FORM CIS

(mandations for completing and ming	inis form are provided on the flext page.)	
This questionnaire reflects changes made	de to the law by H.B. 23, 84th Leg., Regular Session.	OFFICE USE ONLY
	local governmental entity that the following local e of facts that require the officer to file this statement I Government Code.	Date Received
Name of Local Government Office	r	
Charlie Alderi 2 Office Held Superinteridea	Man	
2 Office Held	,	
Superintenden	<i>f</i>	
Name of vendor described by Sec	tions 176.001(7) and 176.003(a), Local Government	Code
NA		
Description of the nature and exter with vendor named in item 3.	nt of each employment or other business relationshi	p and each family relationship
NA		
List gifts accepted by the local go from vendor named in item 3 exce	vernment officer and any family member, if aggreg eds \$100 during the 12-month period described by	ate value of the gifts accepted Section 176.003(a)(2)(B).
	Description of Gift	
Date Gift Accepted $\mathcal{N}\mathcal{A}$	Description of Gift	
Date Gift Accepted NA	Description of Gift	
	(attach additional forms as necessary)	
I swear under penalty of perjury that the above statement is true and correct. I acknowledge that the disclosure applies to each family member (as defined by Section 176.001(2), Local Government Code) of this local government officer. I also acknowledge that this statement covers the 12-month period described by Section 176.003(a)(2)(B), Local Government Code.  STATE OF TEXAS  My Comm. Exp. 09-12-2019  Signature of Local Government Officer		
AFFIX NOTARY STAMP / SEAL ABO  Sworn to and subscribed before me, by the	at 1' All	, this the $35$ day
of August, 20 16, to	certify which, witness my hand and seal of office.	Director of
Signature of officer administering oath	Printed name of officer administering oath	Personnel itle of officer administering oath
ı		January Call

FORM CIS

This is the notice to the appropriate local governmental entity that the following local government officer has become aware of facts that require the officer to file this statement in accordance with Chapter 176, Local Government Code.  1 Name of Local Government Officer    KGH/IREW   Hooteward   Kode   Kode	This questionnaire reflects changes made to the law by H.B. 1491, 80th Leg., Regular S	ession. OFFICEUSEONLY
2 Office Held  Commerce Is Described by Sections 176.002(a) and 176.003(a), Local Government Code  4 Description of the nature and extent of employment or other business relationship with person named in item 3  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 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 additional forms as necessary overs the 12-month period described by Section 176.001(2), Local Government Code.  STATE OF TEXAS ON My Comm. Expires 08-12-2013  AFFIX NOTARY STAMP / SEAL ABOVE  Swom to and subscribed before me, by the said Kath Sea S. Hooten, this the day of June 20 13, to certify which, witness my hand and seal of office.  Ludenne My Comm. Expires 08-12-2013  AFFIX NOTARY STAMP / SEAL ABOVE  Swom to and subscribed before me, by the said Kath Sea S. Hooten, this the day of June 20 13, to certify which, witness my hand and seal of office.  Ludenne My Comm. Expires 08-12-2013  AFFIX NOTARY STAMP / SEAL ABOVE  Swom to and subscribed before me, by the said Kath Sea S. Hooten, this the day of June 20 13, to certify which, witness my hand and seal of office.  Ludenne My Comm. Expires 08-12-2013	government officer has become aware of facts that require the officer to file this state	
Description of the nature and extent of employment or other business relationship with person named in item 3	1 Name of Local Government Officer	
Description of the nature and extent of employment or other business relationship with person named in item 3	Kathleen S. Hooten	
Description of the nature and extent of employment or other business relationship with person named in item 3	2 Office Held	
Description of the nature and extent of employment or other business relationship with person named in item 3	Commerce ISD School Bosto	
Description of the nature and extent of employment or other business relationship with person named in item 3	Trustee, Place 1	
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 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.  NOTARY PUBLIC STATE OF TEXAS My Comm. Expires 09-12-2015  AFFIX NOTARY STAMP / SEAL ABOVE  Swom to and subscribed before me, by the said Kathleen S. Hooten, this the 4 for day of June 2013, to certify which, witness my hand and seal of office.  LUDONNAS MiTHERS Directory for the said Kathleen S. Hooten, this the 4 for day of June 2013, to certify which, witness my hand and seal of office.  LUDONNAS MITHERS Directory for the said Kathleen S. Hooten, this the 4 for day of June 2013, to certify which, witness my hand and seal of office.  LUDONNAS MITHERS Directory for the said Kathleen S. Hooten, this the 4 for day of June 2013, to certify which, witness my hand and seal of office.	Name of person described by Sections 176.002(a) and 176.003(a), Local Gove	ernment Code
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 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.  NOTARY PUBLIC STATE OF TEXAS My Comm. Expires 09-12-2015  AFFIX NOTARY STAMP / SEAL ABOVE  Swom to and subscribed before me, by the said Kathleen S. Hooten, this the 4 for day of June 2013, to certify which, witness my hand and seal of office.  LUDONNAS MiTHERS Directory for the said Kathleen S. Hooten, this the 4 for day of June 2013, to certify which, witness my hand and seal of office.  LUDONNAS MITHERS Directory for the said Kathleen S. Hooten, this the 4 for day of June 2013, to certify which, witness my hand and seal of office.  LUDONNAS MITHERS Directory for the said Kathleen S. Hooten, this the 4 for day of June 2013, to certify which, witness my hand and seal of office.		
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 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.  NOTARY PUBLIC STATE OF TEXAS My Comm. Expires 09-12-2015  AFFIX NOTARY STAMP / SEAL ABOVE  Swom to and subscribed before me, by the said Kathleen S. Hooten, this the 4 for day of June 2013, to certify which, witness my hand and seal of office.  LUDONNAS MiTHERS Directory for the said Kathleen S. Hooten, this the 4 for day of June 2013, to certify which, witness my hand and seal of office.  LUDONNAS MITHERS Directory for the said Kathleen S. Hooten, this the 4 for day of June 2013, to certify which, witness my hand and seal of office.  LUDONNAS MITHERS Directory for the said Kathleen S. Hooten, this the 4 for day of June 2013, to certify which, witness my hand and seal of office.		
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 Description of Gift  Date Gift Accepted Description of Gift  Date Gift Accepted Description of Gift  (attach additional forms as necessary)  AFFIDAVIT   I swear under penalty of perjury that the above statement is true and correct. I acknowledge that the disclosure applies to 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.  STATE OF TEXAS My Comm. Expires 09-12-2015  AFFIX NOTARY STAMP / SEAL ABOVE  Swom to and subscribed before me, by the said Kathle & G. Hootker, this the day of, to certify which, witness my hand and seal of office.  Ludding Market Loung Smithers, this the day of, to certify which, witness my hand and seal of office.	Description of the nature and extent of employment or other business relation	nship with person named in item 3
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 Description of Gift  Date Gift Accepted Description of Gift  Date Gift Accepted Description of Gift  (attach additional forms as necessary)  AFFIDAVIT   I swear under penalty of perjury that the above statement is true and correct. I acknowledge that the disclosure applies to 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.  STATE OF TEXAS My Comm. Expires 09-12-2015  AFFIX NOTARY STAMP / SEAL ABOVE  Swom to and subscribed before me, by the said Kathle & G. Hootker, this the day of, to certify which, witness my hand and seal of office.  Ludding Market Loung Smithers, this the day of, to certify which, witness my hand and seal of office.		
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 Description of Gift  Date Gift Accepted Description of Gift  Date Gift Accepted Description of Gift  (attach additional forms as necessary)  AFFIDAVIT   I swear under penalty of perjury that the above statement is true and correct. I acknowledge that the disclosure applies to 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.  STATE OF TEXAS My Comm. Expires 09-12-2015  AFFIX NOTARY STAMP / SEAL ABOVE  Swom to and subscribed before me, by the said Kathle & G. Hootker, this the day of, to certify which, witness my hand and seal of office.  Ludding Market Loung Smithers, this the day of, to certify which, witness my hand and seal of office.		
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 Description of Gift  Date Gift Accepted Description of Gift  Date Gift Accepted Description of Gift  (attach additional forms as necessary)  AFFIDAVIT   I swear under penalty of perjury that the above statement is true and correct. I acknowledge that the disclosure applies to 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.  STATE OF TEXAS My Comm. Expires 09-12-2015  AFFIX NOTARY STAMP / SEAL ABOVE  Swom to and subscribed before me, by the said Kathle & G. Hootker, this the day of, to certify which, witness my hand and seal of office.  Ludding Market Loung Smithers, this the day of, to certify which, witness my hand and seal of office.	5 List gifts accepted by the local government officer and any family member	excluding gifts described by Section
Date Gift Accepted Description of Gift	176.003(a-1), if aggregate value of the gifts accepted from person named in it	em 3 exceed \$250 during the 12-month
Date Gift Accepted Description of Gift		
Date Gift Accepted	Date Gift Accepted Description of Gift	
Date Gift Accepted	Date Ciff Accepted Description of Ciff	
(attach additional forms as necessary)  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.  STATE OF TEXAS My Comm. Expires 09-12-2015  My Comm. Expires 09-12-2015  AFFIX NOTARY STAMP / SEAL ABOVE  Sworm to and subscribed before me, by the said Kathleen S, Hooten, this the 4th day of June 2013, to certify which, witness my hand and seal of office.  Ludonna Smithus Ludonna Smithers Dir. Personne	Date Gitt Accepted Description of Gitt	
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.  STATE OF TEXAS My Comm. Expires 09-12-2015  My Comm. Expires 09-12-2015  AFFIX NOTARY STAMP / SEAL ABOVE  Sworm to and subscribed before me, by the said Kathleen S. Hooten, this the day of June 2013, to certify which, witness my hand and seal of office.  Ludonna Smithey Ludonna Smithers Dir. Fresome	Date Gift Accepted Description of Gift	
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.  Signature of Local Government Officer  AFFIX NOTARY STAMP / SEAL ABOVE  Sworm to and subscribed before me, by the said Kathleen S. Hooten, this the day of June 2013, to certify which, witness my hand and seal of office.  Ludonna Smithey Ludonna Smithers Dir Personne		
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.  STATE OF TEXAS My Comm. Expires 09-12-2015  AFFIX NOTARY STAMP / SEAL ABOVE  Sworn to and subscribed before me, by the said Kathleen S. Hooten, this the day of June 1, 20 13, to certify which, witness my hand and seal of office.  Ludonne Smither Ludonna Smithers Dir Personne	(attach additional forms as necessary)	
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.  STATE OF TEXAS My Comm. Expires 09-12-2015  Why Comm. Expires 09-12-2015  AFFIX NOTARY STAMP / SEAL ABOVE  Sworn to and subscribed before me, by the said Kathleen S. Hooten, this the day of June 1, 20 13, to certify which, witness my hand and seal of office.  Ludonne Smithley Ludonna Smithless Directions of the section 176.001(2), Local Government Officer.  I also acknowledge that this statement covers the 12-month period described by Section 176.003(a), Local Government Code.  Signature of Local Government Officer  AFFIX NOTARY STAMP / SEAL ABOVE  Sworn to and subscribed before me, by the said Kathleen S. Hooten, this the day of June 1, 20 13, to certify which, witness my hand and seal of office.  Ludonne Smithless Ludonna Smithless Directions of the section 176.001(2), Local Government Code.		tatement is true and correct. Lacknowledge
NOTARY PUBLIC STATE OF TEXAS My Comm. Expires 09-12-2015  My Comm. Expires 09-12-2015  AFFIX NOTARY STAMP / SEAL ABOVE  Sworn to and subscribed before me, by the said Kathleen S. Hooten, this the day of Jene, 20 13, to certify which, witness my hand and seal of office.  Ludonna Smithey Ludonna Smithers Dir. Personne		하는 10~10~10~10~10~10~10~10~10~10~10~10~10~1
STATE OF TEXAS  My Comm. Expires 09-12-2015  Kallow Subscribed Signature of Local Government Officer  AFFIX NOTARY STAMP / SEAL ABOVE  Sworn to and subscribed before me, by the said Kathleen S. Hooten, this the day of June 1, 20 13, to certify which, witness my hand and seal of office.  Ludonne Smithey Ludonna Smithers Dir. Personne		
Signature of Local Government Officer  AFFIX NOTARY STAMP / SEAL ABOVE  Sworn to and subscribed before me, by the said Kathleen S. Hooten, this the 4th day of June, 2013, to certify which, witness my hand and seal of office.  Lidonne Smithey Ludonna Smithers Dir. Personne		176.003(a), Local Government Code.
Sworn to and subscribed before me, by the said Kathleen S. Hooten, this the 4th day of June, 2013, to certify which, witness my hand and seal of office.  Lidonne Smithey Ludonna Smithers Dir. Personne	My Comm. Expires 09-12-2015	Sologle
Sworn to and subscribed before me, by the said Kathleen S. Hooten, this the 4th day of June, 2013, to certify which, witness my hand and seal of office.  Lidonne Smithey Ludonna Smithers Dir. Personne	Signature	of Local Covernment Officer
Swom to and subscribed before me, by the said Kathleen S. Hooten, this the 4th day of June, 2013, to certify which, witness my hand and seal of office.  Lidonne Smithey Ludonna Smithers Dir. Personne	Signature	of Local Government Onice
of June, 2013, to certify which, witness my hand and seal of office. Lidonne Smithey Ludoung Smithers Dir. Personne	AFFIX NOTARY STAMP / SEAL ABOVE	1
Lidonne Smithey Ludouna Smithers Dir. Spersonne	Sworn to and subscribed before me, by the said Kathleen S. Hos	Ten, this the 4th day
Lidonne Smithey Ludouna Smithers Dir. Spersonne	of, 20 13 , 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	Lidonne Smithes Ludonna Smit	hers Dir. L'Personne
	Signature of officer administering oath  Printed name of officer administering oath	Title of officer administering oath

FORM CIS

· · · · · · · · · · · · · · · · · · ·		
This questionnaire reflects changes made to the law by H.B. 23, 84th Leg., Regular Session.	OFFICE USE ONLY	
This is the notice to the appropriate local governmental entity that the following local government officer has become aware of facts that require the officer to file this statement in accordance with Chapter 176, Local Government Code.	Date Received	
1 Name of Local Government Officer		
RUBERT W POL" PIERCE		
2 Office Held		
Commerce: ISO ScHool Borrd Place: 7 3 Name of vendor described by Sections 176.001(7) and 176.003(a), Local Government		
Code Lynghia m Pirole macher Flanden		
Ly NTHIA M. PILRIL MMGARLT F. LONDON  4 Description of the nature and extent of each employment or other business relationshi	p and each family relationship	
with vendor named in item 3. $W_1 f_{L^-} \qquad \qquad DAuGH rem$		
5 List gifts accepted by the local government officer and any family member, if aggreg	ate value of the gifts accepted	
from vendor named in item 3 exceeds \$100 during the 12-month period described by		
Date Gift Accepted Description of Gift		
Date Gift Accepted Description of Gift		
Date Gift Accepted Description of Gift		
(attach additional forms as necessary)  6 SIGNATURE I swear under penalty of perjury that the above statement is true and correct. I acknowledge to the contract of the contra		
also acknowledge that this statement covers the 12-month period described by Sec Government Code.  Signature of Local	/ /	
Please complete either option below:		
ID #12135460 My Commission Expires December 30,/2021	1.	
V.I + W.I.	-th M	
Sworn to and subscribed before me by Merl W. Tueste this the	day of 1 (1).	
20 1 to certify which, witness my hand and seal of office.  Athlesn Into unnumeration ogas		
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	e) (zip code) (country)	
Executed in County, State of , on the day of (month)	, 20 (vear)	
Signature of Local Gover	nment Officer (Declarant)	

FORM CIS

(Instructions for completing and filing this for	rm are provided on the next page.)	
This questionnaire reflects changes made to the	he law by H.B. 1491, 80th Leg., Regular Session.	OFFICE USE ONLY
This is the notice to the appropriate local governmental entity that the following local government officer has become aware of facts that require the officer to file this statement		Date Received
in accordance with Chapter 176, Local Gove	ernment Code.	RECEIVED
Name of Local Government Officer		
GABRIEL M. WITT	KOPF	SEP 8 2010
2 Office Held		From the Office of the Superintendent
C.I.S.D. TRUSTEE	PL.Z	
Name of person described by Sections	176.002(a) and 176.003(a), Local Government	Code
NONE		
Description of the nature and extent of	employment or other business relationship w	ith person named in item 3
HOME		
176.003(a-1), if aggregate value of the g period described by Section 176.003(a)	iment officer and any family member, excluding ifts accepted from person named in item 3 exc (2)(B)  cription of Gift	ceed \$250 during the 12-month
Date Gift Accepted Desc	cription of Gift	
Date Gift Accepted Desc	cription of Gift	
	attach additional forms as necessary)	
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 BONNIE LEE HUNTENERS the 12-month period described by Section 176.003(a), Local Government Code.  STATE OF TEXAS My Commission  Expires 05/04/2013  Signature of Local Government Officer		
Sworn to and subscribed before me, by the said of, 20, to certify to	Gabriel M. W. Hkopf which, witness my hand and seal of office.	, this the day
Signature of officer administering oath	Printed name of officer administering oath	NOVARY TUBLE  Title of officer administering oath

FORM CIS

This questionnaire reflects changes made to the law by H.B. 23, 84th Leg., Regular Ses	sion. OFFICE USE ONLY
This is the notice to the appropriate local governmental entity that the following government officer has become aware of facts that require the officer to file this state in accordance with Chapter 176, Local Government Code.	o local ement Date Received
Name of Local Government Officer	
Raymond Green	
Office Held	
Commerce ISD School Board	
Name of vendor described by Sections 176.001(7) and 176.003(a), Local Gove	ernment Code
$\cap  a $	
Description of the nature and extent of each employment or other business rewith vendor named in item 3.	ationship and each family relationship
$n \mid a$	
List gifts accepted by the local government officer and any family member, from vendor named in item 3 exceeds \$100 during the 12-month period desc	f aggregate value of the gifts accepted ribed by Section 176.003(a)(2)(B).
$\sim 1$ a	
Date Gift Accepted Description of Gift	
Date Gift Accepted Description of Gift	
Date Gift Accepted Description of Gift	
(attach additional forms as necessary)	
I swear under penalty of perjury that the above that the disclosure applies to each family membovernment Code) of this local government off Notary Public  STATE OF TEXAS My Comm. Exp. 09-12-2019  Signatur	er (as defined by Section 176.001(2), Local
Sworn to and subscribed before me, by the said Baymond Gre of November, 20 17, to certify which, witness my hand and seal of office.  Signature of officer administering oath  Printed name of officer administering oath	eN, this the day  S

FORM CIS

(Instructions for completing and filing this form are provided on the next page.)	110 per 3 400 (VAL TV ARTS A	
This questionnaire reflects changes made to the law by H.B. 1491, 80th Leg., Regular Session.	OFFICE USE ONLY	
This is the notice to the appropriate local governmental entity that the following local government officer has become aware of facts that require the officer to file this statement in accordance with Chapter 176, Local Government Code.	Date Received	
1 Name of Local Government Officer		
LAVELLE HENDRICKS		
2 Office Held		
Trustee on school Dopad		
Name of person described by Sections 176.002(a) and 176.003(a), Local Government	Code	
Description of the nature and extent of employment or other business relationship w	ith person named in item 3	
List gifts accepted by the local government officer and any family member, exclud 176.003(a-1), if aggregate value of the gifts accepted from person named in item 3 experiod described by Section 176.003(a)(2)(B)	ing gifts described by Section ceed \$250 during the 12-month	
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. Lacknowledge	
LUDONNA SMITHERS NOTARY PUBLIC STATE OF TEXAS My Comm. Expires 09-12-2015  That the disclosure applies to a family member (as defined by Section 176.001(2), Local government officer. I also acknowledge that this statement covers the 12-month period described by Section 176.003(a), Local government Code.		
Signature of Local	Government Officer	
AFFIX NOTARY STAMP / SEAL ABOVE		
Sworn to and subscribed before me, by the said LaVelle Hendricks	, this the day	
of Mich 20 14, to certify which, witness my hand and seal of office.  Ludonne Smithers Ludonna Smithers	R 0 ( -	
Signature of officer administering oath  Printed name of officer administering oath	Board Sec.	

FORM CIS

This questionnaire reflects changes made to	o the law by H.B. 23, 84th Leg., Regular Session.	OFFICE USE ONLY
	al governmental entity that the following local facts that require the officer to file this statement overnment Code.	Date Received
Name of Local Government Officer		lactor
Kelsey Lytle		1/26/21
2 Office Held		
CISP Board o	4 Trustees, Plc4	
Name of vendor described by Section	ns 176.001(7) and 176.003(a), Local Government	Code
Mugs on the S	Square	
Description of the nature and extent o	f each employment or other business relationshi	p and each family relationship
Employee at mugs. Be	ckey Thompson, owner, is m	y mother
,		
List gifts accepted by the local gover	nment officer and any family member, if aggreg	ate value of the gifts accepted
from vendor fiamed in item 3 exceeds	\$ \$100 during the 12-month period described by	Section 176.003(a)(2)(B).
Date Gift Accepted De	scription of Gift	-
Date Gift Accepted De	escription of Gift	
Date Gift Accepted De	scription of Gift	
	(attach additional forms as necessary)	
AFFIDAVIT	I swear under penalty of perjury that the above statement i	o true and correct   columnidate
Borrows	that the disclosure applies to each family member (as defi	ned by Section 176.001(2), Local
LUDONNA SMITHERS	Covernment Code) of this local government officer. I also evers the 12-month period described by Section 176.003(a	
NOTARY PUBLIC STATE OF TEXAS MY COMM. EXP. 10-22-2023	. /	a/(2)(b), cocal dovernment code.
NOTARY ID 1014954-6	Mary grady	
4-004-0-0-0-0-0-0-0-0-0-0-0-0-0-0-0-0-0	Signature of Local	Government Officer
AFFIX NOTARY STAMP / SEAL ABOVE		
Sworn to and subscribed before me, by the sai	· Kelsey Lytle	, this the $\frac{26}{100}$ day
Λ	y which, witness my hand and seal of office.	day
. //	es Ludonna Smithers	D'r of Pancasas
Signature of officer administering oath	<b>5</b>	Div of tersoune

FORM CIS

This questionnaire reflects changes made to the law by H.B. 23, 84th Leg., Regular Session.		OFFICE USE ONLY
This is the notice to the appropriate local governmental entity that the following local government officer has become aware of facts that require the officer to file this statement in accordance with Chapter 176, Local Government Code.		Date Received
Name of Local Government Office	er .	
L. Ann R	ee l	
2 Office Held		
Place 6 Com	merce ISD Board Trustee	
Name of vendor described by Sec	ctions 176.001(7) and 176.003(a), Local Government	Code
NA		
Description of the nature and extended with vendor named in item 3.	ent of each employment or other business relationshi	p and each family relationship
NA		
	overnment officer and any family member, if aggreg eeds \$100 during the 12-month period described by	
nom vendor named in item o exc	seeds \$100 during the 12-month period described by	Section 170.003(a)(2)(b).
Date Gift Accepted	Description of Gift	
Date Gift Accepted NA	Description of Gift	
Date Gift Accepted NA	Description of Gift	
(attach additional forms as necessary)		
6 AFFIDAVIT	I swear under penalty of perjury that the above statement is	s true and correct. I acknowledge
that the disclosure applies to each family member (as defined by Section 176.001(2), Local		
Government Code) of this local government officer. I also acknowledge that this statement code.  M. RENEE BATES covers the 12-month period described by Section 176.003(a)(2)(B), Local Government Code.		
M. RENEE BATES  Covers the 12-month period described by Section 176.003(a)(2)(B), Local Government Code.  Notary Public, State of Texas  Comm. Expires 01-20-2026  Notary ID 4833979  Signature of Local Government Officer		
AFFIX NOTARY STAMP / SEAL ABOVE		
Sworn to and subscribed before me, by the said		
of Blumble, 20 22, to certify which, witness my hand and seal of office.		
Charles alderman Superintendent		
Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath		