

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

CSO REC'D
JUN 1 '22 AM8:00

1 Name of Local Government Officer

2 Office Held

N/A

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.

Signature of Local Government Officer

Please complete either option below:

N/A

(1) Affidavit

NOTARY STAMP/SEAL

Sworn to and subscribed before me by _____ this the _____ day of _____,

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

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)

CONFLICT OF INTEREST AFFIDAVIT

Each bidder, offeror, or respondent (hereinafter also referred to as "you") to a City of Fort Worth (also referred to as "City") procurement are required to complete Conflict of Interest Questionnaire (the attached CIQ Form) and Local Government Officer Conflicts Disclosure Statement (the attached CIS Form) below pursuant to state law. This affidavit will certify that the Bidder has on file with the City Secretary the required documentation and is eligible to bid on City Work. The referenced forms may be downloaded from the website links provided below.

<http://www.ethics.state.tx.us/forms/CIQ.pdf>

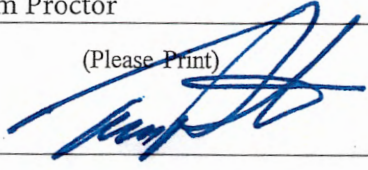
<http://www.ethics.state.tx.us/forms/CIS.pdf>

- CIQ Form is on file with City Secretary
- CIQ Form is being provided to the City Secretary
- CIS Form is on File with City Secretary
- CIS Form is being provided to the City Secretary

CSO REC'D
JUN 1 '22 AM8:0

BIDDER:

Mart, Inc. _____ By: Tim Proctor _____
Company (Please Print)

1503 Perry Street _____ Signature:  _____
Address

Irving, TX 75060 _____ Title: President _____
City/State/Zip (Please Print)