LOCAL GOVERNMENT OFFICER CONFLICTS DISCLOSURE STATEMENT	FORM CIS
(Instructions for completing and filing this form are provided on the next p	age.)
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
¹ Name of Local Government Officer School Board Weil Dudley ² Office Held	
2 Office Held Board Member	
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 relationsh with vendor named in item 3.	ip and each family relationship
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 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 ack to each family member (as defined by Section 176.001(2), Local Government Cod also acknowledge that this statement covers the 12-month period described by Sec Government Code.	e) of this local government officer. I
Signature of Local	Government Officer
Please complete either option below:	9
(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,	1/23/78
My address is 682 Highway 3200, Comanche, TA	. 14442. USA.
Executed in <u>Commanche</u> County, State of <u>Texas</u> , on the <u>Ile</u> day of <u>Sec</u>	e) (zip code) (country) 20 <u>21</u> . (year)
Signature off anal Gaute	nment Officer (Declarant)
Form provided by Texas Ethics Commission www.ethics.state	Revised 8/17/2020

LOCAL GOVERNMENT OFFICER CONFLICTS DISCLOSURE STATEMENT (Instructions for completing and filing this form are provided on the next prov	FORM CIS
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
1 Name of Local Government Officer <u>Commute</u> ISD Mike Furlong	
2 Office Held / 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 relationsh with vendor named in item 3.	ip and each family relationship
 List gifts accepted by the local government officer and any family member, if aggree from vendor named in item 3 exceeds \$100 during the 12-month period described by 	gate value of the gifts accepted v 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 ack to each family member (as defined by Section 176.001(2), Local Government Coc also acknowledge that this statement covers the 12-month period described by Sec Government Code.	e) of this local government officer.
Signature of Local	Government Officer
Please complete either option below:	
(1) Affidavit	
NOTARY STAMP/SEAL	
Sworn to and subscribed before me bythis thethis 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 Mike Furlong, and my date of birth is	
My address is <u>le12 apache Trail</u> , <u>Comaneke</u> , <u>TK</u> (street) (city) (state Executed in <u>Comaneke</u> County, State of <u>TK</u> , on the <u>llath</u> day of <u>Sept</u>	Marker USA
(street) (city) (state	
Executed in <u>Comanche</u> County, State of <u>Tk</u> , on the <u>Ilith</u> day of <u>Sept</u>	20 21 (year)
Sinature of I deal Gover	nment officer (Declarant)
Form provided by Texas Ethics Commission www.ethics.state.tx.us	Revised 8/17/2020

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CONFLICT OF INTEREST QUESTIONNAIRE For vendor or other person doing business with COMANCHE ISD	FORM CIQ			
This questionnaire reflects changes made to the law by H.B. 1491, 80th Leg., Regular Session.	OFFICE USE ONLY			
This questionnaire is being filed in accordance with Chapter 176, Local Government Code by a person who has a business relationship as defined by Section 176.001(1-a) with a local governmental entity and the person meets requirements under Section 176.006(a).	Date Received			
By law this questionnaire must be filed with the records administrator of the local governmental entity not later than the 7th business day after the date the person becomes aware of facts that require the statement to be filed. See Section 176.006, Local Government Code.	1			
A person commits an offense if the person knowingly violates Section 176.006, Local Government Code. An offense under this section is a Class C misdemeanor.				
1 Name of person who has a business relationship with local governmental entity.				
2 Check this box if you are filing an update to a previously filed questionnaire. (The law requires that you file an updated completed questionnaire with the appropriate filing later than the 7th business day after the date the originally filed questionnaire becomes incom	authority not oplete or inaccurate.)			
3 Name of local government officer with whom filer has employment or business relationship.				
Name of Officer				
This section (item 3 including subparts A, B, C & D) must be completed for each officer with whom the employment or other business relationship as defined by Section 176.001(1-a), Local Government Compages to this Form CIQ as necessary.				
A. Is the local government officer named in this section receiving or likely to receive taxable income, of income, from the filer of the questionnaire?	ther than investment			
Yes 🗹 No				
B. Is the filer of the questionnaire receiving or likely to receive taxable income, other than investment income, from or at the direction of the local government officer named in this section AND the taxable income is not received from the local governmental entity?				
Yes 🗹 No				
C. Is the filer of this questionnaire employed by a corporation or other business entity with respect to which the local government officer serves as an officer or director, or holds an ownership of 10 percent or more?				
Yes Yes No				
D. Describe each employment or business relationship with the local government officer named in this	section.			
Signature Date	al 2019			

LOCAL GOVERNMENT OFFICER	FORM CIS
CONFLICTS DISCLOSURE STATEMENT	200
(Instructions for completing and filing this form are provided on the next page.)	
This questionnaire reflects changes made to the law by H.B. 1491, 80th 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
1 Name of Local Government Officer August 2 Office Held	
School Frustee	
3 Name of person described by Sections 176.002(a) and 176.003(a), Local Government	Code
4 Description of the nature and extent of employment or other business relationship w	ith person named in item 3
Comande Nath. Bank - Stock	
 List gifts accepted by the local government officer and any family member, exclud 176.003(a-1), if aggregate value of the gifts accepted from person named in item 3 exc 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 in that the disclosure applies to a family member (as defin Government Code) of this local government officer. I also povers the 12-month period described by Section 176.003 MARY KATHERINE HERRING Notary Public, State of Texas My Commission Expires 02-08-2016 Signature of Local	ed by Section 176.001(2), Local acknowledge that this statement
AFFIX NOTARY STAMP / SEAL ABOVE Sworn to and subscribed before me, by the said of AUDUL, 20,12, to certify which, witness my hand and seal of office. Multiple Automatic	day

Adopted 06/29/2007

LOCAL GOVERNMENT OFFICER CONFLICTS DISCLOSURE STATEMENT	FORM CIS
(Instructions for completing and filing this form are provided on the next p	age.)
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
1 Name of Local Government Officer Harold Harold Higginbothum Comanche, FSD Board	
2 Office Held Board Member	
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 relationsh with vendor named in item 3.	ip and each family relationship
5 List gifts accepted by the local government officer and any family member, if aggree from vendor named in item 3 exceeds \$100 during the 12-month period described by	gate value of the gifts accepted v 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 ack to each family member (as defined by Section 176.001(2), Local Government Cod also acknowledge that this statement covers the 12-month period described by Sector Government Code.	e) of this local government officer. I
Signature of Local	Government Officer
Please complete either option below:	
(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	0 17.107
My name is and my date of birth is and my date of birth is AD9 sho shone Comanche, Ts	8-17-63
(street) (state Executed in <u>Comunche</u> County, State of <u>TX</u> , on the <u>leth</u> day of <u>Sep</u>	, 20 <u>21</u> . (year)
Signature of Used Gover	nment Officer (Declarant)
Form provided by Texas Ethics Commission www.ethics.state.tx.us	Revised 8/17/2020

DISCLOSURE	STATEMENT	ICER CONFLICTS	1 the next p		ORM CIS
This questionnaire reflect This is the notice to the	s changes made to the law e appropriate local gove	r by H.B. 23, 84th Leg., Regular s rnmental entity that the follow at require the officer to file this s	Session.	OFFICE US	SEONLY
	oter 176, Local Governme		latement		
-1	ison Pate	2			
Sch	nool Board				
3 Name of vendor desci Code	ibed by Sections 176.00	1(7) and 176.003(a), Local Gov	vernment		
4 Description of the na with vendor named i		mployment or other business	relationshi	ip and each family	relationshi
		officer and any family member uring the 12-month period de			
Date Gift Accepted	Descripti	on of Gift			
Date Gift Accepted	Descripti	on of Gift			
Date Gift Accepted	Descriptio	n of Gift			
		additional forms as necessary)			
to e also	ach family member (as define	nat the above statement is true and c d by Section 176.001(2), Local Gove lent covers the 12-month period desc	ernment Cod	e) of this local govern	ment officer.
		Signati	ure of Local	Government Officer	
	Please	e complete either option	below:		
(1) Affidavit					
NOTARY STAMP/SEAL					
Sworn to and subscribed be	fore me by		this the	day of	
	ich, witness my hand and seal o				
Signature of officer administering	joath Printed r	name of officer administering oath		Title of officer ad	lministering oa
		OR			
(2) Unsworn Declaration					
My name is Jaso	n Pate CP 304	, and my date o	f birth is	9/16/21	C
My address is -1646	(street)	(city)	(state	(zip code)	(country)
Executed in <u>Loman</u>	Le_County, State of	, on the day of	Sept (mentin)	20_21. (year)	
		Signature of	Local Gover	nment Officer (Declar	ant)
orm provided by Texas Ethics	Commission	www.ethics.state.tx.us			evised 8/17/2

40)

CONFLICT OF INTEREST-TRUSTEE

Comanche Independent School District board members may not have an interest in or in any manner be connected to a vendor for the purchase of goods and services. Rebates, gifts, anything of value or promise, may not be accepted by employees/board members, which may be construed to have been given to influence the purchasing process. (BUS-PRO-410, Texas Government Code 2155.003, (EDGAR 200.318(c)(1), FASRG 3.1.3 and 3.2.2.4)

AFFIDAVIT

DISCLOSURE OF SUBSTANTIAL INTEREST IN A BUSINESS ENTITY

Sheila Stephens, as a Trustee of the Comanche Independent School District Board of I. Trustees make this affidavit and hereby on oath state the following: I, or a person related to me, have a substantial interest in a business entity, as those terms are defined in Local Government Code Sections 171.001-171.002, that would experience a special economic effect distinguishable from its effect on the public by a vote or decision of the board or in real property for which it is reasonably foreseeable that the board's action will have a special economic effect on the value of the property distinguishable from its effect on the public on the value of the property distinguishable from its effect on the public.

The business entity or real property is:

Name of business: Ferfi-Tex, LLC
Address of business: 1100 E. Central Ave
Comanche, TX 76442
Description of property:
I, or Rodney Stephens, my <u>Spouse</u> , has a substantial interest in this business entity or real
property for the following reasons. (check all that apply)
W Ownership of 10 percent or more of the voting stock or shares of the business entity.

W Ownership of 10 percent or more of the fair market value of the business entity.

 \mathbb{N} Ownership of \$15,000 or more of the fair market value of the business entity.

[] Funds received from the business exceed 10 percent of (my, her, his) gross income for the previous year.

Real property is involved and (I, he, she) (have/has) an equitable or legal ownership with a fair market value of at least \$2,500.

Upon the filing of this affidavit with the School Board's secretary, I affirm that I shall abstain from participation in any decision involving this business entity or real property, unless permitted according to Loc. Govt Sec. 171.006

Signature of Off

SD Trustee Title

2ept.9,2019

	4 -	anda ta tha law by U.D.	4404 0046 1	1 0i	OFFICE USE ONI
This questionnaire reflec	_				OFFICE USE ONI
This questionnaire is by a person who has governmental entity a	a business	relationship as def	ined by Section 176	5.001(1-a) with a local	Date Received
By law this questionna entity not later than th that require the stater	e 7th busir	ness day after the d	ate the person bec		al
A person commits an Government Code, Ai					
1 Name of person who Fcrti-Te	has a busi $(, LLC)$	ness relationship wi 100 E.Centra	th local government al Ave, COM	anche, TX 761	142
(The law red	uires that y	ou file an updated cor		questionnaire. with the appropriate filin estionnaire becomes inco	
3 Name of local gover	nment offic	er with whom filer h	as employment or b	ousiness relationship.	
		0	-		
		Sheila S	Stephens Name of Officer		
employment or other pages to this Form C	business re IQ as neces	pparts A, B, C & D) m lationship as defined sary.	ust be completed for by Section 176.001(1	each officer with whom th -a), Local Government C	ode. Attach additiona
employment or other pages to this Form C	business re IQ as neces ment officer	pparts A, B, C & D) m lationship as defined sary, named in this sectior	ust be completed for by Section 176.001(1		ode. Attach additiona
employment or other pages to this Form C A. Is the local govern	business re IQ as neces ment officer	pparts A, B, C & D) m lationship as defined sary, named in this sectior	ust be completed for by Section 176.001(1	-a), Local Government C	ode. Attach additiona
employment or other pages to this Form C A. Is the local govern income, from the fi B. Is the filer of the qu	business re IQ as neces ment officer ler of the qu Yes uestionnaire al governme	pparts A, B, C & D) m lationship as defined sary, named in this section estionnaire? No receiving or likely to	ust be completed for by Section 176.001(1 receiving or likely to receive taxable incom	-a), Local Government C	ode. Attach additiona other than investmer income, from or at th
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 employment or other pages to this Form C A. Is the local govern income, from the fi B. Is the filer of the quadrection of the local governmental entities C. Is the filer of this quadret 	business re IQ as neces ment officer ler of the qu Yes uestionnaire al governme y? Yes uestionnaire	pparts A, B, C & D) me lationship as defined sary, named in this section estionnaire? No receiving or likely to nt officer named in th No eemployed by a corpo	ust be completed for by Section 176.001(1 receiving or likely to receive taxable incom is section AND the ta	 -a), Local Government C receive taxable income, ne, other than investment xable income is not receive ess entity with respect to 	ode. Attach additiona other than investmer income, from or at th ved from the local
 employment or other pages to this Form C A. Is the local govern income, from the fi B. Is the filer of the quadrection of the local governmental entities C. Is the filer of this quadret of the government officer 	business re IQ as neces ment officer ler of the qu Yes uestionnaire al governme y? Yes uestionnaire serves as a Yes	aparts A, B, C & D) me lationship as defined sary, named in this section estionnaire? No receiving or likely to nt officer named in the No employed by a corporn officer or director, of No	ust be completed for by Section 176.001(1 receive taxable incom is section AND the ta pration or other busine or holds an ownership	 -a), Local Government C receive taxable income, ne, other than investment xable income is not receive ess entity with respect to 	ode. Attach additiona other than investmen income, from or at th ved from the local which the local
 employment or other pages to this Form C A. Is the local govern income, from the fi B. Is the filer of the quadrection of the local governmental entities C. Is the filer of this quadret of the government officer 	business re IQ as neces ment officer ler of the qu Yes uestionnaire al governme y? Yes uestionnaire serves as a Yes	aparts A, B, C & D) me lationship as defined sary, named in this section estionnaire? No receiving or likely to nt officer named in the No employed by a corporn officer or director, of No	ust be completed for by Section 176.001(1 receive taxable incom is section AND the ta pration or other busine or holds an ownership	-a), Local Government C receive taxable income, ne, other than investment xable income is not recei ess entity with respect to of 10 percent or more?	ode. Attach additiona other than investmer income, from or at th ved from the local which the local

LOCAL GOVERNMENT OFFICER CONFLICTS	FORM CIS			
DISCLOSURE STATEMENT (Instructions for completing and filing this form are provided on the next p	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			
1 Name of Local Government Officer Traced Carr				
2 Office Held				
School board member				
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 relationsh with vendor named in item 3.	ip and each family relationship			
5 List gifts accepted by the local government officer and any family member, if aggree				
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 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) 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 OR				
(2) Unsworn Declaration	<i>I</i>			
My name is Tracey (arr, and my date of birth is	2/17/76			
My address is 150 Huy 2247 Conanche TX				
Executed in <u>Comanche</u> County, State of <u>t</u> , on the <u>le</u> day of <u>Sept</u> (month)	e) (zip code) (country) $20 \frac{2}{(year)}$.			
Signature of Local Gover	nment Officer (Declarant)			

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Form provided by Texas Ethics Commission

Revised 8/17/2020