

LOCAL GOVERNMENT OFFICER CONFLICTS DISCLOSURE STATEMENT

FORM CIS

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

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

This is the notice to the appropriate local governmental entity that the following local government officer has become 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

Todd Grimes

2 Office Held

Trustee of Mabank ISD School Board

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.

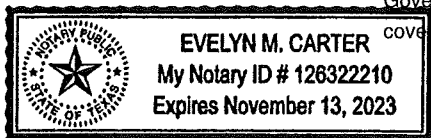
5 List gifts accepted by the local government officer and any family member, if aggregate value of the gifts accepted from vendor named in item 3 exceeds \$100 during the 12-month period described by Section 176.003(a)(2)(B).

Date Gift Accepted _____ Description of Gift _____
 Date Gift Accepted _____ Description of Gift N/A
 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.



Todd Grimes
 Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Todd Grimes, this the _____ day of 16th November, 2020, to certify which, witness my hand and seal of office.

Evelyn M. Carter
 Signature of officer administering oath

Evelyn M. Carter Admin. Asst. to Superintendent
 Printed name of officer administering oath

Admin. Asst. to Superintendent
 Title of officer administering oath

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OFFICE USE ONLY

Date Received

1 Name of Local Government Officer

Erik Tijerina

2 Office Held

Trustee of Mabank ISD School Board

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.

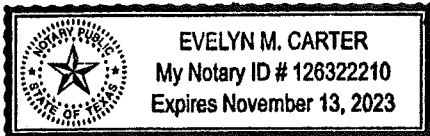
5 List gifts accepted by the local government officer and any family member, if aggregate value of the gifts accepted from vendor named in item 3 exceeds \$100 during the 12-month period described by Section 176.003(a)(2)(B).

Date Gift Accepted _____ Description of Gift _____
 Date Gift Accepted _____ Description of Gift N/A
 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.



[Handwritten Signature]

 Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Erik Tijerina, this the 16th day of November, 20 20, to certify which, witness my hand and seal of office.

[Handwritten Signature]

 Signature of officer administering oath

Evelyn M. Carter Admin. Asst. to Superintendent

 Printed name of officer administering oath

Evelyn M. Carter Admin. Asst. to Superintendent

 Title of officer administering oath

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OFFICE USE ONLY

Date Received



1 Name of Local Government Officer

LORNE ROBERT "ROBBY" TEAGUE

2 Office Held

SCHOOL BOARD TRUSTEE

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

TEAGUE CHEVROLET-BUICK, 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.

PART OWNER + EMPLOYEE

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

Date Gift Accepted _____ Description of Gift _____

Date Gift Accepted _____ Description of Gift _____

Date Gift Accepted _____ Description of Gift _____

(attach additional forms as necessary)

6 SIGNATURE

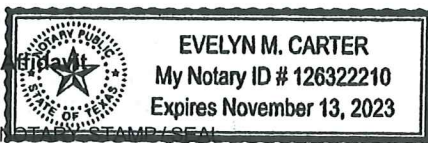
I swear under penalty of perjury that the above statement is true and correct. I acknowledge that the disclosure applies to each family member (as defined by Section 176.001(2), Local Government Code) of this local government officer. I also acknowledge that this statement covers the 12-month period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

[Handwritten Signature]

Signature of Local Government Officer

Please complete either option below:

(1)



Sworn to and subscribed before me by L. Robert "Robby" Teague this the 12 day of May, 2021, to certify which, witness my hand and seal of office.

Evelyn M. Carter
Signature of officer administering oath

Evelyn M. Carter
Printed name of officer administering oath

Admin. Asst. to Superintendent
Title of officer administering oath

OR

(2) Unsworn Declaration

My name is _____, and my date of birth is _____.

My address is _____, _____, _____, _____, _____.
(street) (city) (state) (zip code) (country)

Executed in _____ County, State of _____, on the _____ day of _____, 20____.
(month) (year)

Signature of Local Government Officer (Declarant)

LOCAL GOVERNMENT OFFICER CONFLICTS DISCLOSURE STATEMENT

FORM CIS

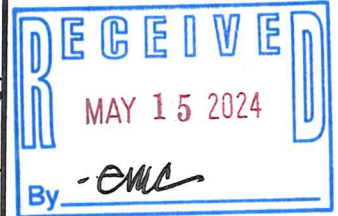
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OFFICE USE ONLY

Date Received



1 Name of Local Government Officer

John Litchfield

2 Office Held

Place 6 Mabank ISD School Board

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.

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

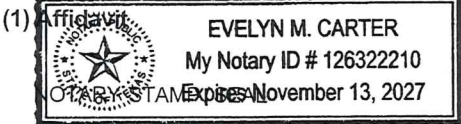
(attach additional forms as necessary)

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.

[Handwritten Signature]
Signature of Local Government Officer

Please complete either option below:



Sworn to and subscribed before me by John Litchfield this the 15th day of May, 2024

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

Evelyn M. Carter Evelyn M. Carter Admin. Assist. to Superintendent
Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath

OR

(2) Unsworn Declaration

My name is _____, and my date of birth is _____.
My address is _____, _____, _____, _____, _____.
(street) (city) (state) (zip code) (country)
Executed in _____ County, State of _____, on the _____ day of _____, 20____.
(month) (year)

Signature of Local Government Officer (Declarant)

LOCAL GOVERNMENT OFFICER CONFLICTS DISCLOSURE STATEMENT

FORM CIS

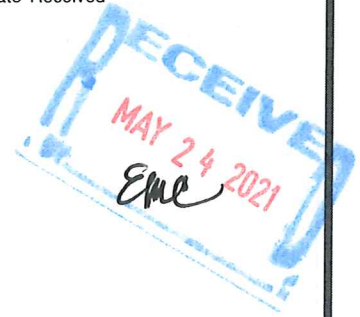
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This is the notice to the appropriate local governmental entity that the following local government officer has become aware of facts that require the officer to file this statement in accordance with Chapter 176, Local Government Code.

OFFICE USE ONLY

Date Received



1 Name of Local Government Officer

Bryan Miller

2 Office Held

Mabank School Board

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

City of Grand Prairie

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 _____

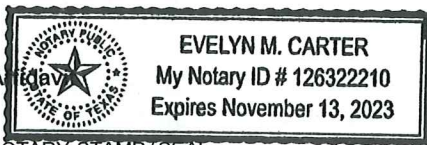
N/A

(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.

Bryan Miller

Signature of Local Government Officer



(1) Affidavit

Please complete either option below:

Sworn to and subscribed before me by *Bryan Miller* this the *24* day of *May*, 20*21*, to certify which, witness my hand and seal of office.

Signature of officer administering oath: *Evelyn M. Carter*
 Printed name of officer administering oath: *Evelyn M. Carter Admin. Asst. to Superintendent*
 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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Date Received

1 Name of Local Government Officer

N/A

2 Office Held

N/A

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.

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

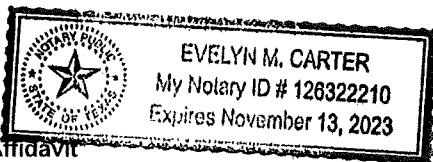
(attach additional forms as necessary)

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.

[Handwritten Signature]

Signature of Local Government Officer



Please complete either option below:

(1) Affidavit

NOTARY STAMP / SEAL

Sworn to and subscribed before me by Dustin Conner this the 18th day of May,

20 22, to certify which, witness my hand and seal of office.

Evelyn M. Carter Evelyn M. Carter Administrative Asst. to Superintendent
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

1 Name of Local Government Officer

Michael "Mikey" Thompson

2 Office Held

School Board Trustee

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

Massey Insurance

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

OWNED

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

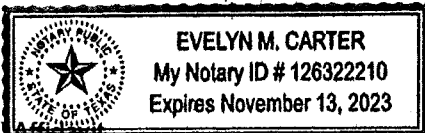
(attach additional forms as necessary)

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.



Signature of Local Government Officer



Please complete either option below:

(1) NOTARY STAMP/SEAL

Sworn to and subscribed before me by MICHAEL "MIKEY" THOMPSON this the 18th day of MAY,

2022, to certify which, witness my hand and seal of office.

Evelyn M. Carter
Signature of officer administering oath

EVELYN M. CARTER
Printed name of officer administering oath

ADMINISTRATIVE ASST. TO SUPERINTENDENT
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)