## **CONFLICT OF INTEREST QUESTIONNAIRE**

FORM CIQ

For vendor doing business with local governmental entity

This questionnaire reflects changes made to the law by H.B. 23, 84th Leg., Regular Session.	OFFICE USE ONLY
This questionnaire is being filed in accordance with Chapter 176, Local Government Code, by a vendor who has a business relationship as defined by Section 176.001(1-a) with a local governmental entity and the vendor 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 vendor becomes aware of facts that require the statement to be filed. See Section 176.006(a-1), Local Government Code.	DECEIVED
A vendor commits an offense if the vendor knowingly violates Section 176.006, Local Government Code. An offense under this section is a misdemeanor.	AUG 0 1 2017
Name of vendor who has a business relationship with local governmental entity.	Bright Sufferen
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 authority not later than the 7th business day after the date on which you became aware that the originally filed questionnaire was incomplete or inaccurate.)	
Name of local government officer about whom the information is being disclosed.	
Name of Officer	
officer, as described by Section 176.003(a)(2)(A). Also describe any family relationship with the local government officer. Complete subparts A and B for each employment or business relationship described. Attach additional pages to this Form CIQ as necessary.  A. Is the local government officer or a family member of the officer receiving or likely to receive taxable income, other than investment income, from the vendor?  Yes  B. Is the vendor receiving or likely to receive taxable income, other than investment income, from or at the direction of the local government officer or a family member of the officer AND the taxable income is not received from the local governmental entity?  Yes  No	
Describe each employment or business relationship that the vendor named in Section 1 maintains with a corporation or other business entity with respect to which the local government officer serves as an officer or director, or holds an ownership interest of one percent or more.	
Check this box if the vendor has given the local government officer or a family member of as described in Section 176.003(a)(2)(B), excluding gifts described in Section 176.003(a)(B), excluding	of the officer one or more gifts 03(a-1).
8-1	17
Signature of vendor doing business with the governmental entity  Da	ate /

## LOCAL GOVERNMENT OFFICER CONFLICTS DISCLOSURE STATEMENT

FORM CIS

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

(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	
1 Name of Local Government Officer		
Jenna Roach	AUG O 1 2017	
2 Office Held	1 1/1/	
Teacher	Brignish Neiffners	
Name of vendor described by Sections 176.001(7) and 176.003(a), Local Government	Code	
Print-It		
Description of the nature and extent of each employment or other business relationsh with vendor named in item 3.	ip and each family relationship	
daughter of owner		
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		
Trons reside to the second proceduring the 12 ments period described 5	, 00011011 7701000(0)(0)(0)	
Date Gift Accepted Description of Gift		
Date Gift Accepted Description of Gift		
Date diff Accepted Description of diff		
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 de		
Government Code) of this local government officer. I als covers the 12-month period described by Section 176.003		
Notary Public, State of Texas	/	
Expires OCTOBER 25, 2019 I.D.# 12878165-6	ch)	
Signature of Local	Government Officer	
AFFIX NOTARY STAMP / SEAL ABOVE	/	
Sworn to and subscribed before me, by the said		
othorized, to certify which, witness my hand and seal of office.		
They Torme 11	Shiet Kerephort	
Signature of officer administering oath Printed name of officer administering oath	Title of officer administering oath	