

# LOCAL GOVERNMENT OFFICER CONFLICTS DISCLOSURE STATEMENT

FORM CIS

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

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

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

**OFFICE USE ONLY**

Date Received

2/18/2020

*[Signature]*

1 Name of Local Government Officer

Stephen Paris-Clay Conley

2 Office Held

Stormwater Superintendent

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

San Angelo Community 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.

David Draper works as a nurse @ San Angelo Community Medical Center & is the father of Stephen Paris-Clay Conley

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

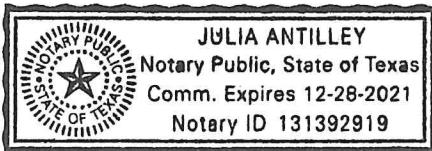
Date Gift Accepted \_\_\_\_\_ Description of Gift \_\_\_\_\_

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.



*[Signature: Steve Conley]*  
Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Stephen Conley, this the 18<sup>th</sup> day of February, 20 20, to certify which, witness my hand and seal of office.

*[Signature: Julia Antilley]*  
Signature of officer administering oath

Julia Antilley  
Printed name of officer administering oath

City Clerk  
Title of officer administering oath

# LOCAL GOVERNMENT OFFICER CONFLICTS DISCLOSURE STATEMENT

FORM CIS

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**OFFICE USE ONLY**

Date Received

2/12/2020



1 Name of Local Government Officer

Allison Strube

2 Office Held

Director of Water Utilities

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

Roger Strube

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

Father-in-law ( Roger Strube farms City Farm property near wastewater plant.)

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

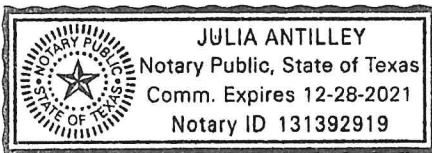
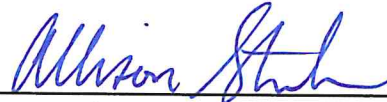
Date Gift Accepted \_\_\_\_\_ Description of Gift \_\_\_\_\_

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

(attach additional forms as necessary)

6 AFFIDAVIT

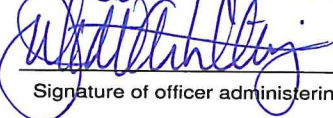
I swear under penalty of perjury that the above statement is true and correct. I acknowledge that the disclosure applies to each family member (as defined by Section 176.001(2), Local Government Code) of this local government officer. I also acknowledge that this statement covers the 12-month period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

Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Allison Strube, this the 12<sup>th</sup> day of February, 20 20, to certify which, witness my hand and seal of office.



Signature of officer administering oath

Julia Antilley

Printed name of officer administering oath

City Clerk

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

2/13/20  
*[Signature]*

1 Name of Local Government Officer

Allison Strube

2 Office Held

Director of Water Utilities

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

Uhl, Fitzsimons, Jewett, Burton & Wolff, PLLC

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

Allison Strube's parents use this law firm for their real estate

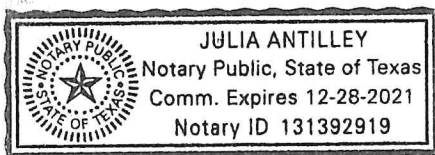
5 List gifts accepted by the local government officer and any family member, if aggregate value of the gifts accepted from vendor named in item 3 exceeds \$100 during the 12-month period described by Section 176.003(a)(2)(B).

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.



*[Signature]*

Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

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

*[Signature]*  
Signature of officer administering oath

Julia Antilley  
Printed name of officer administering oath

City Clerk  
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

2/12/2020



1 Name of Local Government Officer

Allison Strube

2 Office Held

Director of Water Utilities

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

Justin Strube

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

Husband (Justin Strube farms City owned property off of Douglas Loop.)

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

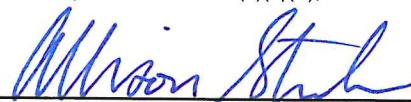
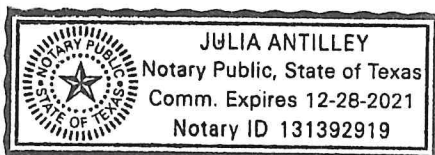
Date Gift Accepted \_\_\_\_\_ Description of Gift \_\_\_\_\_

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.



Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Allison Strube, this the 12th day of Feb., 20 20, to certify which, witness my hand and seal of office.



Signature of officer administering oath

Julia Antilley

Printed name of officer administering oath

City Clerk

Title of officer administering oath



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**OFFICE USE ONLY**

Date Received

2/2/2020



1 Name of Local Government Officer

Allison Strube

2 Office Held

Director of Water Utilities

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

Royce Pyssen / All-tex Irrigation Co-owner

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

Father

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

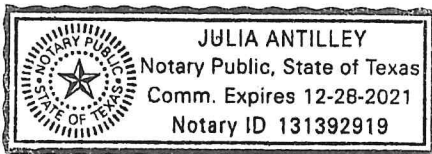
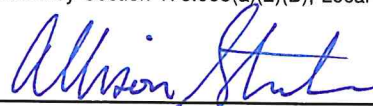
Date Gift Accepted \_\_\_\_\_ Description of Gift \_\_\_\_\_

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(attach additional forms as necessary)

**6 AFFIDAVIT**

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Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Allison Strube, this the 12<sup>th</sup> day of February, 2020, to certify which, witness my hand and seal of office.



Signature of officer administering oath

Julia Antilley

Printed name of officer administering oath

City Clerk

Title of officer administering oath

# LOCAL GOVERNMENT OFFICER CONFLICTS DISCLOSURE STATEMENT

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**OFFICE USE ONLY**

Date Received

2/11/2020

*[Signature]*

1 Name of Local Government Officer

Angela Bloss

2 Office Held

Budget Analyst, Sr.

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

Stubwire.com

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

Sell tickets on behalf of stubwire for events held on city property.

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

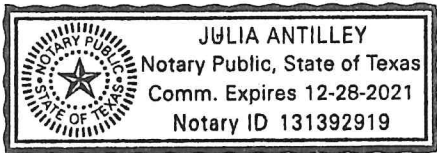
Date Gift Accepted \_\_\_\_\_ Description of Gift \_\_\_\_\_

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(attach additional forms as necessary)

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*[Signature]*  
Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Angela Bloss, this the 11<sup>th</sup> day of February, 20 20, to certify which, witness my hand and seal of office.

*[Signature]*  
Signature of officer administering oath

Julia Antilley  
Printed name of officer administering oath

City Clerk  
Title of officer administering oath



# LOCAL GOVERNMENT OFFICER CONFLICTS DISCLOSURE STATEMENT

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**OFFICE USE ONLY**

Date Received

2/10/2020



1 Name of Local Government Officer

Carl White

2 Office Held

Parks + Recreation Director

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

KFA - Kirby Franke 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.

friend of owner - Craig Kirby (occasional lunch + dinner together, Christmas gift exchange)

aggregate < \$100

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

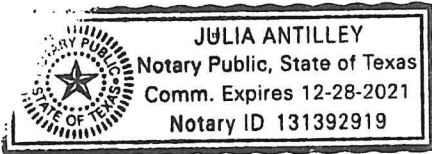
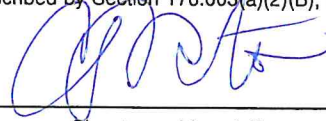
Date Gift Accepted \_\_\_\_\_ Description of Gift \_\_\_\_\_

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

(attach additional forms as necessary)

6 AFFIDAVIT

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Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Carl White, this the 10th day of Feb., 20 20, to certify which, witness my hand and seal of office.



Signature of officer administering oath

Julia Antilley

Printed name of officer administering oath

City Clerk

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

2/10/2020  
*[Signature]*

1 Name of Local Government Officer

Jessica Pirkle

2 Office Held

Purchasing Specialist

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

SKG 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.

Husband works for them

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

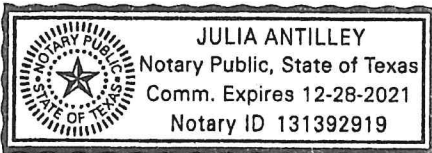
Date Gift Accepted \_\_\_\_\_ Description of Gift \_\_\_\_\_

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

(attach additional forms as necessary)

6 AFFIDAVIT

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*Jessica Pirkle*  
Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Jessica Pirkle, this the 10th day of Feb., 2020, to certify which, witness my hand and seal of office.

*[Signature]*  
Signature of officer administering oath

Julia Antilley  
Printed name of officer administering oath

City Clerk  
Title of officer administering oath



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**OFFICE USE ONLY**

Date Received

2/11/2020  
*[Signature]*

1 Name of Local Government Officer

*Julia Williams Antilley*

2 Office Held

*City Clerk*

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

*Tony Jones, Bill Williams Tire Center, Concho Propane, Sports Next Level, Cienete Lawn & Landscape, Livingston Onsite Consultants, Chick-fila, Concho Valley Electric, TxDOT, SA Headstart, Bronte Housing Authority, Blanket ISD, Coke County, Santa Anna ISD, Christoval ISD, CRMWD*

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

*Husband's business, Pinnacle Spraying, LLC has received over \$2,500 in income from these persons/vendors affiliated/potentially affiliated w/ the City w/in the past 12 months.*

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

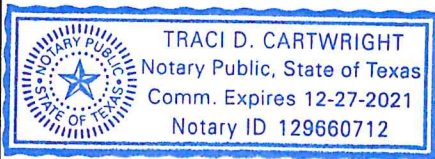
Date Gift Accepted \_\_\_\_\_ Description of Gift \_\_\_\_\_

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

(attach additional forms as necessary)

6 AFFIDAVIT

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*[Signature]*  
Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said *Julia Antilley*, this the *11th* day of *Feb.*, 20 *20*, to certify which, witness my hand and seal of office.

*Traci D. Cartwright* *Traci D. Cartwright* *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

2/10/2020

*[Signature]*

1 Name of Local Government Officer

Jay Shelton

2 Office Held

Admin Asst, Sr - Engineering

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

Shelton's Body Shop, Pardner's Body 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.

Auto body repair w/city / Fleet Vehicles - husband, brother

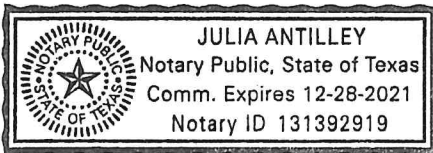
5 List gifts accepted by the local government officer and any family member, if aggregate value of the gifts accepted from vendor named in item 3 exceeds \$100 during the 12-month period described by Section 176.003(a)(2)(B).

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.



*[Signature]*  
Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Jay Shelton, this the 10th day of Feb., 20 20, to certify which, witness my hand and seal of office.

*[Signature]* Printed name of officer administering oath Julia Antilley Title of officer administering oath City Clerk



# LOCAL GOVERNMENT OFFICER CONFLICTS DISCLOSURE STATEMENT

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**OFFICE USE ONLY**

Date Received

2/10/2020

*Antilley*

1 Name of Local Government Officer

NOLAN Andrew SOSA

2 Office Held

Purchasing Manager

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

Jim Bass Ford, 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.

Mother, Laura Sosa - President, Bass 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 \_\_\_\_\_ Description of Gift \_\_\_\_\_

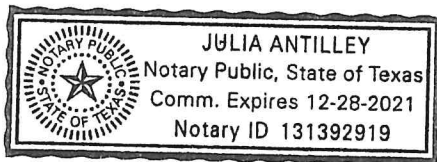
Date Gift Accepted \_\_\_\_\_ Description of Gift \_\_\_\_\_

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.



*Nolan A. Sosa*  
Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Nolan Sosa, this the 10th day of Feb., 20 20, to certify which, witness my hand and seal of office.

*Julia Antilley*  
Signature of officer administering oath

Julia Antilley  
Printed name of officer administering oath

City Clerk  
Title of officer administering oath

# LOCAL GOVERNMENT OFFICER CONFLICTS DISCLOSURE STATEMENT

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**OFFICE USE ONLY**

Date Received

2/10/2020  
*[Signature]*

1 Name of Local Government Officer

*Patrick Brody*

2 Office Held

*Assistant Fire Chief*

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

*Jack Lube center / Daryl Calder*

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

*provide oil change for Ambulance*

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

Date Gift Accepted 12-25-19 Description of Gift \$25.00

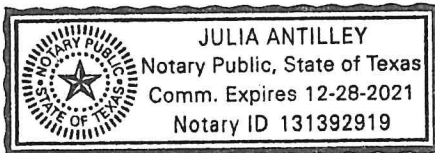
Date Gift Accepted \_\_\_\_\_ Description of Gift \_\_\_\_\_

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.



*[Signature]*  
Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Patrick Brody, this the 10th day of Feb. 2020, to certify which, witness my hand and seal of office.

*[Signature]*  
Signature of officer administering oath

*Julia Antilley*  
Printed name of officer administering oath

*City 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

2/10/2020  
*[Signature]*

1 Name of Local Government Officer

*Roger D. Hawlak*

2 Office Held

*Parks Sr. Manager*

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

*A & H Services ~~contracts~~*

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

*Siblings who contract with Fairmont Cemetery*

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

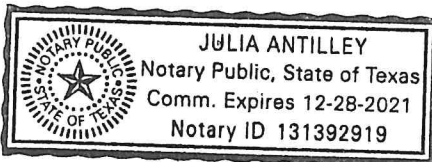
Date Gift Accepted \_\_\_\_\_ Description of Gift \_\_\_\_\_

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.



*Roger D. Hawlak*  
Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said *Roger Hawlak*, this the *10th* day of *Feb.*, 20 *20*, to certify which, witness my hand and seal of office.

*[Signature]*  
Signature of officer administering oath

*Julia Antilley*  
Printed name of officer administering oath

*City 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

2/10/2020  
*[Signature]*

1 Name of Local Government Officer

*Tina Dierschke*

2 Office Held

*Director of Finance*

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

*Corfield Construction, LLC  
Glass Doctor*

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

*My father owns both entities.*

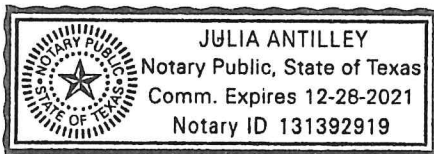
5 List gifts accepted by the local government officer and any family member, if aggregate value of the gifts accepted from vendor named in item 3 exceeds \$100 during the 12-month period described by Section 176.003(a)(2)(B).

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.



*[Signature]*

Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said *Tina Dierschke*, this the *10th* day of *Feb.*, 20 *20*, to certify which, witness my hand and seal of office.

*[Signature]*  
Signature of officer administering oath

*Julia Antilley*  
Printed name of officer administering oath

*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  
2/10/20  
*[Signature]*

1 Name of Local Government Officer  
*Vicky Porter*

2 Office Held  
*So. Adm Asst - Operations*

3 Name of vendor described by Sections 176.001(7) and 176.003(a), Local Government Code  
*Tony Jones 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.  
*Friend since Jr. High School*

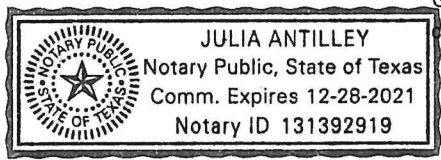
5 List gifts accepted by the local government officer and any family member, if aggregate value of the gifts accepted from vendor named in item 3 exceeds \$100 during the 12-month period described by Section 176.003(a)(2)(B).

Date Gift Accepted 7-20 Description of Gift Wood Flooring  
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.



*Vicky Porter*  
Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Vicky Porter, this the 10th day of Feb., 20 20, to certify which, witness my hand and seal of office.

*[Signature]* Signature of officer administering oath  
Julia Antilley Printed name of officer administering oath  
City 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

1/31/20

11:35 AM

*Julia*

1 Name of Local Government Officer

Michael Muncey

2 Office Held

Budget Analyst, Sr.

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

San Angelo Stock Show and Rodeo

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

Sell tickets for Stock Show and Rodeo.

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

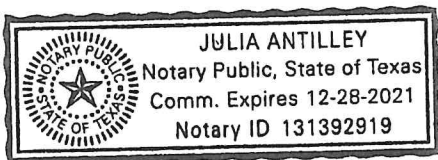
Date Gift Accepted \_\_\_\_\_ Description of Gift \_\_\_\_\_

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.



*Michael Muncey*

Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Michael Muncey, this the 31st day of January, 2020, to certify which, witness my hand and seal of office.

*Julia Antilley*  
Signature of officer administering oath

Julia Antilley  
Printed name of officer administering oath

City Clerk  
Title of officer administering oath



\*copied from Candidate packet for city records

# LOCAL GOVERNMENT OFFICER CONFLICTS DISCLOSURE STATEMENT

## FORM CIS

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

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

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

### OFFICE USE ONLY

Date Received

9:58 AM 1/17/20  
*Julia Antilley*  
City Clerk

1 Name of Local Government Officer

*Frank N. CARTER*

2 Office Held

*CHIEF OF POLICE*

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

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

*SISTER, KEN FLOYD, IS EMPLOYED BY NELSON. SHE IS NOT IN SALES NOR IS SHE AN OFFICER OF THE 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 \_\_\_\_\_ Description of Gift \_\_\_\_\_

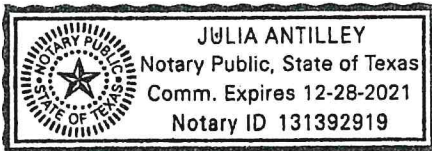
Date Gift Accepted \_\_\_\_\_ Description of Gift \_\_\_\_\_

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.



*Frank Carter*  
Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said *Frank Carter*, this the *23<sup>rd</sup>* day of *January*, 20 *20*, to certify which, witness my hand and seal of office.

*Julia Antilley*  
Signature of officer administering oath

*Julia Antilley*  
Printed name of officer administering oath

*City Clerk*  
Title of officer administering oath