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 Officer	
Micah Lowe	,
2 Office Held	į
Board President	
3 Name of vendor described by Sections 176.001(7) and 176.003(a), Local Government	
Code N/A	
Description of the nature and extent of each employment or other business relationshi with vendor named in item 3.  N/A	p and each family relationship
List gifts accepted by the local government officer and any family member, if aggreg from vendor named in item 3 exceeds \$100 during the 12-month period described by	
Date Gift Accepted N/A Description of Gift	
Date Gift Accepted Description of Gift	
Date Gift Accepted N/A 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 this statement covers the 12-month period described by Section 176.001(2), Local Government Code also acknowledge that this statement covers the 12-month period described by Sect Government Code.  Signature of Local Company Code and Code also acknowledge that this statement covers the 12-month period described by Section 176.001(2), Local Government Code also acknowledge that this statement covers the 12-month period described by Section 176.001(2), Local Government Code also acknowledge that this statement covers the 12-month period described by Section 176.001(2), Local Government Code also acknowledge that this statement covers the 12-month period described by Section 176.001(2), Local Government Code also acknowledge that this statement covers the 12-month period described by Section 176.001(2), Local Government Code also acknowledge that this statement covers the 12-month period described by Section 176.001(2), Local Government Code also acknowledge that this statement covers the 12-month period described by Section 176.001(2), Local Government Code also acknowledge that this statement covers the 12-month period described by Section 176.001(2), Local Government Code also acknowledge that this statement covers the 12-month period described by Section 176.001(2), Local Government Code also acknowledge that this statement covers the 12-month period described by Section 176.001(2), Local Government Code also acknowledge that the 176.001(2) ack	of this local government officer. I ion 176.003(a)(2)(B), Local
Please complete either option below:	
(1) Affidavit	
NOTARY STAMP/SEAL	
Sworn to and subscribed before me by <u>Micah Lowe</u> this the <u>1</u>	9 day of August ,
20 <u>24,</u> to certif∲which, witness my hand and seal of office.	
Cindy Gibson Administration	ive Assistant to the 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 (month)	, 20 (vear)
(mond)	() - w. /
Signature of Local Govern	ment Officer (Declarant)

#### 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.	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 Officer	
Phillip "Bear" Brown	
2 Office Held	
Vice-Board President	
Name of vendor described by Sections 176.001(7) and 176.003(a), Local Government	
Code Pye-Barker Fire and Safety/LPS-Fire, LLC	
Description of the nature and extent of each employment or other business relationship	and each family relationship
with vendor named in item 3.  Owner/Employee of Pye-Barker Fire and Safety/LPS-	Fire, LLC
List gifts accepted by the local government officer and any family member, if aggregation from vendor named in item 3 exceeds \$100 during the 12-month period described by	ate value of the gifts accepted Section 176.003(a)(2)(B).
Date Gift Accepted N/A Description of Gift	
Date Gift Accepted Description of Gift	
Date Gift AcceptedN/A 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 this statement covers the 12-month period described by Section Government Code.  Signature of Local Countries  Signatu	of this local government officer. I on 176.003(a)(2)(B), Local
Please complete either option below:	
(1) Affidavit	
NOTARY STAMP/SEAL	
Sworn to and subscribed before me byPhillip "Bear" Brown this the1	9 day of August,
20 <u>24</u> , to certify which, witness my hand and seal of office.	
Cindy Gibson Administration	ve Assistant to the 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)	
Executed in County, State of , on the day of (month)	, 20 (year)
Signature of Local Govern	ment Officer (Declarant)

							ann an
This questionnaire	reflects changes	made to the law by H.B. 2	23, 84th Leg., F	Regular Session.		OFFICE	USEONLY
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.						ate Received	
	Government Off						
	Kyle Thomps	on					
2 Office Held							
	Board Secreta	ry					
3 Name of vendor Code	described by S N/A	ections 176.001(7) and 1	76.003(a), Lo	cal Governmer	nt		
with vendor na	med in item 3.	xtent of each employmen					
		government officer and xceeds \$100 during the					
Date Gift Acce	oted N/A	Description of Gift					
Date Gift Accep	oted N/A	Description of Gift					
Date Gift Accep	tedN/A	Description of Gift					
		(attach additional	forms as nec	essary)			
		nember (as defined by Section te that this statement covers to de.			Section	176.003(a)(2)	(B), Local
		Please comple	ete either o	ption below	:		
(1) Affidavit		·					
NOTARY STAMP/	SEAL						
Sworn to and subscri	ped before me by	Kyle Thompson		this the _	19	_ day of	August,
20 <u>24</u> to ce	rtify,which, witness i	ny hand and seal of office.					
andy	Mus	Cindy Gibson		Adminis	strative	Assistant to the	Superintendent
Signature of officer admi	nistering oath	Printed name of office	er administering oa	ath		Title of office	r administering oath
			OR				
(2) Unsworn Decla	ation						
My name is			, and m	y date of birth is			
My address is			1		1 _		•
· · · · · · · · · · · · · · · · · · ·		(street)		, ,,	ate)	(zip code)	(country)
Executed in	Cour	ity, State of	, on the	day of(month)		, 20 (year)	<u>.</u>
			Cian	esture of Local Go	vernme	ant Officer /De	clarant)

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 Officer	
Dustin Mason	
2 Office Held	
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 with vendor named in item 3. N/A	and each family relationship
List gifts accepted by the local government officer and any family member, if aggregation	
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	
NIA	
Date ditt Accepted Description of dift	
(attach additional forms as necessary)  5 SIGNATURE I swear under penalty of perjury that the above statement is true and correct. I acknowledge the statement is true and correct.	
to each family member (as defined by Section 176.001(2), Local Government Code also acknowledge that this statement covers the 12-month period described by Sect Government Code.  Signature of Local Common Code Code Code Code Code Code Code Code	of this local government officer. I ion 176.003(a)(2)(B), Local
Please complete either option below:	
(1) Affidavit	
NOTARY STAMP/SEAL	
Sworn to and subscribed before me by Dustin Mason this the1	9 day of August
20, to certify which, witness my hand and seal of office.	
Cindy Gibson Administration	ve Assistant to the Superintendent
Signature of officer administering oath Printed name of officer administering oath	Title of officer administering oath
OR CONTRACTOR OF THE PROPERTY	THE STATE OF THE S
(2) Unsworn Declaration	
My name is, and my date of birth is	•
My address is,,,,	-1'
(street) (city) (state)	(zip code) (country)
Executed in county, State of , on the day of(month)	, 20
(monun)	(yeai)
Signature of Local Govern	ment Officer (Declarant)

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 Officer	
Nick Haley	
2 Office Held	
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 relationshi with vendor named in item 3. N/A	
5 List gifts accepted by the local government officer and any family member, if aggreg from vendor named in item 3 exceeds \$100 during the 12-month period described by	
Date Gift Accepted N/A Description of Gift	
Date Gift Accepted Description of Gift	
Date Gift AcceptedN/A 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 this statement covers the 12-month period described by Section 176.001(2), Local Government Code.  Signature of Local of Signature of	e) of this local government officer. I tion 176.003(a)(2)(B), Local
Please complete either option below:	
(1) Affidavit	
NOTARY STAMP/SEAL	
Sworn to and subscribed before me by Nick Haley this the this the1	19 day of August
20 24 to certify, which, witness my hand and seal of office.	
Cindy Gibson Administration	tive Assistant to the Superintendent
Signature of officer administering oath Printed name of officer administering oath	Title of officer administering oath
OR OR	<b>一种加速的影响</b>
(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 (month)	, 20 (year)
Signature of Local Govern	nment Officer (Declarant)

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 Officer	
Matt Strickland	
2 Office Held	
Board Member	
Name of vendor described by Sections 176.001(7) and 176.003(a), Local Government	
Code N/A	
Description of the nature and extent of each employment or other business relationship with vendor named in item 3.  N/A	and each family relationship
List gifts accepted by the local government officer and any family member, if aggregation from vendor named in item 3 exceeds \$100 during the 12-month period described by	nte value of the gifts accepted Section 176.003(a)(2)(B).
Date Gift Accepted N/A Description of Gift	
Date Gift Accepted N/A Description of Gift	
Date Gift AcceptedN/A 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 this statement covers the 12-month period described by Section Government Code.  Signature of Local Comment Code.	of this local government officer. I on 176.003(a)(2)(B), Local
Please complete either option below:	
(1) Affidavit	
NOTARY STAMP/SEAL	
NOTARY STAMP/SEAL  Sworn to and subscribed before me by Matt Strickland this the 19	9day_ofAugust,
Sworn to and subscribed before me by Matt Strickland this the!	3 day ofAugust,
Sworn to and subscribed before me byMatt Strickland this the!  20 24, to certify which, witness my hand and seal of office.	9 day of <u>August</u> , ve Assistant to the Superintendent
Sworn to and subscribed before me by Matt Strickland this the 19 20 24, to certify which, witness my hand and seal of office.  Cindy Gibson Administration	,
Sworn to and subscribed before me by Matt Strickland this the 19 20 24, to certify which, witness my hand and seal of office.  Cindy Gibson Administration	ve Assistant to the Superintendent
Sworn to and subscribed before me by Matt Strickland this the 19 20 24, to certify which, witness my hand and seal of office.  Cindy Gibson Administrati  Signature of officer administering oath  Printed name of officer administering oath  OR	ve Assistant to the Superintendent
Sworn to and subscribed before me by Matt Strickland this the 19 20 24 . , to certify which, witness my hand and seal of office.  Cindy Gibson Administration of officer administering oath  Printed name of officer administering oath  OR  (2) Unsworn Declaration	ve Assistant to the Superintendent  Title of officer administering oath
Sworn to and subscribed before me by	ve Assistant to the Superintendent  Title of officer administering oath
Sworn to and subscribed before me by	ve Assistant to the Superintendent  Title of officer administering oath
Sworn to and subscribed before me by	ve Assistant to the Superintendent  Title of officer administering oath

This questionnaire ref	lects changes made	to the law by H.B.	. 23, 84th Leg	g., Regular Se	ession.	OFFICE	USEONLY
This is the notice to government officer h in accordance with C	as become aware	of facts that require	e the officer			Date Received	
1 Name of Local Go	vernment Officer						
	Michael Spivey-Ma	ırtin					
2 Office Held			noch				
E	Board Member						
3 Name of vendor de	scribed by Sectio	ns 176.001(7) and	1 176.003(a),	Local Gove	ernment		
Code	N/A						
1.19.							
4 Description of the with vendor name	ed in item 3.	of each employm N/A	ent or other	business re	elationship	and each fan	nily relationship
5 List gifts accepted from vendor name							
Date Gift Accepted	d N/A	Description of Gi	ift				
Date Gift Accepted		Description of Gi					
Date Gift Accepted	NI/A	Description of Gift					
Date Gitt 1000pt	-	(attach addition					
	also acknowledge that Government Code.	this statement covers	s the 12-month	$\mathcal{M}_{i}$	XI-	on 176.003(a)(2)	
		Please comp	olete eithe	r option b	elow:		
(1) Affidavit		•		·			
NOTARY STAMP/SEA	L						
Sworn to and subscribed	before me by Mi	chael Spivey-Martin		thi	is the19	day of	August,
20 <u>24</u> - , to certify	which, witness my har	nd and seal of office.					
Centh to	rpson	Cindy Gibson			Administrati	ve Assistant to the	Superintendent
Signature of officer administe	ering oath	Printed name of offi	icer administerir	ng oath		Title of office	r administering oath
			OR	20-150-150			
(2) Unsworn Declarati	on						
My name is			, an	d my date of t	oirth is		··································
My address is					,	.31	
	(stree	t)		(city)	(state)	(zip code)	(country)
Executed in	County, Sta	ate of	, on the	day of _	(month)	, 20	
					(monun)	(Jeur)	
			5	Signature of Lo	ocal Governi	nent Officer (De	clarant)

This questionnaire refle	cts changes ma	de to the law by H.B. 23	, 84th Leg., Regula	r Session.	OFFICE	USEONLY
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 Gov	ernment Office	r				
M	licah Lewis					
2 Office Held						
Sı	uperintendent					
3 Name of vendor des	cribed by Sect	ions 176.001(7) and 17	76.003(a), Local G	overnment		
Code	Splash Kingdom	Water Park				
4 Description of the n with vendor named		nt of each employmen Marci and Johnny Ble			•	nily relationship
		vernment officer and				
from vendor named	i in item 3 exce	eds \$100 during the 1	2-month period d	escribed by	Section 176.0	03(a)(2)(B).
Date Gift Accepted	N/A	_ Description of Gift _				
Date Gift Accepted	NI/A	Description of Gift				
Date Gift Accepted _	N/A	Description of Gift				
, -		(attach additional f				
SIGNATURE Is	wear under penal	y of perjury that the above			nowledge that the	disclosure applies
als	-	per (as defined by Section at this statement covers the	e 12-month period de	scribed by Sect		(B), Local
		Please comple	te either optio	n below:		
(1) Affidavit		•	•			
NOTARY STAMP/SEAL						
Sworn to and subscribed b	pefore me by	Micah Lewis		_ this the1	19 day of	August,
20 <u>24</u> to certify w	vhjch, witness my h	and and seal of office.				
Cinaly Di	hs !	Cindy Gibson		Administrat	tive Assistant to the	Superintendent
Signature of officer administeri	ng oath	Printed name of officer	administering oath		Title of office	er administering oath
		0	₹			
(2) Unsworn Declaration	n					
My name is			, and my date	of birth is		
My address is				11		·
	•	eet)	(city)	(state)	, , , ,	(country)
Executed in	County, S	State of,	on the day	of	, 20(vear)	
				···-···	(3~~,/	
			Signature o	of Local Govern	ment Officer (De	clarant\