## LOCAL GOVERNMENT OFFICER

FORM CIS

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 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 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 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. 131280 OF AFFIX NOTAHY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Regina Wilkinson, this the

of February 20 19, to certify which, witness my hand and seal of office.

Amber M. Kins ature of officer administering oath

FORM CIS

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fice Held

Loving County Constable 2 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 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. EXPIRES 091 AFFIX NOTARY STAMP / SEAL ABOVE Sworn to and subscribed before me, by the said Brandon Jones 20 19 , to certify which, witness my hand and seal of office. Signature of officer administering oath

### LOCAL GOVERNMENT OFFICER CONFLICTS DISCLOSURE STATEMENT (Instructions for completing and filing this form are provided on the next page.)

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This questionnaire reflects changes ma	ade to the law by H.B. 23, 84th 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	
Mozelle Car		
Office Held		
Mozelle Cari 2 Office Held County and Dist	nict Clerk	
	ections 176.001(7) and 176.003(a), Local Government	Code
P+M Fresh Water	and To	
P+M Jones Family R		
with vendor named in item 3.	ent of each employment or other business relationshi	p and each family relationship
5 List gifts accepted by the local of	government officer and any family member, if aggreg	ate value of the gifts accepted
from vendor named in item 3 exc	ceeds \$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)	
AFFIDATER KING PUBLIC  N 13178 OPTOTAL  AFFIDATER OF THE OFFICE  AFFIDATER OF THE OFFI  AFFIDATER OFFI  A	I swear under penalty of perjury that the above statement that the disclosure applies to each family member (as def Government Code) of this local government officer. I also covers the 12-month period described by Section 176.003(	ined by Section 176.001(2), Local or acknowledge that this statement
AFFIX NOTARY STAMP / SEAL AE	OVE	
	the said MOzelle Carr	, this the day
i and a second s	o certify which, witness my hand and seal of office.	
Au 72	h Printed name of officer administering path	Deputy Clark
Signature of officer agministering oat	h Printed name of officer administering oath	Title of officer administering oath
Form provided by Texas Ethics Commission	MANUA ethics state by us	D. 1. 1. 10 100 100 1

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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		
u		
Jsidro Rentenia	<u> </u>	
Office Held		
Comm Precinct 2		
Name of vendor described by Secti	ions 176.001(7) and 176.003(a), Local Government	Code
AIM Trucking		
		in and and for the
Description of the nature and extension with vendor named in item 3.	t of each employment or other business relationshi	p and each family relationship
	**************************************	M40.4004 100 60 0,000 000 000 000 000 000 000 000
2 List gifts accepted by the local government from vendor named in item 3 excepted.	vernment officer and any family member, if aggreg eds \$100 during the 12-month period described by	gate value of the gifts accepted
	J poou deconinged by	. Isanan II alaaalakkikakak
Date Gift Accepted	Description of Gift	
	Description of Gift	
Date Gift Accepted	Description of Gift	
	(attach additional forms as necessary)	Marcon in contribution and contribution
AFFIDAVIT	I swear under penalty of perjury that the above statement	
WINTER TO BLIC	that the disclosure applies to each family member (as def Government Code) of this local government officer. I also	fined by Section 176.001(2). Local
	covers the 12-month period described by Section 176.003	
AFFIX NOTARY STAMP / SEAL ABOV		+,
IN STATE OF	Ysidio X Zen Signature of Local	land
EXPINATION EXPINATION	Signature of Local	Government Officer
AFFIX NOTARY STAMP / SEAL ABOV		. <b>.</b>
		this the day
of 1 to 0	certify which, witness my hand and seal of office.	_
Aur m. 2	- Amber M. King	DeputyClerk
Signature of officer administering oath	Printed name of officer administering oath	Title of officer administering oath
L		

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Hice Held
County Judge 2 Office Held Name of vendor described by Sections 176.001(7) and 176.003(a), Local Government Code LM Jones Family Ranch, INC. 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) A CA PI AFFIDAVIT STATE OF STA 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 of local Government Officer Sworn to and subscribed before me, by the said Skeet Lee Jones 20 19, to certify which witness my hand and seal of office Amber M. King

Signature of officer administering oath

Printed name of officer administering oath

Title of officer administering oath

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Printed name of officer administering path ture of officer administering oath

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Name of Local Government Officer	
Harlan Hoppen	
Office Held	
01	
Commissioner Pit1	
Name of vendor described by Sections 176.001(7) and 176.003(a), Local Government	Code
11 (	
Hoppiers Station  Description of the nature and extent of each employment or other business relationsh	
Description of the nature and extent of each employment or other business relationsh with vendor named in item 3.	ip and each family relationship
Owner of Station Sell I Terms to ba	2442
List gifts accepted by the local government officer and any family member, if aggre from vendor named in item 3 exceeds \$100 during the 12-month period described b  Date Gift Accepted Description of Gift  Date Gift Accepted Description of Gift	y Section 176.003(a)(2)(6).
Date Gift Accepted Description of Gift	en i des ampares que l'acce distributes e arises equines que conservant que province ampares, montain (handiser és arbeiles)
(attach additional forms as necessary)	
F swear under penalty of perjury that the above statement that the disclosure applies to each family member (as discoveriment Code) of this local government officer. I a covers the 12-month period described by Section 176.00 Signature of Log	efined by Section 176.001(2). Local so acknowledge that this statement
Sworn to and subscribed before me, by the said Haylan Hopper	this the da
of February 20 19 , to certify which witness my hand and seal of office.	
Au X: Amber King	Deputy Cleri
TWO DAY FIND	

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OFFICE USE ONLY

Date Received

Name of Local Government Officer

TomJones

Office Held

County Commissioner Precinct 3

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

P+M Jones Family Ranch Inc.

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

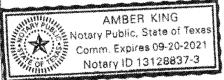
Date Gift Accepted Description of Gift Accepted

Date Gift Accepted Description of Gift

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

(attach additional forms as necessary)

**AFFIDAVIT** 



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AFFIX NOTARY STAMP - SEAL ABOVE

of March 20 19 to certify which, witness my hand and seat of office.

Amber King Deputy Clerk
ring oath Printed name of officer administering path Title of officer administering path