CONFLICT DISCLOSURE STATEMENTS (CIS FORMS)
January, 2019

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

City Secretary's Office Received Date 1-3-19

1 **Name of Local Government Officer**

Marisa Sepulveda

2 **Office Held**

Passport Divisun

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

Melanie Garza (Applicant)

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

~~Box of one dozen doughnuts~~ Citizen

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 01/03/19 Description of Gift Box of One dozen doughnuts Shared w/ staff

Date Gift Accepted _____ Description of Gift _____

Date Gift Accepted _____ Description of Gift _____

(attach additional forms as necessary)

6 **AFFIDAVIT**

YESENIA RODRIGUEZ NOTARY PUBLIC STATE OF TEXAS ID 12644189-4 EXP. 03-10-2020

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

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Marisa Sepulveda, this the 3rd day of Janvary, 20 19, 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
	Yesenia Rodriguez	Notary

LOCAL GOVERNMENT OFFICER CONFLICTS DISCLOSURE STATEMENT

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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

City Secretary's Office Received Date 1-7-19

1 **Name of Local Government Officer**

Joaquin Zamora

2 **Office Held**

Commissioner District 2

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

Jacinto Garza

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

L&G Engineering

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 12/18/18 Description of Gift One box of fruit

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.

ALICIA J. JOHNSON
Notary Public
STATE OF TEXAS
Notary ID# 12941430-1
My Comm. Exp. 05-06-2021

Joaquin Zamora
Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Joaquin Zamora, this the 7th day of January, 20 19, to certify which, witness my hand and seal of office.

Alicia Johnson — Alicia Johnson — Executive Assistant

Signature of officer administering oath | Printed name of officer administering oath | Title of officer administering oath

LOCAL GOVERNMENT OFFICER CONFLICTS DISCLOSURE STATEMENT

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OFFICE USE ONLY

Date Received

City Secretary's Office
Received
Date 1-7-19

1 Name of Local Government Officer

Joaquin Zamora

2 Office Held

Commissioner District 2

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

Megamorphosis

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

Architectural Firm

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 12/18/18 Description of Gift One jar of mazapán

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.

ALICIA J. JOHNSON
Notary Public
STATE OF TEXAS
Notary ID# 12941430-1
My Comm. Exp. 05-06-2021

AFFIX NOTARY STAMP / SEAL ABOVE

Signature of Local Government Officer

Sworn to and subscribed before me, by the said Joaquin Zamora, this the 7th day of January, 2019, to certify which, witness my hand and seal of office.

Alicia Johnson — Alicia Johnson — Executive Assistant

Signature of officer administering oath | Printed name of officer administering oath | Title of officer administering oath

LOCAL GOVERNMENT OFFICER CONFLICTS DISCLOSURE STATEMENT

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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

City Secretary's Office Received Date 1-7-19

1 Name of Local Government Officer

Jim Darling

2 Office Held

Mayor, City of McAllen

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

Anne Burger Entrekin

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

Hilltop Securities Inc.

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 12/19/18 Description of Gift Russell Stover Assorted Chocolates

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.

ALICIA J. JOHNSON
Notary Public
STATE OF TEXAS
Notary ID# 12941430-1
My Comm. Exp. 05-06-2021

Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Jim Darling, this the 7th day of January, 20 19, to certify which, witness my hand and seal of office.

Alicia Johnson — Alicia Johnson — Executive Assistant

Signature of officer administering oath | Printed name of officer administering oath | Title of officer administering oath

LOCAL GOVERNMENT OFFICER CONFLICTS DISCLOSURE STATEMENT

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OFFICE USE ONLY

Date Received

City Secretary's Office Received Date 1-7-19

1 Name of Local Government Officer

Jim Darling

2 Office Held

Mayor, City of McAllen

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

Laura Warren

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

The Warren Group Architects, Inc.

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 12/19/18 Description of Gift Hillshire Farm Basket

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.

ALICIA J. JOHNSON
Notary Public
STATE OF TEXAS
Notary ID# 12941430-1
My Comm. Exp. 05-06-2021

AFFIX NOTARY STAMP / SEAL ABOVE

Signature of Local Government Officer

Sworn to and subscribed before me, by the said Jim Darling, this the 7th day of January, 20 19, 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
Alicia Johnson	Alicia Johnson	Executive Assistant

LOCAL GOVERNMENT OFFICER CONFLICTS DISCLOSURE STATEMENT

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OFFICE USE ONLY

Date Received

City Secretary's Office
Received
Date 1-7-19

1 **Name of Local Government Officer**

Jim Darling

2 **Office Held**

Mayor, City of McAllen

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

Eduardo Bernal Martinez

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

Mexican Consulate

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 12/14/19 Description of Gift Bottle of Tequila

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.

NOTARY PUBLIC STATE OF TEXAS
ALICIA J. JOHNSON
Notary Public
STATE OF TEXAS
Notary ID# 12941430-1
My Comm. Exp. 05-06-2021

AFFIX NOTARY STAMP / SEAL ABOVE

Jan E Oz
Signature of Local Government Officer

Sworn to and subscribed before me, by the said Jim Darling, this the 7th day of January, 20 19, to certify which, witness my hand and seal of office.

Delia Johnson Alicia Johnson Executive Assistant
Signature of officer administering oath | Printed name of officer administering oath | Title of officer administering oath

LOCAL GOVERNMENT OFFICER CONFLICTS DISCLOSURE STATEMENT

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OFFICE USE ONLY

Date Received

City Secretary's Office
Received
Date 1-7-19

1 **Name of Local Government Officer**

Veronica Whitacre

2 **Office Held**

Commissioner District 6

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

Jacinto Garza

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

L&G Engineering

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 12/18/18 Description of Gift One box of fruit

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.

ALICIA J. JOHNSON
Notary Public
STATE OF TEXAS
Notary ID# 12941430-1
My Comm. Exp. 05-06-2021

Veronica V. Whitacre
Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Veronica Whitacre, this the 7th day of January, 20 19, to certify which, witness my hand and seal of office.

Alicia Johnson — Alicia Johnson — Executive Assistant

Signature of officer administering oath | Printed name of officer administering oath | Title of officer administering oath

LOCAL GOVERNMENT OFFICER CONFLICTS DISCLOSURE STATEMENT

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OFFICE USE ONLY

Date Received

City Secretary's Office
Received
Date 1-7-19

1 Name of Local Government Officer

Veronica Whitacre

2 Office Held

Commissioner District 6

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

Megamorphosis

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

Architectural Firm

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 12/18/18 Description of Gift One jar of mazapán

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.

NOTARY PUBLIC STATE OF TEXAS
ALICIA J. JOHNSON
Notary Public
STATE OF TEXAS
Notary ID# 12941430-1
My Comm. Exp. 05-06-2021

Veronica V. Whitacre
Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Veronica Whitacre, this the 7th day of January, 20 19, to certify which, witness my hand and seal of office.

Alicia Johnson Alicia Johnson Executive Assistant
Signature of officer administering oath | Printed name of officer administering oath | Title of officer administering oath

LOCAL GOVERNMENT OFFICER CONFLICTS DISCLOSURE STATEMENT

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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

City Secretary's Office
Received
Date 1-8-19

1 **Name of Local Government Officer**

Elvira I. Alonzo

2 **Office Held**

Public Works Director

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

GCR Tire

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

Vendor (For City of McAllen Employee Christmas Luncheon Prize Drawing)

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 12.01.18 Description of Gift 2ea. - $25.00 Cowboy Chicken Gift Cards

Date Gift Accepted _____ Description of Gift _____

Date Gift Accepted _____ Description of Gift _____

(attach additional forms as necessary)

6 **AFFIDAVIT**

LINDA E DUNHAM
Notary Public
State of Texas
My Comm. Exp 01-20-2020

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.

Elvira I. Alonzo
Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Elvira I. Alonzo, this the 8 day of January, 20 19, to certify which, witness my hand and seal of office.

Linda E. Dunham — Linda E. Dunham — Notary

Signature of officer administering oath | Printed name of officer administering oath | Title of officer administering oath

LOCAL GOVERNMENT OFFICER CONFLICTS DISCLOSURE STATEMENT

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OFFICE USE ONLY

Date Received

City Secretary's Office Received Date 1-8-19

1 **Name of Local Government Officer**

Elvira I. Alonzo

2 **Office Held**

Public Works Director

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

Rio Paper Supply

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

Vendor (For City of McAllen Employee Christmas Luncheon Prize Drawing)

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 12.01.18 Description of Gift 1ea. - Folding arm chair

Date Gift Accepted _____ Description of Gift _____

Date Gift Accepted _____ Description of Gift _____

(attach additional forms as necessary)

6 **AFFIDAVIT**

LINDA E DUNHAM
Notary Public
State of Texas
My Comm. Exp 01-20-2020

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.

Elvira I. Alonzo
Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Elvira I. Alonzo, this the 8 day of January, 20 19, to certify which, witness my hand and seal of office.

Linda E. Dunham — Signature of officer administering oath

Linda E. Dunham — Printed name of officer administering oath

Notary — Title of officer administering oath

LOCAL GOVERNMENT OFFICER CONFLICTS DISCLOSURE STATEMENT

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OFFICE USE ONLY

Date Received

City Secretary's Office
Received
Date 1-8-19

1 **Name of Local Government Officer**

Elvira I. Alonzo

2 **Office Held**

Public Works Director

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

W.W. Grainger

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

Vendor (For City of McAllen Employee Christmas Luncheon Prize Drawing)

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 12.01.18 Description of Gift 10 ea. - DeWalt Cordless Drill 20v

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.

LINDA E DUNHAM
Notary Public
State of Texas
My Comm. Exp 01-20-2020

Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Elvira I. Alonzo, this the 8 day of January, 20 19, to certify which, witness my hand and seal of office.

Linda E. Dunham — Linda E. Dunham — Notary

Signature of officer administering oath | Printed name of officer administering oath | Title of officer administering oath

LOCAL GOVERNMENT OFFICER CONFLICTS DISCLOSURE STATEMENT

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OFFICE USE ONLY

Date Received

City Secretary's Office
Received
Date 1-8-19

1 **Name of Local Government Officer**

Elvira I. Alonzo

2 **Office Held**

Public Works Director

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

Hollon Oil

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

Vendor (For City of McAllen Employee Christmas Luncheon Prize Drawing)

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 12.01.18 Description of Gift 10 ea. - Complimentary lube, oil & filter service

Date Gift Accepted _____ Description of Gift _____

Date Gift Accepted _____ Description of Gift _____

(attach additional forms as necessary)

6 **AFFIDAVIT**

LINDA E DUNHAM
Notary Public
State of Texas
My Comm. Exp 01-20-2020

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.

Elvira I. Alonzo
Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Elvira I. Alonzo, this the 8 day of January, 20 19, to certify which, witness my hand and seal of office.

Linda E. Dunham — Linda E. Dunham — Notary

Signature of officer administering oath | Printed name of officer administering oath | Title of officer administering oath

LOCAL GOVERNMENT OFFICER CONFLICTS DISCLOSURE STATEMENT

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OFFICE USE ONLY

Date Received

City Secretary's Office
Received
Date 1-8-19

1 **Name of Local Government Officer**

Elvira I. Alonzo

2 **Office Held**

Public Works Director

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

J's Hydraulics

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

Vendor (For City of McAllen Employee Christmas Luncheon Prize Drawing)

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 12.01.18 Description of Gift 12 ea. - $50.00 Gift Cards

Date Gift Accepted _____ Description of Gift _____

Date Gift Accepted _____ Description of Gift _____

(attach additional forms as necessary)

6 **AFFIDAVIT**

LINDA E DUNHAM
Notary Public
State of Texas
My Comm. Exp 01-20-2020

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.

Elvira I. Alonzo
Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Elvira I. Alonzo, this the 8 day of January, 20 19, to certify which, witness my hand and seal of office.

Linda E. Dunham — Linda E. Dunham — Notary
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

City Secretary's Office Received Date 1-8-19

1 **Name of Local Government Officer**

Elvira I. Alonzo

2 **Office Held**

Public Works Director

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

French Ellison

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

Vendor (For City of McAllen Employee Christmas Luncheon Prize Drawing)

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 12.01.18 Description of Gift 1 ea. - $25.00 Wal-Mart gift card

Date Gift Accepted _____ Description of Gift _____

Date Gift Accepted _____ Description of Gift _____

(attach additional forms as necessary)

6 **AFFIDAVIT**

NOTARY PUBLIC STATE OF TEXAS
LINDA E DUNHAM
Notary Public
State of Texas
My Comm. Exp 01-20-2020

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.

Elvira I. Alonzo
Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Elvira I. Alonzo, this the 8 day of January, 20 19, to certify which, witness my hand and seal of office

Linda E. Dunham — Linda E. Dunham — Notary

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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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

City Secretary's Office Received Date 1-8-19

1 **Name of Local Government Officer**

Elvira I. Alonzo

2 **Office Held**

Public Works Director

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

5/28/2015 AP

Doggett Freightliner 59040 26741974

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

Vendor (For City of McAllen Employee Christmas Luncheon Prize Drawing)

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 12.01.18 Description of Gift 1 ea. - 43" Sharp Smart TV

Date Gift Accepted 12.01.18 Description of Gift 5 ea. - Tool Bags w/mug & cap

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.

NOTARY PUBLIC STATE OF TEXAS
LINDA E DUNHAM
Notary Public
State of Texas
My Comm. Exp 01-20-2020

Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Elvira I. Alonzo, this the 8 day of January, 20 19, to certify which, witness my hand and seal of office.

Linda E. Dunham — Linda E. Dunham — Notary

Signature of officer administering oath | Printed name of officer administering oath | Title of officer administering oath

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

City Secretary's Office
Received
Date 1-8-19

1 **Name of Local Government Officer**

Elvira I. Alonzo

2 **Office Held**

Public Works Director

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

D&D Wheel Alignment

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

Vendor (For City of McAllen Employee Christmas Luncheon Prize Drawing)

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 12.01.18 Description of Gift 5 ea. - Complimentary lube, oil & filter service

Date Gift Accepted _____ Description of Gift _____

Date Gift Accepted _____ Description of Gift _____

(attach additional forms as necessary)

6 **AFFIDAVIT**

LINDA E DUNHAM
Notary Public
State of Texas
My Comm. Exp 01-20-2020

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.

Elvira I. Alonzo
Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Elvira I. Alonzo, this the 8 day of January, 20 19, to certify which, witness my hand and seal of office.

Linda E. Dunham — Signature of officer administering oath
Linda E. Dunham — Printed name of officer administering oath
Notary — Title of officer administering oath

LOCAL GOVERNMENT OFFICER CONFLICTS DISCLOSURE STATEMENT

FORM CIS

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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

City Secretary's Office
Received
1-10-19

1 **Name of Local Government Officer**

Xavier Cervantes

2 **Office Held**

Planner II

Date 1-10-19

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

Jose G. Gonzalez

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

Planning & Zoning Commissioner

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 12/19/2018 Description of Gift Dinner Party

Date Gift Accepted _____ Description of Gift _____

Date Gift Accepted _____ Description of Gift _____

(attach additional forms as necessary)

6 **AFFIDAVIT**

GABRIELA CANTU
Notary Public
STATE OF TEXAS
Notary ID# 13133076-3
My Comm. Exp. 10-26-2021

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.

X. Cervantes
Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Xavier Cervantes, this the 20th day of December, 20 18, to certify which, witness my hand and seal of office.

G. Cantu — Gabriela Cantu — Adm. Sec.

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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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

City Secretary's Office Received 1-10-19

1 **Name of Local Government Officer**

Xavier Cervantes

Date

2 **Office Held**

Planner II

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

Claudia C. Lynes

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

Citizen

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 12/21/18 Description of Gift Candy

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.

NIKKI MARIE CAVAZOS
Notary Public
STATE OF TEXAS
Notary ID# 13133069-2
My Comm. Exp. 10-26-2021

X. Cer

Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Xavier Cervantes, this the 28th day of December, 20 18, to certify which, witness my hand and seal of office.

Nikki Marie Cavazos — Nikki Marie Cavazos — Secretary

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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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

City Secretary's Office Received 1-10-19

1 **Name of Local Government Officer**

Xavier Cervantes

2 **Office Held**

Planner II

Date 1-10-19

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

Jose Chanin

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

Developer

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 12/20/18 Description of Gift (1) Wine bottle

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.

CARMEN WHITE
Notary Public
STATE OF TEXAS
Notary ID# 13133060-1
My Comm. Exp. 10-26-2021

X. Cervantes
Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Xavier Cervantes, this the 20th day of December, 20 18, to certify which, witness my hand and seal of office.

Carmen White — CARMEN White — Admin. Secretary

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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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

City Secretary's Office
Received
1-10-19

1 **Name of Local Government Officer**

Rodrigo Sanchez

2 **Office Held**

Planner II

Date

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

Jose G. Gonzalez

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

Planning & Zoning Commissioner

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 12/19/2018 Description of Gift Dinner Party

Date Gift Accepted _____ Description of Gift _____

Date Gift Accepted _____ Description of Gift _____

(attach additional forms as necessary)

6 **AFFIDAVIT**

GABRIELA CANTU
Notary Public
STATE OF TEXAS
Notary ID# 13133076-3
My Comm. Exp. 10-26-2021

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.

Rodrigo Sanchez
Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Rodrigo Sanchez, this the 20th day of December, 20 18, to certify which, witness my hand and seal of office.

G Cantu — Gabriella Cantu — Adm. Sec.

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

City Secretary's Office Received 1-10-19

1 Name of Local Government Officer

Rodrigo Sanchez

2 Office Held

Planner II

Date 1-10-19

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

Claudia Clynes

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

Citizen

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 12/21/2018 Description of Gift Candy

Date Gift Accepted _____ Description of Gift _____

Date Gift Accepted _____ Description of Gift _____

(attach additional forms as necessary)

6 AFFIDAVIT

NOTARY PUBLIC STATE OF TEXAS
NIKKI MARIE CAVAZOS
Notary Public
STATE OF TEXAS
Notary ID# 13133069-2
My Comm. Exp. 10-26-2021

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.

Rodrigo Sanchez
Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Rodrigo Sanchez, this the 28th day of December, 20 18, to certify which, witness my hand and seal of office.

Nikki Marie Cavazos Nikki Marie Cavazos secretary

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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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

City Secretary's Office
Received
Date 1-10-19

1 **Name of Local Government Officer**

Rodrigo Sanchez

2 **Office Held**

Planner II

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

Jose Chavin

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

Developer

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 12/20/18 Description of Gift (1) wine bottle

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.

CARMEN WHITE
Notary Public
STATE OF TEXAS
Notary ID# 13133060-1
My Comm. Exp. 10-26-2021

Rodrigo Sanchez
Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Rodrigo Sanchez, this the 20th day of December, 20 18, to certify which, witness my hand and seal of office.

Carmen White	CARMEN White	Admin Secretary
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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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

City Secretary's Office
Received
Date 1-10-19

1 **Name of Local Government Officer**

Porfirio Hernandez

2 **Office Held**

Planning Tech

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

Jose G. Gonzalez

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

Planning & Zoning Commissioner

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 12/19/2018 Description of Gift Dinner Party

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.

GABRIELA CANTU
Notary Public
STATE OF TEXAS
Notary ID# 13133076-3
My Comm. Exp. 10-26-2021

Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said PORFIRIO HERNANDEZ, this the 20th day of DECEMBER, 20 18, to certify which, witness my hand and seal of office.

G. Cantu — Gabriela Cantu — Adm. Sec.

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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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

City Secretary's Office Received

Date 1-10-19

1 **Name of Local Government Officer**

OMAR Sotelo

2 **Office Held**

Planner II

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

Chaning

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 Developer

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 12/20/18 Description of Gift Bottle of Wine

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.

GABRIELA CANTU
Notary Public
STATE OF TEXAS
Notary ID# 13133076-3
My Comm. Exp. 10-26-2021

Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said OMAR Sotelo, this the 20th day of Dec, 20 18, to certify which, witness my hand and seal of office.

G. Cantu — Gabriela Cantu — Adm. Sec.

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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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

City Secretary's Office Received

Date 1-10-19

1 Name of Local Government Officer

NIKKI MARIE CAVAZOS

2 Office Held

SECRETARY

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

IVAN GARCIA

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

CITIZEN

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 12/19/18 Description of Gift COOKIES- SHARED WITH STAFF

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.

CARMEN WHITE
Notary Public
STATE OF TEXAS
Notary ID# 13133060-1
My Comm. Exp. 10-26-2021

Nikki Marie Cavazos

Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said NIKKI MARIE CAVAZOS, this the 19th day of DECEMBER, 20 18, to certify which, witness my hand and seal of office.

Carmen White	Carmen White	Admin. Secretary
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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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

City Secretary's Office Received Date 1-10-19

1 **Name of Local Government Officer**

MARCO A. REYES

2 **Office Held**

INSPECTOR.

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

JOSE CHANIN.

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

DEVELOPER.

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 12/20/18 Description of Gift 1 WINE BOTTLE.

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.

CARMEN WHITE
Notary Public
STATE OF TEXAS
Notary ID# 13133060-1
My Comm. Exp. 10-26-2021

MARCO A. REYES.
Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said MARCO A. Reyes, this the 20th day of December, 20 18, to certify which, witness my hand and seal of office.

Carmen White — Signature of officer administering oath

CARMEN White — Printed name of officer administering oath

Admin Secretary — 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

City Secretary's Office Received

Date 1-10-19

1 **Name of Local Government Officer**

Luis Mora

2 **Office Held**

Deputy Director of Planning

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

Jose G. Gonzalez

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

Planning & Zoning Commissioner

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 12/19/2018 Description of Gift Dinner Party

Date Gift Accepted _____ Description of Gift _____

Date Gift Accepted _____ Description of Gift _____

(attach additional forms as necessary)

6 **AFFIDAVIT**

GABRIELA CANTU
Notary Public
STATE OF TEXAS
Notary ID# 13133076-3
My Comm. Exp. 10-26-2021

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.

Luis Mora
Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Luis Mora, this the 20th day of December, 2018, to certify which, witness my hand and seal of office.

G. Cantu — Gabriela Cantu — Adm. Sec.

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

City Secretary's Office Received 1-10-19

1 **Name of Local Government Officer**

Luis Mora

2 **Office Held**

Deputy Director of Planning

Date 1-10-19

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

Jose Chanin

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

Citizen/developer

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 12-20-2018 Description of Gift Wine

Date Gift Accepted _____ Description of Gift _____

Date Gift Accepted _____ Description of Gift _____

(attach additional forms as necessary)

6 **AFFIDAVIT**

GABRIELA CANTU
Notary Public
STATE OF TEXAS
Notary ID# 13133076-3
My Comm. Exp. 10-26-2021

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.

Luis Mora
Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Luis Mora, this the 20 day of Dec, 2018, to certify which, witness my hand and seal of office.

G. Cantu — Gabriela Cantu — Adm Sec.

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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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

City Secretary's Office Received Date 1-10-19

1 **Name of Local Government Officer**

Julianne R. Rankin

2 **Office Held**

Planning Director

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

Jose Chanin

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

Local Businessman

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 12/21/18 Description of Gift Cookie Box shared with staff

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.

NOTARY PUBLIC STATE OF TEXAS
NIKKI MARIE CAVAZOS
Notary Public
STATE OF TEXAS
Notary ID# 13133069-2
My Comm. Exp. 10-26-2021

Julianne R. Rankin

Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Julianne Rankin, this the 28th day of December, 2018, to certify which, witness my hand and seal of office.

Nikki Marie Cavazos Nikki Marie Cavazos Secretary

Signature of officer administering oath | Printed name of officer administering oath | Title of officer administering oath

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

City Secretary's Office
Received
1-10-19

1 **Name of Local Government Officer**

Julianne R. Rankin

2 **Office Held**

Director of Planning

Date

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

Jose G. Gonalez

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

Planning & Zoning Commissioner

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 12/19/18 Description of Gift Dinner Party

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.

NOTARY PUBLIC STATE OF TEXAS
NIKKI MARIE CAVAZOS
Notary Public
STATE OF TEXAS
Notary ID# 13133069-2
My Comm. Exp. 10-26-2021

Julianne R Rankin
Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Julianne Rankin, this the 20th day of December, 2018, to certify which, witness my hand and seal of office.

Nikki Marie Cavazos Nikki Cavazos Secretary

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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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

City Secretary's Office Received 1-10 19

1 Name of Local Government Officer

Jose Humberto De la Garza

2 Office Held

Planner

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

Chaninn

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

Engineer

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 12/20/18 Description of Gift Bottle of Wine

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.

GABRIELA CANTU
Notary Public
STATE OF TEXAS
Notary ID# 13133076-3
My Comm. Exp. 10-26-2021

Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Jose H. De la Garza, this the 20 day of December, 20 18, to certify which, witness my hand and seal of office.

G. Cantu — Gabriela Cantu — Adm. Sec.

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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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

City Secretary's Office
Received
1-10-19

1 **Name of Local Government Officer**

JOSE F. ORTEGA

2 **Office Held**

PLANNING TECH. III/GIS

Date

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

JOE CHANIN

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

ENGINEER/DEVELOPER

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 12/20/18 Description of Gift WINE BOTTLE

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.

CARMEN WHITE
Notary Public
STATE OF TEXAS
Notary ID# 13133060-1
My Comm. Exp. 10-26-2021

Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Jose F. Ortega, this the 20th day of December, 20 18, to certify which, witness my hand and seal of office.

Carmen White — Signature of officer administering oath

Carmen White — Printed name of officer administering oath

Admin. Secretary — Title of officer administering oath

LOCAL GOVERNMENT OFFICER CONFLICTS DISCLOSURE STATEMENT

FORM CIS

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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

City Secretary's Office
Received
1-10-19

1 **Name of Local Government Officer**

Jessica Cavazos

2 **Office Held**

Planning Admin

Date 1-10-19

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

Ana Leonard

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

Census Comity

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 12-20-18 Description of Gift box of cookies shared with Department.

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.

GABRIELA CANTU
Notary Public
STATE OF TEXAS
Notary ID# 13133076-3
My Comm. Exp. 10-26-2021

Jessica Cavazos
Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Jessica Cavazos, this the 20 day of December, 20 18, to certify which, witness my hand and seal of office.

G. Cantu — Gabriela Cantu — Adm Sec

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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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

City Secretary's Office
Received
1-10-19

1 **Name of Local Government Officer**

Jessica Cuevas

2 **Office Held**

Planning Admin

Date 1-10-19

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

Channin

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

Engineer

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 12/20/18 Description of Gift Box of candies

Date Gift Accepted _____ Description of Gift _____

Date Gift Accepted _____ Description of Gift _____

(attach additional forms as necessary)

6 **AFFIDAVIT**

GABRIELA CANTU
Notary Public
STATE OF TEXAS
Notary ID# 13133076-3
My Comm. Exp. 10-26-2021

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

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Jessica Cuevas, this the 20 day of December, 20 18, to certify which, witness my hand and seal of office.

G. Cantu — Signature of officer administering oath

Gabriela Cantu — Printed name of officer administering oath

Adm. Sec. — Title of officer administering oath

LOCAL GOVERNMENT OFFICER CONFLICTS DISCLOSURE STATEMENT

FORM CIS

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OFFICE USE ONLY

Date Received

City Secretary's Office
Received
Date 1-10-19

1 **Name of Local Government Officer**

Jessica Cavazos

2 **Office Held**

Planning Admin

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

Ana Leonard

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

Census Gemity

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 12/21/18 Description of Gift Cup of oatmeal

Date Gift Accepted _____ Description of Gift _____

Date Gift Accepted _____ Description of Gift _____

(attach additional forms as necessary)

6 **AFFIDAVIT**

GABRIELA CANTU
Notary Public
STATE OF TEXAS
Notary ID# 13133076-3
My Comm. Exp. 10-26-2021

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

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Jessica Cavazos, this the 21 day of December 20 18, to certify which, witness my hand and seal of office.

G. Cantu
Signature of officer administering oath

Gabriela Cantu
Printed name of officer administering oath

Sec. Adm.
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

City Secretary's Office Received 1-10-19

1 **Name of Local Government Officer**

Iris Alvarado

2 **Office Held**

Date 1-10-19

Administrative Supervisor Planning

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

Jose G. Gonzalez

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

Planning & Zoning Commissioner

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 12/19/2018 Description of Gift Dinner Party

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.

GABRIELA CANTU
Notary Public
STATE OF TEXAS
Notary ID# 13133076-3
My Comm. Exp. 10-26-2021

Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Iris Alvarado, this the 20th day of December, 20 18, to certify which, witness my hand and seal of office.

G. Cantu — Gabriella Cantu — Adm. Sec.

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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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

City Secretary's Office Received Date 1-10-19

1 **Name of Local Government Officer**

Iris Alvarado

2 **Office Held**

Planning Admin Superuisor

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

Alonso Cantu

4 **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 _____

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.

NOTARY PUBLIC STATE OF TEXAS
NIKKI MARIE CAVAZOS
Notary Public
STATE OF TEXAS
Notary ID# 13133069-2
My Comm. Exp. 10-26-2021

Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Iris Alvarado, this the 28th day of December, 20 18, to certify which, witness my hand and seal of office.

Nikki Marie Cavazos — Nikki Marie Cavazos — Secretary

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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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

City Secretary's Office Received 1-10-19

1 **Name of Local Government Officer**

Iris Alvarado

2 **Office Held** Date

Administrative Supervisor

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

Jose Chanin

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

Developer

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 12/20/18 Description of Gift candy

Date Gift Accepted _____ Description of Gift _____

Date Gift Accepted _____ Description of Gift _____

(attach additional forms as necessary)

6 **AFFIDAVIT**

GABRIELA CANTU
Notary Public
STATE OF TEXAS
Notary ID# 13133076-3
My Comm. Exp. 10-26-2021

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

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Iris Alvarado, this the 20 day of Dec., 20 18, to certify which, witness my hand and seal of office.

G. Cantu — Signature of officer administering oath

Gabriela Cantu — Printed name of officer administering oath

Adm. Sec. — 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

City Secretary's Office Received 1-10-19

1 **Name of Local Government Officer**

Gabriela Cantu

Date 1-10-19

2 **Office Held**

Planning dept.

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

Chanin

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

Engineer

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 12/20/18 Description of Gift Box of chocolates

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.

CARMEN WHITE
Notary Public
STATE OF TEXAS
Notary ID# 13133060-1
My Comm. Exp. 10-26-2021

G Cantu

Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Gabriela Cantu, this the 20th day of December, 20 18, to certify which, witness my hand and seal of office.

Carmen White | Carmen White | Admin. Secretary

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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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

City Secretary's Office Received 1-10-19

1 Name of Local Government Officer

Carmen White

2 Office Held

Planning Secretary

Date 1-10-19

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

Jose G. Gonzalez

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

Planning & Zoning Commissioner

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 12/19/2018 Description of Gift Dinner Party

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.

GABRIELA CANTU
Notary Public
STATE OF TEXAS
Notary ID# 13133076-3
My Comm. Exp. 10-26-2021

Carmen White

Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Carmen White, this the 19 day of Dec, 2018, to certify which, witness my hand and seal of office.

G. Cantu — Gabriela Cantu — Adm. Sec.

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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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

City Secretary's Office Received Date 1-10-19

1 **Name of Local Government Officer**

Carmen White

2 **Office Held**

Planning/Secretary

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

Jose Chanin

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

Engineer/DeveloperER

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 12/20/18 Description of Gift Candy

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.

GABRIELA CANTU
Notary Public
STATE OF TEXAS
Notary ID# 13133076-3
My Comm. Exp. 10-26-2021

Carmen White

Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Carmen White, this the 20 day of Dec, 20 18, to certify which, witness my hand and seal of office.

G. Cantu | Gabriela Cantu | Adm. Sec.

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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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

City Secretary's Office
Received
Date 1-10-19

1 **Name of Local Government Officer**

Abel Barraza

2 **Office Held**

Planner I

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

Channin

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

Engineer

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 12/21 Description of Gift Bottle wine

Date Gift Accepted _____ Description of Gift _____

Date Gift Accepted _____ Description of Gift _____

(attach additional forms as necessary)

6 **AFFIDAVIT**

GABRIELA CANTU
Notary Public
STATE OF TEXAS
Notary ID# 13133076-3
My Comm. Exp. 10-26-2021

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

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Abel Barraza, this the 20 day of Dec, 20 18, to certify which, witness my hand and seal of office.

G. Cantu — Gabriela Cantu — Adm. Sec

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

City Secretary's Office
Received
1/19/19

1 **Name of Local Government Officer**

Lt. Armando Cano

2 **Office Held**

Date

Fire Department/Prevention Division

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

Sanchez Trailers

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

Food Trailer Distributor

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 12-19-18 Description of Gift Christmas food basket.

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.

CECILIA GARZA
Notary Public, State of Texas
Comm. Expires 08-18-2022
Notary ID 126813313

Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Lt. Armando Cano, this the 9th day of January, 20 19, to certify which, witness my hand and seal of office.

Signature of officer administering oath | Cecilia Garza | Printed name of officer administering oath | Notary | Title of officer administering oath

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

City Secretary's Office Received Date 1/14/19

1 **Name of Local Government Officer**

Lt. Armando Cano

2 **Office Held**

Fire Department/Prevention Division

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

Alliance Specialized Systems

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

Fire Sprinkler Contractor

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 12-18-18 Description of Gift Christmas cookies & sweet breads.

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.

CECILIA GARZA
Notary Public, State of Texas
Comm. Expires 08-18-2022
Notary ID 126813313

Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Lt. Armando Cano, this the 9th day of January, 20 19, to certify which, witness my hand and seal of office.

Signature of officer administering oath | Cecilia Garza — Printed name of officer administering oath | Notary — Title of officer administering oath

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

City Secretary's Office
Received
1-15-19

1 **Name of Local Government Officer**

Veronica Whitacre

2 **Office Held**

City Commissioner

Date

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

The Warren Group Architects

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

Architect Firm

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 12/19/18 Description of Gift Holiday cheese, sausage, crackers box

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.

NOTARY PUBLIC STATE OF TEXAS
ALICIA J. JOHNSON
Notary Public
STATE OF TEXAS
Notary ID# 12941430-1
My Comm. Exp. 05-06-2021

Veronica Whitacre

Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Veronica Whitacre, this the 14th day of January, 20 19, to certify which, witness my hand and seal of office.

Alicia Johnson — Alicia Johnson — Executive Assistant

Signature of officer administering oath | Printed name of officer administering oath | Title of officer administering oath

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

City Secretary's Office Received 1-15-19

1 Name of Local Government Officer

Omar Quintanilla

Date

2 Office Held

Commissioner District 3

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

Megamorphosis

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

Architectural Firm

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 12/18/18 Description of Gift One jar of mazapán

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.

NOTARY PUBLIC STATE OF TEXAS
ALICIA J. JOHNSON
Notary Public
STATE OF TEXAS
Notary ID# 12941430-1
My Comm. Exp. 05-06-2021

Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Omar Quintanilla, this the 14th day of January, 20 19, to certify which, witness my hand and seal of office.

Signature of officer administering oath | Alicia Johnson | Printed name of officer administering oath | Ex. Assistant | Title of officer administering oath

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

City Secretary's Office
Received
Date 1-15-19

1 **Name of Local Government Officer**

Omar Quintanilla

2 **Office Held**

City Commissioner

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

The Warren Group Architects

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

Architect Firm

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 12/19/18 Description of Gift Holiday cheese, sausage, crackers box

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.

NOTARY PUBLIC STATE OF TEXAS
ALICIA J. JOHNSON
Notary Public
STATE OF TEXAS
Notary ID# 12941430-1
My Comm. Exp. 05-06-2021

Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Omar Quintanilla, this the 14th day of January, 20 19, 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
Alicia Johnson	Alicia Johnson	Executive Assistant

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

City Secretary's Office Received

1-15-19

1 Name of Local Government Officer

Omar Quintanilla

Date

2 Office Held

Commissioner District 3

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

Jacinto Garza

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

L&G Engineering

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 12/18/18 Description of Gift One box of fruit

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.

NOTARY PUBLIC STATE OF TEXAS
ALICIA J. JOHNSON
Notary Public
STATE OF TEXAS
Notary ID# 12941430-1
My Comm. Exp. 05-06-2021

Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Omar Quintanilla, this the 14th day of January, 20 19, to certify which, witness my hand and seal of office.

Alicia Johnson — Alicia Johnson — Ex. Assistant

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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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

City Secretary's Office
Received
1-15-19

1 **Name of Local Government Officer**

John Ingram

2 **Office Held**

Commissioner District 5

Date

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

Megamorphosis

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

Architectural Firm

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 12/18/18 Description of Gift One jar of mazapán

Date Gift Accepted _____ Description of Gift _____

Date Gift Accepted _____ Description of Gift _____

(attach additional forms as necessary)

6 **AFFIDAVIT**

ALICIA J. JOHNSON
Notary Public
STATE OF TEXAS
Notary ID# 12941430-1
My Comm. Exp. 05-06-2021

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

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said John Ingram, this the 14th day of January, 20 19, to certify which, witness my hand and seal of office.

Signature of officer administering oath | Alicia Johnson | Printed name of officer administering oath | Ex. Assistant | Title of officer administering oath

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

City Secretary's Office Received

Date 1-15-19

1 Name of Local Government Officer

John Ingram

2 Office Held

City Commissioner

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

The Warren Group Architects

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

Architect Firm

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 12/19/18 Description of Gift Holiday cheese, sausage, crackers box

Date Gift Accepted _____ Description of Gift _____

Date Gift Accepted _____ Description of Gift _____

(attach additional forms as necessary)

6 AFFIDAVIT

ALICIA J. JOHNSON
Notary Public
STATE OF TEXAS
Notary ID# 12941430-1
My Comm. Exp. 05-06-2021

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

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said John Ingram, this the 14th day of January, 20 19, 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
Alicia Johnson	Alicia Johnson	Executive Assistant

LOCAL GOVERNMENT OFFICER CONFLICTS DISCLOSURE STATEMENT

FORM CIS

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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

City Secretary's Office
Received
Date 1-15-19

1 **Name of Local Government Officer**

John Ingram

2 **Office Held**

Commissioner District 5

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

Jacinto Garza

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

L&G Engineering

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 12/18/18 Description of Gift One box of fruit

Date Gift Accepted _____ Description of Gift _____

Date Gift Accepted _____ Description of Gift _____

(attach additional forms as necessary)

6 **AFFIDAVIT**

NOTARY PUBLIC STATE OF TEXAS
ALICIA J. JOHNSON
Notary Public
STATE OF TEXAS
Notary ID# 12941430-1
My Comm. Exp. 05-06-2021

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

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said John Ingram, this the 14th day of January, 20 19, to certify which, witness my hand and seal of office.

Alicia Johnson | Alicia Johnson | Ex. Assistant

Signature of officer administering oath | Printed name of officer administering oath | Title of officer administering oath

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

City Secretary's Office Received 1-15-19

1 **Name of Local Government Officer**

Joaquin Zamora

2 **Office Held**

City Commissioner

Date

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

The Warren Group Architects

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

Architect Firm

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 12/19/18 Description of Gift Holiday cheese, sausage, crackers box

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.

ALICIA J. JOHNSON
Notary Public
STATE OF TEXAS
Notary ID# 12941430-1
My Comm. Exp. 05-06-2021

Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Joaquin Zamora, this the 14th day of January, 20 19, to certify which, witness my hand and seal of office.

Signature of officer administering oath

Alicia Johnson
Printed name of officer administering oath

Executive Assistant
Title of officer administering oath

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

City Secretary's Office
Received
Date 1-15-19

1 **Name of Local Government Officer**

Javier Villalobos

2 **Office Held**

City Commissioner

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

The Warren Group Architects

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

Architect Firm

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 12/19/18 Description of Gift Holiday cheese, sausage, crackers box

Date Gift Accepted _____ Description of Gift _____

Date Gift Accepted _____ Description of Gift _____

(attach additional forms as necessary)

6 **AFFIDAVIT**

ALICIA J. JOHNSON
Notary Public
STATE OF TEXAS
Notary ID# 12941430-1
My Comm. Exp. 05-06-2021

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

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Javier Villalobos, this the 14th day of January, 20 19, 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
Alicia J. Johnson	Alicia Johnson	Executive Assistant

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

City Secretary's Office
Received
1-15-19

1 **Name of Local Government Officer**

Javier Villalobos

2 **Office Held**

Commissioner District 1

Date

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

Jacinto Garza

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

L&G Engineering

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 12/18/18 Description of Gift One box of fruit

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.

NOTARY PUBLIC STATE OF TEXAS
ALICIA J. JOHNSON
Notary Public
STATE OF TEXAS
Notary ID# 12941430-1
My Comm. Exp. 05-06-2021

Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Javier Villalobos, this the 14th day of January, 20 19, to certify which, witness my hand and seal of office.

Alicia Johnson — Alicia Johnson — Ex. Assistant

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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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

City Secretary's Office Received

1-15-19

Date

1 Name of Local Government Officer

Javier Villalobos

2 Office Held

Commissioner District 1

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

Megamorphosis

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

Architectural Firm

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 12/18/18 Description of Gift One jar of mazapán

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.

NOTARY PUBLIC STATE OF TEXAS
ALICIA J. JOHNSON
Notary Public
STATE OF TEXAS
Notary ID# 12941430-1
My Comm. Exp. 05-06-2021

AFFIX NOTARY STAMP / SEAL ABOVE

Signature of Local Government Officer

Sworn to and subscribed before me, by the said Javier Villalobos, this the 14th day of January, 20 19, to certify which, witness my hand and seal of office.

Alicia Johnson — Alicia Johnson — Ex. Assistant

Signature of officer administering oath | Printed name of officer administering oath | Title of officer administering oath

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

City Secretary's Office received Date 1-15-19

1 **Name of Local Government Officer**

Aida Ramirez

2 **Office Held**

City Commissioner

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

The Warren Group Architects

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

Architect Firm

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 12/19/18 Description of Gift Holiday cheese, sausage, crackers box

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.

A. Ramirez

Signature of Local Government Officer

NOTARY PUBLIC STATE OF TEXAS
ALICIA J. JOHNSON
Notary Public
STATE OF TEXAS
Notary ID# 12941430-1
My Comm. Exp. 05-06-2021

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Aida Ramirez, this the 14th day of January, 20 19, 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
Alicia Johnson	Alicia Johnson	Executive Assistant

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

City Secretary's Office

1-15-19

1 Name of Local Government Officer

Aida Ramirez

Date

2 Office Held

Commissioner District 4

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

Jacinto Garza

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

L&G Engineering

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 12/18/18 Description of Gift One box of fruit

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.

ALICIA J. JOHNSON
Notary Public
STATE OF TEXAS
Notary ID# 12941430-1
My Comm. Exp. 05-06-2021

A. Ramirez

Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Aida Ramirez, this the 14th day of January, 20 19, to certify which, witness my hand and seal of office.

Alicia J. Johnson Alicia Johnson Ex. Assistant

Signature of officer administering oath | Printed name of officer administering oath | Title of officer administering oath

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

City Secretary's Office
Received
1-15-19

1 **Name of Local Government Officer**

Aida Ramirez

2 **Office Held**

Commissioner District 4

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

Megamorphosis

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

Architectural Firm

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 12/18/18 Description of Gift One jar of mazapán

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.

NOTARY PUBLIC STATE OF TEXAS
ALICIA J. JOHNSON
Notary Public
STATE OF TEXAS
Notary ID# 12941430-1
My Comm. Exp. 05-06-2021

A. Ramirez
Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Aida Ramirez, this the 14th day of January, 20 19, to certify which, witness my hand and seal of office.

Alicia Johnson | Alicia Johnson | Ex. Assistant
Signature of officer administering oath | Printed name of officer administering oath | Title of officer administering oath

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

City Secretary's Office Received

Date 1-15-19

1 **Name of Local Government Officer**

Yesenia Rodriguez

2 **Office Held**

Deputy City Secretary

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

Paul Zimmer

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

Smallcakes Cupcakery and Creamery

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 1/14/19 Description of Gift 1 box of cupcakes (shared with staff

Date Gift Accepted _____ Description of Gift _____

Date Gift Accepted _____ Description of Gift _____

(attach additional forms as necessary)

6 **AFFIDAVIT**

CINDY M GONZALEZ NOTARY PUBLIC STATE OF TEXAS ID 130867249 EXP. 10-18-2020

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

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Yesenia Rodriguez, this the 15th day of January, 20 19, 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
	Cindy Gonzalez	Notary

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

City Secretary's Office Received 1-15-19

1 Name of Local Government Officer

Yesenia Rodriguez

2 Office Held

Deputy City Secretary

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

Luis Garcia

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

Proforma vendor

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 1/15/2019 Description of Gift 2019 Calendar and Ruler

Date Gift Accepted _____ Description of Gift _____

Date Gift Accepted _____ Description of Gift _____

(attach additional forms as necessary)

6 AFFIDAVIT

CINDY M GONZALEZ NOTARY PUBLIC STATE OF TEXAS ID 130867249 EXP. 10-18-2020

AFFIX NOTARY STAMP / SEAL ABOVE

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 Yesenia Rodriguez, this the 15th day of January, 20 19, 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
	Cindy Gonzalez	Notary

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

ity Secretary's Office
Received
1-15-19

1 **Name of Local Government Officer**

Cindy Gonzalez

2 **Office Held**

Administrative Supervisor

Date 1-15-19

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

Luis Garcia

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

Proforma vendor

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 1/15/2019 Description of Gift 2019 Calendar and Ruler

Date Gift Accepted _____ Description of Gift _____

Date Gift Accepted _____ Description of Gift _____

(attach additional forms as necessary)

6 **AFFIDAVIT**

YESENIA RODRIGUEZ NOTARY PUBLIC STATE OF TEXAS ID 12644189-4 EXP. 03-10-2020

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

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Cindy Gonzalez, this the 15th day of January, 20 19, 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
	Yesenia Rodriguez	Notary

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

City Secretary's Office
Received
Date 1/23/19

1 **Name of Local Government Officer**

Victor Rodriguez for McAllen Police Department

2 **Office Held**

Chief of Police

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

Mr. Nicholas Brown, Regional Manager, Security Services

4 **Description of the nature and extent of each employment or other business relationship and each family relationship**

Allied Universal
Retail Division
Simon Account Southwest

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 1/22/19 Description of Gift (1) Meal at Luncheon Meeting at Yard House Restaurant, La Plaza Mall

Date Gift Accepted _____ Description of Gift _____

Date Gift Accepted _____ Description of Gift _____

(Attach additional forms as necessary.)

6 **AFFIDAVIT**

MARIA M. GUZMAN
Notary Public
STATE OF TEXAS
Notary ID# 385152-1
My Comm. Exp. 01/10/2020

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

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Victor Rodriguez, this the 22nd day of January, 20 19, to certify which, witness my hand and seal of office.

Maria M. Guzman — Maria M. Guzman — Notary Public / Administrative

Signature of officer administering oath | Printed name of officer administering oath | Title of officer administering oath

CONFLICT DISCLOSURE STATEMENTS (CIS FORMS)
February, 2019

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

City Secretary's Office
Received
Date 2/7/19

1 Name of Local Government Officer

Julianne R.Rankin

2 Office Held

Director of Planning

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

Frank Schuster

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

Local Farmer

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 1/30/19 Description of Gift Box of Broccoli shared with Staff

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.

GABRIELA CANTU
Notary Public
STATE OF TEXAS
Notary ID# 13133076-3
My Comm. Exp. 10-26-2021

Julianne R Rankin
Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Julianne R. Rankin, this the 4th day of Feb, 20 19, to certify which, witness my hand and seal of office.

G Cantu — Gabriela Cantu — Adm. Clerk

Signature of officer administering oath | Printed name of officer administering oath | Title of officer administering oath

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

City Secretary's Office
Received
Date 2/7/19

1 **Name of Local Government Officer**

JESSICA CAVAZOS

2 **Office Held**

PLANNING SECRETARY

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

ANA LEONARD WITH CENSUS

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

CENSUS COMMITTEE

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 2/5/2019 Description of Gift COOKIES

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.

GABRIELA CANTU
Notary Public
STATE OF TEXAS
Notary ID# 13133076-3
My Comm. Exp. 10-26-2021

Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said JESSICA CAVAZOS, this the 5TH day of FEBRUARY, 20 19, to certify which, witness my hand and seal of office.

G. Cantu — Signature of officer administering oath

Gabriela Cantu — Printed name of officer administering oath

Adm. Sec. — Title of officer administering oath

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

City Secretary's Office
Received
Date 2/12/19

1 **Name of Local Government Officer**

Victor Rodriguez for McAllen Police Department

2 **Office Held**

Chief of Police

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

Mr. Zac Propst, Transportation Specialist

4 **Description of the nature and extent of each employment or other business relationship and each family relationship**

G.L.G. II, LTD, dba
GRIFFITH TRANSPORTATION, McAllen

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 2/12/19 Description of Gift (3) Cases of Grapes (Given to employees.)

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.

MARIA M. GUZMAN
Notary Public
STATE OF TEXAS
Notary ID# 385152-1
My Comm. Exp. 01/10/2020

_____
Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Victor Rodriguez, this the 12th day of February, 20 19, to certify which, witness my hand and seal of office.

Maria M. Guzman — Maria M. Guzman — Notary Public / Administrative

Signature of officer administering oath | Printed name of officer administering oath | Title of officer administering oath

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

City Secretary's Office Received Date 2-18-19

1 **Name of Local Government Officer**

Yvette Barrera

2 **Office Held**

City Engineer

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

Jim Dannenbaum

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

Engineering Company

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 2-13-19 Description of Gift 3 boxes of candies- for Yvette Barrera, Marlen Garza and Office Staff

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.

VERONICA SANCHEZ
Notary Public
STATE OF TEXAS
Notary ID# 781744-6
My Comm. Exp. 07-15-2021
AFFIX NOTARY STAMP / SEAL ABOVE

Signature of Local Government Officer

Sworn to and subscribed before me, by the said Yvette Barrera, this the 13th day of February, 20 18, to certify which, witness my hand and seal of office.

Signature of officer administering oath | Veronica Sanchez — Printed name of officer administering oath | Notary Public — Title of officer administering oath

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

City Secretary's Office Received Date 2/19/19 eg

1 **Name of Local Government Officer**

Nabila Ituarte

2 **Office Held**

Customer Relations, Clerk

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

Oscar Canty from Dolcan Construction

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

Regular water Service Applicant

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 2/19/19 Description of Gift 2 dozens of Krispy Kreme Doughnuts shared w/ staff.

Date Gift Accepted _____ Description of Gift _____

Date Gift Accepted _____ Description of Gift _____

(attach additional forms as necessary)

6 **AFFIDAVIT**

CINDY M GONZALEZ NOTARY PUBLIC STATE OF TEXAS ID 130867249 EXP. 10-16-2020

AFFIX NOTARY STAMP / SEAL ABOVE

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.

Nabila Ituarte

Signature of Local Government Officer

Sworn to and subscribed before me, by the said Nabila Ituarte, this the 19th day of February 20 19, to certify which, witness my hand and seal of office.

Cindy Gonzalez — Signature of officer administering oath

Cindy Gonzalez — Printed name of officer administering oath

Notary — Title of officer administering oath

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

City Secretary's Office Received Date 2/21/19

1 **Name of Local Government Officer**

Julianne R. Rankin

2 **Office Held**

Director of Planning

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

Katherine Ziegler

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

Development Contractor

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 2/20/19 Description of Gift Lunch

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.

NIKKI MARIE CAVAZOS
Notary Public
STATE OF TEXAS
Notary ID# 13133069-2
My Comm. Exp. 10-26-2021

J R Rankin
Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Julianne Rankin, this the 20th day of February 20 19, to certify which, witness my hand and seal of office.

Nikki Marie Cavazos Nikki Marie Cavazos Secretary

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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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

City Secretary's Office Received Date 2/20/19

1 **Name of Local Government Officer**

Norma A. Rodriguez

2 **Office Held**

Passport Division

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

Nancy Fabela

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

Passport applicant

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 2/15/2019 Description of Gift 1 dozen of chocolate strawberries

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.

Norma A Rodriguez
Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Norma Rodriguez, this the 20th day of February, 20 19, to certify which, witness my hand and seal of office.

Perla E. Lara
Signature of officer administering oath | Printed name of officer administering oath | Title of officer administering oath

PERLA E LARA NOTARY PUBLIC STATE OF TEXAS ID 4802156 EXP. 07-12-2020

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

City Secretary's Office
Received
Date 2/25/19

1 **Name of Local Government Officer**

Victor Rodriguez for McAllen Police Department

2 **Office Held**

Chief of Police

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

Mr. James Ewing

4 **Description of the nature and extent of each employment or other business relationship and each family relationship**

South Texas Communications, McAllen

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 2/21/19 Description of Gift Door Prize at South Texas Communications Lunch & Learn Demonstration (1) Motorola Portable APX 7000 Serial #655cmv0473 (Added to Radio Inventory.)

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.

MARIA M. GUZMAN
Notary Public
STATE OF TEXAS
Notary ID# 385152-1
My Comm. Exp. 01/10/2020

Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Victor Rodriguez, this the 22nd day of February, 20 19, to certify which, witness my hand and seal of office.

Signature of officer administering oath	Maria M. Guzman Printed name of officer administering oath	Notary Public / Administrative Assistant Title of officer administering oath

CONFLICT DISCLOSURE STATEMENTS (CIS FORMS)
March, 2019

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

Secretary's Office Received 3-5-19

1 **Name of Local Government Officer**

Gerardo Noriega

2 **Office Held**

Date

City of McAllen Purchasing & Contracting

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

Dannenbaum Engineering

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

3rd party Engineer for the City of McAllen

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 02/15/2019 Description of Gift Russel Stovers Heart Box Chocolate

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.

DIANA M SILVA
Notary Public, State of Texas
Comm. Expires 11-22-2018
Notary ID 12845221-7

Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Gerardo Noriega, this the 5th day of March, 2019, to certify which, witness my hand and seal of office.

Diana M. Silva — Diana M. Silva — Notary

Signature of officer administering oath | Printed name of officer administering oath | Title of officer administering oath

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

City Secretary's Office
Received
Date 3/13/19

1 **Name of Local Government Officer**

Lt. Cesar Gomez

2 **Office Held**

Fire Department/Prevention Division

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

McAllen Produce Terminal

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

Homero Gonzalez/Manager

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 2/26/19 Description of Gift (3) Boxes of riped mangos

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.

MARY ANN VELA
Notary ID #1948307
My Commission Expires
March 8, 2022

Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Lt. Cesar Gomez, this the 12th day of March, 20 19, 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
	Mary Ann Vela	Notary

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

City Secretary's Office
Received
Date 3/14/19

1 **Name of Local Government Officer**

Victor Rodriguez for McAllen Police Department

2 **Office Held**

Chief of Police

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

Mr. Luis Becerra, Assistant Manager
Mr. Tony Cavazos, Asset Protection

4 **Description of the nature and extent of each employment or other business relationship and each family relationship**

WalMart Neighborhood Market, 800 E. Nolana Ave., McAllen

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 3/13/19 Description of Gift (5) Cases of Bottled Water (6) packages of Mini-Brownies (Given to police employees.)

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.

MARIA M. GUZMAN
Notary Public
STATE OF TEXAS
Notary ID# 385152-1
My Comm. Exp. 01/10/2020

Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Victor Rodriguez, this the 14th day of March, 20 19, to certify which, witness my hand and seal of office.

Maria M. Guzman — Signature of officer administering oath
Maria M. Guzman — Printed name of officer administering oath
Notary Public / Administrative Assistant — Title of officer administering oath

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

City Secretary's Office
Received
Date 3/26/2019

1 **Name of Local Government Officer**

Norma A. Rodriguez

2 **Office Held**

Passport Division

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

Francisco Perez

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

Passport Applicant

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 3/19/2019 Description of Gift Breakfast tacos

Date Gift Accepted _____ Description of Gift _____

Date Gift Accepted _____ Description of Gift _____

(attach additional forms as necessary)

6 **AFFIDAVIT**

CINDY M GONZALEZ NOTARY PUBLIC STATE OF TEXAS ID 130867249 EXP. 10-18-2020

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.

Norma A Rodriguez

Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Norma Rodriguez, this the 26th day of March, 20 19, to certify which, witness my hand and seal of office.

Cindy M Gonzalez — Cindy M. Gonzalez — Notary

Signature of officer administering oath | Printed name of officer administering oath | Title of officer administering oath

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

3/26/19

1 **Name of Local Government Officer**

Victor Rodriguez for McAllen Police Department

2 **Office Held**

Chief of Police

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

Mr. George Leal, Athletic Director

4 **Description of the nature and extent of each employment or other business relationship and each family relationship**

McAllen Boys and Girls Club

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 3/22/19 Description of Gift (1) Camouflage Base Ball Cap with Boys & Girls Club logo (To be raffled off to employees.)

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.

MARIA M. GUZMAN
Notary Public
STATE OF TEXAS
Notary ID# 385152-1
My Comm. Exp. 01/10/2020

Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Victor Rodriguez, this the 25th day of March, 20 19, to certify which, witness my hand and seal of office.

Maria M. Guzman — Maria M. Guzman — Notary Public / Administrative

Signature of officer administering oath | Printed name of officer administering oath | Title of officer administering oath

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

City Secretary's Office
Received
Date 3/26/19

1 **Name of Local Government Officer**

Cindy Gonzalez

2 **Office Held**

City Secretary Department

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

Monica Chavez

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

Citizen (Proclamation request)

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 3/25/19 Description of Gift One (1) Box of Girl Scout Cookies

Date Gift Accepted _____ Description of Gift _____

Date Gift Accepted _____ Description of Gift _____

(attach additional forms as necessary)

6 **AFFIDAVIT**

YESENIA RODRIGUEZ NOTARY PUBLIC STATE OF TEXAS ID 12644189-4 EXP. 03-10-2020

AFFIX NOTARY STAMP / SEAL ABOVE

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 Cindy Gonzalez, this the 26th day of March, 20 19, 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
	Yesenia Rodriguez	Notary

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

City Secretary's Office Received Date 3/28/2019

1 **Name of Local Government Officer**

Liliana Garza

2 **Office Held**

Planner I

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

Michael Grace

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

Small cells- Nexius

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 3/25/19 Description of Gift Cookie box shared with staff

Date Gift Accepted _____ Description of Gift _____

Date Gift Accepted _____ Description of Gift _____

(attach additional forms as necessary)

6 **AFFIDAVIT**

GABRIELA CANTU
Notary Public
STATE OF TEXAS
Notary ID# 13133076-3
My Comm. Exp. 10-26-2021

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

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Liliana Garza, this the 28 day of March, 20 19, to certify which witness my hand and seal of office.

G Cantu — Gabriela Cantu — adm. Clerk

Signature of officer administering oath — Printed name of officer administering oath — Title of officer administering oath

CONFLICT DISCLOSURE STATEMENTS (CIS FORMS)
April 2019

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

City Secretary's Office Received Date 4/22/19

1 **Name of Local Government Officer**

Rodrigo Sanchez

2 **Office Held**

Planner II

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

Antonia Fuentes

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

Customer

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 4/18/19 Description of Gift Potpourri Jar

Date Gift Accepted _____ Description of Gift _____

Date Gift Accepted _____ Description of Gift _____

(attach additional forms as necessary)

6 **AFFIDAVIT**

CARMEN WHITE
Notary Public
STATE OF TEXAS
Notary ID# 13133060-1
My Comm. Exp. 10-26-2021

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.

Rodrigo Sanchez
Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Rodrigo Sanchez, this the 18th day of April, 20 19, to certify which, witness my hand and seal of office.

Carmen White	CARMEN White	Admin Secty
Signature of officer administering oath	Printed name of officer administering oath	Title of officer administering oath

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

City Secretary's Office Received

Date 4/22/19

1 **Name of Local Government Officer**

Xavier Cervantes

2 **Office Held**

Planner II

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

Antonia Fuentes

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

Customer

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 4/18/19 Description of Gift Potpourri Jar

Date Gift Accepted _____ Description of Gift _____

Date Gift Accepted _____ Description of Gift _____

(attach additional forms as necessary)

6 **AFFIDAVIT**

CARMEN WHITE
Notary Public
STATE OF TEXAS
Notary ID# 13133060-1
My Comm. Exp. 10-26-2021

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.

X. Cervantes

Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Xavier Cervantes, this the 18th day of April, 20 19, to certify which, witness my hand and seal of office.

Carmen White — Signature of officer administering oath

CARMEN White — Printed name of officer administering oath

Admin. Secty — Title of officer administering oath

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

City Secretary's Office
Received
Date April 1, 2019

1 **Name of Local Government Officer**

Victor Rodriguez for McAllen Police Department

2 **Office Held**

Chief of Police

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

Ms. Chris Lash, Program Coordinator

4 **Description of the nature and extent of each employment or other business relationship and each family relationship**

Keep McAllen Beautiful

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 3/29/19 Description of Gift (1) "Arbor Day Celebration 2019" Trophy
(2) "Arbor Day Celebration 2019 " Ribbon Medals

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.

MARIA M. GUZMAN
Notary Public
STATE OF TEXAS
Notary ID# 385152-1
My Comm. Exp. 01/10/2020

Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Victor Rodriguez, this the 29th day of March, 20 19, to certify which, witness my hand and seal of office.

Maria M. Guzman — Maria M. Guzman — Notary Public / Administrative

Signature of officer administering oath | Printed name of officer administering oath | Title of officer administering oath

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

City Secretary's Office Received Date 4-2-19

1 **Name of Local Government Officer**

Norma A. Rodriguez

2 **Office Held**

Passport Division

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

Francisco Perez

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

Passport Applicant

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 3/29/2019 Description of Gift Breakfast Tacos

Date Gift Accepted _____ Description of Gift _____

Date Gift Accepted _____ Description of Gift _____

(attach additional forms as necessary)

6 **AFFIDAVIT**

PERLA E LARA NOTARY PUBLIC STATE OF TEXAS ID 480215-5 EXP. 07-12-2020

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.

Norma A Rodriguez

Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Norma Rodriguez, this the 2nd day of April, 20 19, to certify which, witness my hand and seal of office.

Perla E Lara — Perla E Lara — Notary

Signature of officer administering oath | Printed name of officer administering oath | Title of officer administering oath

GOVERNMENT OFFICER
ICTS 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

City Secretary's Office
Received
Date 4-23-19

1 **Name of Local Government Officer**

Victor Rodriguez for McAllen Police Department

2 **Office Held**

Chief of Police

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

Ms. Jessica Reyna, Program Specialist II

4 **Description of the nature and extent of each employment or other business relationship and each family relationship**

Lower Rio Grande Valley Development Council

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 4/24/19 Description of Gift (1 of each) Camouflage Insulated Lunch Bag, Iconia One 7 phone, PopSocket, Selfie Stick, T-Shirt, Patch, Tote bag, cell phone holder, LRGVDC Challenge Coin, Coffee Mug, Cell phone Chargers, and 2 Stickers

Date Gift Accepted _____ Description of Gift _____

Date Gift Accepted _____ Description of Gift _____

(Attach additional forms as necessary.)

(To be raffled off to employees.)

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.

MARIA M. GUZMAN
Notary Public
STATE OF TEXAS
Notary ID# 385152-1
My Comm. Exp. 01/10/2020

_____
Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Victor Rodriguez, this the 24th day of April, 20 19, to certify which, witness my hand and seal of office.

Maria M. Guzman — Maria M. Guzman — Notary Public / Administrative

Signature of officer administering oath | Printed name of officer administering oath | Title of officer administering oath

CONFLICT DISCLOSURE STATEMENTS (CIS FORMS)
May 2019

CONFLICT DISCLOSURE STATEMENTS (CIS FORMS)
June 2019

CONFLICT DISCLOSURE STATEMENTS (CIS FORMS)
July 2019

CONFLICT DISCLOSURE STATEMENTS (CIS FORMS)
August 2019

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

City Secretary's Office
Received
Date 8-12-19

1 **Name of Local Government Officer**

Omar Quintanilla

2 **Office Held**

Commissioner District 3

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

McAllen Firefighters Association

4 **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 8/8/19 Description of Gift lunch meeting

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.

ALICIA J. JOHNSON
Notary Public
STATE OF TEXAS
Notary ID# 12941430-1
My Comm. Exp. 05-06-2021

Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Omar Quintanilla, this the 8th 12th day of August, 20 19, to certify which, witness my hand and seal of office.

Alicia Johnson — Alice Johnson — Executive Administrator

Signature of officer administering oath | Printed name of officer administering oath | Title of officer administering oath

CONFLICT DISCLOSURE STATEMENTS (CIS FORMS)
September 2019

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

City Secretary's Office Received Date 9-17-19

1 **Name of Local Government Officer**

Victor Rodriguez for McAllen Police Department

2 **Office Held**

Chief of Police

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

Rio Grande Regional Hospital

4 **Description of the nature and extent of each employment or other business relationship and each family relationship**

Ms. Cris Rivera, Chief Executive Officer

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).**

Not

Date Gift Accepted 09/16/19 Description of Gift (1) Large Gift Basket filled coffee drinks and snacks *(To be raffled to police employees.)*

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.

MARIA M. GUZMAN
Notary Public
STATE OF TEXAS
Notary ID# 385152-1
My Comm. Exp. 01/10/2020

Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said **Victor Rodriguez**, this the **16th** day of **September**, 20 **19**, to certify which, witness my hand and seal of office.

Maria M. Guzman — Signature of officer administering oath

Maria M. Guzman — Printed name of officer administering oath

Notary Public / Administrative — Title of officer administering oath

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

City Secretary's Office Received Date 9/17/19

1 **Name of Local Government Officer**

OMAR Sotelo

2 **Office Held**

Planner

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

Russell Limas

Halff Associates, 5000 W. Military #100 McAllen

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

Customer

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 9/13/19 Description of Gift 1 doz donuts shared with Co-workers

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.

NIKKI MARIE CAVAZOS
Notary Public
STATE OF TEXAS
Notary ID# 13133069-2
My Comm. Exp. 10-26-2021

Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Omar Sotelo, this the 17th day of September 20 19, to certify which, witness my hand and seal of office.

Nikki Marie Cavazos Nikki Marie Cavazos Secretary

Signature of officer administering oath | Printed name of officer administering oath | Title of officer administering oath

CONFLICT DISCLOSURE STATEMENTS (CIS FORMS)
October 2019

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

City Secretary's Office
Received
Date 10/8/19

1 **Name of Local Government Officer**

Nabila Ituarte

2 **Office Held**

Customer Service Clerk - Customer Relations

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

Top Golf

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

Holiday Party Invite

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 10/8/19 Description of Gift Can of Chocolate Chip Cookies

Date Gift Accepted _____ Description of Gift _____

Date Gift Accepted _____ Description of Gift _____

(attach additional forms as necessary)

6 **AFFIDAVIT**

CINDY M GONZALEZ NOTARY PUBLIC STATE OF TEXAS ID 130867249 EXP. 10-18-2020

AFFIX NOTARY STAMP / SEAL ABOVE

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.

Ituarte
Signature of Local Government Officer

Sworn to and subscribed before me, by the said Nabila Ituarte, this the 8th day of October, 20 19, to certify which, witness my hand and seal of office.

Signature of officer administering oath | Notary Cindy Gonzalez
Printed name of officer administering oath | Title of officer administering oath

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

City Secretary's Office
Received
Date 12/23/19

1 **Name of Local Government Officer**

Victor Rodriguez
for McAllen Police Department

2 **Office Held**

Chief of Police

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

Ms. Francine Jones

4 **Description of the nature and extent of each employment or other business relationship and each family relationship**

Citizens Police Academy – Class XVI

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).**

Not

Date Gift Accepted 10 / 16 /19 Description of Gift (2) Tony Roma's Gift Cards – Value: $25.00 each

Date Gift Accepted _____ Description of Gift _____

Date Gift Accepted _____ Description of Gift _____

{To be raffled off to police employees.}

(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.

MARIA M. GUZMAN
Notary Public
STATE OF TEXAS
Notary ID# 385152-1
My Comm. Exp. 01/10/2020

_____
Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said **Victor Rodriguez**, this the **21st** day of **October**, 20 **19**, to certify which, witness my hand and seal of office.

Maria M. Guzman	**Maria M. Guzman**	**Notary Public / Administrative Assistant**
Signature of officer administering oath	Printed name of officer administering oath	Title of officer administering oath

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

City Secretary's Office
Received
Date 10/25/19

1 **Name of Local Government Officer**

Victor Rodriguez
for McAllen Police Department

2 **Office Held**

Chief of Police

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

Mr. Sidney Sosa, Store Manager

4 **Description of the nature and extent of each employment or other business relationship and each family relationship**

Walmart Store
1200 E. Jackson Ave., McAllen

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).**

Not

Date Gift Accepted 10 / 22 /19 Description of Gift (2) new and boxed 7.5 ft. pre-lit, artificial Christmas Trees

Date Gift Accepted _____ Description of Gift _____

Date Gift Accepted _____ Description of Gift _____

{Given to City of McAllen's Grants Office and Office of Communications}

(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.

MARIA M. GUZMAN
Notary Public
STATE OF TEXAS
Notary ID# 385152-1
My Comm. Exp. 01/10/2020

_____
Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said **Victor Rodriguez**, this the **22nd** day of **October**, 20 **19**, to certify which, witness my hand and seal of office.

Maria M. Guzman — **Maria M. Guzman** — **Notary Public / Administrative Assistant**

Signature of officer administering oath | Printed name of officer administering oath | Title of officer administering oath

CONFLICT DISCLOSURE STATEMENTS (CIS FORMS)
NOVEMBER, 2019

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

City Secretary's Office
Received
Date 11/1/19

1 **Name of Local Government Officer**

Victor Rodriguez for McAllen Police Department

2 **Office Held**

Chief of Police

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

Mr. Ruben Cavazos

4 **Description of the nature and extent of each employment or other business relationship and each family relationship**

Ruben's Grocery
620 N. 20th, McAllen

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).**

Not
Date Gift Accepted 10/28/19 Description of Gift 40 lbs of sliced brisket with barbeque sauce
(Given to employees.)

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.

MARIA M. GUZMAN
Notary Public
STATE OF TEXAS
Notary ID# 385152-1
My Comm. Exp. 01/10/2020

_____
Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said **Victor Rodriguez**, this the **28th** day of **October**, 20 **19**, to certify which, witness my hand and seal of office.

Maria M. Guzman — **Maria M. Guzman** — **Notary Public / Administrative Assistant**

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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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

City Secretary's Office Received Date 11/1/19

1 **Name of Local Government Officer**

Victor Rodriguez for McAllen Police Department

2 **Office Held**

Chief of Police

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

Ms. Raylene Lackey,
Communities in Schools

4 **Description of the nature and extent of each employment or other business relationship and each family relationship**

Alonzo De Leon Middle School
4201 N. 29th St., McAllen

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).**

Not
Date Gift Accepted 10/28/19 Description of Gift (1) package of Lindt Lindor Chocolate Truffles
(1) Coffee Thermos with carrying case
(To be raffled off to police employees.)

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.

MARIA M. GUZMAN
Notary Public
STATE OF TEXAS
Notary ID# 385152-1
My Comm. Exp. 01/10/2020

_____
Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said **Victor Rodriguez**, this the **28th** day of **October**, 20 **19**, to certify which, witness my hand and seal of office.

Maria M. Guzman — **Maria M. Guzman** — **Notary Public / Administrative Assistant**

Signature of officer administering oath | Printed name of officer administering oath | Title of officer administering oath

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

City Secretary's Office
Received
Date 11/8/19

1 **Name of Local Government Officer**

Victor Rodriguez
for McAllen Police Department

2 **Office Held**

Chief of Police

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

Ms. Esperanza Aguilera, Owner

4 **Description of the nature and extent of each employment or other business relationship and each family relationship**

Espi and T's Mexican Restaurant
2101 N. 10th Street, McAllen

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 11/06/19 Description of Gift Thanksgiving Lunch (Turkey and all the fixings) for employees

Date Gift Accepted _____ Description of Gift _____

Date Gift Accepted _____ Description of Gift _____

{Served to McAllen Police Department employees.}

(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.

MARIA M. GUZMAN
Notary Public
STATE OF TEXAS
Notary ID# 385152-1
My Comm. Exp. 01/10/2020

_____
Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said **Victor Rodriguez**, this the **6th** day of **November**, 20 **19**, to certify which, witness my hand and seal of office.

Maria M. Guzman — **Maria M. Guzman** — **Notary Public / Administrative Assistant**

Signature of officer administering oath | Printed name of officer administering oath | Title of officer administering oath

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

City Secretary's Office
Received
Date 11/8/19

1 **Name of Local Government Officer**

Victor Rodriguez
for McAllen Police Department

2 **Office Held**

Chief of Police

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

Mr. Richey Owen

4 **Description of the nature and extent of each employment or other business relationship and each family relationship**

Earl Owen Company

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 11 / 07 /19 Description of Gift (1) Box of Tiff's Treats Cookies
{Given to police employees.}

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.

MARIA M. GUZMAN
Notary Public
STATE OF TEXAS
Notary ID# 385152-1
My Comm. Exp. 01/10/2020

_____
Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said **Victor Rodriguez**, this the **7th** day of **November**, 20 **19**, to certify which, witness my hand and seal of office.

Maria M. Guzman — **Maria M. Guzman** — **Notary Public / Administrative Assistant**

Signature of officer administering oath | Printed name of officer administering oath | Title of officer administering oath

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

Dec 11/21/19

1 **Name of Local Government Officer**

Mayor Jim Darling

2 **Office Held**

City of McAllen

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

L&G Engineering

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

Business

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 11//21/19 Description of Gift 2 dozen tamales (gave to staff at city hall)

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.

NOTARY PUBLIC STATE OF TEXAS
ALICIA J. JOHNSON
Notary Public
STATE OF TEXAS
Notary ID# 12941430-1
My Comm. Exp. 05-06-2021

Jim Darling
Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Jim Darling, this the 21st day of November, 20 19, to certify which, witness my hand and seal of office.

Alice Johnson — Executive Administrator

Signature of officer administering oath | Printed name of officer administering oath | Title of officer administering oath

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

City Secretary's Office Received Date 11/26/19

1 Name of Local Government Officer

Commissioner Joaquin Zamora

2 Office Held

City of McAllen

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

L&G Engineering

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

Business

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 11//21/19 Description of Gift 2 dozen tamales

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.

ALICIA J. JOHNSON
Notary Public
STATE OF TEXAS
Notary ID# 12941430-1
My Comm. Exp. 05-06-2021

AFFIX NOTARY STAMP / SEAL ABOVE

Signature of Local Government Officer

Sworn to and subscribed before me, by the said Joaquin Zamora, this the 26th day of November, 20 19, to certify which, witness my hand and seal of office.

Signature of officer administering oath	Alice Johnson Printed name of officer administering oath	Executive Administrator Title of officer administering oath

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

City Secretary's Office
Received
Date 11/26/19

1 Name of Local Government Officer

Commissioner Veronica Whitacre

2 Office Held

City of McAllen

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

L&G Engineering

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

Business

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 11//21/19 Description of Gift 2 dozen tamales

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.

ALICIA J. JOHNSON
Notary Public
STATE OF TEXAS
Notary ID# 12941430-1
My Comm. Exp. 05-06-2021

Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Veronica Whitacre, this the 26th day of November, 20 19, to certify which, witness my hand and seal of office.

Signature of officer administering oath | Alice Johnson — Printed name of officer administering oath | Executive Administrator — Title of officer administering oath

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

City Secretary's Office
Received
Date 11/26/19

1 **Name of Local Government Officer**

Commissioner Omar Quintanilla

2 **Office Held**

City of McAllen

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

L&G Engineering

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

Business

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 11//21/19 Description of Gift 2 dozen tamales

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.

ALICIA J. JOHNSON
Notary Public
STATE OF TEXAS
Notary ID# 12941430-1
My Comm. Exp. 05-06-2021

Omar Quintanilla
Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Omar Quintanilla, this the 26 day of November, 20 19, to certify which, witness my hand and seal of office.

Alice Johnson — Executive Administrator

Signature of officer administering oath | Printed name of officer administering oath | Title of officer administering oath

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

City Secretary's Office
Received
Date 11/26/19

1 **Name of Local Government Officer**

Commissioner Javier Villalobos

2 **Office Held**

City of McAllen

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

L&G Engineering

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

Business

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 11//21/19 Description of Gift 2 dozen tamales

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.

ALICIA J. JOHNSON
Notary Public
STATE OF TEXAS
Notary ID# 12941430-1
My Comm. Exp. 05-06-2021

AFFIX NOTARY STAMP / SEAL ABOVE

Signature of Local Government Officer

Sworn to and subscribed before me, by the said Javier Villalobos, this the 26th day of November, 20 19, 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
	Alice Johnson	Executive Administrator

CONFLICT DISCLOSURE STATEMENTS (CIS FORMS)
December 2019

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

City Secretary's Office
Received
Date 12/5/19

1 **Name of Local Government Officer**

MAYOR JIM DARLING

2 **Office Held**

City of McAllen Mayor

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

CIL

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

Business

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 12/4/19 Description of Gift cake (gave to staff)

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.

ALICIA J. JOHNSON
Notary Public
STATE OF TEXAS
Notary ID# 12941430-1
My Comm. Exp. 05-06-2021

Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Jim Darling, this the _____ day of December, 20 19, to certify which, witness my hand and seal of office.

Alice Johnson — Executive Adminisrator

Signature of officer administering oath | Printed name of officer administering oath | Title of officer administering oath

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

City Secretary's Office Received Date 12/5/19

1 **Name of Local Government Officer**

MAYOR JIM DARLING

2 **Office Held**

City of McAllen Mayor

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

Deanan Products Inc.

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

Business

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 12/5/19 Description of Gift bucket of popcorn

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.

ALICIA J. JOHNSON
Notary Public
STATE OF TEXAS
Notary ID# 12941430-1
My Comm. Exp. 05-06-2021

Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Jim Darling, this the 5th day of December, 20 19, to certify which, witness my hand and seal of office.

Alice Johnson — Executive Adminisrator

Signature of officer administering oath | Printed name of officer administering oath | Title of officer administering oath

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

City Secretary's Office
Received
Date 12/5/19

1 **Name of Local Government Officer**

MAYOR JIM DARLING

2 **Office Held**

City of McAllen Mayor

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

Gonzalez Castillo, LLP Attorneys at Law

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

Business

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 12/5/19 Description of Gift ice cream (french)

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.

ALICIA J. JOHNSON
Notary Public
STATE OF TEXAS
Notary ID# 12941430-1
My Comm. Exp. 05-06-2021

Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Jim Darling, this the 5th day of December, 20 19, to certify which, witness my hand and seal of office.

Alice Johnson — Alice Johnson — Executive Adminisrator

Signature of officer administering oath | Printed name of officer administering oath | Title of officer administering oath

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

City Secretary's Office
Received
Date 12/06/19

1 **Name of Local Government Officer**

Ms. Yvette Barrera

2 **Office Held**

City Engineer

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

RABA KISTNER

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

Shortbread Cookies- 1 Pound Box

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 12-05-2019 Description of Gift Distributed To Engineering Staff

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.

VERONICA SANCHEZ
Notary Public
STATE OF TEXAS
Notary ID# 781744-6
My Comm. Exp. 07-15-2021

AFFIX NOTARY STAMP / SEAL ABOVE

Signature of Local Government Officer

Sworn to and subscribed before me, by the said Yvette Barrera, this the 5th day of December, 20 19, to certify which, witness my hand and seal of office.

Veronica Sanchez — Signature of officer administering oath
Veronica Sanchez — Printed name of officer administering oath
Adm. Supervisor — Title of officer administering oath

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

City Secretary's Office Received Date 12/10/19

1 **Name of Local Government Officer**

Jason Shelton

2 **Office Held**

Systems Manager

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

Free IT Data Solutions

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

Vendor / Integrator

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 12/9/19 Description of Gift Gift Basket

Date Gift Accepted _____ Description of Gift _____

Date Gift Accepted _____ Description of Gift _____

(attach additional forms as necessary)

6 **AFFIDAVIT**

YESENIA RODRIGUEZ NOTARY PUBLIC STATE OF TEXAS ID 12644189-1 EXP. 03-10-2020

AFFIX NOTARY STAMP / SEAL ABOVE

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.

12/9/19

Signature of Local Government Officer

Sworn to and subscribed before me, by the said Jason Shelton, this the 9th day of December, 20 19, to certify which, witness my hand and seal of office.

Signature of officer administering oath | Yesenia Rodriguez — Printed name of officer administering oath | Notary — Title of officer administering oath

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

City Secretary's Office
Received
Date 12/10/19

1 **Name of Local Government Officer**

Commissioner Victor Seby Haddad

2 **Office Held**

City of McAllen

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

L&G Engineering

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

Business

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 11//21/19 Description of Gift 2 dozen tamales (gave to staff at city hall)

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.

ALICIA J. JOHNSON
Notary Public
STATE OF TEXAS
Notary ID# 12941430-1
My Comm. Exp. 05-06-2021

Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Victor Seby Haddad, this the 9th day of December, 20 19, to certify which, witness my hand and seal of office.

Alicia Johnson — Alice Johnson — Executive Administrator

Signature of officer administering oath | Printed name of officer administering oath | Title of officer administering oath

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

City Secretary's Office Received Date 12/10/19

1 Name of Local Government Officer

Commissioner Tania Ramirez

2 Office Held

City of McAllen

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

L&G Engineering

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

Business

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 11//21/19 Description of Gift 2 dozen tamales

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.

ALICIA J. JOHNSON
Notary Public
STATE OF TEXAS
Notary ID# 12941430-1
My Comm. Exp. 05-06-2021

Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Tania Ramirez, this the 9th day of December, 20 19, to certify which, witness my hand and seal of office.

Alice Johnson — Executive Administrator

Signature of officer administering oath | Printed name of officer administering oath | Title of officer administering oath

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

City Secretary's Office
Received
Date 12/12/19

1 **Name of Local Government Officer**

Joe Vera

2 **Office Held**

Assistant City Manager

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

R Communications

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

Business

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 12/11/19 Description of Gift Gift Basket

Date Gift Accepted _____ Description of Gift _____

Date Gift Accepted _____ Description of Gift _____

(attach additional forms as necessary)

6 **AFFIDAVIT**

ALICIA J. JOHNSON
Notary Public
STATE OF TEXAS
Notary ID# 12941430-1
My Comm. Exp. 05-06-2021

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

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Joe Vera, this the 11th day of December, 20 19, to certify which, witness my hand and seal of office.

Alice Johnson — Administrative Assistant

Signature of officer administering oath | Printed name of officer administering oath | Title of officer administering oath

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

City Secretary's Office
Received
Date 12/13/19

1 **Name of Local Government Officer**

Jason Shelton

2 **Office Held**

Systems Manager

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

TexAir

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

Vendor

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 12/11/19 Description of Gift Cookie tray

Date Gift Accepted _____ Description of Gift _____

Date Gift Accepted _____ Description of Gift _____

(attach additional forms as necessary)

6 **AFFIDAVIT**

YESENIA RODRIGUEZ NOTARY PUBLIC STATE OF TEXAS ID 12644189-4 EXP. 03-10-2020

AFFIX NOTARY STAMP / SEAL ABOVE

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 Jason Shelton, this the 11th day of December, 20 19, 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
	Yesenia Rodriguez	Notary

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

City Secretary's Office
Received
Date 12/13/19

1 **Name of Local Government Officer**

Mark Vega, P.E.

2 **Office Held**

MPU General Manager

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

Freese & Nichols

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

Engineering Firm

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 12/12/19 Description of Gift Sausage & Cheese box

Date Gift Accepted _____ Description of Gift _____

Date Gift Accepted _____ Description of Gift _____

(attach additional forms as necessary)

6 **AFFIDAVIT**

EDITH SHELTON
Notary Public
STATE OF TEXAS
Notary ID# 13042695-7
My Comm. Exp. 11-02-2023

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

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Mark Vega, this the 13th day of December, 20 19, 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
	Edith Shelton	Executive Assistant

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

City Secretary's Office
Received
Date 12/13/19

1 **Name of Local Government Officer**

Mark Vega, P.E.

2 **Office Held**

MPU General Manager

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

SWG

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

Engineering Firm

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 12/12/19 Description of Gift Snack basket

Date Gift Accepted _____ Description of Gift _____

Date Gift Accepted _____ Description of Gift _____

(attach additional forms as necessary)

6 **AFFIDAVIT**

EDITH SHELTON
Notary Public
STATE OF TEXAS
Notary ID# 13042695-7
My Comm. Exp. 11-02-2023

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

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Mark Vega, this the 13th day of December, 20 19, 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
	Edith Shelton	Executive Assistant

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

City Secretary's Office Received Date 12/16/19

1 **Name of Local Government Officer**

Victor Rodriguez for McAllen Police Department

2 **Office Held**

Chief of Police

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

Mr. Jennifer Banda

4 **Description of the nature and extent of each employment or other business relationship and each family relationship**

H.E.B. Store
Ware Rd., McAllen

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 12/12/19 Description of Gift (1) White Coconut Christmas Cake
(Given to employees.)

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.

MARIA M. GUZMAN
Notary Public
STATE OF TEXAS
Notary ID# 385152-1
My Comm. Exp. 01/10/2020

_____
Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said **Victor Rodriguez**, this the **12th** day of **December**, 20**19**, to certify which, witness my hand and seal of office.

Maria M. Guzman — **Maria M. Guzman** — **Notary Public / Administrative Assistant**

Signature of officer administering oath | Printed name of officer administering oath | Title of officer administering oath

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

City Secretary's Office
Received
Date 12/16/19

1 **Name of Local Government Officer**

Victor Rodriguez for McAllen Police Department

2 **Office Held**

Chief of Police

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

Ms. Melissa del Toro
Ms. Marisela Escobedo

4 **Description of the nature and extent of each employment or other business relationship and each family relationship**

Navy Army Community Credit Union, McAllen

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 12/12/19 Description of Gift (50) Pens
(1) Box of 50 Lunch Tote Bags
(5) Dozen Assorted Shipley Donuts
(15) 2020 Year Wall Calendars

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.

MARIA M. GUZMAN
Notary Public
STATE OF TEXAS
Notary ID# 385152-1
My Comm. Exp. 01/10/2020

Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said **Victor Rodriguez**, this the **12th** day of **December**, 20**19**, to certify which, witness my hand and seal of office.

Maria M. Guzman — **Maria M. Guzman** — **Notary Public / Administrative**

Signature of officer administering oath | Printed name of officer administering oath | Title of officer administering oath

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

City Secretary's Office Received Date 12/16/19

1 Name of Local Government Officer

Jason Shelton

2 Office Held

Systems Manager

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

Dell / EMC

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

Vendor

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 12/16/19 Description of Gift Holiday Snack Trail

Date Gift Accepted _____ Description of Gift _____

Date Gift Accepted _____ Description of Gift _____

(attach additional forms as necessary)

6 AFFIDAVIT

YESENIA RODRIGUEZ NOTARY PUBLIC STATE OF TEXAS ID 12644189-4 EXP. 03-10-2020

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

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Jason Shelton, this the 16th day of December, 20 19, 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
	Yesenia Rodriguez	Notary

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

City Secretary's Office Received

Date 12/16/19

1 **Name of Local Government Officer**

Yvette Barrera

2 **Office Held**

City Engineer

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

Megamorphosis

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

Macaroons & Card

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 12-10-2019 Description of Gift Macaroons

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.

VERONICA SANCHEZ
Notary Public
STATE OF TEXAS
Notary ID# 781744-6
My Comm. Exp. 07-15-2021

AFFIX NOTARY STAMP / SEAL ABOVE

Yvette Barrera
Signature of Local Government Officer

Sworn to and subscribed before me, by the said Yvette Barrera, this the 16th day of December, 20 19, to certify which, witness my hand and seal of office.

Veronica Sanchez — Veronica Sanchez — Administrative Supervisor

Signature of officer administering oath | Printed name of officer administering oath | Title of officer administering oath

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

City Secretary's Office
Received
Date 12/16/19

1 **Name of Local Government Officer**

Yvette Barrera

2 **Office Held**

City Engineer

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

Schneider Electric

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

7 Way Chocolate Lover's Dream Box

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 12-11-19 Description of Gift 7 Way Chocolate Lover's Dream Box

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.

VERONICA SANCHEZ
Notary Public
STATE OF TEXAS
Notary ID# 781744-6
My Comm. Exp. 07-15-2021

AFFIX NOTARY STAMP / SEAL ABOVE

Signature of Local Government Officer

Sworn to and subscribed before me, by the said Yvette Barrera, this the 16th day of December, 20 19, to certify which, witness my hand and seal of office.

Veronica Sanchez — Veronica Sanchez — Administrative Supervisor

Signature of officer administering oath — Printed name of officer administering oath — Title of officer administering oath

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

City Secretary's Office
Received
Date 12/16/19

1 **Name of Local Government Officer**

Jim Darling

2 **Office Held**

Mayor - City of McAllen

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

Consul de Mexico

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

Business

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 12/13/19 Description of Gift Patron - Tequila

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.

NOTARY PUBLIC STATE OF TEXAS
ALICIA J. JOHNSON
Notary Public
STATE OF TEXAS
Notary ID# 12941430-1
My Comm. Exp. 05-06-2021

Jim Darling
Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Jim Darling, this the 16th day of December 20 19, to certify which, witness my hand and seal of office.

Alice Johnson — Ex. Administrator

Signature of officer administering oath | Printed name of officer administering oath | Title of officer administering oath

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

City Secretary's Office Received Date 12/16/19

1 **Name of Local Government Officer**

Jim Darling

2 **Office Held**

Mayor - City of McAllen

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

UTRGV

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

Business

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 12/13/19 Description of Gift Basket full of cookies gave to staff

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.

ALICIA J. JOHNSON
Notary Public
STATE OF TEXAS
Notary ID# 12941430-1
My Comm. Exp. 05-06-2021

Jim Darling
Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Jim Darling, this the 16th day of December, 20 19, to certify which, witness my hand and seal of office.

Alice Johnson — Alice Johnson — Ex. Administrator

Signature of officer administering oath | Printed name of officer administering oath | Title of officer administering oath

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

City Secretary's Office Received Date 12/16/19

1 **Name of Local Government Officer**

Jim Darling

2 **Office Held**

Mayor - City of McAllen

3

The Brownstone Group

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

Business

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 12/13/19 Description of Gift pecan pie

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.

ALICIA J. JOHNSON
Notary Public
STATE OF TEXAS
Notary ID# 12941480-1
My Comm. Exp. 05-06-2021

AFFIX NOTARY STAMP / SEAL ABOVE

Jim Darling
Signature of Local Government Officer

Sworn to and subscribed before me, by the said Jim Darling, this the 16th day of December 20 19, to certify which, witness my hand and seal of office.

Alice Johnson
Signature of officer administering oath

Alice Johnson
Printed name of officer administering oath

Ex. Administrator
Title of officer administering oath

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

City Secretary's Office
Received
Date 12/16/19

1 **Name of Local Government Officer**

Jim Darling

2 **Office Held**

Mayor - City of McAllen

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

The Rhodes Family

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

Business

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 12/11/19 Description of Gift Coffee Cake

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.

ALICIA J. JOHNSON
Notary Public
STATE OF TEXAS
Notary ID# 12941430-1
My Comm. Exp. 05-06-2021

Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Jim Darling, this the 16th day of December, 20 19, to certify which, witness my hand and seal of office.

Alice Johnson — Ex. Administrator

Signature of officer administering oath | Printed name of officer administering oath | Title of officer administering oath

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

City Secretary's Office Received Date 12/16/19

1 **Name of Local Government Officer**

Jim Darling

2 **Office Held**

Mayor - City of McAllen

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

Schneider Electric

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

Business

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 12/11/19 Description of Gift chocolate candy

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.

NOTARY PUBLIC STATE OF TEXAS
ALICIA J. JOHNSON
Notary Public
STATE OF TEXAS
Notary ID# 12941430-1
My Comm. Exp. 05-06-2021

Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Jim Darling, this the 11th day of December 20 19, to certify which, witness my hand and seal of office.

Alice Johnson — Ex. Administrator

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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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

City Secretary's Office
Received
Date 12/16/19

1 Name of Local Government Officer

Jim Darling

2 Office Held

Mayor - City of McAllen

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

Megamorphosis

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

Business

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 12/10/19 Description of Gift macaroons (gave to staff)

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.

ALICIA J. JOHNSON
Notary Public
STATE OF TEXAS
Notary ID# 12941430-1
My Comm. Exp. 05-06-2021

Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Jim Darling, this the 16th day of December, 20 19, 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
	Alice Johnson	Executive Administrator

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

City Secretary's Office
Received
Date 12/19/19

1 **Name of Local Government Officer**

Yvette Barrera

2 **Office Held**

City Engineer

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

Terracon Consultants , Inc.

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

Premium Select Fudge Mint Cookies-Distributed to Employees.

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 12-18-19 Description of Gift Premium Select Fudge Mint Cookies

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.

VERONICA SANCHEZ
Notary Public
STATE OF TEXAS
Notary ID# 781744-6
My Comm. Exp. 07-15-2021

AFFIX NOTARY STAMP / SEAL ABOVE

Signature of Local Government Officer

Sworn to and subscribed before me, by the said Yvette Barrera, this the 19th day of December, 20 19, to certify which, witness my hand and seal of office.

Veronica Sanchez — Veronica Sanchez — Administrative Supervisor

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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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

City Secretary's Office
Received
Date 12/19/19

1 **Name of Local Government Officer**

Victor Seby Haddad

2 **Office Held**

Commissioner - City of McAllen

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

Schneider Electric

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

Business

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 12/11/19 Description of Gift chocolate candy

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.

ALICIA J. JOHNSON
Notary Public
STATE OF TEXAS
Notary ID# 12941430-1
My Comm. Exp. 05-06-2021

Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Victor Seby Haddad, this the 19th day of December, 20 19, to certify which, witness my hand and seal of office.

Alice Johnson — Ex. Administrator

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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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

City Secretary's Office
Received
Date 12/19/19

1 **Name of Local Government Officer**

Kevin D. Pagan

2 **Office Held**

City Attorney

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

Ross Molina Oliveros, P.C.

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

Outside Counsel

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 12/18/2019 Description of Gift Holiday Package

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.

ALMA VILLARREAL
Notary Public
STATE OF TEXAS
Notary ID# 12474934-4
My Comm. Exp. 11-17-2023

Signature of Local Government Officer

Sworn to and subscribed before me, by the said Kevin D. Pagan, this the 18th day of December, 20 19, to certify which, witness my hand and seal of office.

Alma Villarreal — Alma Villarreal — Paralegal/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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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

City Secretary's Office
Received
Date 12/20/19

1 **Name of Local Government Officer**

Jason Shelton

2 **Office Held**

Systems Manager

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

Network Solutions

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

Vendor

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 12/20/19 Description of Gift Wireless Charging Pad

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.

_____
Signature of Local Government Officer

YESENIA RODRIGUEZ NOTARY PUBLIC STATE OF TEXAS ID 12644189-4 EXP 03-10-2020

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Jason Shelton, this the 20th day of December, 20 19, to certify which, witness my hand and seal of office.

_____ Yesenia Rodriguez Notary
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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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

City Secretary's Office Received Date 12/20/19

1 **Name of Local Government Officer**

Jim Darling

2 **Office Held**

Mayor - City of McAllen

3

TWG Architects

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

Business

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 12/20/19 Description of Gift 3 bottles of wine

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.

ALICIA J. JOHNSON
Notary Public
STATE OF TEXAS
Notary ID# 12941430-1
My Comm. Exp. 05-06-2021

AFFIX NOTARY STAMP / SEAL ABOVE

Signature of Local Government Officer

Sworn to and subscribed before me, by the said Jim Darling, this the 20th day of December 2019, to certify which, witness my hand and seal of office.

Alice Johnson — Ex. Administrator

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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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

City Secretary's Office
Received
Date 12/20/19

1 Name of Local Government Officer

Jim Darling

2 Office Held

Mayor - City of McAllen

3

Terry Canales

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

Business

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 12/20/19 Description of Gift bottle of wine

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.

ALICIA J. JOHNSON
Notary Public
STATE OF TEXAS
Notary ID# 12941430-1
My Comm. Exp. 05-06-2021

Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Jim Darling, this the 20th day of December, 20 19, to certify which, witness my hand and seal of office.

Alice Johnson — Ex. Administrator

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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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

City Secretary's Office
Received
Date 12/20/19

1 **Name of Local Government Officer**

Jim Darling

2 **Office Held**

Mayor - City of McAllen

3

Capable Kids Foundation

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

Business

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 12/20/19 Description of Gift Ornament and cookies (gave to staff)

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.

ALICIA J. JOHNSON
Notary Public
STATE OF TEXAS
Notary ID# 12941430-1
My Comm. Exp. 05-06-2021

AFFIX NOTARY STAMP / SEAL ABOVE

Signature of Local Government Officer

Sworn to and subscribed before me, by the said Jim Darling, this the 20th day of December 20 19, to certify which, witness my hand and seal of office.

Alice Johnson — Ex. Administrator

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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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

City Secretary's Office
Received
Date 12/20/19

1 Name of Local Government Officer

Eduardo Mendoza

2 Office Held

Deputy City Engineer

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

Melden & Hunt, INC.

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

2 Trays of Mini Pastries-Distribute To Employees

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 12-19-2019 Description of Gift 2 Trays of Mini Pastries - Engineering Staff

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.

VERONICA SANCHEZ
Notary Public
STATE OF TEXAS
Notary ID# 781744-6
My Comm. Exp. 07-15-2021

AFFIX NOTARY STAMP / SEAL ABOVE

Signature of Local Government Officer

Sworn to and subscribed before me, by the said Eduardo Mendoza, this the 19th day of December, 20 19, to certify which, witness my hand and seal of office.

Veronica Sanchez Administrative Assistant

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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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

City Secretary's Office
Received
Date 12/26/19

1 **Name of Local Government Officer**

City Sec - Vitals Division

2 **Office Held**

Deputy Local Registrar - Cynthia Gonzalez

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

Memorial Funeral Home

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

Funeral Home

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 12/20/19 Description of Gift Cookie Platter - will share w/ staff

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.

Cynthia Gonzalez
Signature of Local Government Officer

YESENIA RODRIGUEZ NOTARY PUBLIC STATE OF TEXAS ID 12644189-4 EXP 03-10-2020

AFFIX NOTARY'S STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Cynthia Gonzalez, this the 26th day of December, 20 19, to certify which, witness my hand and seal of office.

Signature of officer administering oath | Yesenia Rodriguez — Printed name of officer administering oath | Notary — Title of officer administering oath

CONFLICT DISCLOSURE STATEMENTS (CIS FORMS)
January 2020

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

City Secretary's Office
Received
Date 1/6/2020

1 **Name of Local Government Officer**

Alejandro Ramos

2 **Office Held**

Fleet Supervisor

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

Mobile Service

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

Repair Center

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).**

EST $150 =

Date Gift Accepted 12/19/19 Description of Gift office Supplies basket, calendars, flashlights

Date Gift Accepted _____ Description of Gift _____

Date Gift Accepted _____ Description of Gift _____

(attach additional forms as necessary)

6 **AFFIDAVIT**

NOTARY PUBLIC STATE OF TEXAS
LINDA E DUNHAM
Notary Public
State of Texas
My Comm. Exp 01-20-2020

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

AFFIX NOTARY STAMP / SEAL ABOVE

AZ

Sworn to and subscribed before me, by the said Alejandro Ramos, this the 27th day of Dec, 20 19, to certify which, witness my hand and seal of office.

Linda E. Dunham | Linda E Dunham | Notary

Signature of officer administering oath | Printed name of officer administering oath | Title of officer administering oath

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

City Secretary's Office Received 11/6/2020

1 **Name of Local Government Officer**

Alejandro Ramos

2 **Office Held**

Date 11/6/2020

Fleet Supervisor

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

Autel Tech

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

Diagnostic tool Vendor

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).**

BT $90.00

Date Gift Accepted 12/19/19 Description of Gift Fruit Basket, chocolates

Date Gift Accepted _____ Description of Gift _____

Date Gift Accepted _____ Description of Gift _____

(attach additional forms as necessary)

6 **AFFIDAVIT**

LINDA E DUNHAM
Notary Public
State of Texas
My Comm. Exp 01-20-2020

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

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Alejandro Ramos, this the 27th day of Nov, 20 19, to certify which, witness my hand and seal of office.

Linda E. Dunham | Linda E. Dunham | Notary

Signature of officer administering oath | Printed name of officer administering oath | Title of officer administering oath

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. City

OFFICE USE ONLY

Date Received

City Secretary's Office Received

Date 1/7/2020

1 Name of Local Government Officer

Yvette Barrera

2 Office Held

City Engineer

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

SpawGlass

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

Contractor

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 12-19-2019 Description of Gift 1Box-Honey Bourbon Hot Toddy-

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.

VERONICA SANCHEZ
Notary Public
STATE OF TEXAS
Notary ID# 781744-6
My Comm. Exp. 07-15-2021

AFFIX NOTARY STAMP / SEAL ABOVE

Signature of Local Government Officer

Sworn to and subscribed before me, by the said Yvette Barrera, this the 6th day of January, 20 20, to certify which, witness my hand and seal of office.

Veronica Sanchez — Signature of officer administering oath

Veronica Sanchez — Printed name of officer administering oath

Administrative Supervisor — Title of officer administering oath

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. -city

OFFICE USE ONLY

Date Received

Secretary's Office Received

Date 1/7/2020

1 Name of Local Government Officer

Yvette Barrea

2 Office Held

Engineering Department

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

Rio Delta Engineering

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

Engineering Firm

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 12-19-19 Description of Gift 1 Mini Box Cookies distributed to employees

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.

VERONICA SANCHEZ
Notary Public
STATE OF TEXAS
Notary ID# 781744-6
My Comm. Exp. 07-15-2021

AFFIX NOTARY STAMP / SEAL ABOVE

Signature of Local Government Officer

Sworn to and subscribed before me, by the said Yvette Barrera, this the 20 day of December, 20 19, 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
	Veronica Sanchez	Administrative Supervisior

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. 1491, 80th 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. -ity

OFFICE USE ONLY

Date Received

Secretary's Office Received

Date 1/7/2020

1 **Name of Local Government Officer**

Eduardo Mendoza

2 **Office Held**

Deputy City Engineer

3 **Name of person described by Sections 176.002(a) and 176.003(a), Local Government Code**

Dannenbaum Engineering

4 **Description of the nature and extent of employment or other business relationship with person named in item 3**

Engineering Firm

5 **List gifts accepted by the local government officer and any family member, excluding gifts described by Section 176.003(a-1), if aggregate value of the gifts accepted from person named in item 3 exceed $250 during the 12-month period described by Section 176.003(a)(2)(B)**

Date Gift Accepted 12-23-2019 Description of Gift 1 Tray of Pastries- Engineering Staff

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 a 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), Local Government Code.

VERONICA SANCHEZ
Notary Public
STATE OF TEXAS
Notary ID# 781744-6
My Comm. Exp. 07-15-2021

AFFIX NOTARY STAMP / SEAL ABOVE

Signature of Local Government Officer

Sworn to and subscribed before me, by the said Eduardo Mendoza, this the 6th day of January, 20 20, to certify which, witness my hand and seal of office.

Veronica Sanchez — Signature of officer administering oath

Veronica Sanchez — Printed name of officer administering oath

Administrative Supervisor — Title of officer administering oath

Adopted 06/29/2007

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

City Secretary's Office Received Date 1/7/2020

1 Name of Local Government Officer

Eduardo Mendoza

2 Office Held

Deputy City Engineer

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

Cantu Construction

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

Construction Company.

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 12-23-2019 Description of Gift 10 Dozens-Tamales-Distributed To Employees

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.

VERONICA SANCHEZ
Notary Public
STATE OF TEXAS
Notary ID# 781744-6
My Comm. Exp. 07-15-2021

AFFIX NOTARY STAMP / SEAL ABOVE

Signature of Local Government Officer

Sworn to and subscribed before me, by the said Eduardo Mendoza, this the 6th day of January, 20 20, to certify which, witness my hand and seal of office.

Veronica Sanchez — Veronica Sanchez — Administrative Supervisor

Signature of officer administering oath — Printed name of officer administering oath — Title of officer administering oath

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

City Secretary's Office Received Date 1/9/2020

1 **Name of Local Government Officer**

Norma A. Rodriguez

2 **Office Held**

Passport Division

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

Nancy Solis - Texas Casa De Cambio

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

Business related

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 1/7/2020 Description of Gift Gourmet Gift Basket - Shared with Staff

Date Gift Accepted _____ Description of Gift _____

Date Gift Accepted _____ Description of Gift _____

(attach additional forms as necessary)

6 **AFFIDAVIT**

CINDY M GONZALEZ NOTARY PUBLIC STATE OF TEXAS ID 130867249 EXP. 10-18-2020

AFFIX NOTARY STAMP / SEAL ABOVE

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.

Norma A Rodriguez

Signature of Local Government Officer

Sworn to and subscribed before me, by the said Norma A. Rodriguez, this the 9th day of January 2020, to certify which, witness my hand and seal of office.

Cindy Gonzalez — Cindy Gonzalez — Notary

Signature of officer administering oath — Printed name of officer administering oath — Title of officer administering oath

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

City Secretary's Office
Received
Date 1/9/2020

1 **Name of Local Government Officer**

Tania Ramirez

2 **Office Held**

Commissioner - City of McAllen

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

Schneider Electric

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

Business

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 12/11/19 Description of Gift chocolate candy

Date Gift Accepted _____ Description of Gift _____

Date Gift Accepted _____ Description of Gift _____

(attach additional forms as necessary)

6 **AFFIDAVIT**

ALICIA J. JOHNSON
Notary Public
STATE OF TEXAS
Notary ID# 12941430-1
My Comm. Exp. 05-06-2021

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

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Tania Ramirez, this the 9th day of January, 2020, to certify which, witness my hand and seal of office.

Alice Johnson — Alice Johnson — Ex. Administrator

Signature of officer administering oath | Printed name of officer administering oath | Title of officer administering oath

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

City Secretary's Office
Received
Date 1/14/2020

1 Name of Local Government Officer

Javier Villalobos

2 Office Held

Commissioner - City of McAllen

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

Schneider Electric

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

Business

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 12/11/19 Description of Gift chocolate candy

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.

NOTARY PUBLIC STATE OF TEXAS
ALICIA J. JOHNSON
Notary Public
STATE OF TEXAS
Notary ID# 12941430-1
My Comm. Exp. 05-06-2021

Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Javier Villalobos, this the 13th day of January, 2020, to certify which, witness my hand and seal of office.

Alice Johnson — Alice Johnson — Ex. Administrator

Signature of officer administering oath | Printed name of officer administering oath | Title of officer administering oath

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

City Secretary's Office
Received
Date 1/14/2020

1 **Name of Local Government Officer**

Omar Quintanilla

2 **Office Held**

Commissioner - City of McAllen

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

Schneider Electric

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

Business

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 12/11/19 Description of Gift chocolate candy

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.

NOTARY PUBLIC STATE OF TEXAS
ALICIA J. JOHNSON
Notary Public
STATE OF TEXAS
Notary ID# 12941430-1
My Comm. Exp. 05-06-2021

AFFIX NOTARY STAMP / SEAL ABOVE

Omar Quintanilla
Signature of Local Government Officer

Sworn to and subscribed before me, by the said Omar Quintanilla, this the 13th day of January, 2020, to certify which, witness my hand and seal of office.

Alice Johnson — Ex. Administrator

Signature of officer administering oath | Printed name of officer administering oath | Title of officer administering oath

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

City Secretary's Office Received Date 1/14/2020

1 **Name of Local Government Officer**

Joaquin Zamora

2 **Office Held**

Commissioner - City of McAllen

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

Schneider Electric

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

Business

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 12/11/19 Description of Gift chocolate candy

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.

ALICIA J. JOHNSON
Notary Public
STATE OF TEXAS
Notary ID# 12941430-1
My Comm. Exp. 05-06-2021

AFFIX NOTARY STAMP / SEAL ABOVE

Signature of Local Government Officer

Sworn to and subscribed before me, by the said Joaquin Zamora, this the 13th day of January, 20 20, to certify which, witness my hand and seal of office.

Alice Johnson — Ex. Administrator

Signature of officer administering oath | Printed name of officer administering oath | Title of officer administering oath

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

ity Secretary's Office
Received
Date 1/14/2020

1 **Name of Local Government Officer**

Veronica Whitacre

2 **Office Held**

MPT / City of McAllen

3

S&B Infrastructure

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

Business

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 12/26/19 Description of Gift Fruit from Pittman&Davis

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.

NOTARY PUBLIC STATE OF TEXAS
ALICIA J. JOHNSON
Notary Public
STATE OF TEXAS
Notary ID# 12941430-1
My Comm. Exp. 05-06-2021

AFFIX NOTARY STAMP / SEAL ABOVE

Veronica Whitacre
Signature of Local Government Officer

Sworn to and subscribed before me, by the said Veronica Whitacre, this the 13th day of January '20 20, to certify which, witness my hand and seal of office.

Alice Johnson — Printed name of officer administering oath
Ex. Administrator — Title of officer administering oath
Signature of officer administering oath

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

City Secretary's Office Received Date 1/14/2020

1 **Name of Local Government Officer**

Veronica Whitacre

2 **Office Held**

Commissioner - City of McAllen

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

Schneider Electric

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

Business

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 12/11/19 Description of Gift chocolate candy

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.

ALICIA J. JOHNSON
Notary Public
STATE OF TEXAS
Notary ID# 12941430-1
My Comm. Exp. 05-06-2021

Veronica Whitacre
Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Veronica Whitacre, this the 13th day of January 2020, to certify which, witness my hand and seal of office.

Alice Johnson — Signature of officer administering oath

Alice Johnson — Printed name of officer administering oath

Ex. Administrator — Title of officer administering oath

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

City Secretary's Office Received Date 1/16/2020

1 **Name of Local Government Officer**

Omar Barrera

2 **Office Held**

Customer Relations

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

Friberto Bravo Jr.

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

Utility Customer

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 1/16/2020 Description of Gift 4 individual bottle openers

Date Gift Accepted _____ Description of Gift _____

Date Gift Accepted _____ Description of Gift _____

(attach additional forms as necessary)

6 **AFFIDAVIT**

CINDY M GONZALEZ NOTARY PUBLIC STATE OF TEXAS ID 130867249 EXP. 10-18-2020

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

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Omar Barrera, this the 16th day of January, 20 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
	Cindy Gonzalez	Notary

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

City Secretary's Office Received

Date 1/17/2020

1 Name of Local Government Officer

Yvette M. Balderas

2 Office Held

Director of Grant Administration

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

Karen Valdez

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

CD Chairperson

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 12/13/19 Description of Gift Basket of sweets for staff

Date Gift Accepted _____ Description of Gift _____

Date Gift Accepted _____ Description of Gift _____

(attach additional forms as necessary)

6 AFFIDAVIT

YESENIA RODRIGUEZ NOTARY PUBLIC STATE OF TEXAS ID 12644189-4 EXP. 03-10-2020

AFFIX NOTARY STAMP / SEAL ABOVE

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.

Yvette Balderas

Signature of Local Government Officer

Sworn to and subscribed before me, by the said Yvette Balderas, this the 17th day of January, 20 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
	Yesenia Rodriguez	Notary

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

City Secretary's Office Received Date 1/17/2020

1 **Name of Local Government Officer**

Yvette M. Balderas

2 **Office Held**

Director of Grant Administration

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

Affordable Homes of South Texas

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

Subrecipient

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 12/17/19 Description of Gift Box of bundt cakes for staff

Date Gift Accepted _____ Description of Gift _____

Date Gift Accepted _____ Description of Gift _____

(attach additional forms as necessary)

6 **AFFIDAVIT**

YESENIA RODRIGUEZ NOTARY PUBLIC STATE OF TEXAS ID 12644189-4 EXP. 03-10-2020

AFFIX NOTARY STAMP / SEAL ABOVE

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 Yvette Barrera, this the 17th day of January, 20 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
	Yesenia Rodriguez	Notary

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

City Secretary's Office Received Date 1/17/2020

1 **Name of Local Government Officer**

Yvette M. Balderas

2 **Office Held**

Director of Grant Administration

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

El Periodico

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

Media - Department publishes in newspaper.

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 12/19/19 Description of Gift Box of chocolates for staff

Date Gift Accepted _____ Description of Gift _____

Date Gift Accepted _____ Description of Gift _____

(attach additional forms as necessary)

6 **AFFIDAVIT**

YESENIA RODRIGUEZ NOTARY PUBLIC STATE OF TEXAS ID 12644189-4 EXP. 03-10-2020

AFFIX NOTARY STAMP / SEAL ABOVE

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.

Yvette Balderas

Signature of Local Government Officer

Sworn to and subscribed before me, by the said Yvette Balderas, this the 17th day of January, 20 20, to certify which, witness my hand and seal of office.

Signature of officer administering oath	Yesenia Rodriguez	Notary
	Printed name of officer administering oath	Title of officer administering oath

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

City Secretary's Office
Received
Date 1/17/2020

1 **Name of Local Government Officer**

Yvette M. Balderas

2 **Office Held**

Director of Grant Administration

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

Affordable Homes of South Texas

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

Subrecipient

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 12/17/19 Description of Gift Insulated tote

Date Gift Accepted _____ Description of Gift _____

Date Gift Accepted _____ Description of Gift _____

(attach additional forms as necessary)

6 **AFFIDAVIT**

YESENIA RODRIGUEZ NOTARY PUBLIC STATE OF TEXAS ID 12644189-4 EXP. 03-10-2020

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.

Yvette Balderas
Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn ~~to~~ and subscribed before me, by the said Yvette Balderas, this the 17th day of January, 20 20, to certify which, witness my hand and seal of office.

Signature of officer administering oath	Yesenia Rodriguez Printed name of officer administering oath	Notary Title of officer administering oath

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

City Secretary's Office Received Date 1/17/2020

1 **Name of Local Government Officer**

Yvette M. Balderas

2 **Office Held**

Director of Grant Administration

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

United Way of South Texas

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

Subrecipient

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 12/19/19 Description of Gift mug

Date Gift Accepted _____ Description of Gift _____

Date Gift Accepted _____ Description of Gift _____

(attach additional forms as necessary)

6 **AFFIDAVIT**

YESENIA RODRIGUEZ NOTARY PUBLIC STATE OF TEXAS ID #12644189-4 EXP. 03-10-2020

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.

Yvette Balderas

Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Yvette Balderas, this the 17th day of January, 20 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
	Yesenia Rodriguez	Notary

CONFLICT DISCLOSURE STATEMENTS (CIS FORMS)
February 2020

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

2-19-2020

1 **Name of Local Government Officer**

Norma A. Rodriguez

2 **Office Held**

Passport Division

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

Jorge Bravo

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

Passport Applicant

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 12/19/2020 Description of Gift Cheesecake

Date Gift Accepted _____ Description of Gift _____

Date Gift Accepted _____ Description of Gift _____

(attach additional forms as necessary)

6 **AFFIDAVIT**

PERLA E LARA NOTARY PUBLIC STATE OF TEXAS ID 4802215-3 EXP. 07-12-2020

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.

Norma A. Rodriguez

Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Norma Rodriguez, this the 19th day of February, 2020, to certify which, witness my hand and seal of office.

Perla E. Lara — Perla E. Lara — Notary

Signature of officer administering oath — Printed name of officer administering oath — Title of officer administering oath

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

City Secretary's Office
Received
Date 2/26/2020

1 Name of Local Government Officer

Yvette Barrera

2 Office Held

City Engineer

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

Spawglass

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

Contractor

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 02/25/2020 Description of Gift Starbucks Pastries distributed to Engineering Dept Staff.

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.

VERONICA SANCHEZ
Notary Public
STATE OF TEXAS
Notary ID# 781744-6
My Comm. Exp. 07-15-2021

AFFIX NOTARY STAMP / SEAL ABOVE

Signature of Local Government Officer

Sworn to and subscribed before me, by the said Yvette Barrera, this the 26th day of February, 20 20, to certify which, witness my hand and seal of office.

Veronica Sanchez — Veronica Sanchez — Administrative Supervisor

Signature of officer administering oath | Printed name of officer administering oath | Title of officer administering oath

CONFLICT DISCLOSURE STATEMENTS (CIS FORMS)
March 2020

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

City Secretary's Office
Received
Date 3-23-2020

1 **Name of Local Government Officer**

for McAllen Police Department

2 **Office Held**

Chief Victor Rodriguez

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

Zac Propst, Transportation Specialist

4 **Description of the nature and extent of each employment or other business relationship and each family relationship**

G.L.G, II, LTD. DBA
Griffith Transportation
2502 Buddy Owens Blvd,, McAllen, TX

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 03/19 /2020 Description of Gift (3) Cases of Roma Tomatoes

Date Gift Accepted _____ Description of Gift _____

Date Gift Accepted _____ Description of Gift _____

{Given to Salvation Army.}

(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.

MARIA M GUZMAN
Notary Public
STATE OF TEXAS
Notary ID# 385152-1
My Comm. Exp. 01-10-2024

Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Victor Rodriguez, this the 19th day of March, 2020, to certify which, witness my hand and seal of office.

Maria M. Guzman	Maria M. Guzman	Notary Public / Administrative Assistant
Signature of officer administering oath	Printed name of officer administering oath	Title of officer administering oath

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

City Secretary's Office Received Date 3/31/2020

1 Name of Local Government Officer

Julia Lash

2 Office Held

Assistant Director of Grant Administration

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

Department of State Health Services

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

Emergency Preparedness and Response

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 03/20/20 Description of Gift 500 hand sanitizers - 2 oz. clip

Date Gift Accepted _____ Description of Gift _____

Date Gift Accepted _____ Description of Gift _____

(attach additional forms as necessary)

6 AFFIDAVIT

PERLA E LARA NOTARY PUBLIC STATE OF TEXAS ID 480215-5 EXP. 07-12-2020

AFFIX NOTARY STAMP / SEAL ABOVE

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 Julia Lash, this the 10th day of April 10, 20 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
Perla Lara	Perla Lara	Notary

CONFLICT DISCLOSURE STATEMENTS (CIS FORMS)
April 2020

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

City Secretary's Office
Received
Date 4/7/20

1 **Name of Local Government Officer**

Chief Victor Rodriguez

2 **Office Held**

for McAllen Police Department

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

Mr. Eduardo "Eddie" Cantu
Hidalgo County Commissioner, Precinct 2

4 **Description of the nature and extent of each employment or other business relationship and each family relationship**

Hidalgo County Commissioners Court
100 E. Cano, Second Floor
Edinburg, TX 78539

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 **04/03/2020** Description of Gift (5) Boxes of Crispy Crème Doughnuts

Date Gift Accepted _____ Description of Gift _____

Date Gift Accepted _____ Description of Gift _____

{Given to police employees.)

(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.

NOTARY PUBLIC STATE OF TEXAS
MARIA M GUZMAN
Notary Public
STATE OF TEXAS
Notary ID# 385152-1
My Comm. Exp. 01-10-2024

_____
Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said **Victor Rodriguez**, this the **3rd** day of **April**, **2020**, to certify which, witness my hand and seal of office.

Maria M. Guzman — **Maria M. Guzman** — **Notary Public / Administrative Assistant**

Signature of officer administering oath | Printed name of officer administering oath | Title of officer administering oath

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

4/21/2020

1 **Name of Local Government Officer**

Chief Victor Rodriguez

2 **Office Held**

for McAllen Police Department

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

Dr. Yudu Li

4 **Description of the nature and extent of each employment or other business relationship and each family relationship**

University of Texas Rio Grande Valley
Criminal Justice Department

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 04/17/2020 Description of Gift (500) Face Masks

Date Gift Accepted _____ Description of Gift _____

Date Gift Accepted _____ Description of Gift _____

{Given to police officers.)

(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.

MARIA M GUZMAN
Notary Public
STATE OF TEXAS
Notary ID# 385152-1
My Comm. Exp. 01-10-2024

_____
Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said **Victor Rodriguez**, this the **17th** day of **April**, **2020**, to certify which, witness my hand and seal of office.

Maria M. Guzman — **Maria M. Guzman** — **Notary Public / Administrative Assistant**

Signature of officer administering oath | Printed name of officer administering oath | Title of officer administering oath

CONFLICT DISCLOSURE STATEMENTS (CIS FORMS)
May 2020

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

May 11, 2020

1 Name of Local Government Officer

Carina Jimenez, Administrator of Marketing & Special Events

2 Office Held

McAllen Parks & Recreation

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

O'Reilly's

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

Las Palmas CC Classic Car show - prizes for the winners

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 5/1/20 Description of Gift (2) $30 and (6) $20 gift cards

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.

MARY ANN JUAREZ
Notary Public, State of Texas
Expires 04/17/2023
I.D.# 12429211-2

Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Carina Jimenez, this the 8th day of May, 20 20, to certify which, witness my hand and seal of office.

Mary Ann Juarez — Mary Ann Juarez — Supervisor of Accounting

Signature of officer administering oath — Printed name of officer administering oath — Title of officer administering oath

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

May 11, 2020

1 Name of Local Government Officer

Carina Jimenez, Administrator of Marketing & Special Events

2 Office Held

McAllen Parks & Recreation

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

Whataburger

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

Las Palmas CC Classic Car show - prizes for the winners

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 5/1/20 Description of Gift Whataburger for a year prize basket

Date Gift Accepted _____ Description of Gift _____

Date Gift Accepted _____ Description of Gift _____

(attach additional forms as necessary)

6 AFFIDAVIT

MARY ANN JUAREZ
Notary Public, State of Texas
Expires 04/17/2023
I.D.# 12429211-2

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

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Carina Jimenez, this the 8th day of May, 20 20, to certify which, witness my hand and seal of office.

Mary Ann J | Mary Ann Juarez | Supervisor of Accounting

Signature of officer administering oath | Printed name of officer administering oath | Title of officer administering oath

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

City Secretary's Office
Received
5/28/20
Date

1 **Name of Local Government Officer**

Chief Victor Rodriguez

2 **Office Held**

for McAllen Police Department

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

Ms. Maria Sandoval

4 **Description of the nature and extent of each employment or other business relationship and each family relationship**

Citizen of Pharr, TX

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 **05/27/2020** Description of Gift (2,000) Face Masks

Date Gift Accepted _____ Description of Gift _____

Date Gift Accepted _____ Description of Gift _____

{Given to police employees.)

(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.

MARIA M GUZMAN
Notary Public
STATE OF TEXAS
Notary ID# 385152-1
My Comm. Exp. 01-10-2024

_____
Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said **Victor Rodriguez**, this the **27th** day of **May**, **2020**, to certify which, witness my hand and seal of office.

Maria M. Guzman — **Maria M. Guzman** — **Notary Public / Administrative Assistant**

Signature of officer administering oath | Printed name of officer administering oath | Title of officer administering oath

CONFLICT DISCLOSURE STATEMENTS (CIS FORMS)
June 2020

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

City Secretary's Office
Received
Date 6/3/2020

1 **Name of Local Government Officer**

Yvette M. Balderas

2 **Office Held**

Director of Grant Administration

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

McAllen Independent School District

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

Subrecipient

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 05/26/20 Description of Gift Graduation tickets (No Value)

Date Gift Accepted _____ Description of Gift _____

Date Gift Accepted _____ Description of Gift _____

(attach additional forms as necessary)

6 **AFFIDAVIT**

CINDY M GONZALEZ NOTARY PUBLIC STATE OF TEXAS ID 130867249 EXP 10-18-2020

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.

Yvette Balderas
Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Yvette M. Balderas, this the 26th day of May, 20 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
Cindy M. Gonzalez	Cindy M. Gonzalez	Notary

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

City Secretary's Office
Received
Date 10/25/2020

1 **Name of Local Government Officer**

Chief Victor Rodriguez

2 **Office Held**

for McAllen Police Department

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

Ms. Martha Garza

4 **Description of the nature and extent of each employment or other business relationship and each family relationship**

BREADSMITH
4105 N. 10th, McAllen, TX

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 06/16/2020 Description of Gift (10) Loaves of Bread

Date Gift Accepted _____ Description of Gift _____

Date Gift Accepted _____ Description of Gift _____

(Given to police employees.)

(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.

MARIA M GUZMAN
Notary Public
STATE OF TEXAS
Notary ID# 385152-1
My Comm. Exp. 01-10-2024

Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said **Victor Rodriguez**, this the **16th** day of **June**, **2020**, 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
Maria M. Guzman	**Maria M. Guzman**	**Notary Public / Administrative Assistant**

CONFLICT DISCLOSURE STATEMENTS (CIS FORMS)
July 2020

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

City Secretary's Office
Received
Date 7/16/2020

1 **Name of Local Government Officer**

Yvette Barrera

2 **Office Held**

City Engineer

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

SpawGlass

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

Contractors

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 7/2/2020 Description of Gift 4th of July Goodie Bucket -

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.

VERONICA SANCHEZ
Notary Public
STATE OF TEXAS
Notary ID# 781744-6
My Comm. Exp. 07-15-2021

Signature of Local Government Officer

Sworn to and subscribed before me, by the said Yvette Barrera, this the 2nd day of July, 20 20, to certify which, witness my hand and seal of office.

Veronica Sanchez — Veronica Sanchez — 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

(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

My Secretary's Office
Received
Date 7/30/20

1 **Name of Local Government Officer**

Yvette Barrera

2 **Office Held**

City Engineer

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

Priscilla Mireles

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

Resident of Meadow Ridge

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 7/30/2020 Description of Gift Starbucks gift cards $25 & $10- distributed with staff

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.

VERONICA SANCHEZ
Notary Public
STATE OF TEXAS
Notary ID# 781744-6
My Comm. Exp. 07-15-2021

AFFIX NOTARY STAMP / SEAL ABOVE

Signature of Local Government Officer

Sworn to and subscribed before me, by the said Yvette Barrera, this the 30th day of July, 20 20, to certify which, witness my hand and seal of office.

Veronica Sanchez — Signature of officer administering oath

Veronica Sanchez — Printed name of officer administering oath

Notary Public — Title of officer administering oath

CONFLICT DISCLOSURE STATEMENTS (CIS FORMS)
September 2020

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

City Secretary's Office
Received
Date 9-2-2020

1 Name of Local Government Officer

Marcello Langoni, Center Manager

2 Office Held

McAllen Parks & Recreation - Palmview Community Center

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

Kendra Scott

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

Quarantine Queen - prizes for the winners

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 8/17/20 Description of Gift (4) Leanor Gold Pendants, $70 each

Date Gift Accepted _____ Description of Gift _____

Date Gift Accepted _____ Description of Gift _____

(attach additional forms as necessary)

6 AFFIDAVIT

MARY ANN JUAREZ
Notary Public, State of Texas
Expires 04/17/2023
I.D.# 12429211-2

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

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said MARCELLO LANGONI, this the 8/18/2020 day of August, 20 20, to certify which, witness my hand and seal of office.

Mary Ann Juarez — Mary Ann Juarez — Accounting Supervisor

Signature of officer administering oath — Printed name of officer administering oath — Title of officer administering oath

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

9/29/2020

1 **Name of Local Government Officer**

Archie Morales

2 **Office Held**

Assistant IT Director

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

Turn-Key Mobile, Inc.

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

Vendor was one of the sponsors during the TAGITM Virtual Conference.

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 09/29/20 Description of Gift $25 Amazon Gift Card

Date Gift Accepted 09/29/20 Description of Gift Baseball Cap (est. value $15)

Date Gift Accepted _____ Description of Gift _____

(attach additional forms as necessary)

6 **AFFIDAVIT**

DIANA M SILVA
Notary Public, State of Texas
ID# 12845221-7
My Commission Expires
11-22-2022

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

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Archie Morales, this the 29th day of September, 20 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
Diana M. Silva	Diana M. Silva	Notary

CONFLICT DISCLOSURE STATEMENTS (CIS FORMS)
October 2020

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

Oct. 30, 2020

1 **Name of Local Government Officer**

JAMES Schultz

2 **Office Held**

FIRE CHIEF

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

VERONICA ONTIVEROS - MED CARE EMS

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

CURRENT VENDOR FOR CITY 911 EMS SERVICE PROVIDER

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 10-30-20 Description of Gift GIFT BASKET

Date Gift Accepted _____ Description of Gift _____

Date Gift Accepted _____ Description of Gift _____

(attach additional forms as necessary)

6 **AFFIDAVIT**

NOTARY PUBLIC
Perla E Lara
Notary ID# 4802155
My Comm. Exp. 07-12-2024
STATE OF TEXAS

AFFIX NOTARY STAMP / SEAL ABOVE

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 James Schultz, this the 30 day of Oct., 2020, to certify which, witness my hand and seal of office.

Perla E. Lara — Perla E. Lara — Notary

Signature of officer administering oath | Printed name of officer administering oath | Title of officer administering oath

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

Oct. 30 - 2020

1 **Name of Local Government Officer**

JAMES Schultz

2 **Office Held**

FIRE CHIEF

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

KENNY PONCE- HIDALGO COUNTY EMS

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

VENDOR HAS BID ON CITY EMS CONTRACT IN PAST

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 10-30-20 Description of Gift EDIBLE FRUIT BASKET

Date Gift Accepted _____ Description of Gift _____

Date Gift Accepted _____ Description of Gift _____

(attach additional forms as necessary)

6 **AFFIDAVIT**

NOTARY PUBLIC STATE OF TEXAS Perla E Lara Notary ID# 480215-5 My Comm. Exp. 07-12-2024

AFFIX NOTARY STAMP / SEAL ABOVE

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 James Shultz, this the 30 day of Octobe, 20 20, to certify which, witness my hand and seal of office.

Perla E. Lara	Perla E. Lara	Notary
Signature of officer administering oath	Printed name of officer administering oath	Title of officer administering oath

CONFLICT DISCLOSURE STATEMENTS (CIS FORMS)
November 2020

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

City Secretary's Office
Received
Date 11/10/20

1 **Name of Local Government Officer**

Captain Hector Bennett

2 **Office Held**

Assistant Fire Marshal

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

Home Depot

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

NONE

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 11/4/20 Description of Gift 10 Texas Flags and Hardware for 7 fire stations

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.

MARIA IMELDA CANTU
Notary ID #11644447
My Commission Expires
October 11, 2021

Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Hector Bennett, this the 5th day of November, 2020, to certify which, witness my hand and seal of office.

Maria Imelda Cantu Maria Imelda Cantu Notary

Signature of officer administering oath | Printed name of officer administering oath | Title of officer administering oath

CONFLICT DISCLOSURE STATEMENTS (CIS FORMS)
December 2020

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

City Secretary's Office
Received
12/1/2020

1 Name of Local Government Officer

Yvette M. Balderas

2 Office Held

Director of Grant Administration

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

Communtiy HOPE Medical Center

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

Subrecipient

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 11/19/20 Description of Gift cheese and fruit platter

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.

DIANA M SILVA
Notary Public, State of Texas
ID# 12845221-7
My Commission Expires
11-22-2022

Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Yvette Balderas, this the 1st day of December, 20 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
Diana M. Silva	Diana M. Silva	Notary

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

12/11/20

1 Name of Local Government Officer

JIM DARLING

2 Office Held

MAYOR

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

Gonzalez Castillo Moya, LLP

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

Attorneys at Law

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 12/09/20 Description of Gift ice cream (shared with staff)

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.

NOTARY PUBLIC STATE OF TEXAS
ALICIA J. JOHNSON
Notary Public
STATE OF TEXAS
Notary ID# 12941430-1
My Comm. Exp. 05-06-2021

AFFIX NOTARY STAMP / SEAL ABOVE

James E Darling

Signature of Local Government Officer

Sworn to and subscribed before me, by the said JIM DARLING, this the 11th day of December 20 20, to certify which, witness my hand and seal of office.

Alicia Johnson — ALICIA JOHNSON — EX. ASSISTANT

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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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

12/11/20

1 **Name of Local Government Officer**

JIM DARLING

2 **Office Held**

MAYOR

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

ReSolved Energy Consulting

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

Consultants

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 12/03/20 Description of Gift box of popcorn 20 bags (shared with staff)

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.

ALICIA J. JOHNSON
Notary Public
STATE OF TEXAS
Notary ID# 12941430-1
My Comm. Exp. 05-06-2021

AFFIX NOTARY STAMP / SEAL ABOVE

James E Darling

Signature of Local Government Officer

Sworn to and subscribed before me, by the said JIM DARLING, this the 11th day of December, 2020, to certify which, witness my hand and seal of office.

Alicia Johnson — ALICIA JOHNSON — EX. ASSISTANT

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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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

12/11/2020

1 **Name of Local Government Officer**

JIM DARLING

2 **Office Held**

MAYOR

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

Goode Company Hall of Fame

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

vendor

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 11/30/20 Description of Gift pecan pie

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.

NOTARY PUBLIC STATE OF TEXAS
ALICIA J. JOHNSON
Notary Public
STATE OF TEXAS
Notary ID# 12941430-1
My Comm. Exp. 05-06-2021

AFFIX NOTARY STAMP / SEAL ABOVE

Jim E Darling

Signature of Local Government Officer

Sworn to and subscribed before me, by the said JIM DARLING, this the 11th day of December, 2020, to certify which, witness my hand and seal of office.

Alicia Johnson — ALICIA JOHNSON — EX. ASSISTANT

Signature of officer administering oath | Printed name of officer administering oath | Title of officer administering oath

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

City Secretary's Office
Received
Date 12/14/20

1 Name of Local Government Officer

Kevin D. Pagan

2 Office Held

City Attorney

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

Lloyd Gosselink

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

Outside Counsel

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 12/14/20 Description of Gift Brazos Bottom Pecan Pie in Wooden Box

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.

ALMA VILLARREAL
Notary Public
STATE OF TEXAS
Notary ID# 12474934-4
My Comm. Exp. 11-17-2023

AFFIX NOTARY STAMP / SEAL ABOVE

Signature of Local Government Officer

Sworn to and subscribed before me, by the said Kevin D. Pagan, this the 14th day of December, 20 20, to certify which, witness my hand and seal of office.

Alma Villarreal — Signature of officer administering oath

Alma Villarreal — Printed name of officer administering oath

Paralegal/Notary Public — Title of officer administering oath

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

Sent to - Office

Date 12/15/20

1 Name of Local Government Officer

Jim Darling

2 Office Held

Mayor

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

TWG Archhitects

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

consultants

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 12/14/20 Description of Gift bottle of wine

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.

ALICIA J. JOHNSON
Notary Public
STATE OF TEXAS
Notary ID# 12941430-1
My Comm. Exp. 05-06-2021

AFFIX NOTARY STAMP / SEAL ABOVE

Signature of Local Government Officer

Sworn to and subscribed before me, by the said Jim Darling, this the 14th day of December, 20 20, to certify which, witness my hand and seal of office.

Alicia Johnson — Ex. Assistant

Signature of officer administering oath | Printed name of officer administering oath | Title of officer administering oath

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

City Secretary's Office
Received
Date 12/15/20

1 **Name of Local Government Officer**

Victor Seby Haddad

2 **Office Held**

Commissioner

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

TWG Archhitects

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

consultants

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 12/14/20 Description of Gift pound cake / fruit cake

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.

NOTARY PUBLIC STATE OF TEXAS
ALICIA J. JOHNSON
Notary Public
STATE OF TEXAS
Notary ID# 12941430-1
My Comm. Exp. 05-06-2021

V Haddad
Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Victor Seby Haddad, this the 14th day of December, 20 20, to certify which, witness my hand and seal of office.

Alicia Johnson — Ex. Assistant

Signature of officer administering oath | Printed name of officer administering oath | Title of officer administering oath

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

City Secretary's Office
Received
Date 12/17/20

1 **Name of Local Government Officer**

JIM DARLING

2 **Office Held**

MAYOR

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

THE RHODES FAMILY

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

DEVELOPERS

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 12/16/20 Description of Gift COFFEE CAKE

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.

ALICIA J. JOHNSON
Notary Public
STATE OF TEXAS
Notary ID# 12941430-1
My Comm. Exp. 05-06-2021

AFFIX NOTARY STAMP / SEAL ABOVE

Signature of Local Government Officer

Sworn to and subscribed before me, by the said JIM DARLING, this the 16TH day of DECEMBER, 20 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
	ALICIA JOHNSON	EX. ASSISTANT

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

City Secretary's Office
Received
Date 12/17/20

1 **Name of Local Government Officer**

JIM DARLING

2 **Office Held**

MAYOR

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

UTRGV GOVERNMENT VERONICA GONZALEZ & STAFF

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

UNIVERSITY

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 12/16/20 Description of Gift FRUIT

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.

ALICIA J. JOHNSON
Notary Public
STATE OF TEXAS
Notary ID# 12941430-1
My Comm. Exp. 05-06-2021

AFFIX NOTARY STAMP / SEAL ABOVE

Signature of Local Government Officer

Sworn to and subscribed before me, by the said JIM DARLING, this the 16TH day of DECEMBER, 20 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
	ALICIA JOHNSON	EX. ASSISTANT

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. 1491, 80th 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

12/18/23 Date

City Secretary's Office received

1 **Name of Local Government Officer**

Kevin D.Pagan

2 **Office Held**

City Attorney

3 **Name of person described by Sections 176.002(a) and 176.003(a), Local Government Code**

Twenhafel Law, PLLC

4 **Description of the nature and extent of employment or other business relationship with person named in item 3**

Outside Counsel

5 **List gifts accepted by the local government officer and any family member, excluding gifts described by Section 176.003(a-1), if aggregate value of the gifts accepted from person named in item 3 exceed $250 during the 12-month period described by Section 176.003(a)(2)(B)**

Date Gift Accepted 12/17/20 Description of Gift Capadona Ranch Chilli Piquin Mesquite Bean Jelly

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 a 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), Local Government Code.

ALMA VILLARREAL
Notary Public
STATE OF TEXAS
Notary ID# 12474934-4
My Comm. Exp. 11-17-2023

AFFIX NOTARY STAMP / SEAL ABOVE

Signature of Local Government Officer

Sworn to and subscribed before me, by the said Kevin D. Pagan, this the 17th day of December, 20 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
Alma Villarreal	Alma Villarreal	Notary Public

Adopted 06/29/2007

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

City Secretary's Office
Received
Date 12/22/20

1 Name of Local Government Officer

Jim Darling

2 Office Held

Mayor

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

Schneider Electric

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

Consultans

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 12/18/20 Description of Gift cookies in a tin

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.

ALICIA J. JOHNSON
Notary Public
STATE OF TEXAS
Notary ID# 12941430-1
My Comm. Exp. 05-06-2021

Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Jim Darling, this the 18th day of December, 20 20, to certify which, witness my hand and seal of office.

Alicia Johnson — Ex. Administrator

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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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

City Secretary's Office
Received
Date 12/22/20

1 **Name of Local Government Officer**

Cesar Noe Rodriguez

2 **Office Held**

Assistant Director Health & Code Enforcement

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

Habitat Developers, LLC. - Investor (previous) Imagine Tomorrow customer

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

Investor with Project Imagine Tomorrow - Rehab Condemned Homes.

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 12/21/2020 Description of Gift 8-Starbucks Gift Cups - $80.00

Date Gift Accepted _____ Description of Gift _____

Date Gift Accepted _____ Description of Gift _____

(attach additional forms as necessary)

6 **AFFIDAVIT**

NOTARY PUBLIC
Cindy Gonzalez
Notary ID#
13086724-9
My Comm. Exp.
10-18-2024
STATE OF TEXAS

AFFIX NOTARY STAMP / SEAL ABOVE

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] 12/21/2020
Signature of Local Government Officer

Sworn to and subscribed before me, by the said Cesar Noe Rodriguez, this the 21 day of December, 20 20, to certify which, witness my hand and seal of office.

[signature]	Cindy Gonzalez	Notary
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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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

City Secretary's Office
Received
Date 12/22/19

1 **Name of Local Government Officer**

Jessica Cerezos

2 **Office Held**

Admenstrative Depervisor

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

Miguel Martinez

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

Citizen

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 12/23/19 Description of Gift Basket of fruit

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.

CLAUDIA R MARISCAL
Notary Public
STATE OF TEXAS
Notary ID# 12555784-1
My Comm. Exp. 03-04-2023

AFFIX NOTARY STAMP / SEAL ABOVE

Signature of Local Government Officer

Sworn to and subscribed before me, by the said _____, this the 23rd day of December, 20 19, to certify which witness my hand and seal of office.

Claudia R. Mariscal — Signature of officer administering oath

CLAUDIA R MARISCAL — Printed name of officer administering oath

Administrative Secretary — Title of officer administering oath

LOCAL GOVERNMENT OFFICER CONFLICTS DISCLOSURE STATEMENT

FORM CIS

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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
City Secretary's Office
Received
Date 12/22/20

1 **Name of Local Government Officer**

Jessica Cuevas

2 **Office Held**

Administrative Supervisor

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

Cantu Construction

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

Cantu Construction Company

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 12/23/19 Description of Gift 12 dozen of tamales

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.

CLAUDIA R MARISCAL
Notary Public
STATE OF TEXAS
Notary ID# 12555784-1
My Comm. Exp. 03-04-2023

AFFIX NOTARY STAMP / SEAL ABOVE

Signature of Local Government Officer

Sworn to and subscribed before me, by the said _____, this the 23rd day of December, 20 19, to certify which, witness my hand and seal of office.

Claudia R. Mariscal CLAUDIA R MARISCAL Administrative Secretary

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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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

City Secretary's Office Received 12/22/19

1 **Name of Local Government Officer**

Jessica Canazer

2 **Office Held**

Administrative Supervisor

Date

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

Melden and Hunt

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

Engineering Company

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 12/23/19 Description of Gift Tray of Cookies

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.

CLAUDIA R MARISCAL
Notary Public
STATE OF TEXAS
Notary ID# 12555784-1
My Comm. Exp. 03-04-2023

AFFIX NOTARY STAMP / SEAL ABOVE

Signature of Local Government Officer

Sworn to and subscribed before me, by the said _____, this the 23rd day of December, 20 19, to certify which, witness my hand and seal of office.

Claudia R Mariscal — Signature of officer administering oath

CLAUDIA R MARISCAL — Printed name of officer administering oath

Administrative Secretary — Title of officer administering oath

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

City Secretary's Office Received Date 12/22/20

1 **Name of Local Government Officer**

Jessica Cuevas

2 **Office Held**

Administrative Supervisor

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

Sancha Garza

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

gateway printing

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 7/10/20 Description of Gift 2-notepads 2-pens 4-Candles

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.

CLAUDIA R MARISCAL
Notary Public
STATE OF TEXAS
Notary ID# 12555784-1
My Comm. Exp. 03-04-2023

Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said _____, this the 7 day of July, 20 20, to certify which, witness my hand and seal of office.

Claudia R Mariscal — Claudia R Mariscal — 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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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

City Secretary's Office Received Date 12/22/20

1 **Name of Local Government Officer**

Carlos Garza

2 **Office Held**

Planner I

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

Customer

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

Custome applying for Abn

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 7-6-20 Description of Gift Gem X - face mask

Date Gift Accepted _____ Description of Gift _____

Date Gift Accepted _____ Description of Gift _____

(attach additional forms as necessary)

6 **AFFIDAVIT**

CLAUDIA R MARISCAL
Notary Public
STATE OF TEXAS
Notary ID# 12555784-1
My Comm. Exp. 03-04-2023

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

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said _____, this the 7th day of July, 20 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
Claudia R. Mariscal	Claudia R Mariscal	Notary Public

LOCAL GOVERNMENT OFFICER CONFLICTS DISCLOSURE STATEMENT

FORM CIS

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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

City Secretary's Office
Received
Date 12/22/20

1 **Name of Local Government Officer**

Rodrigo Sanchez

2 **Office Held**

Senior Planner

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

Casa del Taco

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

Casa del Taco

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 3/10/20 Description of Gift Paid lunch

Date Gift Accepted _____ Description of Gift _____

Date Gift Accepted _____ Description of Gift _____

(attach additional forms as necessary)

6 **AFFIDAVIT**

CLAUDIA R MARISCAL
Notary Public
STATE OF TEXAS
Notary ID# 12555784-1
My Comm. Exp. 03-04-2023

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.

Rodrigo Sanchez
Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Rodrigo Sanchez, this the 12th day of March, 2020, to certify which, witness my hand and seal of office.

Claudia R Mariscal — CLAUDIA R MARISCAL

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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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

City Secretary's Office
Received
12/22/20

1 **Name of Local Government Officer**

Jose Humberto de la Garza

2 **Office Held**

Planner III

Date

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

Sandra Prado

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

La Quinta Used Auto Part & Auto Sales

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 3/16/20 Description of Gift Flashlight

Date Gift Accepted 3-16-20 Description of Gift Tumbler

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.

NOTARY PUBLIC STATE OF TEXAS
NIKKI MARIE CAVAZOS
Notary Public
STATE OF TEXAS
Notary ID# 13133069-2
My Comm. Exp. 10-26-2021

AFFIX NOTARY STAMP / SEAL ABOVE

Signature of Local Government Officer

Sworn to and subscribed before me, by the said _____, this the 16 day of March, 20 20, to certify which, witness my hand and seal of office.

Nikki Marie Cavazos Nikki Marie Cavazos secretary

Signature of officer administering oath | Printed name of officer administering oath | Title of officer administering oath

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

City Secretary's Office Received 12/22/23

1 **Name of Local Government Officer**

Carmen White

Date

2 **Office Held**

Secretary

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

The Butterfly (Sylvia Hinojosa)

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

The Butterfly

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 12/17/2020 Description of Gift pan de polvo and wedding cookies

Date Gift Accepted _____ Description of Gift _____

Date Gift Accepted _____ Description of Gift _____

(attach additional forms as necessary)

6 **AFFIDAVIT**

CLAUDIA R MARISCAL
Notary Public
STATE OF TEXAS
Notary ID# 12555784-1
My Comm. Exp. 03-04-2023

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.

Carmen White

Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Carmen White, this the 18th day of December, 20 20, to certify which, witness my hand and seal of office.

Claudia R. Mariscal — Claudia R. Mariscal — Administrative Secretary

Signature of officer administering oath | Printed name of officer administering oath | Title of officer administering oath

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

7/24/20 JC

1 Name of Local Government Officer

Planning Department

2 Office Held

Friday Review Meeting - Staff

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

Michael Tamez

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

Mad House Development Group.

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 7/24/20 Description of Gift Box of Kolaches

Date Gift Accepted 7/24/20 Description of Gift Box of Donuts

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.

CLAUDIA R MARISCAL
Notary Public
STATE OF TEXAS
Notary ID# 12555784-1
My Comm. Exp. 03-04-2023

Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said _____, this the 24 day of July, 20 20, to certify which, witness my hand and seal of office.

Claudia R Mariscal | Claudia R Mariscal | Notary

Signature of officer administering oath | Printed name of officer administering oath | Title of officer administering oath

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. City

OFFICE USE ONLY

Date Received
Secretary's Office
Received
Date 12/29/2020

1 Name of Local Government Officer

Yvette Barrera

2 Office Held

City Engineer

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

Schneider Electric

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

1 box of Christmas cookies and a Holiday Card

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 12-18-20 Description of Gift 1 box of Christmas cookies and a Holiday Card

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.

VERONICA SANCHEZ
Notary Public
STATE OF TEXAS
Notary ID# 781744-6
My Comm. Exp. 07-15-2021

AFFIX NOTARY STAMP / SEAL ABOVE

Signature of Local Government Officer

Sworn to and subscribed before me, by the said Yvette Barrera, this the 18th day of December, 20 20, to certify which, witness my hand and seal of office.

Veronica Sanchez — Veronica Sanchez — Adm. Supervisor

Signature of officer administering oath | Printed name of officer administering oath | Title of officer administering oath

CONFLICT DISCLOSURE STATEMENTS (CIS FORMS)
JANUARY 2021

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. City

OFFICE USE ONLY

Date Received
Secretary's Office
Received
Date 1/6/2021

1 Name of Local Government Officer

Bilkis Olazaran

2 Office Held

Development Engineer

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

Antun Domit

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

Developer

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 01/04/2021 Description of Gift 6 mini gift boxes with different pastries. (Distributed to Staff)

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.

VERONICA SANCHEZ
Notary Public
STATE OF TEXAS
Notary ID# 781744-6
My Comm. Exp. 07-15-2021
AFFIX NOTARY STAMP / SEAL ABOVE

Signature of Local Government Officer

Sworn to and subscribed before me, by the said Bilkis Olazaran, this the 4th day of January, 20 21, to certify which, witness my hand and seal of office.

Veronica Sanchez — Veronica Sanchez — Notary Public

Signature of officer administering oath — Printed name of officer administering oath — Title of officer administering oath

CONFLICT DISCLOSURE STATEMENTS (CIS FORMS)
FEBRUARY 2021

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

City Secretary's Office Received Date 2/22/21

1 **Name of Local Government Officer**

Lt. Paulo Herrera, JR

2 **Office Held**

Fire Prevention / Public Education

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

JAC's Fire Protection, LLC

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

- No Relationship with vendor / Local Vendor Clearing out his shop
- Extinguishers to be used for training ~~purposes~~ purposes only

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 2-17-21 Description of Gift Used / Unserviceable Fire Extinguishers

Date Gift Accepted _____ Description of Gift _____

Date Gift Accepted _____ Description of Gift _____

(attach additional forms as necessary)

6 **AFFIDAVIT**

MARIA IMELDA CANTU
Notary ID #11644447
My Commission Expires
October 11, 2021

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

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Paulo Herrera Jr., this the 17th day of February, 2021, to certify which, witness my hand and seal of office.

Maria Imelda Cantu — Maria Imelda Cantu — Notary

Signature of officer administering oath — Printed name of officer administering oath — Title of officer administering oath

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

City Secretary's Office Received Date 2/25/21

1 Name of Local Government Officer

Kristyna M Mancias, Center Manager

2 Office Held

McAllen Parks & Recreation - Las Palmas Community Center

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

United Healthcare

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

Senior programs - Valentine's Day event

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 2/12/21 Description of Gift 27 Dz. cupcakes ($188.00)

Date Gift Accepted 2/12/21 Description of Gift Valentine's Day backdrop ($18.99)

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.

MARY ANN JUAREZ
Notary Public, State of Texas
Expires 04/17/2023
I.D.# 12429211-2

Kristyna Mancias
Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Kristyna Mancias, this the 22nd day of February, 20 21, to certify which, witness my hand and seal of office.

Mary Ann Juarez — Mary Ann Juarez — Accounting Supervisor

Signature of officer administering oath — Printed name of officer administering oath — Title of officer administering oath

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

City Secretary's Office Received Date 4/25/21

1 **Name of Local Government Officer**

Kristyna M Mancias, Center Manager

2 **Office Held**

McAllen Parks & Recreation - Las Palmas Community Center

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

Amistad

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

Senior programs - arts & craft and special event

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 2/11/21 Description of Gift party favors, flower arrangements, center pieces,

Date Gift Accepted _____ Description of Gift floral products, ribbons,etc. ($2,300.00)

Date Gift Accepted _____ Description of Gift _____

(attach additional forms as necessary)

6 **AFFIDAVIT**

MARY ANN JUAREZ
Notary Public, State of Texas
Expires 04/17/2023
I.D.# 12429211-2

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.

Kristyna Mancias
Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Kristyna Mancias, this the 22nd day of February, 20 21, to certify which, witness my hand and seal of office.

Mary Ann Juarez — Mary Ann Juarez — Accounting Supervisor

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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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

City Secretary's Office
Received
Date 2/25/21

1 Name of Local Government Officer

Kristyna M Mancias, Center Manager

2 Office Held

McAllen Parks & Recreation - Las Palmas Community Center

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

Area Agency

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

Senior programs

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 12/15/20 Description of Gift Mask ($1,036.80)

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.

MARY ANN JUAREZ
Notary Public, State of Texas
Expires 04/17/2023
I.D.# 12429211-2

Kristy Mancias
Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Kristyna Mancias, this the 22nd day of February, 20 21, to certify which, witness my hand and seal of office.

Mary Ann Juarez — Mary Ann Juarez — Accounting Supervisor

Signature of officer administering oath | Printed name of officer administering oath | Title of officer administering oath

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

2/24/21

1 **Name of Local Government Officer**

Yvette Barrera

2 **Office Held**

City Engineer

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

Jacinto Garza

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

L&G Engineering

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 2/8/2021 Description of Gift A box of grapefruit and avocados (distributed to staff)

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.

GABRIELA CANTU
Notary Public
STATE OF TEXAS
Notary ID# 13133076-3
My Comm. Exp. 10-26-2021

Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Yvette Barrera, this the 8th day of February, 20 21, to certify which, witness my hand and seal of office.

gcantu Gabriela Cantu Secretary

Signature of officer administering oath | Printed name of officer administering oath | Title of officer administering oath

CONFLICT DISCLOSURE STATEMENTS (CIS FORMS)

May 2021

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

City Secretary's Office
Received
Date 5/3/21

1 Name of Local Government Officer

Yvette Barrera

2 Office Held

City Engineer

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

Madhouse Developers

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

Developer

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 04/29/2021 Description of Gift De Alba Bakery- Sweet Bread Box-Distributed to staff.

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.

VERONICA SANCHEZ
Notary Public
STATE OF TEXAS
Notary ID# 781744-6
My Comm. Exp. 07-15-2021

AFFIX NOTARY STAMP / SEAL ABOVE

Signature of Local Government Officer

Sworn to and subscribed before me, by the said Yvette Barrera, this the 29th day of April, 2021, to certify which, witness my hand and seal of office.

Veronica Sanchez — Veronica Sanchez — Administrative Assistant

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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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

Date 5/20/21

1 **Name of Local Government Officer**

Jason Shelton

2 **Office Held**

Systems Manager

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

Arctic Wolf

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

Vendor

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 5/20/21 Description of Gift Donuts

Date Gift Accepted 5/20/21 Description of Gift Tumblers, Water bottle

Date Gift Accepted _____ Description of Gift _____

(attach additional forms as necessary)

6 AFFIDAVIT

NOTARY PUBLIC
Cindy Gonzalez
Notary ID# 13086724-9
My Comm. Exp. 10-18-2024
STATE OF TEXAS

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

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Jason Shelton, this the 21 day of May, 20 21, 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
	Cindy Gonzalez	Notary

LOCAL GOVERNMENT OFFICER CONFLICTS DISCLOSURE STATEMENT

FORM CIS

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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

5-20-21

1 **Name of Local Government Officer**

Jason Shelton

2 **Office Held**

Systems Manager

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

Free IT Data Solutions

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

Vendor / Integrator

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 5/20/21 Description of Gift Lunch

Date Gift Accepted _____ Description of Gift _____

Date Gift Accepted _____ Description of Gift _____

(attach additional forms as necessary)

6 **AFFIDAVIT**

NOTARY PUBLIC
Cindy Gonzalez
Notary ID# 13086724-9
My Comm. Exp. 10-18-2024
STATE OF TEXAS

AFFIX NOTARY STAMP / SEAL ABOVE

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 Jason Shelton, this the May day of 21, 20 21, 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
	Cindy Gonzalez	Notary

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

City Secretary's Office
Received
Date 5/20/21

1 Name of Local Government Officer

Ricardo Mendoza

2 Office Held

Information Technology Department - Information Security Officer

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

Arctic Wolf

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

Information Technology - New Vendor Meeting - No relation

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 5/20/2021 Description of Gift Deck of Cards, Water Bottle, Can Cooler, Black Cup

Date Gift Accepted _____ Description of Gift _____

Date Gift Accepted _____ Description of Gift _____

(attach additional forms as necessary)

6 AFFIDAVIT

NOTARY PUBLIC
Cindy Gonzalez
Notary ID# 13086724-9
My Comm. Exp. 10-18-2024
STATE OF TEXAS

AFFIX NOTARY STAMP / SEAL ABOVE

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 Ricardo Mendoza, this the 21 day of May, 20 21, 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
	Cindy Gonzalez	Notary

CONFLICT DISCLOSURE STATEMENTS (CIS FORMS)

June 2021

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

City Secretary's Office
Received
Date 7/1/21

1 **Name of Local Government Officer**

Victor Rodriguez for McAllen Police Department

2 **Office Held**

Chief of Police

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

SYMBOL ARTS

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

Marketing Department, Ogden Utah

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 06/2021 Description of Gift (150) Blue Line Flag Lapel Pins

Date Gift Accepted _____ Description of Gift _____

Date Gift Accepted _____ Description of Gift _____

(To be raffled off to Police Officers at Command Staff Roll Call Training.)

(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.

MARIA M GUZMAN
Notary Public
STATE OF TEXAS
Notary ID# 385152-1
My Comm. Exp. 01-10-2024

Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said **Victor Rodriguez**, this the **29th** day of **June**, 20**21**, to certify which, witness my hand and seal of office.

Maria M. Guzman — **Maria M. Guzman** — **Notary Public / Administrative**

Signature of officer administering oath | Printed name of officer administering oath | Title of officer administering oath

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

City Secretary's Office
Received
Date 7/1/21

1 **Name of Local Government Officer**

Victor Rodriguez for McAllen Police Department

2 **Office Held**

Chief of Police

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

McAllen Emergency Room

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

Management Staff, 6700 N. 10th St., McAllen

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 06/2021 Description of Gift (4) Tote Bags with Small First Aid Kit, Coozie, Notebook pad, Writing Pad), Stress ball

Date Gift Accepted _____ Description of Gift _____

Date Gift Accepted _____ Description of Gift _____

(To be raffled off to Police Officers at Command Staff Roll Call Training.)

(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.

MARIA M GUZMAN
Notary Public
STATE OF TEXAS
Notary ID# 385152-1
My Comm. Exp. 01-10-2024

_____
Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said **Victor Rodriguez**, this the **29th** day of **June**, 20**21**, to certify which, witness my hand and seal of office.

Maria M Guzman	**Maria M. Guzman**	**Notary Public / Administrative**
Signature of officer administering oath	Printed name of officer administering oath	Title of officer administering oath

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

City Secretary's Office
Received
Date 7-1-21

1 Name of Local Government Officer

Victor Rodriguez for McAllen Police Department

2 Office Held

Chief of Police

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

ULINE Shipping Supply Specialists

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

Vendor Company, Chicago, Illinois

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 06/2021 Description of Gift (2) Weber BBQ Tool Sets, (1) Charm-Tex T-Shirt, (1) Coleman Grocery Getter Insulated Bag, (1) Synergy Pro Laptop Backpack, (4) Backpacks, (2) Mobil Desk Organizers, (1) Rollling Cooler, (1) Camping Chair, (1) Utility Wagon

(To be raffled off to Police Officers at Command Staff Roll Call Training.)

(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.

MARIA M GUZMAN
Notary Public
STATE OF TEXAS
Notary ID# 385152-1
My Comm. Exp. 01-10-2024

Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said **Victor Rodriguez**, this the **29th** day of **June**, 20**21**, to certify which, witness my hand and seal of office.

Maria M. Guzman — **Maria M. Guzman** — **Notary Public / Administrative**

Signature of officer administering oath | Printed name of officer administering oath | Title of officer administering oath

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

7-7-2021

1 **Name of Local Government Officer**

Yvette Barrera

2 **Office Held**

City Engineer

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

Carolina Cadengo

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

SpawGlass

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 6/28/2021 Description of Gift 4th of July gift basket- raffled to staff

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.

VERONICA SANCHEZ
Notary Public
STATE OF TEXAS
Notary ID# 781744-6
My Comm. Exp. 07-15-2021

AFFIX NOTARY STAMP / SEAL ABOVE

Signature of Local Government Officer

Sworn to and subscribed before me, by the said Yvette Barrera, this the 28th day of June, 2021, 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
Veronica Sanchez	Veronica Sanchez	Notary Public

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

City Secretary's Office Received

Date 2-20-2021

1 Name of Local Government Officer

Yvette Barrera

2 Office Held

City Engineer

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

Jacinto Garza & L&G Engineering

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

Engineering Firm

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 07/13/2021 Description of Gift Texas Peaches Box- Distributed to staff

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.

VERONICA SANCHEZ
Notary Public
STATE OF TEXAS
Notary ID# 781744-6
My Comm. Exp. 07-15-2021

AFFIX NOTARY STAMP / SEAL ABOVE

Yvette Barrera
Signature of Local Government Officer

Sworn to and subscribed before me, by the said Yvette Barrera, this the 19th day of July, 20 21, to certify which, witness my hand and seal of office.

Veronica Sanchez — Veronica Sanchez — 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

(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

Received July 21, 2021

1 **Name of Local Government Officer**

Bilkis Olazaran

2 **Office Held**

Development Engineer

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

Raymundo Platas

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

Developer

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 7/26/21 Description of Gift Starbucks Drink

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.

GABRIELA CANTU
Notary Public
STATE OF TEXAS
Notary ID# 13133076-3
My Comm. Exp. 10-26-2021

Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Bilkis Olazaran, this the 26 day of July, 20 21, to certify which, witness my hand and seal of office.

gcantu — Gabriela Cantu — 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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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

City Secretary's Office
Received
Date 7/29/21

1 **Name of Local Government Officer**

Yvette Barrera

2 **Office Held**

Development Engineer

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

Raymundo Platas

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

Developer

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 7/26/21 Description of Gift Starbucks Drink

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.

GABRIELA CANTU
Notary Public
STATE OF TEXAS
Notary ID# 13133076-3
Comm. Exp. 10-26-2021

Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Yvette Barrera, this the 26 day of July, 20 21, to certify which, witness my hand and seal of office.

gcantu — Gabriela Cantu — 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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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

City Secretary's Office Received

Date 7-30-21

1 Name of Local Government Officer

Bilkis Martinez

2 Office Held

City Engineer

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

Raymundo Platas (Developer) with The Investment Tour

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

Starbucks Drink

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 7/29/21 Description of Gift (1) Starbucks Drink

Date Gift Accepted _____ Description of Gift _____

Date Gift Accepted _____ Description of Gift _____

(attach additional forms as necessary)

6 AFFIDAVIT

GABRIELA CANTU
Notary Public
STATE OF TEXAS
Notary ID# 13133076-3
My Comm. Exp. 10-26-2021

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

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Bilkis Martinez, this the 29 day of July, 20 21, to certify which, witness my hand and seal of office.

gcantu — Gabriela Cantu — 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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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

City Secretary's Office
Received
Date 7-30-21

1 **Name of Local Government Officer**

Yvette Barrera

2 **Office Held**

City Engineer

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

Raymundo Platas (Developer) with The Investment Tour

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

Starbucks Drink

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 7/29/21 Description of Gift (1) Starbucks Drink

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.

GABRIELA CANTU
Notary Public
STATE OF TEXAS
Notary ID# 13133076-3
My Comm. Exp. 10-26-2021

Yvette Barrera
Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Yvette Barrera, this the 29 day of July, 20 21, to certify which, witness my hand and seal of office.

gcantu — Gabriela Cantu — 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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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

City Secretary's Office Received Date 8/10/2021

1 **Name of Local Government Officer**

Bilkis Martinez

2 **Office Held**

Development City Engineer

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

Raymundo Platas (Developer) with The Investment Tour

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

Developer

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 8/9/21 Description of Gift (1) Starbucks drink

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.

GABRIELA CANTU
Notary Public
STATE OF TEXAS
Notary ID# 13133076-3
My Comm. Exp. 10-26-2021

Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Bilkis Martinez, this the 9th day of August, 20 21, to certify which, witness my hand and seal of office.

gcantu — Gabriela Cantu — 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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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

City Secretary's Office Received Date 8/11/21

1 **Name of Local Government Officer**

Bilkis Martinez

2 **Office Held**

Development Engineer

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

Raymundo Platas

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

Developer

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 8/10/2021 Description of Gift Architectural Book

Date Gift Accepted _____ Description of Gift _____

Date Gift Accepted _____ Description of Gift _____

(attach additional forms as necessary)

6 **AFFIDAVIT**

GABRIELA CANTU
Notary Public
STATE OF TEXAS
Notary ID# 13133076-3
My Comm. Exp. 10-26-2021

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

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Bilkis Martinez, this the 10th day of August, 20 21, 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
GCantu	Gabriela Cantu	Notary Public

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

City Secretary's Office Received Date 8/11/2021

1 Name of Local Government Officer

Natalie Manzanares

2 Office Held

CDBG-CV Program Coordinator

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

Anonymous

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

Anonymous Person left gift with City of McAllen Employee (Sarah Reyes)

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 08/06/21 Description of Gift necklace and earring set

Date Gift Accepted _____ Description of Gift _____

Date Gift Accepted _____ Description of Gift _____

(attach additional forms as necessary)

6 AFFIDAVIT

YESENIA RODRIGUEZ NOTARY PUBLIC STATE OF TEXAS NOTARY ID 12844189-4 03/17/2024

AFFIX NOTARY STAMP / SEAL ABOVE

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 Natalie Manzanares, this the 9th day of August, 20 21, 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
	Yesenia Rodriguez	Notary

LOCAL GOVERNMENT OFFICER CONFLICTS DISCLOSURE STATEMENT

FORM CIS

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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

City Secretary's Office
Received
Date 8-13-2021

1 **Name of Local Government Officer**

Mario Cruz

2 **Office Held**

Drainage Engineer

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

Heffner Design Team

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

Landscape Architect

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 8/13/2021 Description of Gift 25$ Starbucks gift card

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.

GABRIELA CANTU
Notary Public
STATE OF TEXAS
Notary ID# 13133076-3
My Comm. Exp. 10-26-2021

Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Mario Cruz, this the 13th day of August, 20 21, to certify which, witness my hand and seal of office.

gcantu — Gabriela Cantu — Notary Public

Signature of officer administering oath | Printed name of officer administering oath | Title of officer administering oath

CONFLICT DISCLOSURE STATEMENTS (CIS FORMS)

September 2021

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

City Secretary's Office
Received
Date 9/16/2021

1 **Name of Local Government Officer**

Victor Rodriguez for McAllen Police Department

2 **Office Held**

Chief of Police

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

Ms. Sylvia Sepulveda
RSVP Project Director

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

Ameri Corps
County of Hidalgo, Community Service Agency

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 09/15/21 Description of Gift (1) Gift Basket with snacks

Date Gift Accepted _____ Description of Gift _____

Date Gift Accepted _____ Description of Gift _____

(To be given off to Police Officers..)

(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.

MARIA M GUZMAN
Notary Public
STATE OF TEXAS
Notary ID# 385152-1
My Comm. Exp. 01-10-2024

_____
Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said **Victor Rodriguez**, this the **15th** day of **September**, 20**21**, to certify which, witness my hand and seal of office.

Maria M. Guzman — **Maria M. Guzman** — **Notary Public / Administrative Assistant**

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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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

City Secretary's Office
Received
Date 9/22/21

1 Name of Local Government Officer

Bilkis O. Martinez

2 Office Held

Engineering

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

Raymundo Plata

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

Sweet bread

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 09/20/2021 Description of Gift Sweet Bread

Date Gift Accepted _____ Description of Gift _____

Date Gift Accepted _____ Description of Gift _____

(attach additional forms as necessary)

6 AFFIDAVIT

GABRIELA CANTU
Notary Public
STATE OF TEXAS
Notary ID# 13133076-3
My Comm. Exp. 10-26-2021

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

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Bilkis O. Martinez, this the 20th day of Sept., 20 21, to certify which, witness my hand and seal of office.

Gcantu — Signature of officer administering oath
Gabriela Cantu — Printed name of officer administering oath
Adm. Clerk — Title of officer administering oath

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

City Secretary's Office

9/22/2021

1 **Name of Local Government Officer**

Yvette Barrera

2 **Office Held**

City Engineer

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

Raymundo Plata

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

Sweet Bread

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 09/20/2021 Description of Gift Sweet Bread

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.

GABRIELA CANTU
Notary Public
STATE OF TEXAS
Notary ID# 13133076-3
My Comm. Exp. 10-26-2021

Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Yvette Barrera, this the 20th day of Sept., 20 21, 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
gcantu	Gabriela Cantu	Adm. Clerk

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

City Secretary's Office
Received
Date 9/30/21

1 **Name of Local Government Officer**

Jason Shelton

2 **Office Held**

IT Systems Manager

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

HPE

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

Vendor

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 9/30/21 Description of Gift Breakfast Tacos

Date Gift Accepted _____ Description of Gift _____

Date Gift Accepted _____ Description of Gift _____

(attach additional forms as necessary)

6 AFFIDAVIT

NOTARY PUBLIC
Cindy Gonzalez
Notary ID#
13086724-9
My Comm. Exp.
10-18-2024
STATE OF TEXAS

AFFIX NOTARY STAMP / SEAL ABOVE

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 Jason Shelton, this the 30th day of September, 20 21, 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
	Cindy Gonzalez	Notary

CONFLICT DISCLOSURE STATEMENTS (CIS FORMS)

November 2021

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

City Secretary's Office
Received
Date 11/9/21

1 **Name of Local Government Officer**

Cecilia Vallejo, Las Palmas Community Center Supervisor

2 **Office Held**

McAllen Parks & Recreation - Las Palmas Community Center

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

Peter Piper Pizza

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

2021 Pumpkin Carving Event

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 10/23/21 Description of Gift 15 pizza vouchers, 100 ice cream voucher ($297.2 N

Date Gift Accepted _____ Description of Gift _____

Date Gift Accepted _____ Description of Gift _____

(attach additional forms as necessary)

6 **AFFIDAVIT**

MARY ANN JUAREZ
Notary Public, State of Texas
Expires 04/17/2023
I.D.# 12429211-2

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

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Cecilia Vallejo, this the 29th day of October, 20 21, to certify which, witness my hand and seal of office.

Mary Ann Juarez — Mary Ann Juarez — Accounting Supervisor

Signature of officer administering oath — Printed name of officer administering oath — Title of officer administering oath

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

City Secretary's Office
Received
Date 11/9/21

1 **Name of Local Government Officer**

Cecilia Vallejo, Las Palmas Community Center Supervisor

2 **Office Held**

McAllen Parks & Recreation - Las Palmas Community Center

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

HEB

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

2021 Pumpkin Carving Event

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 10/23/21 Description of Gift Gift card ($100.00)

Date Gift Accepted _____ Description of Gift _____

Date Gift Accepted _____ Description of Gift _____

(attach additional forms as necessary)

6 **AFFIDAVIT**

MARY ANN JUAREZ
Notary Public, State of Texas
Expires 04/17/2023
I.D.# 12429211-2

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

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Cecilia Vallejo, this the 29th day of October, 20 21, to certify which, witness my hand and seal of office.

Mary Ann Juarez — Mary Ann Juarez — Accounting Supervisor

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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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

City Secretary's Office Received Date 11-9-21

1 Name of Local Government Officer

Cecilia Vallejo, Las Palmas Community Center Supervisor

2 Office Held

McAllen Parks & Recreation - Las Palmas Community Center

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

Raising Canes

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

2021 Pumpkin Carving Event

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 10/22/21 Description of Gift 75 meals CV

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.

MARY ANN JUAREZ
Notary Public, State of Texas
Expires 04/17/2023
I.D.# 12429211-2

Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Cecilia Vallejo, this the 29th day of October, 2021, 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
Mary Ann Juarez	Mary Ann Juarez	Accounting Supervisor

LOCAL GOVERNMENT OFFICER CONFLICTS DISCLOSURE STATEMENT

FORM CIS

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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

City Secretary's Office Received

Date 11-9-21

1 **Name of Local Government Officer**

Cecilia Vallejo, Las Palmas Community Center Supervisor

2 **Office Held**

McAllen Parks & Recreation - Las Palmas Community Center

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

Sweet & Tasty Bakery

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

2021 Pumpkin Carving Event

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 10/23/21 Description of Gift 150 jumbo cupcakes ($450.00) cf

Date Gift Accepted _____ Description of Gift _____

Date Gift Accepted _____ Description of Gift _____

(attach additional forms as necessary)

6 **AFFIDAVIT**

MARY ANN JUAREZ
Notary Public, State of Texas
Expires 04/17/2023
I.D.# 12429211-2

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

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Cecilia Vallejo, this the 29th day of October, 20 21, 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
Mary Ann Juarez	Mary Ann Juarez	Accounting Supervisor

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

City Secretary's Office Received

Date 11-9-21

1 **Name of Local Government Officer**

Cecilia Vallejo, Las Palmas Community Center Supervisor

2 **Office Held**

McAllen Parks & Recreation - Las Palmas Community Center

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

Rocky Mountain Chocolate Factory

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

2021 Pumpkin Carving Event

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 10/23/21 Description of Gift 100 Candy apples and 3 gift basket ($469.35) of

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.

MARY ANN JUAREZ
Notary Public, State of Texas
Expires 04/17/2023
I.D.# 12429211-2

Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Cecilia Vallejo, this the 29th day of October, 20 21, to certify which, witness my hand and seal of office.

Mary Ann Juarez — Mary Ann Juarez — Accounting Supervisor

Signature of officer administering oath — Printed name of officer administering oath — Title of officer administering oath

CONFLICT DISCLOSURE STATEMENTS (CIS FORMS)

December 2021

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

City Secretary's Office
Received
Date 12/2/21

1 **Name of Local Government Officer**

Yvette M. Balderas

2 **Office Held**

Director of Grant Administration

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

Missy Alvarez (Chamber of Commerce)

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

Subrecipient

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 11/17/21 Description of Gift bundnt cake minis

Date Gift Accepted _____ Description of Gift _____

Date Gift Accepted _____ Description of Gift _____

(attach additional forms as necessary)

6 **AFFIDAVIT**

NOTARY PUBLIC
Cindy Gonzalez
Notary ID# 13086724-9
My Comm. Exp. 10-18-2024
STATE OF TEXAS

AFFIX NOTARY STAMP / SEAL ABOVE

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.

Yvette M. Balderas
Signature of Local Government Officer

Sworn to and subscribed before me, by the said Yvette M. Balderas, this the 2nd day of December, 20 22, 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
	Cindy Gonzalez	Notary

LOCAL GOVERNMENT OFFICER CONFLICTS DISCLOSURE STATEMENT

FORM CIS

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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

City Secretary's Office
Received
Date 12/6/21

1 **Name of Local Government Officer**

Yvette Barrera

2 **Office Held**

City Engineer

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

The Rhodes Family

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

(2) Coffee Cakes

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 12-03-2021 Description of Gift (2) Coffee Cakes

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.

GABRIELA CANTU
NOTARY PUBLIC
STATE OF TEXAS
MY COMM. EXP. 10/26/25
NOTARY ID 13133076-3

Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Yvette Barrera, this the 3 day of Dec., 20 21, to certify which, witness my hand and seal of office.

Gcantu — Gabriela Cantu — Admin Clerk

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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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

City Secretary's Office
Received
Date 12/17/2021

1 **Name of Local Government Officer**

YVETTE BARRERA

2 **Office Held**

CITY ENGINEER

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

JESSE SALINAS & TEDSI STAFF

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

DEVELOPER-TEDSI

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 12/17/2021 Description of Gift GIFT BOX - cheeses and meats tray

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.

GABRIELA CANTU
NOTARY PUBLIC
STATE OF TEXAS
MY COMM. EXP. 10/26/25
NOTARY ID 13133076-3

Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Yvette Barrera, this the 17th day of Dec, 20 21, to certify which, witness my hand and seal of office.

Signature of officer administering oath | Gabriela Cantu — Printed name of officer administering oath | Adm. Clerk — Title of officer administering oath

LOCAL GOVERNMENT OFFICER CONFLICTS DISCLOSURE STATEMENT

FORM CIS

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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

City Secretary's Office
Received
Date 12/17/2021

1 **Name of Local Government Officer**

YVETTE BARRERA

2 **Office Held**

CITY ENGINEER

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

MEGAMORPHOSIS INC.

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

DEVELOPER-MEGAMORPHOSIS INC.

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 12/16/2021 Description of Gift GIFT BOX - Cocoa Mix and candy pecans

Date Gift Accepted _____ Description of Gift _____

Date Gift Accepted _____ Description of Gift _____

(attach additional forms as necessary)

6 **AFFIDAVIT**

GABRIELA CANTU
NOTARY PUBLIC
STATE OF TEXAS
MY COMM. EXP. 10/26/25
NOTARY ID 13133076-3

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

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Yvette Barrera, this the 17th day of Dec, 20 21, to certify which, witness my hand and seal of office.

gcantu — Signature of officer administering oath

Gabriela Cantu — Printed name of officer administering oath

Asst. City Clerk — Title of officer administering oath

LOCAL GOVERNMENT OFFICER CONFLICTS DISCLOSURE STATEMENT

FORM CIS

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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

City Secretary's Office
Received
Date 12/17/2021

1 Name of Local Government Officer

JUAN MARTINEZ

2 Office Held

CONSTRUCTION MANAGER

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

RENE OLIVAREZ, P.E

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

Developer- RO ENGINEERING

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 12/16/2021 Description of Gift 4 GIFT BOXES WHAT WHERE RAFFLED

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.

GABRIELA CANTU
NOTARY PUBLIC
STATE OF TEXAS
MY COMM. EXP. 10/26/25
NOTARY ID 13133076-3

Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Juan Martinez, this the 17th day of Dec., 20 21, to certify which, witness my hand and seal of office.

Signature of officer administering oath | Gabriela Cantu | Printed name of officer administering oath | Adm. Clerk | Title of officer administering oath

LOCAL GOVERNMENT OFFICER CONFLICTS DISCLOSURE STATEMENT

FORM CIS

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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

City Secretary's Office
Received
Date 12/15/21

1 **Name of Local Government Officer**

Jason Shelton

2 **Office Held**

Systems Manager

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

Tex Air

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

A/C Vendor

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 12/14/21 Description of Gift cookie tray

Date Gift Accepted _____ Description of Gift _____

Date Gift Accepted _____ Description of Gift _____

(attach additional forms as necessary)

6 **AFFIDAVIT**

NOTARY PUBLIC
Cindy Gonzalez
Notary ID# 13086724-9
My Comm. Exp. 10-18-2024
STATE OF TEXAS

AFFIX NOTARY STAMP / SEAL ABOVE

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 Jason Shelton, this the 15th day of December 20 21, 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
	Cindy Gonzalez	Notary

LOCAL GOVERNMENT OFFICER CONFLICTS DISCLOSURE STATEMENT

FORM CIS

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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

City Secretary's Office Received Date 12/17/21

1 **Name of Local Government Officer**

Natalie Manzanares

2 **Office Held**

Program Coordinator

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

Rafael Malo

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

Client

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 12/16/21 Description of Gift foot cream

Date Gift Accepted _____ Description of Gift _____

Date Gift Accepted _____ Description of Gift _____

(attach additional forms as necessary)

6 **AFFIDAVIT**

NOTARY PUBLIC
Cindy Gonzalez
Notary ID# 13086724-9
My Comm. Exp. 10-18-2024
STATE OF TEXAS

AFFIX NOTARY STAMP / SEAL ABOVE

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.

Natalie Manzanares
Signature of Local Government Officer

Sworn to and subscribed before me, by the said Natalie Manzanares, this the 17th day of December, 20 21, 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
	Cindy Gonzalez	Notary

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

City Secretary's Office
Received
Date 12/21/20

1 **Name of Local Government Officer**

Victor Rodriguez for McAllen Police Department

2 **Office Held**

Chief of Police

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

Mr. Danny Clark

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

Clark Chevrolet, McAllen

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 12/17/21 Description of Gift (1) Bottle of Andalusia Texas Single Malt Whiskey
(1) Book - The Intuition Paintings by Kirk Clark

Date Gift Accepted _____ Description of Gift _____

Date Gift Accepted _____ Description of Gift _____
(To be raffled to police employees.)

(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.

MARIA M. GUZMAN
Notary Public
STATE OF TEXAS
Notary ID# 385152-1
Comm Exp. 01-10-

_____
Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said **Victor Rodriguez**, this the **17th** day of **December**, 20**21**, to certify which, witness my hand and seal of office.

Maria M. Guzman — **Maria M. Guzman** — **Notary Public / Administrative**

Signature of officer administering oath | Printed name of officer administering oath | Title of officer administering oath

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

City Secretary's Office Received Date 12/21/20

1 Name of Local Government Officer

Jason Shelton

2 Office Held

Systems Manager

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

Free IT Data Solutions

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

Vendor / Integrator

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 12/21/21 Description of Gift Gift Box - edibles

Date Gift Accepted _____ Description of Gift _____

Date Gift Accepted _____ Description of Gift _____

(attach additional forms as necessary)

6 AFFIDAVIT

NOTARY PUBLIC
Cindy Gonzalez
Notary ID# 13086724-9
My Comm. Exp. 10-18-2024
STATE OF TEXAS

AFFIX NOTARY STAMP / SEAL ABOVE

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 Jason Shelton, this the 21st day of December, 20 21, 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

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
City Secretary's Office
Received
Date 12/22/21

1 **Name of Local Government Officer**

Cesar Noe Rodriguez

2 **Office Held**

Assistant Director of Health & Code Enforcement

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

HaCitat Developers, LLC.

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

Project Imagine Tomorrow Costomer

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 12/20/2021 Description of Gift Starbucks Cups w/ Cocoa Mix - (11)

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.

STEPHANIE MAIRE HOUCK
Notary Public
STATE OF TEXAS
Notary ID# 13290640-8
My Comm. Exp. 02-02-2025

Asst. Director
12/20/2021
Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Cesar Rodriguez, this the 20th day of December, 20 21, 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
JK	Stephanie Houck	Administrative Clerk

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

City Secretary's Office Received 10/22/21

1 **Name of Local Government Officer** Norma Yado

2 **Office Held** Chief Building Official Date

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

4 **Description of the nature and extent of each employment or other business relationship and each family relationship with vendor named in Item 3.** Contractor / Customer

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 12/22/21 Description of Gift Tamales

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 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

Please complete either option below:

(1) Affidavit

NOTARY STAMP / SEAL

NOTARY PUBLIC STATE OF TEXAS
MELISSA Y MARTINEZ
Notary Public
STATE OF TEXAS
Notary ID# 126947759
My Comm. Exp. 07-02-2025

Sworn to and subscribed before me by _____ this the 22nd day of December, 20 21, to certify which, witness my hand and seal of office.

Signature of officer administering oath — Melissa Martinez — Printed name of officer administering oath — Administrator — 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 Government Officer (Declarant)

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

City Secretary's Office
Received
Date 12/22/21

1 **Name of Local Government Officer**

Victor Rodriguez for McAllen Police Department

2 **Office Held**

Chief of Police

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

Mr. Rudy Plascencia

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

McAllen Crime Stoppers

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 12/18/21 Description of Gift (1) Starbucks Gift Card valued at $176.61

Date Gift Accepted _____ Description of Gift _____

Date Gift Accepted _____ Description of Gift _____

(To be raffled to police employees.)

(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.

MARIA M GUZMAN
Notary Public
STATE OF TEXAS
Notary ID# 385152-1
My Comm. Exp. 01-10-2024

_____
Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said **Victor Rodriguez**, this the **21st** day of **December**, 20**21**, to certify which, witness my hand and seal of office.

Maria M. Guzman — **Maria M. Guzman** — **Notary Public / Administrative**

Signature of officer administering oath | Printed name of officer administering oath | Title of officer administering oath

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

City Secretary's Office Received Date 12/22/21

1 **Name of Local Government Officer**

Bilkis Martinez

2 **Office Held**

Development Engineer

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

Daniela Perez-Marmoles Novellin Construction

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

Developer

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 12/20/2021 Description of Gift Artic tumbler

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.

GABRIELA CANTU
NOTARY PUBLIC
STATE OF TEXAS
MY COMM. EXP. 10/26/25
NOTARY ID 13133076-3

Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Bilkis Martinez, this the 20th day of Dec, 20 21, to certify which, witness my hand and seal of office.

Signature of officer administering oath | Gabriela Cantu — Printed name of officer administering oath | Adm. Clerk — Title of officer administering oath

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

City Secretary's Office
Received
Date 12/22/21

1 **Name of Local Government Officer**

Florencio De La Cruz

2 **Office Held**

Designer/Subdivision Coordinator

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

Daniela Perez-Marmoles Novellin Construction

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

Developer

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 12/20/2021 Description of Gift Artic tumbler

Date Gift Accepted _____ Description of Gift _____

Date Gift Accepted _____ Description of Gift _____

(attach additional forms as necessary)

6 **AFFIDAVIT**

GABRIELA CANTU
NOTARY PUBLIC
STATE OF TEXAS
MY COMM. EXP. 10/26/25
NOTARY ID 13133076-3

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

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Florencio De La Cruz, this the 20th day of Dec, 20 21, to certify which, witness my hand and seal of office.

Signature of officer administering oath | Gabriela Cantu — Printed name of officer administering oath | Adm. Clerk — Title of officer administering oath

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

City Secretary's Office
Received
Date 12/28/21

1 **Name of Local Government Officer**

Victor Rodriguez for McAllen Police Department

2 **Office Held**

Chief of Police

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

Mr. Joe Vera

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

Assistant City Manager - McAllen

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 12/25/21 Description of Gift (1) Logan's Roadhouse Gift Card - $25.00 Value

Date Gift Accepted _____ Description of Gift _____

Date Gift Accepted _____ Description of Gift _____

(To be raffled off to police officers.)

(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.

MARIA M GUZMAN
Notary Public
STATE OF TEXAS
Notary ID# 385152-1
My Comm. Exp. 01-10-2024

_____
Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said **Victor Rodriguez**, this the **27th** day of **December**, 20**21**, to certify which, witness my hand and seal of office.

Maria M. Guzman — **Maria M. Guzman** — **Notary Public / Administrative Assistant**

Signature of officer administering oath | Printed name of officer administering oath | Title of officer administering oath

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

City Secretary's Office Received Date 12/28/21

1 **Name of Local Government Officer**

Victor Rodriguez for McAllen Police Department

2 **Office Held**

Chief of Police

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

Daniela Martinez

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

Police Supporter

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 12/21/21 Description of Gift *(1) Be Strong & Courageous Tabletop Cross – Police Officer*

Date Gift Accepted _____ Description of Gift _____

Date Gift Accepted _____ Description of Gift _____

(To be raffled off to Police Officers)

(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.

MARIA M GUZMAN
Notary Public
STATE OF TEXAS
Notary ID# 385152-1
My Comm. Exp. 01-10-2024

_____
Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said **Victor Rodriguez**, this the **22nd** day of **December**, 20**21**, to certify which, witness my hand and seal of office.

Maria M. Guzman — **Maria M. Guzman** — **Notary Public / Administrative Assistant**

Signature of officer administering oath | Printed name of officer administering oath | Title of officer administering oath

CONFLICT DISCLOSURE STATEMENTS (CIS FORMS)

February 2022

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

City Secretary's Office
Received
Date 02/02/22

1 Name of Local Government Officer

Cristina Monroy, Assistant Management

2 Office Held

McAllen Parks & Recreation

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

Esteban Aguilar - Tournament Organizer

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

Raffled to Employees

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 12/22/21 Description of Gift 3 gift cards ($25.00) each

Date Gift Accepted _____ Description of Gift _____

Date Gift Accepted _____ Description of Gift _____

(attach additional forms as necessary)

6 AFFIDAVIT

MARY ANN JUAREZ
Notary Public, State of Texas
Expires 04/17/2023
I.D.# 12429211-2

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.

Cristina Monroy
Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Cristina Monroy, this the 1st day of February, 20 22, to certify which, witness my hand and seal of office.

Mary Ann Juarez — Mary Ann Juarez — Acting Supervisor

Signature of officer administering oath | Printed name of officer administering oath | Title of officer administering oath

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

City Secretary's Office
Received
Date 02/02/22

1 Name of Local Government Officer

Denny Meline, Director

2 Office Held

McAllen Parks & Recreation

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

Soccer Evolution

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

Parks employee givaway

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 12/28/21 Description of Gift Purfums de Marly Layton ($200)

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.

MARY ANN JUAREZ
Notary Public, State of Texas
Expires 04/17/2023
I.D.# 12429211-2

Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Denny Meline, this the 1st day of February, 20 22, to certify which, witness my hand and seal of office.

Mary Ann Juarez	Mary Ann Juarez	Acting Supervisor
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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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

City Secretary's Office Received Date 02/02/22

1 Name of Local Government Officer

Grecia Martinez, Accounting Clerk

2 Office Held

McAllen Parks & Recreation

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

Soccer Evolution

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

Parks employee giveaway

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 12/28/21 Description of Gift Yeti Cup 20oz. ($29.99)

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.

MARY ANN JUAREZ
Notary Public, State of Texas
Expires 04/17/2023
I.D.# 12429211-2

G Martinez
Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Grecia Martinez, this the 1st day of February, 20 22, to certify which, witness my hand and seal of office.

Mary Ann Juarez — Mary Ann Juarez — Acting Supervisor

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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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

City Secretary's Office Received 02/02/22

1 Name of Local Government Officer

Kristyna Mancias

2 Office Held

McAllen Parks & Recreation

Date 02/02/22

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

Soccer Evolution

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

Gift to employee

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 12/28/21 Description of Gift Yeti Cup 20oz. ($29.99)

Date Gift Accepted _____ Description of Gift _____

Date Gift Accepted _____ Description of Gift _____

(attach additional forms as necessary)

6 AFFIDAVIT

MARY ANN JUAREZ
Notary Public, State of Texas
Expires 04/17/2023
I.D.# 12429211-2

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.

Kristy Mancias
Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Kristyna Mancias, this the 1st day of February, 2022, to certify which, witness my hand and seal of office.

Mary Ann Juarez — Mary Ann Juarez — Acting Supervisor

Signature of officer administering oath | Printed name of officer administering oath | Title of officer administering oath

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

City Secretary's Office
Received
Date 02/02/22

1 Name of Local Government Officer

Sarai Garcia, Deputy Director of Operations

2 Office Held

McAllen Parks & Recreation

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

Martin Farm & Ranch Supply

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

Raffle - Employee Christmas Party

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 12/10/21 Description of Gift 2 Gift Certificate ($100.00) each

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.

MARY ANN JUAREZ
Notary Public, State of Texas
Expires 04/17/2023
I.D.# 12429211-2

Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Sarai Garcia, this the _____ day of 1/31, 20 22, to certify which, witness my hand and seal of office.

Mary Ann Juarez — Mary Ann Juarez — Acctng Supervisor

Signature of officer administering oath | Printed name of officer administering oath | Title of officer administering oath

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

City Secretary's Office Received Date 02/02/22

1 **Name of Local Government Officer**

Sarai Garcia, Deputy Director of Operations

2 **Office Held**

McAllen Parks & Recreation

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

Tejas Equipment Rental

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

Raffle - Employee Christmas Party

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 12/10/21 Description of Gift 2 Walmart Gift Card ($50.00) each

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.

MARY ANN JUAREZ
Notary Public, State of Texas
Expires 04/17/2023
I.D.# 12429211-2

Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Sarai Garcia, this the _____ day of 1/31, 20 22, to certify which, witness my hand and seal of office.

Mary Ann Juarez — Mary Ann Juarez — Acting Supervisor

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

City Secretary's Office
Received
Date 02/02/22

1 **Name of Local Government Officer**

Sarai Garcia, Deputy Director of Operations

2 **Office Held**

McAllen Parks & Recreation

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

Parks Place Recreation Designs

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

Raffle - Employee Christmas Party

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 12/10/21 Description of Gift 4 Walmart Gift Card ($50.00) each

Date Gift Accepted _____ Description of Gift _____

Date Gift Accepted _____ Description of Gift _____

(attach additional forms as necessary)

6 **AFFIDAVIT**

MARY ANN JUAREZ
Notary Public, State of Texas
Expires 04/17/2023
I.D.# 12429211-2

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.

Sarai Garcia
Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Sarai Garcia, this the _____ day of 1/31, 20 22, to certify which, witness my hand and seal of office.

Mary Ann Juarez — Mary Ann Juarez — Acting Supervisor

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

City Secretary's Office
Received
Date 02/02/22

1 Name of Local Government Officer

Sarai Garcia, Deputy Director of Operations

2 Office Held

McAllen Parks & Recreation

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

Artillery

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

Raffle - Employee Christmas Party

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 12/10/21 Description of Gift 4 Gift Card ($25.00) each- Starbucks, Buffalo Wil

Date Gift Accepted _____ Description of Gift wings, Chili's, Subway

Date Gift Accepted _____ Description of Gift _____

(attach additional forms as necessary)

6 AFFIDAVIT

MARY ANN JUAREZ
Notary Public, State of Texas
Expires 04/17/2023
I.D.# 12429211-2

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

AFFIX NOTARY STAMP / SEAL ABOVE

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Mary Ann Juarez — Mary Ann Juarez — Acting Supervisor

Signature of officer administering oath | Printed name of officer administering oath | Title of officer administering oath

LOCAL GOVERNMENT OFFICER CONFLICTS DISCLOSURE STATEMENT

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OFFICE USE ONLY

Date Received

City Secretary's Office
Received
Date 02/02/22

1 **Name of Local Government Officer**

Sarai Garcia, Deputy Director of Operations

2 **Office Held**

McAllen Parks & Recreation

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

Mission Western Wear

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

Raffle - Employee Christmas Party

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 12/10/21 Description of Gift 1 Gift certificate Ariat Jacket ($119.00)

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.

MARY ANN JUAREZ
Notary Public, State of Texas
Expires 04/17/2023
I.D.# 12429211-2

Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Sarai Garcia, this the _____ day of 1/31, 20 22, to certify which, witness my hand and seal of office.

Mary Ann Juarez — Mary Ann Juarez — Acting Supervisor

Signature of officer administering oath — Printed name of officer administering oath — Title of officer administering oath

LOCAL GOVERNMENT OFFICER CONFLICTS DISCLOSURE STATEMENT

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OFFICE USE ONLY

Date Received

City Secretary's Office
Received
Date 02/02/22

1 **Name of Local Government Officer**

Sarai Garcia, Deputy Director of Operations

2 **Office Held**

McAllen Parks & Recreation

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

McAllen Sports

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

Raffle - Employee Christmas Party

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 12/10/21 Description of Gift 22 caps ($4.00) each

Date Gift Accepted _____ Description of Gift _____

Date Gift Accepted _____ Description of Gift _____

(attach additional forms as necessary)

6 **AFFIDAVIT**

MARY ANN JUAREZ
Notary Public, State of Texas
Expires 04/17/2023
I.D.# 12429211-2

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.

Sarai Garcia
Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Sarai Garcia, this the _____ day of 1/31, 20 22, to certify which, witness my hand and seal of office.

Mary Ann J. | Mary Ann Juarez | Acting Supervisor
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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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

City Secretary's Office
Received
Date 02/02/22

1 **Name of Local Government Officer**

Sarai Garcia, Deputy Director of Operations

2 **Office Held**

McAllen Parks & Recreation

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

Beta

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

Raffle - Employee Christmas Party

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 12/10/21 Description of Gift 1 knife $5.00

Date Gift Accepted _____ Description of Gift _____

Date Gift Accepted _____ Description of Gift _____

(attach additional forms as necessary)

6 **AFFIDAVIT**

MARY ANN JUAREZ
Notary Public, State of Texas
Expires 04/17/2023
I.D.# 12429211-2

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

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Sarai Garcia, this the _____ day of 1/31, 20 22, to certify which, witness my hand and seal of office.

Mary Ann J. | Mary Ann Juarez | Acting Supervisor

Signature of officer administering oath | Printed name of officer administering oath | Title of officer administering oath

LOCAL GOVERNMENT OFFICER CONFLICTS DISCLOSURE STATEMENT

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OFFICE USE ONLY

Date Received

City Secretary's Office
Receipt
Date 02/02/22

1 Name of Local Government Officer

Sarai Garcia, Deputy Director of Operations

2 Office Held

McAllen Parks & Recreation

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

O'riely Auto Parts

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

Raffle - Employee Christmas Party

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 12/10/21 Description of Gift 2 car wash bucket ($15.00) each

Date Gift Accepted _____ Description of Gift _____

Date Gift Accepted _____ Description of Gift _____

(attach additional forms as necessary)

6 AFFIDAVIT

MARY ANN JUAREZ
Notary Public, State of Texas
Expires 04/17/2023
I.D.# 12429211-2

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

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Sarai Garcia, this the _____ day of 1/31, 20 22, to certify which, witness my hand and seal of office.

Mary Ann Juarez — Mary Ann Juarez — Acting Supervisor

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

City Secretary's Office Received Date 02/02/22

1 Name of Local Government Officer

Sarai Garcia, Deputy Director of Operations

2 Office Held

McAllen Parks & Recreation

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

Artillary

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

Raffle - Employee Christmas Party

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 12/10/21 Description of Gift 1 Craftsman 268 pc tool set ($129.00)

Date Gift Accepted 12/10/21 Description of Gift 1 Craftsman 5 gallon wet dry vac ($40.00)

Date Gift Accepted 12/10/21 Description of Gift 1 Craftsman Drill Driver Kit ($60.00)

(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 of Local Government Officer

MARY ANN JUAREZ
Notary Public, State of Texas
Expires 04/17/2023
I.D.# 12429211-2

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Sarai Garcia, this the _____ day of 1/31, 20 22, to certify which, witness my hand and seal of office.

Mary Ann Juarez — Mary Ann Juarez — Acting Supervisor

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

City Secretary's Office
Received
Date 02/04/22

1 Name of Local Government Officer

Sarai Garcia, Deputy Director of Operations

2 Office Held

McAllen Parks & Recreation

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

5 Star GC Construction LLC

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

Raffle - Employee Christmas Party

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 12/10/21 Description of Gift 4 Gift Card various ($25.00)

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.

MARY ANN JUAREZ
Notary Public, State of Texas
Expires 04/17/2023
I.D.# 12429211-2

Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Sarai Garcia, this the _____ day of 1/31, 20 22, to certify which, witness my hand and seal of office.

Mary Ann Juarez — Mary Ann Juarez — Acting Supervisor

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

City Secretary's Office
Received
02/02/22

1 Name of Local Government Officer

Sarai Garcia, Deputy Director of Operations

2 Office Held

McAllen Parks & Recreation

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

Rio Grande Plumbing

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

Raffle - Employee Christmas Party

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 12/10/21 Description of Gift 1 faucet ($70.00)

Date Gift Accepted _____ Description of Gift _____

Date Gift Accepted _____ Description of Gift _____

(attach additional forms as necessary)

6 AFFIDAVIT

MARY ANN JUAREZ
Notary Public, State of Texas
Expires 04/17/2023
I.D.# 12429211-2

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.

Sarai Garcia
Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Sarai Garcia, this the _____ day of 1/31, 20 22, to certify which, witness my hand and seal of office.

Mary Ann J. | Mary Ann Juarez | Acting Supervisor
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

City Secretary's Received Date 02/02/22

1 Name of Local Government Officer

Sarai Garcia, Deputy Director of Operations

2 Office Held

McAllen Parks & Recreation

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

Central Plumbing

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

Raffle - Employee Christmas Party

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 12/10/21 Description of Gift Tool Belt and T shirts ($15.00)

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.

MARY ANN JUAREZ
Notary Public, State of Texas
Expires 04/17/2023
I.D.# 12429211-2

Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Sarai Garcia, this the _____ day of 1/31, 20 22, 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
Mary Ann Juarez	Mary Ann Juarez	Acting Supervisor

LOCAL GOVERNMENT OFFICER CONFLICTS DISCLOSURE STATEMENT

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OFFICE USE ONLY

Date Received

City Secretary's Office
Received
Date 02/02/22

1 **Name of Local Government Officer**

Sarai Garcia, Deputy Director of Operations

2 **Office Held**

McAllen Parks & Recreation

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

Sherwin Williams

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

Raffle - Employee Christmas Party

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 12/10/21 Description of Gift 2 Chair ($40.00) each

Date Gift Accepted 12/10/21 Description of Gift 2 lunch boxes ($15.00)

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.

MARY ANN JUAREZ
Notary Public, State of Texas
Expires 04/17/2023
I.D.# 12429211-2

Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Sarai Garcia, this the _____ day of 1/31, 20 22, to certify which, witness my hand and seal of office.

Mary Ann Juarez — Mary Ann Juarez — Acting Supervisor

Signature of officer administering oath | Printed name of officer administering oath | Title of officer administering oath

LOCAL GOVERNMENT OFFICER CONFLICTS DISCLOSURE STATEMENT

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1 Name of Local Government Officer

Sarai Garcia, Deputy Director of Operations

2 Office Held

McAllen Parks & Recreation

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

Avance Door

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

Raffle - Employee Christmas Party

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 12/10/21 Description of Gift 2 Gift cards Buffalo Wild Wings ($25.00)

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.

MARY ANN JUAREZ
Notary Public, State of Texas
Expires 04/17/2023
I.D.# 12429211-2

Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Sarai Garcia, this the _____ day of 1/31, 2022, to certify which, witness my hand and seal of office.

Mary Ann Juarez — Mary Ann Juarez — Acting Supervisor

Signature of officer administering oath | Printed name of officer administering oath | Title of officer administering oath

LOCAL GOVERNMENT OFFICER CONFLICTS DISCLOSURE STATEMENT

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OFFICE USE ONLY

Date Received

City Secretary's Office Received Date 02/02/22

1 Name of Local Government Officer

Sarai Garcia, Deputy Director of Operations

2 Office Held

McAllen Parks & Recreation

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

Reyes Trap & Tent

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

Raffle - Employee Christmas Party

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 12/10/21 Description of Gift 5 Gift cards VISA ($25.00) each

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.

MARY ANN JUAREZ
Notary Public, State of Texas
Expires 04/17/2023
I.D.# 12429211-2

AFFIX NOTARY STAMP / SEAL ABOVE

Signature of Local Government Officer

Sworn to and subscribed before me, by the said Sarai Garcia, this the _____ day of 1/31, 20 22, 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
Mary Ann Juarez	MaryAnn Juarez	Acting Supervisor

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

City Secretary's Office
Received
02/02/22

1 **Name of Local Government Officer**

Sarai Garcia, Deputy Director of Operations

2 **Office Held**

McAllen Parks & Recreation

Date 02/02/22

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

Lucas

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

Raffle - Employee Christmas Party

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 12/10/21 Description of Gift Detail Kit ($20.00)

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.

MARY ANN JUAREZ
Notary Public, State of Texas
Expires 04/17/2023
I.D.# 12429211-2

Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Sarai Garcia, this the _____ day of 1/31, 20 22, to certify which, witness my hand and seal of office.

Mary Ann Juarez — Mary Ann Juarez — Acting Supervisor

Signature of officer administering oath — Printed name of officer administering oath — Title of officer administering oath

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

City Secretary's Office Received Date 02/02/22

1 Name of Local Government Officer

Sarai Garcia, Deputy Director of Operations

2 Office Held

McAllen Parks & Recreation

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

Internatinal Bolts and Screw

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

Raffle - Employee Christmas Party

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 12/10/21 Description of Gift fans, lights, gloves

Date Gift Accepted _____ Description of Gift _____

Date Gift Accepted _____ Description of Gift _____

(attach additional forms as necessary)

6 AFFIDAVIT

MARY ANN JUAREZ
Notary Public, State of Texas
Expires 04/17/2023
I.D.# 12429211-2

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

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Sarai Garcia, this the _____ day of 1/31, 20 22, to certify which, witness my hand and seal of office.

Signature of officer administering oath | Mary Ann Juarez | Printed name of officer administering oath | Acting Supervisor | Title of officer administering oath

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

City Secretary's Office
Received
Date 02/02/22

1 **Name of Local Government Officer**

Sarai Garcia, Deputy Director of Operations

2 **Office Held**

McAllen Parks & Recreation

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

OG Barber Shop

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

Raffle - Employee Christmas Party

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 12/10/21 Description of Gift 3 gift cards ($25.00) each

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.

MARY ANN JUAREZ
Notary Public, State of Texas
Expires 04/17/2023
I.D.# 12429211-2

Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Sarai Garcia, this the _____ day of 1/31, 20 22, to certify which, witness my hand and seal of office.

Mary Ann Juarez — Mary Ann Juarez — Acting Supervisor

Signature of officer administering oath — Printed name of officer administering oath — Title of officer administering oath

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

City Secretary's Office Received 02/02/22

1 Name of Local Government Officer

Sarai Garcia, Deputy Director of Operations

Date

2 Office Held

McAllen Parks & Recreation

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

Fastenal

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

Raffle - Employee Christmas Party

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 12/10/21 Description of Gift Irwa-Visc Grip set

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.

Signature of Local Government Officer

MARY ANN JUAREZ
Notary Public, State of Texas
Expires 04/17/2023
I.D.# 12429211-2

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Sarai Garcia, this the _____ day of 1/31, 20 22, to certify which, witness my hand and seal of office.

Mary Ann Juarez — Mary Ann Juarez — Acctng. Supervisor

Signature of officer administering oath — Printed name of officer administering oath — Title of officer administering oath

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

City Secretary's Office

Date 02/02/22

1 Name of Local Government Officer

Sarai Garcia, Deputy Director of Operations

2 Office Held

McAllen Parks & Recreation

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

Musco Lighting

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

Raffle - Employee Christmas Party

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 12/10/21 Description of Gift 5 Gift cards ($50.00) each

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.

MARY ANN JUAREZ
Notary Public, State of Texas
Expires 04/17/2023
I.D.# 12429211-2

Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Sarai Garcia, this the _____ day of 1/31, 20 22, to certify which, witness my hand and seal of office.

Mary Ann Juarez — Mary Ann Juarez — Acting Supervisor

Signature of officer administering oath | Printed name of officer administering oath | Title of officer administering oath

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

City Secretary's Office
Received
Date 02/02/22

1 Name of Local Government Officer

Sarai Garcia, Deputy Director of Operations

2 Office Held

McAllen Parks & Recreation

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

Valley Tire Sales

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

Raffle - Employee Christmas Party

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 12/10/21 Description of Gift 3 Gift cards Dairy Queen ($10.00) each

Date Gift Accepted _____ Description of Gift _____

Date Gift Accepted _____ Description of Gift _____

(attach additional forms as necessary)

6 AFFIDAVIT

MARY ANN JUAREZ
Notary Public, State of Texas
Expires 04/17/2023
I.D.# 12429211-2

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

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Sarai Garcia, this the _____ day of 1/31, 20 22, 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
Mary Ann Juarez	MaryAnn Juarez	Acctng Supervisor

LOCAL GOVERNMENT OFFICER CONFLICTS DISCLOSURE STATEMENT

FORM CIS

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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

Date 02/02/22

1 Name of Local Government Officer

Sarai Garcia, Deputy Director of Operations

2 Office Held

McAllen Parks & Recreation

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

OG Barber Shop

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

Raffle - Employee Christmas Party

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 12/10/21 Description of Gift 3 gift cards ($25.00) each

Date Gift Accepted _____ Description of Gift _____

Date Gift Accepted _____ Description of Gift _____

(attach additional forms as necessary)

6 AFFIDAVIT

MARY ANN JUAREZ
Notary Public, State of Texas
Expires 04/17/2023
I.D.# 12429211-2

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

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Sarai Garcia, this the _____ day of 1/31, 20 22, to certify which, witness my hand and seal of office.

Mary Ann Juarez — Mary Ann Juarez — Acting Supervisor

Signature of officer administering oath — Printed name of officer administering oath — Title of officer administering oath

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

City Secretary's Office
Received
Date 02/07/22

1 **Name of Local Government Officer**

Yvette M. Balderas

2 **Office Held**

Director of Grant Administration

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

Affordable Homes of South Texas

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

Subrecipient

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 12/14/21 Description of Gift Krispy Creme Donuts

Date Gift Accepted _____ Description of Gift _____

Date Gift Accepted _____ Description of Gift _____

(attach additional forms as necessary)

6 **AFFIDAVIT**

NOTARY PUBLIC
Cindy Gonzalez
Notary ID# 13086724-9
My Comm. Exp. 10-18-2024
STATE OF TEXAS

AFFIX NOTARY STAMP / SEAL ABOVE

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.

Yvette Balderas

Signature of Local Government Officer

Sworn to and subscribed before me, by the said Yvette Balderas, this the 7th day of February, 20 22, 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
	Cindy Gonzalez	Notary

LOCAL GOVERNMENT OFFICER CONFLICTS DISCLOSURE STATEMENT

FORM CIS

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

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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

City Secretary's Office
Received
Date 2/11/2022

1 **Name of Local Government Officer**

Victor Rodriguez for McAllen Police Department

2 **Office Held**

Chief of Police

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

Ms. Elena Villarreal

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

Galaxy Press
7051 Hollywood Blvd., Hollywood, CA

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).**

NOT
Date Gift **Accepted** 2/9/22 Description of Gift (7) Fiction Books and (12) Audiobooks by L. Ron Hubbard

Date Gift Accepted _____ Description of Gift _____

Date Gift Accepted _____ Description of Gift _____

(Donated to the McAllen Public Library.)

(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.

MARIA M GUZMAN
Notary Public
STATE OF TEXAS
Notary ID# 385152-1
My Comm. Exp. 01-10-2024

_____
Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said **Victor Rodriguez**, this the **9th** day of **February**, **2022**, to certify which, witness my hand and seal of office.

Maria M. Guzman	**Maria M. Guzman**	**Notary Public / Administrative**
Signature of officer administering oath	Printed name of officer administering oath	Title of officer administering oath

McAllen Police Department
List of Books and Audiobooks Donation to McAllen Public Library

Title of Books/ Audiobooks	Author	Publisher	Qty. Books	Qty. Audiobooks - Sets of 2 CDs
Battlefield Earth	L. Ron Hubbard	Galaxy Press	1	
Beyond All Weapons	L. Ron Hubbard	Galaxy Press	1	
Devil's Manhunt	L. Ron Hubbard	Galaxy Press	1	
Fear	L. Ron Hubbard	Galaxy Press	1	
Final Blackout	L. Ron Hubbard	Galaxy Press	1	
One Was Stubborn	L. Ron Hubbard	Galaxy Press	1	
Typewriting in the Sky	L. Ron Hubbard	Galaxy Press	1	
Destiny's Drum	L. Ron Hubbard	Galaxy Press		1
Hurricane	L. Ron Hubbard	Galaxy Press		1
Hurtling Wings	L. Ron Hubbard	Galaxy Press		1
If I Were You	L. Ron Hubbard	Galaxy Press		1
Red Death Over China	L. Ron Hubbard	Galaxy Press		1
The Crossroads	L. Ron Hubbard	Galaxy Press		1
The Dive Bomber	L. Ron Hubbard	Galaxy Press		1
The Magic Quirt	L. Ron Hubbard	Galaxy Press		1
The Red Dragon	L. Ron Hubbard	Galaxy Press		1
The Sky-Crasher	L. Ron Hubbard	Galaxy Press		1
Trick Soldier	L. Ron Hubbard	Galaxy Press		1
Twenty Fathoms Down	L. Ron Hubbard	Galaxy Press		1
			7	12

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

City Secretary's Office
Received
Date 2/17/22

1 **Name of Local Government Officer**

Mr. Steven Kotsantos

2 **Office Held**

Health + Code Enforcement

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

The Cook Shack

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

Food Establishment

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 2-16-22 Description of Gift Chicken strips + Salad w/dressing

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 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.

STEPHANIE MAIRE HOUCK
Notary Public
STATE OF TEXAS
Notary ID# 13290640-8
My Comm. Exp. 02-02-2025

_____
Signature of Local Government Officer

Please complete either option below:

(1) Affidavit

NOTARY STAMP / SEAL

Sworn to and subscribed before me by Steven Kotsantos this the 16th day of February, 20 22, to certify which, witness my hand and seal of office.

_____ Stephanie Houck _____

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) (zip code) (country)

Executed in _____ County, State of _____, on the _____ day of _____ (month), 20_____ (year).

_____
Signature of Local Government Officer (Declarant)

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: City Secretary's Office Received 2-23-2022 Date

1 **Name of Local Government Officer**

Victor Rodriguez for McAllen Police Department

2 **Office Held**

Chief of Police

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

Ms. Dixie Rainey and Mr. Neo Canales

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

Citizens of McAllen

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 2/18/22 Description of Gift (12) Cases of Assorted Girl Scout Cookies

Date Gift Accepted _____ Description of Gift _____

Date Gift Accepted _____ Description of Gift _____

(Distributed to personnel.)

(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.

MARIA M GUZMAN
Notary Public
STATE OF TEXAS
Notary ID# 385152-1
My Comm. Exp. 01-10-2024

_____
Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said **Victor Rodriguez**, this the **21st** day of **February**, 20**22**, to certify which, witness my hand and seal of office.

Maria M. Guzmán — **Maria M. Guzman** — **Notary Public / Administrative Assistant**

Signature of officer administering oath | Printed name of officer administering oath | Title of officer administering oath

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

City Secretary's Office Received Date 2/24/22

1 **Name of Local Government Officer** Jose Angel Trujillo III

2 **Office Held** City Secretary Dept. - Senior Admin. Clerk (Floater)

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

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

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 2/24/22 Description of Gift 2 boxes of cookies

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 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.

Jose Angel Trujillo III

Signature of Local Government Officer

Please complete either option below:

(1) Affidavit

NOTARY PUBLIC Cindy Gonzalez Notary ID# 13086724-9 My Comm. Exp. 10-18-2024 STATE OF TEXAS

NOTARY STAMP / SEAL

Sworn to and subscribed before me by Jose Angel Trujillo III this the 24th day of February, 20 22, to certify which, witness my hand and seal of office.

Signature of officer administering oath | Cindy Gonzalez — Printed name of officer administering oath | Notary — 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 Government Officer (Declarant)

CONFLICT DISCLOSURE STATEMENTS (CIS FORMS)

March 2022

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

City Secretary's Office Received

Date: 3/1/22

1 **Name of Local Government Officer**
Maria Luisa Briere / Health and Code Enforcement Dept.

2 **Office Held**
Health & Code Enforcement

3 **Name of vendor described by Sections 176.001(7) and 176.003(a), Local Government Code**
Yamil G. Tueme

4 **Description of the nature and extent of each employment or other business relationship and each family relationship with vendor named in item 3.**
Short Term Rental permit holder.

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 2/28/22 Description of Gift Baklava dessert - $50

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 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

Please complete either option below:

(1) Affidavit

NOTARY PUBLIC STATE OF TEXAS
CYNTHIA ANN REYNA
Notary Public
STATE OF TEXAS
Notary ID# 13290046-8
My Comm. Exp. 01-29-2025

NOTARY STAMP / SEAL

Sworn to and subscribed before me by Cynthia Reyna this the 2 day of March, 20 22, 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 _____, 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 Government Officer (Declarant)

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.

City

OFFICE USE ONLY

Date Received
City Secretary's Office
Received
Date 3/4/22

1 **Name of Local Government Officer**
James F. Farrell Jr.

2 **Office Held**
Deputy Fire Chief

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

4 **Description of the nature and extent of each employment or other business relationship and each family relationship with vendor named in item 3.**
NONE

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 2-27-22 Description of Gift Decorative PLAQUE For Fire Sr. 7

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 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.

James F. Farrell

Signature of Local Government Officer

MARY ANN VELA
Notary ID #1948307
My Commission Expires
March 8, 2022

Please complete either option below:

(1) Affidavit

NOTARY STAMP / SEAL

Sworn to and subscribed before me by MARY A. VELA this the 4th day of March, 20 22, 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
	MARY A. VELA	Notary

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 Government Officer (Declarant)

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

City Secretary's Office Received

Date 3-11-22

1 **Name of Local Government Officer**

Victor Rodriguez for McAllen Police Department

2 **Office Held**

Chief of Police

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

Ms. Giseth Moya

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

Del Angel Funeral Home, 4607 N. Sugar Rd., Pharr, TX

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 03/9/22 Description of Gift (1) Large Basket of Snacks

Date Gift Accepted _____ Description of Gift _____

Date Gift Accepted _____ Description of Gift _____

(Gave Basket to employees).

(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.

MARIA M GUZMAN
Notary Public
STATE OF TEXAS
Notary ID# 385152-1
My Comm. Exp. 01-10-2024

_____
Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said **Victor Rodriguez**, this the **9th** day of **March**, 20**22**, to certify which, witness my hand and seal of office.

Maria M. Guzman	**Maria M. Guzman**	**Notary Public / Administrative Assistant**
Signature of officer administering oath	Printed name of officer administering oath	Title of officer administering oath

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

City Secretary's Office
Received
Date 4/6/22

1 **Name of Local Government Officer**
Sarah Canizales, Community Center Manager

2 **Office Held**
Las Palmas Community Center

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

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

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 3/30/22 Description of Gift 20 Ceramic molds

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 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.

BRENDA GONZALEZ MARTINEZ
Notary Public, State of Texas
Expires 04/30/2023
I.D.# 131994314

Signature of Local Government Officer

Please complete either option below:

(1) Affidavit

NOTARY STAMP / SEAL

Sworn to and subscribed before me by Sarah Canizales this the 30 day of March, 20 22, to certify which, witness my hand and seal of office.

Brenda Gonzalez Martinez — Brenda Gonzalez Martinez — Secretary

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) (zip code) (country)

Executed in _____ County, State of _____, on the _____ day of _____, 20_____.
(month) (year)

_____
Signature of Local Government Officer (Declarant)

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

City Secretary's Office
Received
Date 4-29-22

1 Name of Local Government Officer

Florencio De la Cruz

2 Office Held

Designer

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

Jose C. Diaz South Texas Christian Academy

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

Giftcards - $25 and $15

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 4/26/2022 Description of Gift Gift card $25

Date Gift Accepted 4/26/2022 Description of Gift Gift Card $15

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.

NOTARY PUBLIC STATE OF TEXAS
GABRIELA CANTU
NOTARY PUBLIC
STATE OF TEXAS
MY COMM. EXP. 10/26/25
NOTARY ID 13133076-3

Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Florencio De la Cruz, this the 27th day of April, 20 22, 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
gcantu	Gabriela Cantu	Admin Clerk

CONFLICT DISCLOSURE STATEMENTS (CIS FORMS)

May 2022

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

City Secretary's Office

Date 5-10-22

1 Name of Local Government Officer

Florencio De La Cruz

2 Office Held

Designer/Subdivision Coordinator

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

Maria Ester Rivera

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

McAllen Resident - Distributed to Employees

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 05/06/2022 Description of Gift Cabello Brothers Mango Box

Date Gift Accepted _____ Description of Gift _____

Date Gift Accepted _____ Description of Gift _____

(attach additional forms as necessary)

6 AFFIDAVIT

GABRIELA CANTU
NOTARY PUBLIC
STATE OF TEXAS
MY COMM. EXP. 10/26/25
NOTARY ID 13133076-3

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

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Florencio De La Cruz, this the 6th day of May, 20 22, to certify which, witness my hand and seal of office.

Signature of officer administering oath | Gabriela Cantu | Public Notary

Printed name of officer administering oath | Title of officer administering oath

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

City Secretary's Office
Received
Date 6/3/22

1 **Name of Local Government Officer**

Jose Humberto De La Garza

2 **Office Held**

Development Coordinator

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

Garman Investments, LP

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

Developers

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 06/2/22 Description of Gift Gift basket filled with Chips, Candy and crackers.

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 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

Please complete either option below:

(1) Affidavit

DIANA M SILVA
Notary Public, State of Texas
ID# 12845221-7
My Commission Expires
11-22-2022

NOTARY STAMP/SEAL

Sworn to and subscribed before me by Jose Humberto De La Garza this the 3rd day of June, 20 22, to certify which, witness my hand and seal of office.

Diana M. Silva — Diana M. Silva — Notary

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) (zip code) (country)

Executed in _____ County, State of _____, on the _____ day of _____, 20_____.
(month) (year)

_____
Signature of Local Government Officer (Declarant)

CONFLICT DISCLOSURE STATEMENTS (CIS FORMS)

June 2022

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

Received

Date 6/24/22

1 Name of Local Government Officer

Danyel Ayala, LCC Recreation Supervisor

2 Office Held

McAllen Parks & Recreation

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

Domino's Pizza

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

Lark Summer Day Camp Session 1 Fun Friday Meal

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 6/17/22 Description of Gift 12 large pepperoni pizza $97.30

Date Gift Accepted _____ Description of Gift _____

Date Gift Accepted _____ Description of Gift _____

(attach additional forms as necessary)

6 AFFIDAVIT

MARY ANN JUAREZ
Notary Public, State of Texas
Expires 04/17/2023
I.D.# 12429211-2

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

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Danyel Ayala, this the 16 day of Ce, 20 22, to certify which, witness my hand and seal of office.

Mary Ann Juarez — Mary Ann Juarez — Accounting Supervisor

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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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

City Secretary's Office Received Date 6/22/22

1 **Name of Local Government Officer**

Jose Angel Trujillo III, Senior Admin. Clerk

2 **Office Held**

City Secretary

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

RGV K-Pop Shop

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

Special Event applicant

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 6/21/22 Description of Gift Box of Sweet bread

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 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

NOTARY PUBLIC
Cindy Gonzalez
Notary ID# 13086724-9
My Comm. Exp. 10-18-2024
STATE OF TEXAS

NOTARY STAMP / SEAL

Please complete either option below:

(1) Affidavit

Sworn to and subscribed before me by Jose Angel Trujillo III this the 22 day of June, 20 22, 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
	Cindy Gonzalez	Notary

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)

_____
Signature of Local Government Officer (Declarant)

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

City Secretary's Office Received Date 6/22/22

1 Name of Local Government Officer

Florencio De La Cruz

2 Office Held

Subdivision Coordinator

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

Raymundo Platas-Developer

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

Developer

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 6/17/2022 Description of Gift 1) doughnut box-distributed to staff

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.

GABRIELA CANTU
NOTARY PUBLIC
STATE OF TEXAS
MY COMM. EXP. 10/26/25
NOTARY ID 13133076-3

Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Florencio De la Cruz, this the 17 day of June, 20 22, to certify which, witness my hand and seal of office.

Signature of officer administering oath | Gabriela Cantu | Notary Public

Printed name of officer administering oath | Title of officer administering oath

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

City Secretary's Office Received Date 6/23/22

1 Name of Local Government Officer

EDUARDO MENDOZA

2 Office Held

CITY ENGINEER

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

RAYMUNDO PLATAS - DEVELOPER

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

DEVELOPER

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 6/23/2022 Description of Gift 1) BOOK - (it will go to our library)

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.

GABRIELA CANTU
NOTARY PUBLIC
STATE OF TEXAS
MY COMM. EXP. 10/26/25
NOTARY ID 13133076-3

Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Eduardo Mendoza, this the 23rd day of June, 20 22, 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
Gcantu	Gabriela Cantu	Notary Public

CONFLICT DISCLOSURE STATEMENTS (CIS FORMS)

July 2022

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

City Secretary's Office
Received
Date 7/1/22

1 **Name of Local Government Officer**

Victor Rodriguez for McAllen Police Department

2 **Office Held**

Chief of Police

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

ULINE Shipping Supply Specialists

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

Vender Company, Chicago, Illinois

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 Gifts Accepted 6/30/22

Description of Gifts
2) ULINE Camo Rolling Coolers
(1) ULINE Precision Grill Tongs & Spatula Set
(3) ULINE Camp Chairs
(1) ULINE Utility Wagon
(3) ULINE Backpacks
(2) ULINE Year Wall Calendars

(To be Raffled off to Police Officers at Command Staff Roll Call Training.)

(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.

MARIA M GUZMAN
Notary Public
STATE OF TEXAS
Notary ID# 385152-1
My Comm. Exp. 01-10-2024

Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Victor Rodriguez, this the 1st day of July, 20 22, to certify which, witness my hand and seal of office.

Maria M. Guzman	Maria M. Guzman	Notary Public /Administrative Assistant
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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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

City Secretary's Office
Received
Date 7/1/22

1 **Name of Local Government Officer**

Victor Rodriguez for McAllen Police Department

2 **Office Held**

Chief of Police

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

OFFICE DEPOT

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

Vender Company, McAllen, Texas

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 6/30/22 Description of Gift (1) padded Black Briefcase

Date Gift Accepted _____ Description of Gift _____

Date Gift Accepted _____ Description of Gift _____

(To be Raffled off to Police Officers at Command Staff Roll Call Training.

(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.

MARIA M GUZMAN
Notary Public
STATE OF TEXAS
Notary ID# 385152-1
My Comm. Exp. 01-10-2024

_____
Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said **Victor Rodriguez**, this the **1st** day of **July**, 20 **22**, to certify which, witness my hand and seal of office.

Maria M. Guzman	**Maria M. Guzman**	**Notary Public /Administrative Assistant**
Signature of officer administering oath	Printed name of officer administering oath	Title of officer administering oath

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

7-7-22

1 Name of Local Government Officer

EDUARDO MENDOZA

2 Office Held

CITY ENGINEER

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

ERICK KENNEDY-SPAWGLASS

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

PRESIDENT OF COMPANY

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 6/30/22 Description of Gift 1) 4TH OF JULY GIFT BASKET THAT WAS RAFFLED TO DEPT

Date Gift Accepted _____ Description of Gift _____

Date Gift Accepted _____ Description of Gift _____

(attach additional forms as necessary)

6 AFFIDAVIT

GABRIELA CANTU
NOTARY PUBLIC
STATE OF TEXAS
MY COMM. EXP. 10/26/25
NOTARY ID 13133076-3

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

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Eduardo Mendoza, this the 30th day of June, 20 22, 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
gcantu	Gabriela Cantu	Notary Public

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

City Secretary's Office Received Date 7/22/22

1 Name of Local Government Officer

FLORENCIO DE LA CRUZ

2 Office Held

DESIGNER

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

RAYMUNDO PLATA

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

STARBUCKS (2)

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 7/21/2022 Description of Gift STARBUCKS (2)

Date Gift Accepted _____ Description of Gift _____

Date Gift Accepted _____ Description of Gift _____

(attach additional forms as necessary)

6 AFFIDAVIT

GABRIELA CANTU
NOTARY PUBLIC
STATE OF TEXAS
MY COMM. EXP. 10/26/25
NOTARY ID 13133076-3

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

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Florencio De La Cruz, this the 21 day of July, 20 22, to certify which, witness my hand and seal of office.

Gcantu Gabriela Cantu Notary Public

Signature of officer administering oath | Printed name of officer administering oath | Title of officer administering oath

CONFLICT DISCLOSURE STATEMENTS (CIS FORMS)

August 2022

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

8-1-22
Received

1 **Name of Local Government Officer**

Carina Jimenez

2 **Office Held**

Deputy Director of Programs

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

HEB

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

event sponsor

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 6/29/22 Description of Gift 10 gift card $500 ea = $5,000

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 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

Please complete either option below:

(1) Affidavit

NOTARY STAMP/SEAL

MARY ANN JUAREZ
Notary Public, State of Texas
Expires 04/17/2023
I.D.# 12429211-2

Sworn to and subscribed before me by Carina Jimenez this the 14th day of July, 20 22, to certify which, witness my hand and seal of office.

Mary Ann Juarez — Printed name of officer administering oath

Accounting Supervisor — Title of officer administering oath

Signature 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 Government Officer (Declarant)

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

City Secretary's Office
Received
Date 8-5-22

1 **Name of Local Government Officer**

Mark Zamora

2 **Office Held**

Public Education Officer

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

Vantage Bank - Steven Monks - Vice President Security Specialist

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

Advisory Meeting on Emergency Action Plans & Procedures

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 8/3/22 Description of Gift Meal

Date Gift Accepted _____ Description of Gift _____

Date Gift Accepted _____ Description of Gift _____

(attach additional forms as necessary)

6 **AFFIDAVIT**

MARINA RODRIGUEZ
Notary ID #133619707
My Commission Expires
March 1, 2026

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

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said James Schultz, Fire Chief, this the 3rd day of August, 20 22, 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
Marina Rodriguez	Marina Rodriguez	Notary

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.

City

OFFICE USE ONLY

Date Received
Secretary's Office
Received
Date 8/25/22

1 **Name of Local Government Officer**
Sarah Canizales

2 **Office Held**
Manager Las Palmas CC

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

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

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 8/4/22 Description of Gift Table Tennis with wheels ($600.00)

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 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

Please complete either option below:

(1) Affidavit

NOTARY STAMP / SEAL

NOTARY PUBLIC STATE OF TEXAS
MARY ANN JUAREZ
Notary Public, State of Texas
Expires 04/17/2023
I.D.# 12429211-2

Sworn to and subscribed before me by Sarah Canizales this the 12th day of August, 20 22, to certify which, witness my hand and seal of office.

Mary Ann Juarez — Accounting Supervisor

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) (zip code) (country)

Executed in _____ County, State of _____, on the _____ day of _____, 20_____.
(month) (year)

Signature of Local Government Officer (Declarant)

CONFLICT DISCLOSURE STATEMENTS (CIS FORMS)

September 2022

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

City Secretary's Office
Received
Date 9/19/22

1 Name of Local Government Officer

Victor Rodriguez for McAllen Police Department

2 Office Held

Chief of Police

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

Mr. Robert Barbosa

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

Sharyland High School

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 09/16/22 Description of Gift (1) Gift basket with food snacks

Date Gift Accepted _____ Description of Gift _____

Date Gift Accepted _____ Description of Gift _____

(Given to Police employees.)

(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.

MARIA M GUZMAN
Notary Public
STATE OF TEXAS
Notary ID# 385152-1
My Comm. Exp. 01-10-2024

_____
Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Victor Rodriguez, this the 20 day of September, 20 22, to certify which, witness my hand and seal of office.

Maria M. Guzman — Maria M. Guzman — Notary Public / Administrative Assistant

Signature of officer administering oath | Printed name of officer administering oath | Title of officer administering oath

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

City Secretary's Office Received Date 9-28-22

1 Name of Local Government Officer

GERARDO DE LA ROSA

2 Office Held

PERMIT TECHNICIAN

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

Melden & Hunt Inc.

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

Consultant - Distributed to Employees

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 09/23/2022 Description of Gift BOX OF 6 SHIPLEYS DONUTS

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.

GABRIELA CANTU
NOTARY PUBLIC
STATE OF TEXAS
MY COMM. EXP. 10/26/25
NOTARY ID 13133076-3

Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Gerardo De La Rosa, this the 23rd day of Sept., 20 22, to certify which, witness my hand and seal of office.

Gcantu Gabriela Cantu 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

(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

City Secretary's Office Received

Date 9-30-22

1 **Name of Local Government Officer**

Alejandrino Morales

2 **Office Held**

Fire Inspector

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

Yard House (Restaurant) - Management

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

As ite meeting was conducted to discuss fire Sprinkler System problems.

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 9/16/22 Description of Gift (9) 25 dollar gift Cards.

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 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

Please complete either option below:

(1) Affidavit

NOTARY STAMP/SEAL

NOTARY PUBLIC STATE OF TEXAS
MARINA RODRIGUEZ
Notary ID #133619707
My Commission Expires
March 1, 2026

Sworn to and subscribed before me by James Schultz, Fire Chief this the 19th day of September 20 22, 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
Marina Rodriguez	Marina Rodriguez	Notary

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 Government Officer (Declarant)

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

City Secretary's Office Received Date 9-30-22

1 Name of Local Government Officer

EDUARDO MENDOZA

2 Office Held

CITY ENGINEER

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

NICK PARDO

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

SHIPLEY DONUTS

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 9/30/2022 Description of Gift 1) SHIPLEY DONUTS

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.

NOTARY PUBLIC STATE OF TEXAS
VERONICA SANCHEZ
NOTARY PUBLIC
STATE OF TEXAS
MY COMM. EXP. 10/27/25
NOTARY ID 781744-6

Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Eduardo Mendoza, this the 30th day of September, 20 22, to certify which, witness my hand and seal of office.

Veronica Sanchez — Signature of officer administering oath

Veronica Sanchez — Printed name of officer administering oath

Notary Public — Title of officer administering oath

CONFLICT DISCLOSURE STATEMENTS (CIS FORMS)

October 2022

CONFLICT DISCLOSURE STATEMENTS (CIS FORMS)

November 2022

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

City Secretary's Office Received Date 11/11/22

1 Name of Local Government Officer

MARIO CRUZ

2 Office Held

DEPUTY CITY ENGINEER

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

YVETTE BARRERA

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

HIDALGO COUNTY DISTRICT

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 11/9/2022 Description of Gift SHIPLEY DONUT BOX

Date Gift Accepted _____ Description of Gift _____

Date Gift Accepted _____ Description of Gift _____

(attach additional forms as necessary)

6 AFFIDAVIT

GABRIELA CANTU
NOTARY PUBLIC
STATE OF TEXAS
MY COMM. EXP. 10/26/25
NOTARY ID 13133076-3

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

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Mario Cruz, this the 9th day of November, 20 22, 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
Gcantu	Gabriela Cantu	Adm. Clerk

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

City Secretary's Office
Received
Date 11/17/22

1 **Name of Local Government Officer**

MARIO CRUZ

2 **Office Held**

DEPUTY CITY ENGINEER

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

MDM

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

CONTRACTOR

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 11/17/2022 Description of Gift KRISPY KREME DONUTS

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.

VERONICA SANCHEZ
NOTARY PUBLIC
STATE OF TEXAS
MY COMM. EXP. 10/27/25
NOTARY ID 781744-6

AFFIX NOTARY STAMP / SEAL ABOVE

Signature of Local Government Officer

Sworn to and subscribed before me, by the said Mario A. Cruz, this the 17th day of November, 20 22, to certify which, witness my hand and seal of office.

Veronica Sanchez — Veronica Sanchez — 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

(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

City Secretary's Office Received Date 11/17/22

1 **Name of Local Government Officer**

MARIO CRUZ

2 **Office Held**

DEPUTY CITY ENGINEER

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

RIO DELTA ENGINEERING

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

3 TURKEYS / SIDES

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 11/17/2022 Description of Gift 3 TURKEYS / SIDES / Raffled

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.

VERONICA SANCHEZ
NOTARY PUBLIC
STATE OF TEXAS
MY COMM. EXP. 10/27/25
NOTARY ID 781744-6

AFFIX NOTARY STAMP / SEAL ABOVE

Signature of Local Government Officer

Sworn to and subscribed before me, by the said Mario A. Cruz, this the 17th day of November, 20 22, to certify which, witness my hand and seal of office.

Veronica Sanchez — Signature of officer administering oath

Veronica Sanchez — Printed name of officer administering oath

Notary Public — Title of officer administering oath

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

City Secretary's Office Received Date 11/17/22

1 **Name of Local Government Officer**

EDUARDO MENDOZA

2 **Office Held**

CITY ENGINEER

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

RIO DELTA ENGINEERING

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

4 TURKEYS / SIDES

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 11/17/2022 Description of Gift 4 TURKEYS / SIDES / Raffled

Date Gift Accepted _____ Description of Gift _____

Date Gift Accepted _____ Description of Gift _____

(attach additional forms as necessary)

6 **AFFIDAVIT**

GABRIELA CANTU
NOTARY PUBLIC
STATE OF TEXAS
MY COMM. EXP. 10/26/25
NOTARY ID 13133076-3

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

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Mario De la Cruz, this the 17th day of Nov., 20 22, to certify which, witness my hand and seal of office.

Gcantu — Signature of officer administering oath

Gabriela Cantu — Printed name of officer administering oath

Senior Adm Clerk — Title of officer administering oath

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.

ity

OFFICE USE ONLY

Date Received

Secretary's Office
Received
Date 11-22-22

1 Name of Local Government Officer

JUAN MARTINEZ

2 Office Held

CONSTRUCTION MANAGER

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

RIO UNITED BUILDERS

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

1 CAKE

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 11/21/22 Description of Gift 1) CAKE

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.

NOTARY PUBLIC STATE OF TEXAS
GABRIELA CANTU
NOTARY PUBLIC
STATE OF TEXAS
MY COMM. EXP. 10/26/25
NOTARY ID 13133076-3

Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Juan Martinez, this the 21 day of November 20 22, to certify which, witness my hand and seal of office.

gcantu Gabriela Cantu Senior Adm. Clerk

Signature of officer administering oath | Printed name of officer administering oath | Title of officer administering oath

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

City Secretary's Office Received Date 11-30-22

1 Name of Local Government Officer

EDUARDO MENDOZA

2 Office Held

CITY ENGINEER

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

RABA KISTNER

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

DEVELOPERS

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 11/29/2022 Description of Gift BISCUITS/Cookies shared with staff.

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.

VERONICA SANCHEZ
NOTARY PUBLIC
STATE OF TEXAS
MY COMM. EXP. 10/27/25
NOTARY ID 781744-6

AFFIX NOTARY STAMP / SEAL ABOVE

Signature of Local Government Officer

Sworn to and subscribed before me, by the said Eduardo Mendoza, this the 29th day of November, 20 22, to certify which, witness my hand and seal of office.

Veronica Sanchez — Veronica Sanchez — Notary

Signature of officer administering oath | Printed name of officer administering oath | Title of officer administering oath

CONFLICT DISCLOSURE STATEMENTS (CIS FORMS)

December 2022

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

City Secretary's Office Received Date 12/2/22

1 Name of Local Government Officer

olazaran
BILKIS ~~OLARAZAN~~

2 Office Held

DEVELOPMENT ENGINEER

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

ANTUM DOMIT

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

DEVELOPER

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 2 Description of Gift CANDLES (gave one to eduardo)

Date Gift Accepted _____ Description of Gift _____

Date Gift Accepted _____ Description of Gift _____

(attach additional forms as necessary)

6 AFFIDAVIT

NOTARY PUBLIC STATE OF TEXAS
GABRIELA CANTU
NOTARY PUBLIC
STATE OF TEXAS
MY COMM. EXP. 10/26/25
NOTARY ID 13133076-3

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

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Bilkis O. Martinez, this the 30th day of November, 20 22, 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
Gcantu	Gabriela Cantu	Senior Adm. Clerk

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

City Secretary's Office
Received
Date 12-8-22

1 **Name of Local Government Officer**

Jason Shelton

2 **Office Held**

Systems Manager

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

STI Government Solutions

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

Vendor

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 12/6/22 Description of Gift Holiday Cupcakes

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 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.

NOTARY PUBLIC
Cindy Gonzalez
Notary ID# 13086724-9
My Comm. Exp. 10-18-2024
STATE OF TEXAS

NOTARY STAMP / SEAL

Signature of Local Government Officer

Please complete either option below:

(1) Affidavit

Sworn to and subscribed before me by Jason Shelton this the 8th day of December 20 22, to certify which, witness my hand and seal of office.

Signature of officer administering oath | Cindy Gonzalez Printed name of officer administering oath | Notary 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)

_____
Signature of Local Government Officer (Declarant)

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

City Secretary's Office Received Date 12-8-22

1 **Name of Local Government Officer**

Jason Shelton

2 **Office Held**

Systems Manager

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

Free IT Data Solutions

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

Vendor / Integrator

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 12/7/22 Description of Gift Holiday Basket

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 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.

NOTARY PUBLIC Cindy Gonzalez Notary ID# 13086724-9 My Comm. Exp. 10-18-2024 STATE OF TEXAS

NOTARY STAMP / SEAL

Signature of Local Government Officer

Please complete either option below:

(1) Affidavit

Sworn to and subscribed before me by Jason Shelton this the 8th day of December, 20 22, to certify which, witness my hand and seal of office.

Signature of officer administering oath | Cindy Gonzalez Printed name of officer administering oath | Notary 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)

_____
Signature of Local Government Officer (Declarant)

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

City Secretary's Office Received Date 12-9-22

1 Name of Local Government Officer

Eduardo Mendoza

2 Office Held

City Engineer

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

Antun Domit - Developer

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

Goodie Basket - Distributed to Employees

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 12/07/2022 Description of Gift Basket with Christmas goodies.

Date Gift Accepted _____ Description of Gift _____

Date Gift Accepted _____ Description of Gift _____

(attach additional forms as necessary)

6 AFFIDAVIT

GABRIELA CANTU
NOTARY PUBLIC
STATE OF TEXAS
MY COMM. EXP. 10/26/25
NOTARY ID 13133076-3

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

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Eduardo Mendoza, this the 8th day of Dec, 20 22, to certify which, witness my hand and seal of office.

gcantu — Signature of officer administering oath

Gabriela Cantu — Printed name of officer administering oath

Senior Adm. Clerk — Title of officer administering oath

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

by Secretary's Office
Received
Date 12/9/22

1 **Name of Local Government Officer**

Cindy Reyes
~~City of McAllen - Customer Relations~~

2 **Office Held**

Customer Relations

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

~~Tech~~ Texair Co.

4 **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 12/9/22 Description of Gift Cookie Platter

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 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.

Cindy Reyes

Signature of Local Government Officer

Please complete either option below:

(1) Affidavit

NOTARY PUBLIC
Cindy Gonzalez
Notary ID# 13086724-9
My Comm. Exp. 10-18-2024
STATE OF TEXAS

NOTARY STAMP/SEAL

Sworn to and subscribed before me by Cindy Reyes this the 9th day of December, 20 22, to certify which, witness my hand and seal of office.

Cindy Gonzalez — Cindy Gonzalez — Notary

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) (zip code) (country)

Executed in _____ County, State of _____, on the _____ day of _____ (month), 20_____ (year).

_____
Signature of Local Government Officer (Declarant)

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

City Secretary's Office
Received
Date 12/16/22

1 **Name of Local Government Officer**

Cindy Reyes

2 **Office Held**

Customer Relations

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

Plains Capital Bank

4 **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 12/16/22 Description of Gift Bread Platter

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 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.

Cindy Reyes

Signature of Local Government Officer

Please complete either option below:

(1) Affidavit

NOTARY PUBLIC
Cindy Gonzalez
Notary ID# 13086724-9
My Comm. Exp. 10-18-2024
STATE OF TEXAS

NOTARY STAMP/SEAL

Sworn to and subscribed before me by Cindy Reyes this the 16th day of December, 20 22, 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
	Cindy Gonzalez	Notary

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 Government Officer (Declarant)

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

City Secretary's Office Received Date 12/16/22

1 Name of Local Government Officer

EDUARDO MENDOZA

2 Office Held

CITY ENGINEER

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

TEDSI INFRASTRUCTURE GROUP-CONSULTING ENGINEERS

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

COOKIE PLATTER

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 12/14/22 Description of Gift 1) COOKIE PLATTER

Date Gift Accepted _____ Description of Gift _____

Date Gift Accepted _____ Description of Gift _____

(attach additional forms as necessary)

6 AFFIDAVIT

GABRIELA CANTU
NOTARY PUBLIC
STATE OF TEXAS
MY COMM. EXP. 10/26/25
NOTARY ID 13133076-3

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

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Eduardo Mendoza, this the 14th day of Dec., 20 22, to certify which, witness my hand and seal of office.

Gcantu Gabriela Cantu Senior Adm. Clerk

Signature of officer administering oath | Printed name of officer administering oath | Title of officer administering oath

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

City Secretary's Office Received Date 12/16/22

1 **Name of Local Government Officer**

EDUARDO MENDOZA

2 **Office Held**

CITY ENGINEER

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

SWG ENGINEERING, LLC

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

1. BUNTD CAKE-ENGINEERING

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 12/13/2022 Description of Gift 1) BUNDT CAKE / Shared with Staff

Date Gift Accepted _____ Description of Gift _____

Date Gift Accepted _____ Description of Gift _____

(attach additional forms as necessary)

6 **AFFIDAVIT**

GABRIELA CANTU
NOTARY PUBLIC
STATE OF TEXAS
MY COMM. EXP. 10/26/25
NOTARY ID 13133076-3

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

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Eduardo Mendoza, this the 13th day of December, 20 22, to certify which, witness my hand and seal of office.

GCantu — Gabriela Cantu — Senior Adm. Clerk

Signature of officer administering oath | Printed name of officer administering oath | Title of officer administering oath

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

City Secretary's Office Received Date 12/20/2022

1 **Name of Local Government Officer**

EDUARDO MENDOZA

2 **Office Held**

CITY ENGINEER

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

B2Z ENGINEERING

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

COOKIE TRAY

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 1 Description of Gift COOKIE TRAY (SHARING WITH OFFICE)

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 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.

NOTARY PUBLIC STATE OF TEXAS
GABRIELA CANTU
NOTARY PUBLIC
STATE OF TEXAS
MY COMM. EXP. 10/26/25
NOTARY ID 13133076-3

Signature of Local Government Officer

Please complete either option below:

(1) Affidavit

NOTARY STAMP / SEAL

Sworn to and subscribed before me by Eduardo Mendoza this the 20 day of Dec., 20 22, to certify which, witness my hand and seal of office.

Signature of officer administering oath | Gabriela Cantu — Printed name of officer administering oath | Sen. Adm. Clerk — 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 Government Officer (Declarant)

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

City Secretary's Office Received Date 12/20/2022

1 Name of Local Government Officer

EDUARDO MENDOZA

2 Office Held

CITY ENGINEER

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

MEGAMORPHOSIS

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

CHOCOLATE BOX

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 1 BOX Description of Gift CHOCOLATE BOX (SHARED IT WITH THE OFFICE)

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.

GABRIELA CANTU
NOTARY PUBLIC
STATE OF TEXAS
MY COMM. EXP. 10/26/25
NOTARY ID 13133076-3

Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Eduardo Mendoza, this the 19th day of Dec, 20 22, to certify which, witness my hand and seal of office.

gcantu Gabriela Cantu Adm. Clerk

Signature of officer administering oath | Printed name of officer administering oath | Title of officer administering oath

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

City Secretary's Office Received Date 12/21/22

1 **Name of Local Government Officer**
Cynthia Gonzalez

2 **Office Held**
Deputy Local Registrar

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

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

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 12/21/22 Description of Gift Basket of cookies

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 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.

Cynthia Gonzalez
Signature of Local Government Officer

NOTARY PUBLIC STATE OF TEXAS
Cindy Gonzalez
Notary ID# 13086724-9
My Comm. Exp. 10-18-2024
NOTARY STAMP/SEAL

Please complete either option below:

(1) Affidavit

Sworn to and subscribed before me by Cynthia Gonzalez this the 21 day of December 20 22, to certify which, witness my hand and seal of office.

Cindy Gonzalez — Signature of officer administering oath
Cindy Gonzalez — Printed name of officer administering oath
Notary — 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)

_____
Signature of Local Government Officer (Declarant)

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

City Secretary's Office Received Date 12/28/22

1 **Name of Local Government Officer**

Denny Meline

2 **Office Held**

Parks Director

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

Musco

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

Holiday Christmas Party

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 12/20/22 Description of Gift 6 $50 Visa gift cards ($300)

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 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

Please complete either option below:

(1) Affidavit

NOTARY STAMP / SEAL

MARY ANN JUAREZ
Notary Public, State of Texas
Expires 04/17/2023
I.D.# 12429211-2

Sworn to and subscribed before me by Denny Meline this the 20 day of December, 20 22, to certify which, witness my hand and seal of office.

Signature of officer administering oath | Maryann Juarez (Printed name of officer administering oath) | Accounting Supervisor (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)

Signature of Local Government Officer (Declarant)

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

City Secretary's Office
Received
Date 12/28/22

1 **Name of Local Government Officer**
Denny Meline

2 **Office Held**
Director of Parks

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

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

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 12/20/22 Description of Gift 3 $50 gift cards Longhorn Steakhouse ($150)

Date Gift Accepted _____ Description of Gift 2 $50 gift cards Texas Roadhouse ($100)

Date Gift Accepted _____ Description of Gift 2 $25 gift cards Texas Roadhouse

(attach additional forms as necessary)

6 **SIGNATURE** 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

Please complete either option below:

(1) Affidavit

NOTARY STAMP / SEAL

NOTARY PUBLIC STATE OF TEXAS
MARY ANN JUAREZ
Notary Public, State of Texas
Expires 04/17/2023
I.D.# 12429211-2

Sworn to and subscribed before me by Denny Meline this the 20 day of December, 20 22, to certify which, witness my hand and seal of office.

Signature of officer administering oath | Maryann Juarez (Printed name of officer administering oath) | Accounting Supevisor (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)

Signature of Local Government Officer (Declarant)

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

City Secretary's Office
Received
Date 12/28/22

1 **Name of Local Government Officer**
Sarai Garcia

2 **Office Held**
Parks Deputy Director

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

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

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 12/16/22 Description of Gift 2 $30 IHop gift cards ($60)

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 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.

Sarai Garcia
Signature of Local Government Officer

Please complete either option below:

(1) Affidavit

NOTARY STAMP / SEAL

MARY ANN JUAREZ
Notary Public, State of Texas
Expires 04/17/2023
I.D.# 12429211-2

Sworn to and subscribed before me by Sarai Garcia this the 16 day of December, 20 22, to certify which, witness my hand and seal of office.

Mary Ann Juarez — Accounting Supevisor

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) (zip code) (country)

Executed in _____ County, State of _____, on the _____ day of _____, 20_____.
(month) (year)

_____
Signature of Local Government Officer (Declarant)

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

City Secretary's Office Received Date 12/28/22

1 **Name of Local Government Officer**
Sarai Garcia

2 **Office Held**
Parks Deputy Director

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

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

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 12/16/22 Description of Gift 6 $50 gift cards ($300)

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 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.

Sarai Garcia
Signature of Local Government Officer

Please complete either option below:

(1) Affidavit

NOTARY STAMP / SEAL

MARY ANN JUAREZ
Notary Public, State of Texas
Expires 04/17/2023
I.D.# 12429211-2

Sworn to and subscribed before me by Sarai Garcia this the 16 day of December, 20 22, to certify which, witness my hand and seal of office.

Mary Ann Juarez — Mary Ann Juarez — Accounting Clerk

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) (zip code) (country)

Executed in _____ County, State of _____, on the _____ day of _____ (month), 20_____ (year).

_____
Signature of Local Government Officer (Declarant)

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

City Secretary's Office Received Date 12/28/22

1 **Name of Local Government Officer**

Sarai Garcia

2 **Office Held**

Parks Deputy Director

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

Fastenal

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

Employee Christmas Party

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 12/09/22 Description of Gift $100 Check made out to City of McAllen Employee ($100)

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 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

Please complete either option below:

(1) Affidavit

NOTARY STAMP/SEAL

MARY ANN JUAREZ
Notary Public, State of Texas
Expires 04/17/2023
I.D.# 12429211-2

Sworn to and subscribed before me by Sarai Garcia this the 12 day of December, 20 22, to certify which, witness my hand and seal of office.

Mary Ann Juarez — Printed name of officer administering oath

Accounting Supervisor — Title of officer administering oath

Signature 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 Government Officer (Declarant)

LOCAL GOVERNMENT OFFICER CONFLICTS DISCLOSURE STATEMENT

FORM CIS

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

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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

City Secretary's Office
Received
Date 12/28/22

1 **Name of Local Government Officer**

Sarai Garcia

2 **Office Held**

Parks Deputy Director

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

O'Reilly

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

Employee Christmas Party

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 12/09/22 Description of Gift $50 Wal Mart gift card ($50)

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 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

Please complete either option below:

(1) Affidavit

NOTARY STAMP / SEAL

MARY ANN JUAREZ
Notary Public, State of Texas
Expires 04/17/2023
I.D.# 12429211-2

Sworn to and subscribed before me by Sarai Garcia this the 12 day of December, 20 22, to certify which, witness my hand and seal of office.

Mary Ann Juarez — Accounting Supervisor

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) (zip code) (country)

Executed in _____ County, State of _____, on the _____ day of _____, 20_____.
(month) (year)

_____
Signature of Local Government Officer (Declarant)

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

City Secretary's Office Received Date 12/28/22

1 **Name of Local Government Officer**

Sarai Garcia

2 **Office Held**

Parks Deputy Director

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

Valley Tires

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

Employee Christmas Party

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 12/09/22 Description of Gift $50 Wal Mart gift card ($50)

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 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.

Sarai Garcia

Signature of Local Government Officer

Please complete either option below:

(1) Affidavit

NOTARY STAMP / SEAL

NOTARY PUBLIC STATE OF TEXAS

MARY ANN JUAREZ
Notary Public, State of Texas
Expires 04/17/2023
I.D.# 12429211-2

Sworn to and subscribed before me by Sarai Garcia this the 12 day of December, 20 22, to certify which, witness my hand and seal of office.

Mary Ann Juarez — Mary Ann Juarez — Accounting Supervisor

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) (zip code) (country)

Executed in _____ County, State of _____, on the _____ day of _____, 20_____.

(month) (year)

_____

Signature of Local Government Officer (Declarant)

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

City Secretary's Office Received Date 12/28/22

1 **Name of Local Government Officer**

Sarai Garcia

2 **Office Held**

Parks Deputy Director

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

Uline

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

Employee Christmas Party

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 12/09/22 Description of Gift backpack, lunch bag ($20)

Date Gift Accepted 12/09/22 Description of Gift chair ($30)

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 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.

Sarai Garcia

Signature of Local Government Officer

Please complete either option below:

(1) Affidavit

NOTARY STAMP / SEAL:

NOTARY PUBLIC STATE OF TEXAS
MARY ANN JUAREZ
Notary Public, State of Texas
Expires 04/17/2023
I.D.# 12429211-2

Sworn to and subscribed before me by Sarai Garcia this the 12 day of December, 20 22, to certify which, witness my hand and seal of office.

Mary Ann Juarez — Printed name of officer administering oath

Accounting Supervisor — Title of officer administering oath

Signature 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 Government Officer (Declarant)

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

City Secretary's Office Received Date 12/28/22

1 **Name of Local Government Officer**

Sarai Garcia

2 **Office Held**

Parks Deputy Director

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

Razo Auto Body

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

Employee Christmas Party

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 12/09/22 Description of Gift 3 $50 HEB gift cards ($150)

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 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.

Sarai Garcia

Signature of Local Government Officer

Please complete either option below:

(1) Affidavit

NOTARY STAMP / SEAL

NOTARY PUBLIC STATE OF TEXAS
MARY ANN JUAREZ
Notary Public, State of Texas
Expires 04/17/2023
I.D.# 12429211-2

Sworn to and subscribed before me by Sarai Garcia this the 12 day of December, 20 22, to certify which, witness my hand and seal of office.

Mary Ann Juarez — Accounting Supervisor

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) (zip code) (country)

Executed in _____ County, State of _____, on the _____ day of _____, 20_____.
(month) (year)

_____

Signature of Local Government Officer (Declarant)

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

City Secretary's Office Received Date 12/28/22

1 **Name of Local Government Officer**

Sarai Garcia

2 **Office Held**

Parks Deputy Director

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

Alamo Iron Works

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

Employee Christmas Party

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 12/09/22 Description of Gift 5 Stanley 12 in 1 tool set ($27x5) ($135)

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 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

Please complete either option below:

(1) Affidavit

NOTARY STAMP / SEAL

MARY ANN JUAREZ
Notary Public, State of Texas
Expires 04/17/2023
I.D.# 12429211-2

Sworn to and subscribed before me by Sarai Garcia this the 12 day of December, 20 22, to certify which, witness my hand and seal of office.

Signature of officer administering oath | Mary Ann Juarez (Printed name of officer administering oath) | Accounting Supervisor (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)

_____
Signature of Local Government Officer (Declarant)

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

City Secretary's Office Received Date 12/28/22

1 **Name of Local Government Officer**

Sarai Garcia

2 **Office Held**

Parks Deputy Director

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

Ewing

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

Employee Christmas Party

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 12/09/22 Description of Gift socket set ($18)

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 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

Please complete either option below:

(1) Affidavit

NOTARY STAMP / SEAL: NOTARY PUBLIC STATE OF TEXAS — MARY ANN JUAREZ, Notary Public, State of Texas, Expires 04/17/2023, I.D.# 12429211-2

Sworn to and subscribed before me by Sarai Garcia this the 12 day of December, 20 22, to certify which, witness my hand and seal of office.

Mary Ann Juarez — Accounting Supervisor

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) (zip code) (country)

Executed in _____ County, State of _____, on the _____ day of _____ (month), 20_____ (year).

_____

Signature of Local Government Officer (Declarant)

LOCAL GOVERNMENT OFFICER CONFLICTS DISCLOSURE STATEMENT

FORM CIS

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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

City Secretary's Office Received Date 12/28/22

1 **Name of Local Government Officer**

Sarai Garcia

2 **Office Held**

Parks Deputy Director

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

Art's Trucking

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

Employee Christmas Party

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 12/09/22 Description of Gift $250 check made out to the City of McAllen ($250)

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 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

Please complete either option below:

(1) Affidavit

NOTARY STAMP / SEAL

MARY ANN JUAREZ
Notary Public, State of Texas
Expires 04/17/2023
I.D.# 12429211-2

Sworn to and subscribed before me by Sarai Garcia this the 12 day of December, 20 22, to certify which, witness my hand and seal of office.

Signature of officer administering oath | Mary Ann Juarez (Printed name of officer administering oath) | Accounting Supervisor (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 Government Officer (Declarant)

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

City Secretary's Office Received Date 12/28/22

1 **Name of Local Government Officer**

Sarai Garcia

2 **Office Held**

Parks Deputy Director

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

Central Fence

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

Employee Christmas Party

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 12/09/22 Description of Gift 2 $100 Academy gift cards ($200)

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 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

Please complete either option below:

(1) Affidavit

NOTARY STAMP / SEAL

MARY ANN JUAREZ
Notary Public, State of Texas
Expires 04/17/2023
I.D.# 12429211-2

Sworn to and subscribed before me by Sarai Garcia this the 12 day of December, 20 22, to certify which, witness my hand and seal of office.

Signature of officer administering oath | Mary Ann Juarez (Printed name of officer administering oath) | Accounting Supervisor (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 Government Officer (Declarant)

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

City Secretary's Office
Received
Date 12/28/22

1 **Name of Local Government Officer**

Sarai Garcia

2 **Office Held**

Parks Deputy Director

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

Tellus

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

Employee Christmas Party

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 12/09/22 Description of Gift Stihl pruning saw ($50)

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 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

Please complete either option below:

(1) Affidavit

NOTARY STAMP / SEAL

NOTARY PUBLIC STATE OF TEXAS
MARY ANN JUAREZ
Notary Public, State of Texas
Expires 04/17/2023
I.D.# 12429211-2

Sworn to and subscribed before me by Sarai Garcia this the 12 day of December, 20 22, to certify which, witness my hand and seal of office.

Mary Ann Juarez — Accounting Supervisor

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) (zip code) (country)

Executed in _____ County, State of _____, on the _____ day of _____ (month), 20_____ (year).

_____
Signature of Local Government Officer (Declarant)

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

City Secretary's Office Received Date 12/28/22

1 **Name of Local Government Officer**

Sarai Garcia

2 **Office Held**

Parks Deputy Director

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

Tellus

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

Employee Christmas Party

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 12/09/22 Description of Gift multi tool kit ($30)

Date Gift Accepted _____ Description of Gift wall clock ($25)

Date Gift Accepted _____ Description of Gift homeowner lopper ($50)

(attach additional forms as necessary)

6 **SIGNATURE** 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

Please complete either option below:

(1) Affidavit

NOTARY STAMP / SEAL

NOTARY PUBLIC STATE OF TEXAS
MARY ANN JUAREZ
Notary Public, State of Texas
Expires 04/17/2023
I.D.# 12429211-2

Sworn to and subscribed before me by Sarai Garcia this the 12 day of December, 20 22, to certify which, witness my hand and seal of office.

Mary Ann Juarez — Accounting Supervisor

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) (zip code) (country)

Executed in _____ County, State of _____, on the _____ day of _____ (month), 20_____ (year).

_____

Signature of Local Government Officer (Declarant)

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

City Secretary's Office
Received
Date 12/28/22

1 **Name of Local Government Officer**

Sarai Garcia

2 **Office Held**

Parks Deputy Director

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

Rodz Lawn Care

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

Employee Christmas Party

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 12/09/22 Description of Gift 20 $25 gift cards ($500)

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 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

Please complete either option below:

(1) Affidavit

NOTARY STAMP / SEAL

MARY ANN JUAREZ
Notary Public, State of Texas
Expires 04/17/2023
I.D.# 12429211-2

Sworn to and subscribed before me by Sarai Garcia this the 12 day of December, 20 22, to certify which, witness my hand and seal of office.

Signature of officer administering oath	Mary Ann Juarez	Accounting Supervisor
	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 Government Officer (Declarant)

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

City Secretary's Office
Received
Date 12/28/22

1 **Name of Local Government Officer**

Sarai Garcia

2 **Office Held**

Parks Deputy Director

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

Tejas Rentals

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

Employee Christmas Party

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 12/09/22 Description of Gift 2 $75 Visa gift cards ($150)

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 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

Please complete either option below:

(1) Affidavit

NOTARY STAMP / SEAL

NOTARY PUBLIC STATE OF TEXAS
MARY ANN JUAREZ
Notary Public, State of Texas
Expires 04/17/2023
I.D.# 12429211-2

Sworn to and subscribed before me by Sarai Garcia this the 12 day of December, 20 22, to certify which, witness my hand and seal of office.

Mary Ann Juarez — Accounting Supervisor

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) (zip code) (country)

Executed in _____ County, State of _____, on the _____ day of _____ (month), 20_____ (year).

_____
Signature of Local Government Officer (Declarant)

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

City Secretary's Office
Received
Date 12/28/22

1 **Name of Local Government Officer**

Sarai Garcia

2 **Office Held**

Parks Deputy Director

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

Reyes Tarps

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

Employee Christmas Party

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 12/09/22 Description of Gift 5 $25 Visa gift cards ($125)

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 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

Please complete either option below:

(1) Affidavit

NOTARY STAMP / SEAL

MARY ANN JUAREZ
Notary Public, State of Texas
Expires 04/17/2023
I.D.# 12429211-2

Sworn to and subscribed before me by Sarai Garcia this the 12 day of December, 20 22, to certify which, witness my hand and seal of office.

Signature of officer administering oath | Mary Ann Juarez (Printed name of officer administering oath) | Accounting Supervisor (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 Government Officer (Declarant)

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

City Secretary's Office
Received
Date 12/28/22

1 **Name of Local Government Officer**

Sarai Garcia

2 **Office Held**

Parks Deputy Director

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

Park Place

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

Employee Christmas Party

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 12/09/22 Description of Gift 5 $50 Bass Pro Shop gift cards ($250)

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 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

Please complete either option below:

(1) Affidavit

NOTARY STAMP / SEAL

MARY ANN JUAREZ
Notary Public, State of Texas
Expires 04/17/2023
I.D.# 12429211-2

Sworn to and subscribed before me by Sarai Garcia this the 12 day of December, 20 22, to certify which, witness my hand and seal of office.

Mary Ann Juarez — Accounting Supervisor

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) (zip code) (country)

Executed in _____ County, State of _____, on the _____ day of _____ (month), 20_____ (year).

Signature of Local Government Officer (Declarant)

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

City Secretary's Office
Received
Date 12/28/22

1 **Name of Local Government Officer**

Sarai Garcia

2 **Office Held**

Parks Deputy Director

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

Delta Signs

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

Employee Christmas Party

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 12/09/22 Description of Gift $15 Starbucks gift card ($15)

Date Gift Accepted _____ Description of Gift $25 Cracker Barrel gift card ($25)

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 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

Please complete either option below:

(1) Affidavit

NOTARY STAMP / SEAL

MARY ANN JUAREZ
Notary Public, State of Texas
Expires 04/17/2023
I.D.# 12429211-2

Sworn to and subscribed before me by Sarai Garcia this the 12 day of December, 20 22, to certify which, witness my hand and seal of office.

Signature of officer administering oath | Mary Ann Juarez (Printed name of officer administering oath) | Accounting Supervisor (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 Government Officer (Declarant)

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

City Secretary's Office
Received
Date 12/28/22

1 **Name of Local Government Officer**

Sarai Garcia

2 **Office Held**

Parks Deputy Director

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

Delta Signs

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

Employee Christmas Party

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 12/09/22 Description of Gift 5 $15 Whataburger gift cards($75)

Date Gift Accepted _____ Description of Gift 2 $25 Texas Road House gift cards ($50)

Date Gift Accepted _____ Description of Gift $25 Denny's gift card ($25)

(attach additional forms as necessary)

6 **SIGNATURE** 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.

Sarai Garcia
Signature of Local Government Officer

Please complete either option below:

(1) Affidavit

NOTARY STAMP / SEAL

NOTARY PUBLIC STATE OF TEXAS
MARY ANN JUAREZ
Notary Public, State of Texas
Expires 04/17/2023
I.D.# 12429211-2

Sworn to and subscribed before me by Sarai Garcia this the 12 day of December, 20 22, to certify which, witness my hand and seal of office.

Mary Ann Juarez — Mary Ann Juarez — Accounting Supervisor

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) (zip code) (country)

Executed in _____ County, State of _____, on the _____ day of _____, 20_____.
(month) (year)

_____
Signature of Local Government Officer (Declarant)

LOCAL GOVERNMENT OFFICER CONFLICTS DISCLOSURE STATEMENT

FORM CIS

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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

City Secretary's Office
Received
Date 12/28/22

1 **Name of Local Government Officer**

Sarai Garcia

2 **Office Held**

Parks Deputy Director

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

Beta

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

Employee Christmas Party

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 12/09/22 Description of Gift 8 in one tire gauge($25)

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 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

Please complete either option below:

(1) Affidavit

NOTARY STAMP / SEAL

NOTARY PUBLIC STATE OF TEXAS
MARY ANN JUAREZ
Notary Public, State of Texas
Expires 04/17/2023
I.D.# 12429211-2

Sworn to and subscribed before me by Sarai Garcia this the 12 day of December, 20 22, to certify which, witness my hand and seal of office.

Mary Ann Juarez — Accounting Supervisor

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) (zip code) (country)

Executed in _____ County, State of _____, on the _____ day of _____, 20_____.
(month) (year)

_____
Signature of Local Government Officer (Declarant)

LOCAL GOVERNMENT OFFICER CONFLICTS DISCLOSURE STATEMENT

FORM CIS

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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

City Secretary's Office Received Date 12/28/22

1 **Name of Local Government Officer**

Sarai Garcia

2 **Office Held**

Parks Deputy Director

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

Prestige Chemicals

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

Employee Christmas Party

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 12/09/22 Description of Gift $50 Home Depot gift card ($50)

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 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

Please complete either option below:

(1) Affidavit

NOTARY STAMP / SEAL

NOTARY PUBLIC STATE OF TEXAS

MARY ANN JUAREZ
Notary Public, State of Texas
Expires 04/17/2023
I.D.# 12429211-2

Sworn to and subscribed before me by Sarai Garcia this the 12 day of December, 20 22, to certify which, witness my hand and seal of office.

Signature of officer administering oath | Mary Ann Juarez — Printed name of officer administering oath | Accounting Supervisor — 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)

_____
Signature of Local Government Officer (Declarant)

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

City Secretary's Office
Received
Date 12/28/22

1 **Name of Local Government Officer**

Sarai Garcia

2 **Office Held**

Parks Deputy Director

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

Site One

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

Employee Christmas Party

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 12/09/22 Description of Gift $50 gift card ($50)

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 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.

Sarai Garcia
Signature of Local Government Officer

Please complete either option below:

(1) Affidavit

NOTARY STAMP / SEAL

NOTARY PUBLIC STATE OF TEXAS
MARY ANN JUAREZ
Notary Public, State of Texas
Expires 04/17/2023
I.D.# 12429211-2

Sworn to and subscribed before me by Sarai Garcia this the 12 day of December, 20 22, to certify which, witness my hand and seal of office.

Mary Ann Juarez — Mary Ann Juarez — Accounting Supervisor

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) (zip code) (country)

Executed in _____ County, State of _____, on the _____ day of _____ (month), 20_____ (year).

_____
Signature of Local Government Officer (Declarant)

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

City Secretary's Office
Received
Date 12/23/22

1 **Name of Local Government Officer**

Sarai Garcia

2 **Office Held**

Parks Deputy Director

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

Camco

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

Employee Christmas Party

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 12/09/22 Description of Gift Ice Chest ($140.00)

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 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.

Sarai Garcia
Signature of Local Government Officer

Please complete either option below:

(1) Affidavit

NOTARY STAMP / SEAL

NOTARY PUBLIC STATE OF TEXAS
MARY ANN JUAREZ
Notary Public, State of Texas
Expires 04/17/2023
I.D.# 12429211-2

Sworn to and subscribed before me by Sarai Garcia this the 12 day of December, 20 22, to certify which, witness my hand and seal of office.

Mary Ann Juarez — Mary Ann Juarez — Accounting Supervisor

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) (zip code) (country)

Executed in _____ County, State of _____, on the _____ day of _____, 20_____.
(month) (year)

_____
Signature of Local Government Officer (Declarant)

LOCAL GOVERNMENT OFFICER CONFLICTS DISCLOSURE STATEMENT

FORM CIS

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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

City Secretary's Office
Received
Date 12/27/22

1 **Name of Local Government Officer**

Nallely Calderas

2 **Office Held**

Vitals / Statistics Receptionist Clerk

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

Rodriguez Flower Shop

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

Funeraria Del Angel Palm Valley

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 12-27-22 Description of Gift Christmas basket goodies, mug

Date Gift Accepted _____ Description of Gift Cookies, Snacks.

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 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.

Nallely Calderas
Signature of Local Government Officer

NOTARY PUBLIC
Cindy Gonzalez
Notary ID# 13086724-9
My Comm. Exp. 10-18-2024
STATE OF TEXAS

NOTARY STAMP/SEAL

Please complete either option below:

(1) Affidavit

Sworn to and subscribed before me by Nallely Calderas this the 27 day of December 20 22, 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
	Cindy Gonzalez	Notary

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)

_____
Signature of Local Government Officer (Declarant)

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

City Secretary's Office Received Date 12-28-22

1 **Name of Local Government Officer**
FLORENCIO DE LA CRUZ

2 **Office Held**
DESIGNER

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

4 **Description of the nature and extent of each employment or other business relationship and each family relationship with vendor named in item 3.**
BUNDT CAKE AND TINY BUND CAKE

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 12/21/2022 Description of Gift BUNDT CAKE AND TINY BUND CAKE SHARED WITH THE OFFICE

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 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.

GABRIELA CANTU
NOTARY PUBLIC
STATE OF TEXAS
MY COMM. EXP. 10/26/25
NOTARY ID 13133076-3

Signature of Local Government Officer

Please complete either option below:

(1) Affidavit

NOTARY STAMP / SEAL

Sworn to and subscribed before me by Florencio De la Cruz this the 21 day of December, 20 22, to certify which, witness my hand and seal of office.

Signature of officer administering oath | Gabriela Cantu (Printed name of officer administering oath) | Senior Adm. Clerk (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 Government Officer (Declarant)

CONFLICT DISCLOSURE STATEMENTS (CIS FORMS)

January 2023

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

City Secretary's Office
Received
Date 1/3/23

1 **Name of Local Government Officer**
Yvette M. Balderas

2 **Office Held**
Director of Grant Administration

3 **Name of vendor described by Sections 176.001(7) and 176.003(a), Local Government Code**
Boys and Girls Club of McAllen

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

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 12/21/22 Description of Gift Cookies and Candy

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 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.

Yvette Balderas
Signature of Local Government Officer

NOTARY PUBLIC
Cindy Gonzalez
Notary ID# 13086724-9
My Comm. Exp. 10-18-2024
STATE OF TEXAS

NOTARY STAMP/SEAL

Please complete either option below:

(1) Affidavit

Sworn to and subscribed before me by Yvette Balderas this the 3 day of January, 20 23, 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
	Cindy Gonzalez	Notary

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 Government Officer (Declarant)

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

City Secretary's Office
Received
Date 1/3/23

1 **Name of Local Government Officer**
Natalie Manzanares

2 **Office Held**
Director of Grant Administration

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

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

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 12/20/22 Description of Gift Bottle of cheese sauce

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 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.

Natalie Manzanares
Signature of Local Government Officer

Please complete either option below:

(1) Affidavit

NOTARY PUBLIC
Cindy Gonzalez
Notary ID# 13086724-9
My Comm. Exp. 10-18-2024
STATE OF TEXAS

NOTARY STAMP/SEAL

Sworn to and subscribed before me by Natalie Manzanares this the 3 day of January, 20 23, 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
CJ	Cindy Gonzalez	Notary

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)

_____
Signature of Local Government Officer (Declarant)

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

City Secretary's Office
Received
Date 1/3/23

1 **Name of Local Government Officer**
Yvette M. Balderas

2 **Office Held**
Director of Grant Administration

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

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

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 12/20/22 Description of Gift Bottle of cheese sauce

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 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.

Yvette Balderas
Signature of Local Government Officer

NOTARY PUBLIC
Cindy Gonzalez
Notary ID# 13086724-9
My Comm. Exp. 10-18-2024
STATE OF TEXAS

NOTARY STAMP/SEAL

Please complete either option below:

(1) Affidavit

Sworn to and subscribed before me by Yvette Balderas this the 3 day of January, 20 23, 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
	Cindy Gonzalez	Notary

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)

_____
Signature of Local Government Officer (Declarant)

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

City Secretary's Office
Received
Date 1/3/23

1 **Name of Local Government Officer**
Yvette M. Balderas

2 **Office Held**
Director of Grant Administration

3 **Name of vendor described by Sections 176.001(7) and 176.003(a), Local Government Code**
Affordable Homes of South Texas

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

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 12/14/22 Description of Gift Basket of Macarons

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 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.

Yvette Balderas
Signature of Local Government Officer

NOTARY PUBLIC
Cindy Gonzalez
Notary ID# 13086724-9
My Comm. Exp. 10-18-2024
STATE OF TEXAS

Please complete either option below:

(1) Affidavit

NOTARY STAMP / SEAL

Sworn to and subscribed before me by Yvette Balderas this the 3 day of January, 20 23, 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
	Cindy Gonzalez	Notary

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)

_____
Signature of Local Government Officer (Declarant)

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

City Secretary's Office Received Date 1/3/23

1 **Name of Local Government Officer**

DAVID GARZA

2 **Office Held**

DIRECTOR OF WW Systems

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

Southern Trenchless

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

Vendor

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 12/27/2022 Description of Gift Gift Card - Pappas - $250.00

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 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

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.

Signature of officer administering oath | Printed name of officer administering oath | Title of officer administering oath

OR

(2) Unsworn Declaration

My name is DAVID GARZA, and my date of birth is 02-03-1965.

My address is 812 E TAMIAMI AVE, PHARR, TX, 78577, ~~Hidalgo~~ USA.
(street) (city) (state) (zip code) (country)

Executed in Hidalgo County, State of TEXAS, on the 03 day of 01 (month), 20 23 (year).

Signature of Local Government Officer (Declarant)

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

City Secretary's Office
Received
Date 1/4/23

1 Name of Local Government Officer

Eduardo Mendoza

2 Office Held

City Engineer

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

Anthony Capul - Andale Construction

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

Construction Company

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 01-04-2023 Description of Gift Box of Carne Seca & Beans - Raffled to employees.

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.

GABRIELA CANTU
NOTARY PUBLIC
STATE OF TEXAS
MY COMM. EXP. 10/26/25
NOTARY ID 13133076-3

AFFIX NOTARY STAMP / SEAL ABOVE

Signature of Local Government Officer

Sworn to and subscribed before me, by the said Eduardo Mendoza, this the 4th day of January, 2023, 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
Gcantu	Gabriela Cantu	Senior Adm. Clerk

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

City Secretary's Office Received Date 1/5/23

1 Name of Local Government Officer

Mario Cruz

2 Office Held

Deputy City Engineer

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

Raba Kistner

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

Vendor

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 01-05-2023 Description of Gift BOX OF KRISPY KREME DONUTS

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.

Signature of Local Government Officer

NOTARY PUBLIC STATE OF TEXAS
GABRIELA CANTU
NOTARY PUBLIC
STATE OF TEXAS
MY COMM. EXP. 10/26/25
NOTARY ID 13133076-3

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Mario Cruz, this the 5th day of January, 20 23, to certify which, witness my hand and seal of office.

Signature of officer administering oath | Gabriela Cantu — Printed name of officer administering oath | Senior Adm. C. — Title of officer administering oath

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

City Secretary's Office Received Date 1/5/23

1 Name of Local Government Officer

Zeferino Mendoza

2 Office Held

Construction Manager

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

Quantum Mechanical Contractors

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

Contractor

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 01-05-2023 Description of Gift Basket with cookies & pastries.

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.

GABRIELA CANTU
NOTARY PUBLIC
STATE OF TEXAS
MY COMM. EXP. 10/26/25
NOTARY ID 13133076-3

Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Zeferino Mendoza, this the 5th day of January, 20 23, to certify which, witness my hand and seal of office.

GCantu Gabriela Cantu Senior Adm-Clerk

Signature of officer administering oath | Printed name of officer administering oath | Title of officer administering oath

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

City Secretary's Office
Received
Date 1/6/23

1 **Name of Local Government Officer**
Rick Zapata

2 **Office Held**
Vital Statistics

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

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

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 1/5/23 Description of Gift Pack of Cookies

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 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

Please complete either option below:

(1) Affidavit

NOTARY PUBLIC
Cindy Gonzalez
Notary ID# 13086724-9
My Comm. Exp. 10-18-2024
STATE OF TEXAS

NOTARY STAMP / SEAL

Sworn to and subscribed before me by Rick Zapata this the 6th day of January, 20 23, to certify which, witness my hand and seal of office.

Signature of officer administering oath | Cindy Gonzalez — Printed name of officer administering oath | Notary — 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)

_____
Signature of Local Government Officer (Declarant)

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

City Secretary's Office Received Date 1/6/23

1 **Name of Local Government Officer**

Samuel Herrera

2 **Office Held**

Fire Lieutenant - Fire Marshal's office

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

Baja Fish Tacos - McAllen Food Park

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

Fire Marshal's office

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 12/28/2022 Description of Gift ($) one free taco

Date Gift Accepted _____ Description of Gift (Raffle to Staff)

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 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

Please complete either option below:

(1) Affidavit

NOTARY STAMP / SEAL

NOTARY PUBLIC STATE OF TEXAS
MARINA RODRIGUEZ
Notary ID #133619707
My Commission Expires
March 1, 2026

Sworn to and subscribed before me by Marina Rodriguez this the 6th day of January, 20 23, to certify which, witness my hand and seal of office.

Marina Rodriguez — Marina Rodriguez — Notary

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) (zip code) (country)

Executed in _____ County, State of _____, on the _____ day of _____, 20_____.
(month) (year)

_____
Signature of Local Government Officer (Declarant)

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

City Secretary's Office Received Date 1/18/23 eg

1 **Name of Local Government Officer**

Mark Zamora

2 **Office Held**

McAllen Fire Department

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

South Texas Buick-GMC

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

Local Fire Department Responds to emergencies, conducts inspections at business

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 1-18-23 Description of Gift Five Extinguishers X 18 @ $70.00 each

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 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

Please complete either option below:

(1) Affidavit

NOTARY STAMP / SEAL

MARINA RODRIGUEZ
Notary ID #133619707
My Commission Expires
March 1, 2026

Sworn to and subscribed before me by Marina Rodriguez this the 18th day of January, 20 23, to certify which, witness my hand and seal of office.

Marina Rodriguez | Marina Rodriguez | Notary

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) (zip code) (country)

Executed in _____ County, State of _____, on the _____ day of _____, 20_____.
(month) (year)

_____
Signature of Local Government Officer (Declarant)

CONFLICT DISCLOSURE STATEMENTS (CIS FORMS)

February 2023

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

City Secretary's Office Received Date 2-6-2023

1 **Name of Local Government Officer**

Mark Zamora

2 **Office Held**

Fire Prevention

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

RGV Bedliners

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

Customer

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 2-3-23 Description of Gift Expired Fire Extinguisher

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 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

Please complete either option below:

(1) Affidavit

NOTARY STAMP / SEAL: NOTARY PUBLIC STATE OF TEXAS — MARINA RODRIGUEZ, Notary ID #133619707, My Commission Expires March 1, 2026

Sworn to and subscribed before me by, Marina Rodriguez this the 3rd day of February, 2023, to certify which, witness my hand and seal of office.

Marina Rodriguez — Signature of officer administering oath

Marina Rodriguez — Printed name of officer administering oath

Notary — 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)

_____
Signature of Local Government Officer (Declarant)

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

City Secretary's Office
Received
Date 2/8/23

1 **Name of Local Government Officer**
Jose Angel Trujillo III

2 **Office Held**
City Manager's Dept.

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

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

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 2/8/23 Description of Gift Box of 6 breadsticks

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 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

Please complete either option below:

(1) Affidavit

NOTARY STAMP/SEAL

NOTARY PUBLIC
Cindy Gonzalez
Notary ID# 13086724-9
My Comm. Exp. 10-18-2024
STATE OF TEXAS

Sworn to and subscribed before me by Jose Angel Trujillo III this the 8th day of February, 20 23, 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
	Cindy Gonzalez	Notary

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 Government Officer (Declarant)

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

City Secretary's Office Received Date 2-9-2023

1 **Name of Local Government Officer**
Alejandrina Morales

2 **Office Held**
Fire Inspector

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

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

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 2/8/23 Description of Gift Free plate & Drink

Date Gift Accepted 2/8/23 Description of Gift Free plate & Drink

Date Gift Accepted 2/8/23 Description of Gift 1 Orden de Tacos y 1 bebida gratis.

(attach additional forms as necessary)

6 **SIGNATURE** 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

Please complete either option below:

(1) Affidavit

NOTARY STAMP/SEAL — NOTARY PUBLIC STATE OF TEXAS — MARINA RODRIGUEZ Notary ID #133619707 My Commission Expires March 1, 2026

Sworn to and subscribed before me by Marina Rodriguez this the 08th day of February, 20 23, to certify which, witness my hand and seal of office.

Marina Rodriguez — Signature of officer administering oath

Marina Rodriguez — Printed name of officer administering oath

Notary — 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)

_____
Signature of Local Government Officer (Declarant)

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

City Secretary's Office Received Date 2-9-2023

1 **Name of Local Government Officer**

Mark Zamora

2 **Office Held**

Fire Prevention

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

Civilian

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

Civilian wanted to rid of expired fire extinguishers

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 2/7/23 Description of Gift Fire Extinguishers X 2

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 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

Please complete either option below:

(1) Affidavit

NOTARY STAMP/SEAL

NOTARY PUBLIC STATE OF TEXAS
MARINA RODRIGUEZ
Notary ID #133619707
My Commission Expires
March 1, 2026

Sworn to and subscribed before me by Marina Rodriguez this the 7th day of February, 20 23, to certify which, witness my hand and seal of office.

Marina Rodriguez | Marina Rodriguez | Notary

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) (zip code) (country)

Executed in _____ County, State of _____, on the _____ day of _____ (month), 20_____ (year).

_____
Signature of Local Government Officer (Declarant)

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

City Secretary's Office Received Date 2-14-23

1 **Name of Local Government Officer**

Jose Angel Trujillo III

2 **Office Held**

City Secretary's Dept.

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

Tina Ziegler (IMAS Guild)

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

Organization / Vendor

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 2/14/23 Description of Gift Small goodie bag

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 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.

Angel T. III

Signature of Local Government Officer

NOTARY PUBLIC Cindy Gonzalez Notary ID# 13086724-9 My Comm. Exp. 10-18-2024 STATE OF TEXAS

NOTARY STAMP/SEAL

Please complete either option below:

(1) Affidavit

Sworn to and subscribed before me by Jose Angel Trujillo III this the 14th day of February, 20 23, 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
Cindy Gonzalez	Cindy Gonzalez	Notary

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)

_____
Signature of Local Government Officer (Declarant)

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

City Secretary's Office
Received
Date 2-28-23

1 Name of Local Government Officer

Mario Cruz

2 Office Held

Deputy
City Engineer

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

KATRIN M. LEONARD, P.E.

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

RABA Kistner

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 2/22/2023 Description of Gift 1) Krispy Kreme Donuts

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.

NOTARY PUBLIC STATE OF TEXAS
GABRIELA CANTU
NOTARY PUBLIC
STATE OF TEXAS
MY COMM. EXP. 10/26/25
NOTARY ID 13133076-3

AFFIX NOTARY STAMP / SEAL ABOVE

[signature]
Signature of Local Government Officer

Sworn to and subscribed before me, by the said Mario Cruz, this the 23rd day of feb., 20 23, 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
[signature]	Gabriela Cantú	Senior Adm. Clerk

CONFLICT DISCLOSURE STATEMENTS (CIS FORMS)

April 2023

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

City Secretary's Office Received

Date 4-28-2023

1 **Name of Local Government Officer**

Norma A. Rodriguez

2 **Office Held**

Passport Facility Administrator - Passport Division

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

Loretta Szucs Baker

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

Passport Applicant

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 4/26/2023 Description of Gift Fruit Tray

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 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.

Norma A Rodriguez

Signature of Local Government Officer

NOTARY PUBLIC
Diana M. Silva
Notary ID# 12845221-7
My Comm. Exp. 11-22-2026
STATE OF TEXAS

NOTARY STAMP / SEAL

Please complete either option below:

(1) Affidavit

Sworn to and subscribed before me by Norma A Rodriguez this the 28th day of April, 20 23, to certify which, witness my hand and seal of office.

Diana M. Silva — Diana M Silva — Notary

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) (zip code) (country)

Executed in _____ County, State of _____, on the _____ day of _____, 20_____.
(month) (year)

_____

Signature of Local Government Officer (Declarant)

CONFLICT DISCLOSURE STATEMENTS (CIS FORMS)

May 2023

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

City Secretary's Office Received Date 5-17-23

1 **Name of Local Government Officer**

C. Cadena, J. Chavero, A. Morales, R. Ortiz, I. Villarreal

2 **Office Held**

Fire Marshal's Office

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

Abasto Corporation

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

The FMO conducts fire inspections at vendor's facilities.

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 5/11/2023 Description of Gift Firefighter tumbler with inspector's name

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 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

Please complete either option below:

(1) Affidavit

NOTARY STAMP/SEAL

NOTARY PUBLIC STATE OF TEXAS
MARINA RODRIGUEZ
Notary ID #133619707
My Commission Expires
March 1, 2026

Sworn to and subscribed before me by Marina Rodriguez this the 16th day of May, 20 23, to certify which, witness my hand and seal of office.

Signature of officer administering oath | Marina Rodriguez — Printed name of officer administering oath | Notary — 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 Government Officer (Declarant)

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
City Secretary's Office
Received
Date 5-26-23

1 **Name of Local Government Officer**

Elvira I. Alonzo

2 **Office Held**

City of McAllen - Public Works

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

Clark Chevrolet

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

Local car dealership

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 4/29/23 Description of Gift Meals - Delivered

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 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

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.

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) (zip code) (country)

Executed in _____ County, State of _____, on the _____ day of _____ (month), 20_____ (year).

Signature of Local Government Officer (Declarant)

CONFLICT DISCLOSURE STATEMENTS (CIS FORMS)

June 2023

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

City Secretary's Office Received Date 6-5-23

1 **Name of Local Government Officer**

Martino Trevino

2 **Office Held**

City of McAllen - Public Works

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

John Deere

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

Manufacturing

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 6/2/23 Description of Gift Meals - Delivered/prepared onsite

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 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.

FOR EA.

Signature of Local 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.

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) (zip code) (country)

Executed in _____ County, State of _____, on the _____ day of _____ (month), 20_____ (year).

Signature of Local Government Officer (Declarant)

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

City Secretary's Office
Received
Date 6/16/23

1 **Name of Local Government Officer**

Jason Shelton

2 **Office Held**

IT Systems Manager

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

Verkada

4 **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 6/16/23 Description of Gift Box of Cookies

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 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

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.

_____
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) (zip code) (country)

Executed in _____ County, State of _____, on the _____ day of _____ (month), 20_____ (year).

_____
Signature of Local Government Officer (Declarant)

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

City Secretary's Office
Received
Date 6/16/23

1 **Name of Local Government Officer**

Jason Skelton

2 **Office Held**

IT Systems Manager

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

Tubbesing

4 **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 6/13/23 Description of Gift Lunch

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 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

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.

_____
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) (zip code) (country)

Executed in _____ County, State of _____, on the _____ day of _____ (month), 20_____ (year).

_____
Signature of Local Government Officer (Declarant)

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

06/20/2023

1 **Name of Local Government Officer**

JAVIER ZAMORA

2 **Office Held**

Management Assistant

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

Consuela

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

Consuela Purse @ TXSWANA conference

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 6/13/23 Description of Gift Consuela Purse @ TXSWANA conference

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 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

NOTARY PUBLIC
Diana M. Silva
Notary ID# 12845221-7
My Comm. Exp. 11-22-2026
STATE OF TEXAS

Please complete either option below:

(1) Affidavit

NOTARY STAMP/SEAL

Sworn to and subscribed before me by Javier Zamora this the 20th day of June, 2023, to certify which, witness my hand and seal of office.

Diana M. Silva — Diana M. Silva — Notary

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) (zip code) (country)

Executed in _____ County, State of _____, on the _____ day of _____ (month), 20____ (year).

Signature of Local Government Officer (Declarant)

CONFLICT DISCLOSURE STATEMENTS (CIS FORMS)

July 2023

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

City Secretary's Office Received Date 7-13-2023

1 **Name of Local Government Officer**

Victor Rodriguez - McAllen Police Department

2 **Office Held**

Chief of Police

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

ULINE (12575 Uline Dr., Pleasant Prairie, WI)

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

Shipping Supply Specialist

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 7/11/23 Description of Gift (2) Uline Rolling Coolers (Cameo)

Date Gift Accepted 7/11/23 Description of Gift (1) Uline Cooler (Black/Blue)

Date Gift Accepted 7/11/23 Description of Gift (1) Uline Camp Chair (Cameo)

(attach additional forms as necessary) ***Will be raffled to police employees.

6 **SIGNATURE** 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

Please complete either option below:

(1) Affidavit

JAVIER RODRIGUEZ
Notary Public
STATE OF TEXAS
Notary ID# 1224147-0
My Comm. Exp. 07-26-2025

Sworn to and subscribed before me by Victor Rodriguez this the 11th day of July, 20 23, to certify which, witness my hand and seal of office.

Javier Rodriguez — Javier Rodriguez — Notary Public/Admn.

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) (zip code) (country)

Executed in _____ County, State of _____, on the _____ day of _____, 20_____.
(month) (year)

Signature of Local Government Officer (Declarant)

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

City Secretary's Office Received Date 7/21/23

1 **Name of Local Government Officer**

Vivian Garza

2 **Office Held**

Residential Supervisor

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

Texas Packet Load (Conference TxSWANA)

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

City vendor - Raffle held @ TxSWANA Conference

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 6/14/2023 Description of Gift Yeti Tote and Yeti Cups (2)

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 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

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.

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) (zip code) (country)

Executed in _____ County, State of _____, on the _____ day of _____ (month), 20_____ (year).

Signature of Local Government Officer (Declarant)

CONFLICT DISCLOSURE STATEMENTS (CIS FORMS)

August 2023

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

City Secretary's Office
Received
Date 8/11/23

1 **Name of Local Government Officer**

Denny A Meline

2 **Office Held**

Director

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

McAllen Chamber of Commerce

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

Raffle to staff

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 5/17/23 Description of Gift (2) Lamarca Prosecco Rose 187ml

Date Gift Accepted 5/17/23 Description of Gift (1) Freixenet Italian Rose 187ml

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 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

MARY ANN JUAREZ
Notary Public, State of Texas
Expires 06/02/2027
I.D.# 12429211-2

Please complete either option below:

(1) Affidavit

NOTARY STAMP / SEAL

Sworn to and subscribed before me by Denny A Meline this the 27th day of July,

20 23, to certify which, witness my hand and seal of office.

Signature of officer administering oath | Mary Ann Juarez — Printed name of officer administering oath | Accounting Supervisor — 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)

Signature of Local Government Officer (Declarant)

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

City Secretary's Office
Received
Date 8/11/23

1 **Name of Local Government Officer**

Denny A Meline

2 **Office Held**

Director

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

Zencity

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

Raffle to staff

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 7/1/23 Description of Gift socks ($10.00)

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 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.

MARY ANN JUAREZ
Notary Public, State of Texas
Expires 06/02/2027
I.D.# 12429211-2

Signature of Local Government Officer

Please complete either option below:

(1) Affidavit

NOTARY STAMP / SEAL

Sworn to and subscribed before me by Denny A Meline this the 27th day of July, 20 23, 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
	Mary Ann Juarez	Accounting Supervisor

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)

_____
Signature of Local Government Officer (Declarant)

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

City Secretary's Office Received Date 8/11/23

1 **Name of Local Government Officer**

Carina Jimenez

2 **Office Held**

Deputy Director of Programs

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

Walmart

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

Donation - McFun Summer Program

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 5/9/23 Description of Gift Walmart Gift Card $100.00

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 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.

MARY ANN JUAREZ
Notary Public, State of Texas
Expires 06/02/2027
I.D.# 12429211-2

_____
Signature of Local Government Officer

Please complete either option below:

(1) Affidavit

NOTARY STAMP / SEAL

Sworn to and subscribed before me by Carina Jimenez this the 9 day of August, 20 23, to certify which, witness my hand and seal of office.

Mary Ann Juarez — Accounting Supervisor

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) (zip code) (country)

Executed in _____ County, State of _____, on the _____ day of _____, 20_____.
(month) (year)

_____
Signature of Local Government Officer (Declarant)

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

City Secretary's Office Received Date 8/11/23

1 **Name of Local Government Officer**

Carina Jimenez

2 **Office Held**

Deputy Director of Programs

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

Carlos Rosales

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

McAllen Youth Baseball Complex

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 8/7/23 Description of Gift Portable mound $500.00

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 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.

MARY ANN JUAREZ
Notary Public, State of Texas
Expires 06/02/2027
I.D.# 12429211-2

Signature of Local Government Officer

Please complete either option below:

(1) Affidavit

NOTARY STAMP / SEAL

Sworn to and subscribed before me by Carina Jimenez this the 9 day of August, 20 23, to certify which, witness my hand and seal of office.

Mary Ann Juarez — Signature of officer administering oath

Mary Ann Juarez — Printed name of officer administering oath

Accounting Supervisor — 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 Government Officer (Declarant)

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

City Secretary's Office
Received
Date 8/11/23

1 **Name of Local Government Officer**

Isidro Salinas

2 **Office Held**

Parks Supervisor

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

Professional Turf Products

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

Raffle to staff

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 6/13/23 Description of Gift Hat Promotion ($15.00)

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 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.

MARY ANN JUAREZ
Notary Public, State of Texas
Expires 06/02/2027
I.D.# 12429211-2

Isidro Salinas
Signature of Local Government Officer

Please complete either option below:

(1) Affidavit

NOTARY STAMP / SEAL

Sworn to and subscribed before me by Isidro Salinas this the 13 day of July, 20 23, to certify which, witness my hand and seal of office.

Mary Ann Juarez — Accounting Supervisor

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) (zip code) (country)

Executed in _____ County, State of _____, on the _____ day of _____, 20_____.
(month) (year)

_____
Signature of Local Government Officer (Declarant)

CONFLICT DISCLOSURE STATEMENTS (CIS FORMS)

September 2023

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

City Secretary's Office Received Date 9-11-2023

1 **Name of Local Government Officer**

McAllen Fire Department

2 **Office Held**

Prevention office

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

Lowe's

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

Marketing & Events

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 8/28 Description of Gift Stove

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 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

Please complete either option below:

(1) Affidavit

NOTARY STAMP / SEAL

MARINA RODRIGUEZ
Notary ID #133619707
My Commission Expires
March 1, 2026

Sworn to and subscribed before me by Marina Rodriguez this the 7th day of September, 20 23, to certify which, witness my hand and seal of office.

Marina Rodriguez | Marina Rodriguez | Notary

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) (zip code) (country)

Executed in _____ County, State of _____, on the _____ day of _____ (month), 20_____ (year).

_____
Signature of Local Government Officer (Declarant)

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

City Secretary's Office Received Date 9-26-23

1 **Name of Local Government Officer**

Victor Rodriguez - McAllen Police Department

2 **Office Held**

Chief of Police

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

Allied Universal Security Services

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

Security Services

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 09/22/23 Description of Gift Lunch at Palenque Grill provided for (Chief & 3 ACOP)

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 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

JAVIER RODRIGUEZ
Notary Public
STATE OF TEXAS
Notary ID# 1224147-0
My Comm. Exp. 07-26-2025

NOTARY STAMP / SEAL

Please complete either option below:

(1) Affidavit

Sworn to and subscribed before me by Victor Rodriguez this the 25th day of September, 20 23, to certify which, witness my hand and seal of office.

Javier Rodriguez — Javier Rodriguez — Notary Public/Admn.

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) (zip code) (country)

Executed in _____ County, State of _____, on the _____ day of _____ (month), 20_____ (year).

_____
Signature of Local Government Officer (Declarant)

CONFLICT DISCLOSURE STATEMENTS (CIS FORMS)

November 2023

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

City Secretary's Office Received Date 11/3/23

1 **Name of Local Government Officer**

Mark Zamora

2 **Office Held**

Fire Prevention

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

McAlister's Deli

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

local business

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 11-2-23 Description of Gift Food

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 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

Please complete either option below:

(1) Affidavit

NOTARY STAMP/SEAL — NOTARY PUBLIC STATE OF TX — MARINA RODRIGUEZ Notary ID #133619707 My Commission Expires March 1, 2026

Sworn to and subscribed before me by Marina Rodriguez this the 2nd day of November, 20 23, 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
Marina Rodriguez	Marina Rodriguez	Notary

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)

_____
Signature of Local Government Officer (Declarant)

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

City Secretary's Office Received Date 11/10/23

1 **Name of Local Government Officer**

Sarah Canizales

2 **Office Held**

Center Manager, Las Palmas Community Center

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

Kristi Collier

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

Senior fundraising raffle

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 11/9/23 Description of Gift Cash $50.00

Date Gift Accepted 11/9/23 Description of Gift Insignia 32in TC $130.00

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 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

Please complete either option below:

(1) Affidavit

NOTARY STAMP / SEAL

NOTARY PUBLIC STATE OF TEXAS
MARY ANN JUAREZ
Notary Public, State of Texas
Expires 06/02/2027
I.D.# 12429211-2

Sworn to and subscribed before me by Sarah Canizales this the 9th day of November, 20 23, to certify which, witness my hand and seal of office.

Mary Ann Juarez — Mary Ann Juarez — Accounting Supervisor

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) (zip code) (country)

Executed in _____ County, State of _____, on the _____ day of _____, 20_____.
(month) (year)

_____
Signature of Local Government Officer (Declarant)

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

City Secretary's Office Received Date 11/10/23

1 **Name of Local Government Officer**

Sarah Canizales

2 **Office Held**

Center Manager, Las Palmas Community Center

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

David Marroquin

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

Senior fundraising raffle

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 11/9/23 Description of Gift Walmart Gift Card $100.00

Date Gift Accepted 11/9/23 Description of Gift HEB Gift Card $100.00

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 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

Please complete either option below:

(1) Affidavit

NOTARY STAMP / SEAL

NOTARY PUBLIC STATE OF TEXAS
MARY ANN JUAREZ
Notary Public, State of Texas
Expires 06/02/2027
I.D.# 12429211-2

Sworn to and subscribed before me by Sarah Canizales this the 9th day of November, 20 23, to certify which, witness my hand and seal of office.

Mary Ann Juarez — Mary Ann Juarez — Accounting Supervisor

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) (zip code) (country)

Executed in _____ County, State of _____, on the _____ day of _____, 20_____.
(month) (year)

_____
Signature of Local Government Officer (Declarant)

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

City Secretary's Office
Received
Date 11/10/23

1 **Name of Local Government Officer**

Sarah Canizales

2 **Office Held**

Center Manager, Las Palmas Community Center

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

Hiram Gutierrez

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

Senior fundraising raffle

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 11/9/23 Description of Gift Vizio 65in TV $431.92

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 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

Please complete either option below:

(1) Affidavit

NOTARY STAMP / SEAL

NOTARY PUBLIC STATE OF TEXAS
MARY ANN JUAREZ
Notary Public, State of Texas
Expires 06/02/2027
I.D.# 12429211-2

Sworn to and subscribed before me by Sarah Canizales this the 9th day of November, 20 23, to certify which, witness my hand and seal of office.

Mary Ann Juarez — Mary Ann Juarez — Accounting Supervisor

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) (zip code) (country)

Executed in _____ County, State of _____, on the _____ day of _____ (month), 20_____ (year).

_____
Signature of Local Government Officer (Declarant)

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

City Secretary's Office Received Date 11/10/23

1 **Name of Local Government Officer**

Sarah Canizales

2 **Office Held**

Center Manager, Las Palmas Community Center

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

Jamison Merrick

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

Senior fundraising raffle

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 11/9/23 Description of Gift Papadeaux Gift Card $100.00

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 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

Please complete either option below:

(1) Affidavit

NOTARY STAMP / SEAL

NOTARY PUBLIC STATE OF TEXAS
MARY ANN JUAREZ
Notary Public, State of Texas
Expires 06/02/2027
I.D.# 12429211-2

Sworn to and subscribed before me by Sarah Canizales this the 9th day of November, 20 23, to certify which, witness my hand and seal of office.

Mary Ann Juarez — Mary Ann Juarez — Accounting Supervisor

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) (zip code) (country)

Executed in _____ County, State of _____, on the _____ day of _____ (month), 20_____ (year).

_____

Signature of Local Government Officer (Declarant)

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

City Secretary's Office Received Date 11/10/23

1 **Name of Local Government Officer**

Sarah Canizales

2 **Office Held**

Center Manager, Las Palmas Community Center

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

Edward Zamora Jr

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

Senior fundraising raffle

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 11/9/23 Description of Gift Yellow Accent Chair $100.00

Date Gift Accepted 11/9/23 Description of Gift Infinity 3 Disc Bike, Black $225.99

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 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

Please complete either option below:

(1) Affidavit

NOTARY STAMP / SEAL

NOTARY PUBLIC STATE OF TEXAS
MARY ANN JUAREZ
Notary Public, State of Texas
Expires 06/02/2027
I.D.# 12429211-2

Sworn to and subscribed before me by Sarah Canizales this the 9th day of November 20 23, to certify which, witness my hand and seal of office.

Mary Ann Juarez — Accounting Supervisor

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) (zip code) (country)

Executed in _____ County, State of _____, on the _____ day of _____ (month), 20_____ (year).

_____

Signature of Local Government Officer (Declarant)

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

City Secretary's Office Received Date 11/10/23

1 **Name of Local Government Officer**

Denny Meline

2 **Office Held**

Director

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

McAlister

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

Office staff

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 10/12/23 Description of Gift Cookie tray $40.00

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 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

Please complete either option below:

(1) Affidavit

NOTARY STAMP/SEAL

MARY ANN JUAREZ
Notary Public, State of Texas
Expires 06/02/2027
I.D.# 12429211-2

Sworn to and subscribed before me by Denny Meline this the 7th day of November, 20 23, to certify which, witness my hand and seal of office.

Signature of officer administering oath	Mary Ann Juarez Printed name of officer administering oath	Accounting Supervisor 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)

_____
Signature of Local Government Officer (Declarant)

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

City Secretary's Office
Received
Date 11/10/23

1 **Name of Local Government Officer**

Denny Meline

2 **Office Held**

Director

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

HEB and Convention Center

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

Office staff

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 11/6/23 Description of Gift Cake $20.00

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 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

Please complete either option below:

(1) Affidavit

NOTARY STAMP/SEAL

NOTARY PUBLIC STATE OF TEXAS
MARY ANN JUAREZ
Notary Public, State of Texas
Expires 06/02/2027
I.D.# 12429211-2

Sworn to and subscribed before me by Denny Meline this the 7th day of November, 20 23, to certify which, witness my hand and seal of office.

Mary Ann Juarez — Mary Ann Juarez — Accounting Supervisor

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) (zip code) (country)

Executed in _____ County, State of _____, on the _____ day of _____ (month), 20_____ (year).

_____
Signature of Local Government Officer (Declarant)

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

City Secretary's Office Received Date 11/10/23

1 **Name of Local Government Officer**

Denny Meline

2 **Office Held**

Director

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

Bread Smith

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

Office staff

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 10/9/23 Description of Gift Bread $35.00

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 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

Please complete either option below:

(1) Affidavit

NOTARY STAMP / SEAL

MARY ANN JUAREZ
Notary Public, State of Texas
Expires 06/02/2027
I.D.# 12429211-2

Sworn to and subscribed before me by Denny Meline this the 7th day of November, 2023, to certify which, witness my hand and seal of office.

Signature of officer administering oath	Mary Ann Juarez Printed name of officer administering oath	Accounting Supervisor 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)

_____
Signature of Local Government Officer (Declarant)

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

City Secretary's Office
Received
Date 11/10/23

1 **Name of Local Government Officer**

Denny Meline

2 **Office Held**

Director

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

BJ

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

Office staff

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 10/6/23 Description of Gift Food Tray $39.00

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 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

Please complete either option below:

(1) Affidavit

NOTARY STAMP / SEAL

NOTARY PUBLIC STATE OF TEXAS
MARY ANN JUAREZ
Notary Public, State of Texas
Expires 06/02/2027
I.D.# 12429211-2

Sworn to and subscribed before me by Denny Meline this the 7th day of November, 20 23, to certify which, witness my hand and seal of office.

Mary Ann Juarez — Mary Ann Juarez — Accounting Supervisor

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) (zip code) (country)

Executed in _____ County, State of _____, on the _____ day of _____ (month), 20_____ (year).

_____
Signature of Local Government Officer (Declarant)

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

City Secretary's Office Received Date 11/10/23

1 **Name of Local Government Officer**

Denny Meline

2 **Office Held**

Director

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

BJS

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

Office staff

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 10/6/23 Description of Gift Sandwich Tray $30.00

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 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

Please complete either option below:

(1) Affidavit

NOTARY STAMP / SEAL

NOTARY PUBLIC STATE OF TEXAS
MARY ANN JUAREZ
Notary Public, State of Texas
Expires 06/02/2027
I.D.# 12429211-2

Sworn to and subscribed before me by Denny Meline this the 7th day of November, 20 23, to certify which, witness my hand and seal of office.

Signature of officer administering oath	Mary Ann Juarez Printed name of officer administering oath	Accounting Supervisor 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)

_____
Signature of Local Government Officer (Declarant)

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 11/30/2023

1 **Name of Local Government Officer**

Ruben Solis

2 **Office Held**

Fleet Journeyman Technician Crew Leader

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

Diesel Fleet Care,LLC

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

Vendor-Diesel Fleet Care,LLC

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 11/30/2023 Description of Gift 3 Gift Baskets

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 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.

(Ruben Solis 1194)

Signature of Local Government Officer

Please complete either option below:

(1) Affidavit

NOTARY STAMP / SEAL

NOTARY PUBLIC STATE OF TEXAS
STEPHANIE PUENTES
My Notary ID # 125435224
Expires November 6, 2026

Sworn to and subscribed before me by Ruben Solis this the 30th day of November 20 23, to certify which, witness my hand and seal of office.

Stephanie Puentes STEPHANIE PUENTES

Signature of officer administering oath | Printed name of officer administering oath | Title of officer administering oath

NOTARY PUBLIC STATE OF TEXAS
STEPHANIE PUENTES
My Notary ID # 125435224
Expires November 6, 2026

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)

_____
Signature of Local Government Officer (Declarant)

CONFLICT DISCLOSURE STATEMENTS (CIS FORMS)

December 2023

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
12/01/2023

1 **Name of Local Government Officer**

Ruben Solis

2 **Office Held**

Fleet Operations Technician Crew Leader

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

Trucker's Equipment

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

Vendor-Tracker's Equipment

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 12/01/2023 Description of Gift 8-Gift Cards 25 dollars each

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 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.

(Ruben Solis #1199)
Signature of Local Government Officer

Please complete either option below:

(1) Affidavit

NOTARY STAMP / SEAL

STEPHANIE PUENTES
My Notary ID # 125435224
Expires November 6, 2026

Sworn to and subscribed before me by Ruben Solis this the 4th day of December, 20 23, to certify which, witness my hand and seal of office.

Stephanie Puentes — STEPHANIE PUENTES — Admin. Supervisor

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) (zip code) (country)

Executed in _____ County, State of _____, on the _____ day of _____ (month), 20_____ (year).

_____
Signature of Local Government Officer (Declarant)

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 12/05/2023

1 **Name of Local Government Officer**

Ruben Solis

2 **Office Held**

Fleet Journeyman Technician Crew Leader

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

J's Hydraulics Inc

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

Vendor- J's Hydraulics Inc

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 12/05/2023 Description of Gift 2-50in tvs

Date Gift Accepted 12/05/2023 Description of Gift 2-55in tvs

Date Gift Accepted 12/05/2023 Description of Gift 20-Gift Cards 50 Each

(attach additional forms as necessary)

6 **SIGNATURE** 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.

11940

Signature of Local Government Officer

Please complete either option below:

(1) Affidavit

NOTARY STAMP / SEAL

NOTARY PUBLIC STATE OF TEXAS
STEPHANIE PUENTES
My Notary ID # 125435224
Expires November 6, 2026

Sworn to and subscribed before me by Ruben Solis this the 8th day of December, 2023, to certify which, witness my hand and seal of office.

Stephanie Puentes STEPHANIE PUENTES Administrative Supervisor

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) (zip code) (country)

Executed in _____ County, State of _____, on the _____ day of _____, 20_____.
(month) (year)

_____

Signature of Local Government Officer (Declarant)

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

City Secretary's Office
Received
Date 12/8/23

1 **Name of Local Government Officer**

Denny Meline

2 **Office Held**

Director

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

Paris Bakery

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

Office

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 11/21/23 Description of Gift Assorted sweet bread tray $31.60

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 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

Please complete either option below:

(1) Affidavit

NOTARY STAMP / SEAL

MARY ANN JUAREZ
Notary Public, State of Texas
Expires 06/02/2027
I.D.# 12429211-2

Sworn to and subscribed before me by Denny Meline this the 12th day of December, 20 23, to certify which, witness my hand and seal of office.

Mary Ann Juarez — Accounting Supervisor

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) (zip code) (country)

Executed in _____ County, State of _____, on the _____ day of _____, 20_____.
(month) (year)

_____
Signature of Local Government Officer (Declarant)

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

City Secretary's Office
Received
Date 12/8/23

1 **Name of Local Government Officer**

Carina Jimenez

2 **Office Held**

Deputy Director, Programs

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

HEB

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

Halloween Festival

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 11/22/23 Description of Gift Gift Card $500.00

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 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

Please complete either option below:

(1) Affidavit

MARY ANN JUAREZ
Notary Public, State of Texas
Expires 06/02/2027
I.D.# 12429211-2

NOTARY STAMP / SEAL

Sworn to and subscribed before me by Carina Jimenez this the 22nd day of November, 20 23, to certify which, witness my hand and seal of office.

Signature of officer administering oath | Mary Ann Juarez — Printed name of officer administering oath | Accounting Supervisor — 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)

Signature of Local Government Officer (Declarant)

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
12/08/2023

1 **Name of Local Government Officer**
Ruben Solis

2 **Office Held**
Fleet Journeyman Technician Crew Leader

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

4 **Description of the nature and extent of each employment or other business relationship and each family relationship with vendor named in item 3.**
Vendor- Border Engine Rebuilders

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 12/08/2023 Description of Gift 4- Gift Cards 50 Dollars Each.

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 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.

RS 11/9/10
Signature of Local Government Officer

Please complete either option below:

(1) Affidavit

NOTARY STAMP / SEAL

STEPHANIE PUENTES
My Notary ID # 125435224
Expires November 6, 2026

Sworn to and subscribed before me by Ruben Solis this the 8th day of December, 2023, to certify which, witness my hand and seal of office.

Stephanie Puentes STEPHANIE PUENTES Administrative Supervisor

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) (zip code) (country)

Executed in _____ County, State of _____, on the _____ day of _____ (month), 20_____ (year).

_____
Signature of Local Government Officer (Declarant)

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
12-12-2023

1 **Name of Local Government Officer**
Ruben Solis

2 **Office Held**
Fleet Journeyman Technician Crew Leader

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

4 **Description of the nature and extent of each employment or other business relationship and each family relationship with vendor named in item 3.**
Vendor- Oyervides Tire Service

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 12/12/2023 Description of Gift 600 Dollar store credit certificate

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 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.

12/12/23
Signature of Local Government Officer

Please complete either option below:

(1) Affidavit

NOTARY STAMP / SEAL

STEPHANIE PUENTES
My Notary ID # 125435224
Expires November 6, 2026

Sworn to and subscribed before me by Ruben Solis this the 12th day of December, 20 23, to certify which, witness my hand and seal of office.

Stephanie Puentes — STEPHANIE PUENTES — Admin. Supervisor

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) (zip code) (country)

Executed in _____ County, State of _____, on the _____ day of _____ (month), 20_____ (year).

_____
Signature of Local Government Officer (Declarant)

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
12/12/2023

1 **Name of Local Government Officer**
Ruben Solis

2 **Office Held**
Fleet Journeyman Technician Crew Leader

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

4 **Description of the nature and extent of each employment or other business relationship and each family relationship with vendor named in item 3.**
Vendor-Southern Tire Mart

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 12/12/2023 Description of Gift 4- Tumblr Cups

Date Gift Accepted 12/12/2023 Description of Gift 2- Ice Chest

Date Gift Accepted 12/12/2023 Description of Gift 1- Blue tooth Speaker

(attach additional forms as necessary)

6 **SIGNATURE** 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.

12/12/23
Signature of Local Government Officer

Please complete either option below:

(1) Affidavit

NOTARY STAMP / SEAL

STEPHANIE PUENTES
My Notary ID # 125435224
Expires November 6, 2026

Sworn to and subscribed before me by Ruben Solis this the 12th day of December, 20 23, to certify which, witness my hand and seal of office.

Stephanie Puentes — STEPHANIE PUENTES — Administrative Supervisor

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) (zip code) (country)

Executed in _____ County, State of _____, on the _____ day of _____ (month), 20_____ (year).

_____
Signature of Local Government Officer (Declarant)

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
12-12-2023

1 **Name of Local Government Officer**
Ruben Solis

2 **Office Held**
Fleet Journeyman Technician Crew Leader

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

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

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 12/12/2023 Description of Gift 2- 100 Dollar Gift Cards

Date Gift Accepted 12/12/2023 Description of Gift 6- 50 Dollar Gift Cards

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 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.

11940
Signature of Local Government Officer

Please complete either option below:

(1) Affidavit

NOTARY STAMP / SEAL

NOTARY PUBLIC STATE OF TEXAS
STEPHANIE PUENTES
My Notary ID # 125435224
Expires November 6, 2026

Sworn to and subscribed before me by Ruben Solis this the 12th day of December, 20 23, to certify which, witness my hand and seal of office.

Stephanie Puentes — STEPHANIE PUENTES — Administrative Supervisor

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) (zip code) (country)

Executed in _____ County, State of _____, on the _____ day of _____ (month), 20_____ (year).

_____
Signature of Local Government Officer (Declarant)

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
12-13-2023

1 **Name of Local Government Officer**
Ruben Solis

2 **Office Held**
Fleet Journeyman Technician Crew Leader

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

4 **Description of the nature and extent of each employment or other business relationship and each family relationship with vendor named in item 3.**
Vendor- Capital Towing LLC

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 12/13/2023 Description of Gift 1- Yeti ice chest

Date Gift Accepted 12/13/2023 Description of Gift 5- Yeti Tumblers

Date Gift Accepted 12/13/2023 Description of Gift 2- Ugly Stik Fishing Rod

(attach additional forms as necessary)

6 **SIGNATURE** 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.

11940
Signature of Local Government Officer

Please complete either option below:

(1) Affidavit

STEPHANIE PUENTES
My Notary ID # 125435224
Expires November 6, 2026

NOTARY STAMP / SEAL

Sworn to and subscribed before me by Ruben Solis this the 13th day of December, 20 23, to certify which, witness my hand and seal of office.

Stephanie Puentes — STEPHANIE PUENTES — Administrative Supervisor

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) (zip code) (country)

Executed in _____ County, State of _____, on the _____ day of _____ (month), 20_____ (year).

_____
Signature of Local Government Officer (Declarant)

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
12/13/2023

1 **Name of Local Government Officer**
Ruben Solis

2 **Office Held**
Fleet Journeyman Technician Crew Leader

3 **Name of vendor described by Sections 176.001(7) and 176.003(a), Local Government Code**
A&G Fleet Service

4 **Description of the nature and extent of each employment or other business relationship and each family relationship with vendor named in item 3.**
Vendor- A&G Fleet Service

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 12/13/2023 Description of Gift 5-100 Dollar Gift Cards

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 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.

11440

Signature of Local Government Officer

Please complete either option below:

(1) Affidavit

NOTARY STAMP / SEAL

NOTARY PUBLIC STATE OF TEXAS
STEPHANIE PUENTES
My Notary ID # 125435224
Expires November 6, 2026

Sworn to and subscribed before me by Ruben Solis this the 13th day of December, 2023, to certify which, witness my hand and seal of office.

Stephanie Puentes — STEPHANIE PUENTES — ADMINISTRATIVE SUPERVISOR

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) (zip code) (country)

Executed in _____ County, State of _____, on the _____ day of _____, 20_____.
(month) (year)

_____
Signature of Local Government Officer (Declarant)

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
12/18/23

1 **Name of Local Government Officer**
Alejandro Ramos

2 **Office Held**
Public Works Supervisor

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

4 **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 12/18/23 Description of Gift (20) Dozen Tamales

Date Gift Accepted 12/18/23 Description of Gift (1) whiskey battle of Crown P.

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 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

Please complete either option below:

(1) Affidavit

NOTARY STAMP / SEAL

NOTARY PUBLIC STATE OF TEXAS
STEPHANIE PUENTES
My Notary ID # 125435224
Expires November 6, 2026

Sworn to and subscribed before me by Alejandro Ramos this the 18th day of December, 2023, to certify which, witness my hand and seal of office.

Stephanie Puentes | STEPHANIE PUENTES | Admin. Supervisor

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) (zip code) (country)

Executed in _____ County, State of _____, on the _____ day of _____, 20_____.
(month) (year)

_____
Signature of Local Government Officer (Declarant)

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

City Secretary's Office
Received
Date 12/13/23

1 **Name of Local Government Officer**
EDUARDO MENDOZA

2 **Office Held**
CITY ENGINEER

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

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

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 12/12/23 Description of Gift COOKIE TIN DISTRIBUTED TO ENGINEERING DEPT.

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 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

VERONICA SANCHEZ
NOTARY PUBLIC
STATE OF TEXAS
MY COMM. EXP. 10/27/25
NOTARY ID 781744-6

Please complete either option below:

(1) Affidavit

NOTARY STAMP / SEAL

Sworn to and subscribed before me by EDUARDO MENDOZA this the 12 day of DECEMBER, 20 23, to certify which, witness my hand and seal of office.

Veronica Sanchez — Veronica Sanchez — Notary

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) (zip code) (country)

Executed in _____ County, State of _____, on the _____ day of _____ (month), 20_____ (year).

_____
Signature of Local Government Officer (Declarant)

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

City Secretary's Office
Received
Date 12/13/23

1 **Name of Local Government Officer**

EDUARDO MENDOZA

2 **Office Held**

ENGINEERING DEPT.

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

SWG ENGINEERING, LLC

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

ENGINEERING FIRM

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 *12/13/2023* Description of Gift *PASTRIES*

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 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

VERONICA SANCHEZ
NOTARY PUBLIC
STATE OF TEXAS
MY COMM. EXP. 10/27/25
NOTARY ID 781744-6
NOTARY STAMP / SEAL

Please complete either option below:

(1) Affidavit

Sworn to and subscribed before me by Eduardo Mendoza this the 13TH day of DECEMBER, 20 23, to certify which, witness my hand and seal of office.

Veronica Sanchez — Veronica Sanchez — Notary

Signature of officer administering oath | Printed name of officer administering oath | Title of officer administering oath

(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)

_____
Signature of Local Government Officer (Declarant)

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

City Secretary's Office Received Date 12-15-23

1 **Name of Local Government Officer**
EDUARDO MENDOZA AND ENGINEERING

2 **Office Held**
ENGINEERING

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

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

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 12/14/2023 *Description of Gif* COUNTRY GIFT BASKET

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 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

VERONICA SANCHEZ
NOTARY PUBLIC
STATE OF TEXAS
MY COMM. EXP. 10/27/25
NOTARY ID 781744-6
NOTARY STAMP / SEAL

Please complete either option below:

(1) Affidavit

Sworn to and subscribed before me by Eduardo Mendoza this the 14TH day of DECEMBER, 20 23, to certify which, witness my hand and seal of office.

Veronica Sanchez | Veronica Sanchez | Notary
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) (zip code) (country)

Executed in _____ County, State of _____, on the _____ day of _____, 20_____.
(month) (year)

_____
Signature of Local Government Officer (Declarant)

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

City Secretary's Office Received Date 12-18-23

1 **Name of Local Government Officer**

EDUARDO MENDOZA

2 **Office Held**

ENGINEERING

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

HABITAT DEVELOPERS

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

ARCHITECTS

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 *12/14/2023* Description of Gift *MUGS & COFFEE*

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 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

VERONICA SANCHEZ
NOTARY PUBLIC
STATE OF TEXAS
MY COMM. EXP. 10/27/25
NOTARY ID 781744-6

NOTARY STAMP / SEAL

Please complete either option below:

(1) Affidavit

Sworn to and subscribed before me by EDUARDO MENDOZA this the 14TH day of DECEMBER, 20 23, to certify which, witness my hand and seal of office.

Veronica Sanchez — Signature of officer administering oath

Veronica Sanchez — Printed name of officer administering oath

Notary — Title of officer administering oath

(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)

_____
Signature of Local Government Officer (Declarant)

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

City Secretary's Office Received Date 12-18-23

1 **Name of Local Government Officer**

EDUARDO MENDOZA

2 **Office Held**

ENGINEERING

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

MEGAMORPHOSIS

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

ARCHITECTS

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 *12/15/2023* Description of Gift *COOKIES*

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 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

Please complete either option below:

(1) Affidavit

NOTARY STAMP / SEAL

VERONICA SANCHEZ
NOTARY PUBLIC
STATE OF TEXAS
MY COMM. EXP. 10/27/25
NOTARY ID 781744-6

Sworn to and subscribed before me by EDUARDO MENDOZA this the 15TH day of DECEMBER, 20 23, to certify which, witness my hand and seal of office.

Veronica Sanchez | Veronica Sanchez | Notary

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) (zip code) (country)

Executed in _____ County, State of _____, on the _____ day of _____ (month), 20_____ (year).

Signature of Local Government Officer (Declarant)

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

City Secretary's Office
Received
Date 12-19-23

1 **Name of Local Government Officer**
EDUARDO MENDOZA

2 **Office Held**
ENGINEERING

3 **Name of vendor described by Sections 176.001(7) and 176.003(a), Local Government Code**
B2Z ENGINEERING

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

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 *12/18/2023* Description of Gift *COOKIES B2Z*

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 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

VERONICA SANCHEZ
NOTARY PUBLIC
STATE OF TEXAS
MY COMM. EXP. 10/27/25
NOTARY ID 781744-6
NOTARY STAMP / SEAL

Please complete either option below:

(1) Affidavit

Sworn to and subscribed before me by EDUARDO MENDOZA this the 18TH day of DECEMBER, 20 23, to certify which, witness my hand and seal of office.

Signature of officer administering oath — Veronica Sanchez — Printed name of officer administering oath — Notary — 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 Government Officer (Declarant)

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

City Secretary's Office Received Date 12-20-23

1 **Name of Local Government Officer**
EDUARDO MENDOZA

2 **Office Held**
CITY ENGINEER

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

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

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 12/19/23 Description of Gift COFFEE AND CAKE

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 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.

GABRIELA CANTU
NOTARY PUBLIC
STATE OF TEXAS
MY COMM. EXP. 10/26/25
NOTARY ID 13133076-3

Signature of Local Government Officer

Please complete either option below:

(1) Affidavit

NOTARY STAMP / SEAL

Sworn to and subscribed before me by EDUARDO MENDOZA this the 19 day of DECEMBER, 20 23, to certify which, witness my hand and seal of office.

Gabriela Cantu Gabriela Cantu Notary

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) (zip code) (country)

Executed in _____ County, State of _____, on the _____ day of _____, 20_____.
(month) (year)

_____
Signature of Local Government Officer (Declarant)

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

City Secretary's Office Received Date 12-20-23

1 **Name of Local Government Officer**
EDUARDO MENDOZA

2 **Office Held**
CITY ENGINEER

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

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

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 12/20/23 Description of Gift BUTTER COOKIES TIN DISTRIBUTED TO ENGINEERING

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 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.

NOTARY PUBLIC STATE OF TEXAS
GABRIELA CANTU
NOTARY PUBLIC
STATE OF TEXAS
MY COMM. EXP. 10/26/25
NOTARY ID 13133076-3

Signature of Local Government Officer

Please complete either option below:

(1) Affidavit

NOTARY STAMP / SEAL

Sworn to and subscribed before me by EDUARDO MENDOZA this the 20 day of DECEMBER, 20 23, to certify which, witness my hand and seal of office.

G Cantu Gabriela Cantu Notary

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) (zip code) (country)

Executed in _____ County, State of _____, on the _____ day of _____ (month), 20_____ (year).

_____
Signature of Local Government Officer (Declarant)

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

City Secretary's Office Received Date 12-21-23

1 **Name of Local Government Officer**

Denny A. Meline

2 **Office Held**

Director, Parks & Recreation

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

Heritage Center

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

for department staff

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 12/20/23 Description of Gift pan de polvo cookies

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 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

Please complete either option below:

(1) Affidavit

NOTARY STAMP/SEAL

NOTARY PUBLIC Brenda Gonzalez Martinez Notary ID# 13199431-4 My Comm. Exp. 08-02-2027 STATE OF TEXAS

Sworn to and subscribed before me by Brenda Gonzalez-Martinez this the 20 day of December, 20 23, 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 _____, 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)

Signature of Local Government Officer (Declarant)

CONFLICT DISCLOSURE STATEMENTS (CIS FORMS)

January 2024

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

City Secretary's Office Received

Date 1-3-2024

1 **Name of Local Government Officer**

Denny A. McIne

2 **Office Held**

Director, Parks & Recreation

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

McAllen Chamber of Commerce

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

partnership for community events

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 12/21/23 Description of Gift cookies & 2 bottles of wine

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 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

Please complete either option below:

(1) Affidavit

NOTARY STAMP / SEAL

STATE OF TEXAS
My Comm. Exp. 06-02-2027
Notary ID# 131894314
Brenda Gonzalez Martinez
NOTARY PUBLIC

Sworn to and subscribed before me by Brenda Gonzalez-Martinez this the 21 day of December, 20 23, 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 _____, 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)

Signature of Local Government Officer (Declarant)

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

City Secretary's Office Received Date 1-15-2024

1 **Name of Local Government Officer**

Fidel Covarrubias

2 **Office Held**

Recreation Superintendent

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

McAllen Adult Soccer Association

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

Office

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 1/9/24 Description of Gift Saltgrass Gift Card $50.00

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 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

Please complete either option below:

(1) Affidavit

NOTARY STAMP / SEAL

MARY ANN JUAREZ
Notary Public, State of Texas
Expires 06/02/2027
I.D.# 12429211-2

Sworn to and subscribed before me by Fidel Covarrubias this the 16th day of January, 20 24, to certify which, witness my hand and seal of office.

Signature of officer administering oath | Mary Ann Juarez — Printed name of officer administering oath | Accounting Supervisor — 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)

_____
Signature of Local Government Officer (Declarant)

CONFLICT DISCLOSURE STATEMENTS (CIS FORMS)

February 2024

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

City Secretary's Office Received Date 2-15-24

1 **Name of Local Government Officer** Jose A. Trujillo

2 **Office Held** City Secretary

3 **Name of vendor described by Sections 176.001(7) and 176.003(a), Local Government Code** Teresa Castillo - Junior Catholic Daughters of the Americas

4 **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 2/15/24 Description of Gift Heart-Shaped box of Chocolates

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 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.

NOTARY PUBLIC Cindy Gonzalez Notary ID# 13086724-9 My Comm. Exp. 10-18-2024 STATE OF TEXAS

NOTARY STAMP / SEAL

Angel T. [illegible]

Signature of Local Government Officer

Please complete either option below:

(1) Affidavit

Sworn to and subscribed before me by Jose A. Trujillo this the 15 day of February, 20 24, 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
[signature]	Cindy Gonzalez	Notary

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)

_____
Signature of Local Government Officer (Declarant)

CONFLICT DISCLOSURE STATEMENTS (CIS FORMS)

March 2024

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

City Secretary's Office Received

Date 3-18-2024

1 **Name of Local Government Officer**

Mark Zamora

2 **Office Held**

McAllen Fire Department Fire Marshal's Offic

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

HEB & McAllen Fire Department

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

HEB donation to Fire Department for community risk reduction Program.

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 3-14-24 Description of Gift $200 gift card

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 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

Please complete either option below:

(1) Affidavit

NOTARY STAMP/SEAL — NOTARY PUBLIC STATE OF TEXAS — MARINA RODRIGUEZ Notary ID #133619707 My Commission Expires March 1, 2026

Sworn to and subscribed before me by Marina Rodriguez this the 14th day of March, 20 24, 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
Marina Rodriguez	Marina Rodriguez	Notary

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)

_____
Signature of Local Government Officer (Declarant)

CONFLICT DISCLOSURE STATEMENTS (CIS FORMS)

April 2024

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

City Secretary's Office
Received
Date 4/1/24

1 **Name of Local Government Officer**

Jason Shelton

2 **Office Held**

Systems Manager

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

STI Government Solutions

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

Vendor / Integrator

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 3/28/24 Description of Gift Mini Pastries, Bundt cakes

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 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.

NOTARY PUBLIC
Cindy Gonzalez
Notary ID# 13086724-9
My Comm. Exp. 10-18-2024
STATE OF TEXAS

NOTARY STAMP/SEAL

Signature of Local Government Officer

Please complete either option below:

(1) Affidavit

Sworn to and subscribed before me by Jason Shelton this the 28th day of March, 20 24, 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
	Cindy Gonzalez	Notary

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 Government Officer (Declarant)