

LOCAL GOVERNMENT OFFICER CONFLICTS DISCLOSURE STATEMENT

FORM CIS

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

This questionnaire reflects changes made to the law by H.B. 23, 84th Leg., Regular Session.

This is the notice to the appropriate local governmental entity that the following local government officer has become aware of facts that require the officer to file this statement in accordance with Chapter 176, Local Government Code.

OFFICE USE ONLY

Date Received

1 Name of Local Government Officer

Charlie Alderman

2 Office Held

Superintendent

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

NA

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

NA

5 List gifts accepted by the local government officer and any family member, if aggregate value of the gifts accepted from vendor named in item 3 exceeds \$100 during the 12-month period described by Section 176.003(a)(2)(B).

Date Gift Accepted NA Description of Gift _____

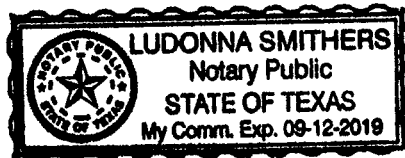
Date Gift Accepted NA Description of Gift _____

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 true and correct. I acknowledge that the disclosure applies to each family member (as defined by Section 176.001(2), Local Government Code) of this local government officer. I also acknowledge that this statement covers the 12-month period described by Section 176.003(a)(2)(B), Local Government Code.



Charlie Alderman

Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Charlie Alderman, this the 25th day of August, 20 16, to certify which, witness my hand and seal of office.

Ludonna Smithers Ludonna Smithers Director of Personnel
Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath

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OFFICE USE ONLY

Date Received

1 Name of Local Government Officer

Kathleen S. Hooten

2 Office Held

Commence ISD School Board
Trustee, Place 1

3 Name of person 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 0 Description of Gift 0

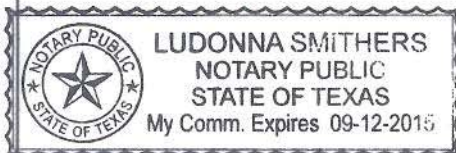
Date Gift Accepted _____ Description of Gift _____

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.



Kathleen S. Hooten

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.

Ludonna Smithers

Signature of officer administering oath

Ludonna Smithers Dir. of Personnel

Printed name of officer administering oath

Title of officer administering oath

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Date Received

1 Name of Local Government Officer

ROBERT W. "Doc" PIERCE

2 Office Held

COMMERCE ISD SCHOOL BOARD PLACE 7

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

CYNTHIA M. PIERCE, MARGARET F. LONDON

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

WIFE

DAUGHTER

5 List gifts accepted by the local government officer and any family member, if aggregate value of the gifts accepted 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 SIGNATURE

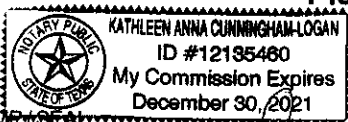
I swear under penalty of perjury that the above statement is true and correct. I acknowledge that the disclosure applies to each family member (as defined by Section 176.001(2), Local Government Code) of this local government officer. I also acknowledge that this statement covers the 12-month period described by Section 176.003(a)(2)(B), Local Government Code.

Robert W. Pierce

Signature of Local Government Officer

Please complete either option below:

(1) Affidavit



NOTARY STAMP/SEAL

Sworn to and subscribed before me by Robert W. Pierce this the 5th day of May.

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

Kathleen Anna Cunningham-Logan

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)

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OFFICE USE ONLY

Date Received

RECEIVED

SEP 8 2010

From the Office
of the Superintendent

1 Name of Local Government Officer

GABRIEL M. WITTKOPF

2 Office Held

C.I.S.D. TRUSTEE PL. 2

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

NONE

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

NONE

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 _____

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.



Gabriel M. Wittkopf

Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Gabriel M. Wittkopf, this the 8th day of Sept., 20 10, to certify which, witness my hand and seal of office.

Bonnie Lee Hunter
Signature of officer administering oath

Bonnie Lee Hunter
Printed name of officer administering oath

Notary Public
Title of officer administering oath

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OFFICE USE ONLY

Date Received

1 Name of Local Government Officer

Raymond Green

2 Office Held

Commerce ISD School Board

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

n/a

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

5 List gifts accepted by the local government officer and any family member, if aggregate value of the gifts accepted from vendor named in item 3 exceeds \$100 during the 12-month period described by Section 176.003(a)(2)(B).

n/a

Date Gift Accepted _____ Description of Gift _____

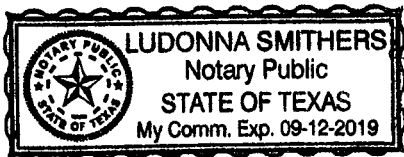
Date Gift Accepted _____ Description of Gift _____

Date Gift Accepted _____ Description of Gift _____

(attach additional forms as necessary)

6 AFFIDAVIT

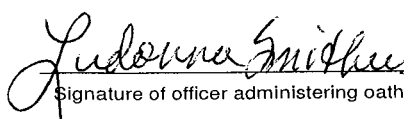
I swear under penalty of perjury that the above statement is true and correct. I acknowledge that the disclosure applies to each family member (as defined by Section 176.001(2), Local Government Code) of this local government officer. I also acknowledge that this statement covers the 12-month period described by Section 176.003(a)(2)(B), Local Government Code.




Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Raymond Green, this the 1st day of November, 20 17, to certify which, witness my hand and seal of office.

 Ludonna Smithers Director of Personnel
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

1 Name of Local Government Officer

LAVELLE HENDRICKS

2 Office Held

Trustee on School Board

3 Name of person 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)

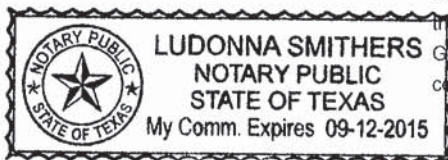
Date Gift Accepted _____ Description of Gift _____

Date Gift Accepted _____ Description of Gift _____

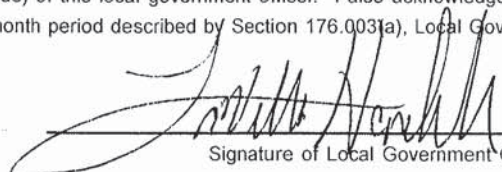
Date Gift Accepted _____ Description of Gift _____

(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.


Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Lavelle Hendricks, this the 30th day of May, 20 14, to certify which, witness my hand and seal of office.

Ludonna Smithers Ludonna Smithers Board Sec.
Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath

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OFFICE USE ONLY

Date Received

1/26/21

1 Name of Local Government Officer

Kelsey Lytle

2 Office Held

CISP Board of Trustees, Plc 4

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

Mugs on the Square

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 at mugs. Beckey Thompson, owner, is my mother.

5 List gifts accepted by the local government officer and any family member, if aggregate value of the gifts accepted 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 _____

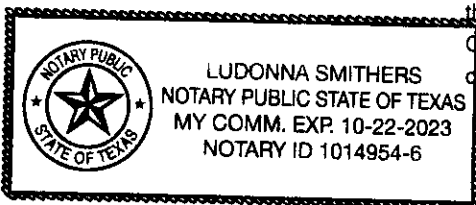
Date Gift Accepted _____ Description of Gift _____

Date Gift Accepted _____ Description of Gift _____

(attach additional forms as necessary)

6 AFFIDAVIT

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Kelsey Lytle

Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Kelsey Lytle, this the 26th day of Jan., 20 21, to certify which, witness my hand and seal of office.

Ludonna Smithers Ludonna Smithers Dir. of Personnel
Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath

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OFFICE USE ONLY

Date Received

1 Name of Local Government Officer

L. Ann Reel

2 Office Held

Place 6 Commerce ISD Board
Trustee

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

NA

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

NA

5 List gifts accepted by the local government officer and any family member, if aggregate value of the gifts accepted from vendor named in item 3 exceeds \$100 during the 12-month period described by Section 176.003(a)(2)(B).

Date Gift Accepted NA Description of Gift _____

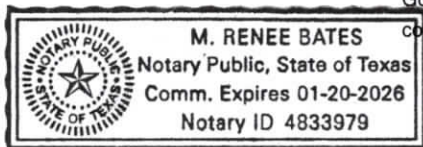
Date Gift Accepted NA Description of Gift _____

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 true and correct. I acknowledge that the disclosure applies to each family member (as defined by Section 176.001(2), Local Government Code) of this local 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]
Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Ann Reel, this the 15th day of December, 20 22, to certify which, witness my hand and seal of office.

[Signature]
Signature of officer administering oath

Charles Alderman
Printed name of officer administering oath

Superintendent
Title of officer administering oath