

**LOCAL GOVERNMENT OFFICER  
CONFLICTS DISCLOSURE STATEMENT**

**FORM CIS**

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

This questionnaire reflects changes made to the law by H.B. 23, 84th Leg., Regular Session.  
This is the notice to the appropriate local governmental entity that the following local government officer has become 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

Robbie Jo Allison

2 Office Held

School Board Member

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 \_\_\_\_\_

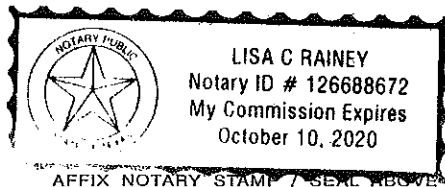
Date Gift Accepted NA Description of Gift \_\_\_\_\_

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.



AFFIX NOTARY STAMP / SEAL ABOVE

Robbie Jo Allison  
Signature of Local Government Officer

Sworn to and subscribed before me, by the said Robbie Jo Allison, this the 18<sup>th</sup> day of December, 2017, to certify which, witness my hand and seal of office.

Lisa C. Rainey  
Signature of officer administering oath

Lisa C. Rainey  
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.)

<p>This questionnaire reflects changes made to the law by H.B. 23, 84th Leg., Regular Session.</p> <p>This is the notice to the appropriate local governmental entity that the following local government officer has become aware of facts that require the officer to file this statement in accordance with Chapter 176, Local Government Code.</p>	<p><b>OFFICE USE ONLY</b></p>
<p>1 Name of Local Government Officer</p> <p><i>James R. Bates</i></p>	<p>Date Received</p>
<p>2 Office Held</p> <p><i>School Board Member</i></p>	

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

*Heart of Texas Electric Coop. 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.

*Employed as Administrative Services 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 \_\_\_\_\_ Description of Gift \_\_\_\_\_

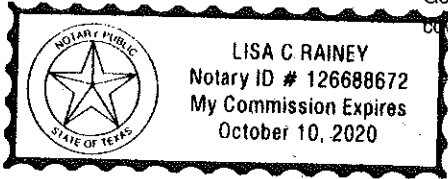
Date Gift Accepted \_\_\_\_\_ Description of Gift \_\_\_\_\_

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.



*James R. Bates*  
Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said James R. Bates, this the 14<sup>th</sup> day of November, 2017, to certify which, witness my hand and seal of office.

*Lisa C. Rainey*      Lisa C. Rainey      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

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

This is the notice to the appropriate local governmental entity that the following 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

Frank Graves

2 Office Held

McGregor 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 — Description of Gift \_\_\_\_\_

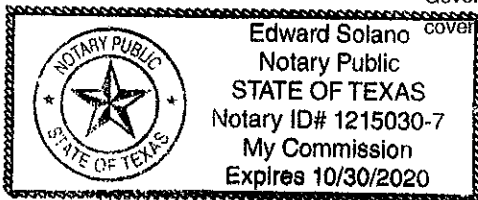
Date Gift Accepted — Description of Gift \_\_\_\_\_

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.



AFFIX NOTARY STAMP / SEAL ABOVE

*Frank Graves*  
Signature of Local Government Officer

Sworn to and subscribed before me, by the said Frank Graves, this the 13 day of DECEMBER, 2017, to certify which, witness my hand and seal of office.

*Edward Solano*  
Signature of officer administering oath

EDWARD SOLANO  
Printed name of officer administering oath

NOTARY  
Title of officer administering oath

**LOCAL GOVERNMENT OFFICER  
CONFLICTS DISCLOSURE STATEMENT**

**FORM CIS**

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<p>This questionnaire reflects changes made to the law by H.B. 23, 84th Leg., Regular Session.</p> <p>This is the notice to the appropriate local governmental entity that the following local government officer has become aware of facts that require the officer to file this statement in accordance with Chapter 176, Local Government Code.</p>	<p><b>OFFICE USE ONLY</b></p>	
<p>li Name of Local Government Officer James Lenamon</p>		<p>Date Received</p>
<p>ll Office Held Superintendent</p>		
<p>11 Name of vendor described by Sections 176.001(7) and 176.003(a), Local Government Code TFNB McGregor</p>		

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

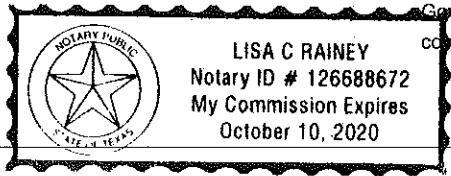
List gifts accepted by the local government officer and any family member, if aggregate value of the gifts accepted from vendor named in item 3 exceeds \$100 during the 12-month period described by Section 176.003(a)(2)(B).

Date Gift Accepted	Description of Gift
Date Gift Accepted	Description of Gift
Date Gift Accepted	Description of Gift

(attach additional forms as necessary)

**II 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.



*James Lenamon*  
Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said James Lenamon this the 16th day Of November, 2017, to certify which, witness my hand and seal of office.

<i>Lisa C. Rainey</i>	Lisa C. Rainey	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

1 Name of Local Government Officer

Kyle Paschall

2 Office Held

Trustee

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

Paschall Insurance 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.

Property and Casualty Insurance Agent

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

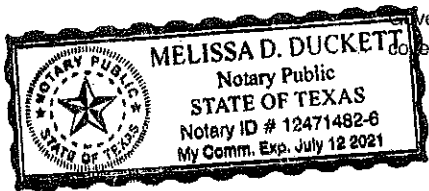
Date Gift Accepted \_\_\_\_\_ Description of Gift \_\_\_\_\_

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.



*Kyle Paschall*  
Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Kyle R Paschall, this the 14<sup>th</sup> day of November, 2015, to certify which, witness my hand and seal of office.

*Melissa D Duckett*  
Signature of officer administering oath

Melissa D Duckett  
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

1 Name of Local Government Officer

Herman V. Tucker, Jr.

2 Office Held

McGregor ISD Board Trustee

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

Mc Lennan Community College

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

Employment

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

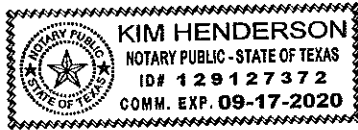
Date Gift Accepted \_\_\_\_\_ Description of Gift \_\_\_\_\_

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.



Herman V. Tucker, Jr.  
Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said \_\_\_\_\_, this the 16<sup>th</sup> day of November, 2017, to certify which, witness my hand and seal of office.

Kim Henderson  
Signature of officer administering oath

Kim Henderson  
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

Herman V. Tucker, Jr.

2 Office Held

McGregor ISD Board Trustee

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

First National Bank of McGregor

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

I have a personal bank account at First National.

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

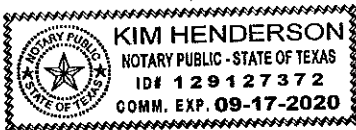
Date Gift Accepted \_\_\_\_\_ Description of Gift \_\_\_\_\_

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

(attach additional forms as necessary)

6 AFFIDAVIT

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*Herman V. Tucker, Jr.*

Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said \_\_\_\_\_, this the 16<sup>th</sup> day of November, 2017, to certify which, witness my hand and seal of office.

*Kim Henderson*

Signature of officer administering oath

Kim Henderson

Printed name of officer administering oath

Title of officer administering oath

**LOCAL GOVERNMENT OFFICER  
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**OFFICE USE ONLY**

Date Received

1 Name of Local Government Officer

*§ Mary Jo Williams*

2 Office Held

*School board member*

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).

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

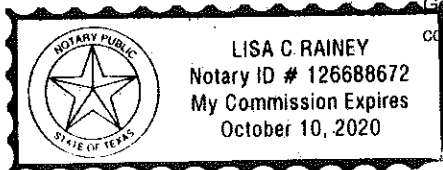
Date Gift Accepted \_\_\_\_\_ Description of Gift \_\_\_\_\_

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.



*Mary Jo Williams*  
Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said *Mary Jo Williams*, this the *8th* day of *December*, 20 *17*, to certify which, witness my hand and seal of office.

*Lisa C. Rainey*  
Signature of officer administering oath

*Lisa C. Rainey*  
Printed name of officer administering oath

*Notary*  
Title of officer administering oath



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**OFFICE USE ONLY**

Date Received

1 Name of Local Government Officer

Trenton Rice

2 Office Held

School Board

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

Rice Inspection 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.

Owner

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

Date Gift Accepted N/A Description of Gift \_\_\_\_\_

Date Gift Accepted N/A Description of Gift \_\_\_\_\_

Date Gift Accepted N/A Description of Gift \_\_\_\_\_

(attach additional forms as necessary)

6 AFFIDAVIT

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*Trenton Rice*

Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Trenton Rice, this the 22<sup>nd</sup> day of February, 20 18, to certify which, witness my hand and seal of office.

*Lisa C. Rainey*  
Signature of officer administering oath

Lisa C. Rainey  
Printed name of officer administering oath

Notary  
Title of officer administering oath

