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.				OFFICE	USE ONLY	
government officer	has become aw	ate local governmental are of facts that require local Government Code.			Date Received	
	Government Offi					
V	sidna K	Kantani				
2 Office Held	nm Pre #	- 1				
Con	nm IIE T	~				
3 Name of vendor of Code	described by Se	ections 176.001(7) and 1	176.003(a), Local Go	vernment		1
Ain	Tracki	na Co.				
4 Description of the with vendor par	he nature and ex	tent of each employme	nt or other business	relationship	and each fam	ily relationship
with vehicor had	office T	andria Com	sana work	bs 1.	A Paul	.+.,
		government officer an	d an Damily membe	er, if aggrega		
from vendor na	med in item 3 ex	ceeds \$100 during the	12-month period de	escribed by S	Section 176.00	3(́a)(2)(B).
Date Gift Accep	oted	Description of Gift	t			
Date Gift Accep	oted	Description of Gift	t			
Date Gift Accept	ted	Description of Gift _				
			I forms as necessary			
6 SIGNATURE	Lauranumalauma	nalty of perjury that the above	<u>.</u>			1. 1 1.
		ember (as defined by Section e that this statement covers de.	the 12-month period des	scribed by Section	_	B), Local
		Please compl	ete either optior	n below:		
(1) Affidavit		·	•			
NOTARY STAMP/S	SEAL					
Sworn to and subscrib	ped before me by _			_ this the	day of	,
20, to cer	rtify which, witness m	ny hand and seal of office.				
Signature of officer admin	nistering oath	Printed name of offic	er administering oath		Title of officer	administering oath
			OR			
(2) Unsworn Declar	ation					
My name is	dro R Ke	i enteria	, and my date	of birth is	Poril 1.	961
My address is P2	Box 162	2 16887 W HWY	 -,		19754	Louma
,	•	(street)	(city)	(state)	(zip code)	(country)
Executed in	Count	ty, State of	_ , on the _ 7 _ day o	of <u>(morith)</u>	y <u>23</u> (year)	
	_		Zpidu	0 X X	ment Officer (Dec	locant)

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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	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.	Date Neceived
Name of Local Government Officer 1 Name of Local Government Officer	
Skeet Lee Jones	
2 Office Held	
County Judge	
3 Name of vendor described by Sections 176.001(7) and 176.003(a), Local Government	
Code	
Dames Hamilton (DASTrastION	
Description of the nature and extent of each employment or other business relationshi with vendor named in item 3.	p and each family relationship
Rents + Lease Houseing to James A	lamilton longt.
5 List gifts accepted by the local government officer and any family member, if aggred	ate value of the gifts accepted
from vendor named in item 3 exceeds \$100 during the 12-month period described by	Jo NES (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 Sec Government Code. Signature of Local	
Please complete either option below:	V
(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	
(2) Unsworn Declaration	
My name is <u>Skeet Lee Jones</u> , and my date of birth is	Feb. 16, 1951
My address is P.O. Box 213 2118 Co. Rd. 300 Mentone. Tx	79754 Louing.
Executed in Loving County, State of Texas, on the 9th day of Jawas (month)) (zip code) (country) r y 20 23 (year)
Signature of Local Govern	nment Officer (Declarant)

LOCAL GOVERNMENT OFFICER CONFLICTS DISCLOSURE STATEMENT

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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 follow government officer has become aware of facts that require the officer to file this in accordance with Chapter 176, Local Government Code.	
Name of Local Government Officer	
Brad Cook	
2 Office Held	
County Commissioner Pot. 4 3 Name of vendor described by Sections 176.001(7) and 176.003(a), Local Go	
Name of vendor described by Sections 176.001(7) and 176.003(a), Local Go	vernment
Code	ļ
Mene. Description of the nature and extent of each employment or other business	
with vendor named in item 3.	relationship and each family relationship
none	
List gifts accepted by the local government officer and any family member from vendor named in item 3 exceeds \$100 during the 12-month period de	r, if aggregate value of the gifts accepted
Date Gift Accepted <u>ha</u> Description of Gift <u>ha</u>	
Date Gift Accepted Description of Gift	
Date Gift Accepted <u>pla</u> Description of Gift <u>pla</u>	
(attach additional forms as necessary)	
to each family member (as defined by Section 176.001(2), Local Gov also acknowledge that this statement covers the 12-month period des Government Code. Signa	
Please complete either option	below:
(1) Affidavit	20.0
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	
My name isBvadCookand my date of	of birth is <u>61-31-1966</u>
	, tx , 79754 . Loving
(street) (city)	(state) (zip code) (country)
Executed in	
Pha	(month) (year)
Signature of	Local Government Officer (Declarant)

LOCAL GOVERNMENT OFFICER CONFLICTS DISCLOSURE STATEMENT

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This questionnaire reflects changes made to the law hy	IID 00 04th Law Davids Occiden	
This questionnaire reflects changes made to the law by	OFFICE USE ONLY	
This is the notice to the appropriate local government officer has become aware of facts that re in accordance with Chapter 176, Local Government C		
Name of Local Government Officer		
RAYMOND KING		
2 Office Held		
COMMISSIONER PCT 3		
3 Name of vendor described by Sections 176.001(7) Code) and 176.003(a), Local Governme	1t
<u> </u>		
4 Description of the nature and extent of each empl with vendor named in item 3.		
5 List gifts accepted by the local government offic from vendor named in item 3 exceeds \$100 during	cer and any family member, if agg	regate value of the gifts accepted
nom vendor named in Rein o exceeds \$100 duin	ig 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	
	ditional forms as necessary)	
	Section 176.001(2), Local Government Covers the 12-month period described by	
Please co	omplete 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 off		, day or,
Signature of officer administering oath Printed name		Title E EC de la
Finited name	of officer administering oath OR	Title of officer administering oath
(2) Unsworn Declaration		
My name is RAYMOND KING	, and my date of birth is	12 10 1981
My address is 9032 UALERIE LANE	MENTONE, T	X, 79754, 00 USA.
(street)	(city) (s	tate) (zip code) (country)
Executed in Louing County, State of TE	XAS, on the day of (month	(year) .
	Signature of Local Co	vernment Officer (Declarant)

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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 loca 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 O Man C 5/04 OF PCT	
Name of vendor described by Sections 176.001(7) and 176.003(a), Local Governmen	र्च
OHSI/Agradian	
Description of the nature and extent of each employment or other business relations with vendor named in item 3. Less electron with the local government officer and any family member, if aggregion wendor named in item 3 exceeds \$100 during the 12-month period described in the local government officer and any family member.	egate value of the gifts accepted
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 at to each family member (as defined by Section 176.001(2), Local Government Coalso acknowledge that this statement covers the 12-month period described by Section 176.001(2).	ode) of this local government officer. I
Signature of Loc	al 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.	, day 01,
Signature of officer administering oath Printed name of officer administering oath	Title of officer administering oath
OR	
(2) Unsworn Declaration	
My name is Havior Months and my date of birth is	2-22-1968
My address is 124 N Récos , Mendem , M	(<u>. 19754</u> , U S
(street) (city) (state of Loving day of Jay (month)	ate) (zip code) (country) , 20 <u>2 3</u> . (year)
Signature of Local Gov	erninent Officer (Declarant)