ	Government Code) of this local government officer. I also covers the 12-month period described by Section 176.003(a)	
My Commission Expires	covers the 12-month period described by Section 176.003(a)	(2)(B), Local Government Gode.
January 24, 2017	Menefer	12/14/15
	Signature of Local G	overnment Officer
AFFIX NOTARY STAMP / SEAL ABOVE		×
Sworp to and subscribed before me, by the sai	d Rank Runiser	this the 14th day
9)	y which, witness my hand and seal of office.	day
1100	1 8 - 1 -	1).1
Signature of officer administering oath	Printed name of officer administering oath Tit	le of officer administering oath

COMPLICIS 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. 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	
Zachary X. Yante	# 1 # #
2 Office Held	
Pregident	
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	
Description of the nature and extent of each employment or other business relationshi with vendor named in item 3.	p and each family relationship
The second secon	
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).
Date Gift Accepted Description of Gift	
Date Gift Accepted Description of Gift	
Date Gift Accepted Description of Gift	1
(attach additional forms as necessary)	,
6 AFFIDAVIT	
I swear under penalty of perjury that the above statement is that the disclosure applies to each family member (as defined by the context of	
JUANITA G. SANCHEZ Government Code) of this local government officer. I also	acknowledge that this statement
Notary Public, State of Texas covers the 12-month period described by Section 176.003(a My Commission Expires)(2)(B), Local Government Code.
January 24, 2017	17 11
Signature of Local C	Sovernment Officer
	n e
AFFIX NOTARY STAMP / SEAL ABOVE	with
Sworn to and subscribed before me, by the said Zuchary	, this the day
of, 20, to certify which, witness my hand and seal of office.	· ·
Justa Sanchez	Motary
Signature of officer administering oath Printed name of officer administering oath Ti	tle of officer administering oath

COM FIG 12 DISCEOSOME 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. 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	
Danny Espacer	grande en la sala de la companya de La companya de la co
2 Office Held Board Member	
Name of vendor described by Sections 176.001(7) and 176.003(a), Local Government A Conflect Assures	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
rua-responding a company of the comp	
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	Section 176.003(a)(2)(B).
Date Gift Accepted Description of Gift	
(attach additional forms as necessary)	4
I swear under penalty of perjury that the above statement is that the disclosure applies to each family member (as defined as	ned by Section 176.001(2), Local acknowledge that this statement
Sworn to and subscribed before me, by the said	, this theday
Signature of officer administering oath Printed name of officer administering oath T	Title of officer administering oath

(Instructions for completing and filing th	is form are provided on the next page.)	
This questionnaire reflects changes made	to the law by H.B. 23, 84th Leg., Regular Session.	OFFICE USE ONLY
	ocal governmental entity that the following local of facts that require the officer to file this statement Government Code.	Date Received
Name of Local Government Officer		
Timothy L.S	Schryver	·
2 Office Held Vice President	Board Member	* * *
Name of vendor described by Section	ons 176.001(7) and 176.003(a), Local Government	Code
No Conflic	t disclosures	
Description of the nature and extent with vendor named in item 3.	of each employment or other business relationshi	p and each family relationship
	1	
	ernment officer and any family member, if aggreg ds \$100 during the 12-month period described by	
Date Gift Accepted NO Gifts Accepted Description of Gift		
Date Gift Accepted D	Description of Gift	
Date Gift Accepted D	escription of Gift	
	(attach additional forms as necessary)	
JUANITA G. SANCHEZ Notary Public, State of Texas My Commission Expires January 24, 2017	I swear under penalty of perjury that the above statement is that the disclosure applies to each family member (as defin Government Code) of this local government officer. I also covers the 12-month period described by Section 176.003(at Signature of Local Code)	ned by Section 176.001(2), Local acknowledge that this statement (1)(2)(B), Local Government Code.
AFFIX NOTARY STAMP / SEAL ABOVE		+0 -
Sworn to and subscribed before me, by the sa	lify which, witness my hand and seal of office.	tle of officer administering oath
Tightalar of Ships, dominionally duli		as a smoot again notering out

FORM CIS

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

This questionnaire reflects changes made to the law by H.B. 23, 84th Leg., Regular Session. OFFICE USE ONLY This is the notice to the appropriate local governmental entity that the following local Date Received government officer has become aware of facts that require the officer to file this statement in accordance with Chapter 176, Local Government Code. Name of Local Government Officer Office Held 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 relationship and each family relationship with vendor named in Item 3. 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 **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 each family member (as defined by Section 176.001(2), Local JUANITA G. SANCHEZ Government Code) of this-local government officer. I also acknowledge that this statement lotary Public, State of Texas covers the 12-month period described by Section 176.003(a)(2)(B), Local Government Code. My Commission Expires January 24, 2017 Signature of Local Government Officer AFFIX NOTARY STAMP / SEAL ABOVE Sworn to and subscribed before me, by the said day

Signature of officer administering each

Printed name of officer administering oath

Title of officer administering oath

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

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. 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	
Eloy Nunez	
2 Office Held	
Board of Trustee	
Name of vendor described by Sections 176.001(7) and 176.003(a), Local Government C	Code
No conflict disclosurer	
Description of the nature and extent of each employment or other business relationship with vendor named in item 3.	and each family relationship
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 \$100 during the 12-month period de	
,	
Date Gift Accepted	
Date Gift Accepted Description of Gift	A 1
Date Gift Accepted Description of Gift	
Date Gitt Accepted Description of Gitt	
(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 each family member (as define	ed by Section 176.001(2), Local
Notary Public, State of Texas My Commission Expires Government Code) of this local government officer. I also a covers the 12-month period described by Section 176.003(a)	
January 24, 2017	A1 5 100
12-	14-15
Signature of Local Go	overnment Officer
AFFIX NOTARY STAMP / SEAL ABOVE	
Sworn to and subscribed before me, by the said Eloy Numer	this the 14 th day
of December , 20 15 , to certify which, witness my hand and seal of office.	•
Junto Sach Junita Sanchez	Votary
Signature of officer administering oath Printed name of officer administering oath Titl	le of officer administering oath

(Instructions for completing and filing t	his form are provided on the next page.)	
This questionnaire reflects changes mad	e to the law by H.B. 23, 84th Leg., Regular Session.	OFFICE USE ONLY
	local governmental entity that the following local of facts that require the officer to file this statement Government Code.	Date Received
Name of Local Government Officer		
Kebrert Mo	/wa	
2 Office Held		
Board of To	uste-	
	ions 176.001(7) and 176.003(a), Local Government	Code
FARCITY NAT 1	bank	
Description of the nature and exten with vendor named in item 3.	t of each employment or other business relationshi	ip and each family relationship
	vernment officer and any family member, if aggregeds \$100 during the 12-month period described by	
Date Gift Accepted	Description of Gift	P ST TO ST TO ST
	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 i	s true and correct. I acknowledge
JUANITA G. SANCHEZ Notary Public, State of Texas My Commission Expires	that the disclosure applies to each family member (as defi Government Code) of this local government officer. I also covers the 12-month period described by Section 176.003(a	acknowledge that this statement
January 24, 2017	Kalled.	la (2/14/15
	Signature of Local	Government Officer
AFFIX NOTARY STAMP / SEAL ABOVE		
Sworn to and subscribed before me, by the		, this the 14 th day
of <u>seconder</u> , 20 5, to ce	ertify which, witness my hand and seal of office.	2
Signature of officer administering oath	Printed name of officer administering oath T	itle of officer administering oath
Signature of officer administering Oath	Timed hame of officer administering oath	the of officer administering datif