FORM CIS

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

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 Offi	icer
	\bigcirc \bigcirc \bigcirc	
	1/014/200	den

2 Office Held

C)	-7	-
	um	
		-

- Name of person described by Sections 176.002(a) and 176.003(a), Local Government Code
- Description of the nature and extent of employment or business relationship with person named in item 3
- List gifts if aggregate value of the gifts received from person named in item 3 exceed \$250

Date Gift Received _____ Description of Gift _____

Did Not Accept Gift

Date Gift Received Description of Gift

Description of Gift_____

Did Not Accept Gift

Date Gift Received

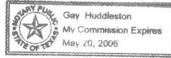
Description of Gift_

Did Not Accept 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 a family member (as defined by Section 176.001(2), Local Government Code) of a 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

AFFIX NOTARY STAMP / SEAL ABOVE

Swom to and subscribed before me, by the said____

Doug Bowder

, this the 13th day

of FEDTUATY, 20 10 6 , 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

LOCAL GOVERNMENT OFFICER FORM CIS CONFLICTS DISCLOSURE STATEMENT (Instructions for completing and filing this form are provided on the back.) 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 Date Received the officer to file this statement in accordance with chapter 176, Local Government Code. **Name of Local Government Officer** Description of the nature and extent of employment or business relationship with person named in item 3 List gifts if aggregate value of the gifts received from person named in item 3 exceed \$250 Date Gift Received _____ Description of Gift _____ Did Not Accept Gift Date Gift Received _____ Description of Gift Did Not Accept Gift Date Gift Received Description of Gift Did Not Accept Gift (attach additional forms as necessary) **AFFIDAVIT** I swear under penalty of perjury that the above statement is true and correct. I acknowledge that the disclosure applies to a family member (as defined by Section 176.001(2), Local Government Code) of a government officer. I also acknowledge that this statement covers the 12-month period Gay Huddleston described by Section 176.003(a)(2)(b), Local Government Code. ly Commission Expires May 20, 2006 AFFIX NOTARY STAMP / SEAL ABOVE Doug Caffey Sworn to and subscribed before me, by the said_ of February, 20 O 6, to certify which, witness my hand and seal of office.

Signature of afficer administering oath

Gay Huddleston notary

Printed name of officer administering oath .

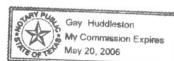
Title of officer administering oath

FORM CIS

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

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 Date Received the officer to file this statement in accordance with chapter 176, Local Government Code. Name of Local Government Officer Office Held Name of person described by Sections 176.002(a) and 176.003(a), Local Government Code Description of the nature and extent of employment or business relationship with person named in item 3 List gifts if aggregate value of the gifts received from person named in item 3 exceed \$250 Date Gift Received Description of Gift Did Not Accept Gift Date Gift Received _____ Description of Gift ___ 7 Did Not Accept Gift Date Gift Received _____ Description of Gift Did Not Accept Gift

AFFIDAVIT



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

> X Dean Rogers Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

of FEDTUATY, 20 06, to certify which, witness my hand and seal of office.

(attach additional forms as necessary)

You Huddleston Gay Huddleston notory public
Signature of officer administering oath
Printed name of officer administering oath
Title of officer administering oath

FORM CIS

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

This is the notice to the appropriate	local governmental enti-	ty that the
following local government officer has	become aware of facts to	hat require
the officer to file this statement in ac	cordance with chapter	176, Local
Government Code.	and the second second	

OFFICE USE ONLY

Date Received

1	r	Name	of	Local	Government	Officer
---	---	------	----	-------	------------	---------

Sayle Jones Sidney School Board

- Name of person described by Sections 176.002(a) and 176.003(a), Local Government Code
- Description of the nature and extent of employment or business relationship with person named in item 3
- List gifts if aggregate value of the gifts received from person named in item 3 exceed \$250

Date Gift Received _____ Description of Gift

Did Net Accept Gift

Date Gift Received Description of Gift

Did Not Accept Gift

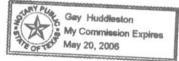
Date Gift Received Description of Gift

Dtd Not Accept Gift

(attach additional forms as necessary)

AFFIDAVIT

I swear under penalty of perjury that the above statement is true and correct. I acknowledge that the disclosure applies to a family member (as defined by Section 176.001(2), Local Government Code) of a government officer. Lalso 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

AFFIX NOTARY STAMP / SEAL ABOVE

Swom to and subscribed before me, by the said Gayle Jones

. this the

of Lebruary . 20 0 6 , to certify which, witness my hand and seal of office.

uddleston Signature of officer administering oath

Printed name of officer administering oath

Title of officer administering oath

Signature of officer administering oath P

FORM CIS

CONFLICTS DISCLOSURE STATEMENT	
(Instructions for completing and filing this form are provided on the back.) This is the notice to the appropriate local governmental entity that the	OFFICE USE ONLY
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	
Jason Ward	
Sidney T.SD. School Board	
Name of person described by Sections 176.002(a) and 176.003(a), Local Government	ent Code
Description of the nature and extent of employment or business relationship with	person named in item 3
5 List gifts if aggregate value of the gifts received from person named in item 3 exc	eed \$250
Date Gift Received Description of Gift	Did Not Accept Gift
Date Gift Received Description of Gift	Did Not Accept Gift
Date Gift Received Description of Gift	Did Not Accept Gift
(attach additional forms as necessary)	
I swear under penalty of perjury that the above statem the disclosure applies to a family member (as defined Code) of a government officer. I also acknowledge that described by Section 176.003(a)(2)(b), Local Government of the Code of a government of the Code of the Cod	by Section 176.001(2), Local Government this statement covers the 12-month period
Sworn to and subscribed before me, by the said <u>Jason Ward</u> of <u>February</u> , 20 <u>Ob</u> , to certify which, witness my hand and seal of office.	this the 13th day

Printed name of officer administering oath Title of officer administering oath

FORM CIS

	Instructions for completing and filir	ng this form are provided on the back.)	
CONTRACTOR	- 10 1 10 10 10 10 10 10 10 10 10 10 10 1	propriate local governmental entity that the fficer has become aware of facts that require	OFFICE USE ONLY
ALL SERVICES OF THE SERVICES		nent in accordance with chapter 176, Local	Date Received
订	Name of Local Government Offi	icer	
OCHPHRIPM	The state of the s		
-	-	es	
2	Office Held		
Distribution of the second	Sidne I	5-D. School Board	
3	Name of person deseribed by S	Sections 176.002(a) and 176.003(a), Local Governmen	nt Code
Complementational			
4	Description of the nature and e.	xtent of employment or business relationship with p	erson named in item 3
side (Control of Control of Contr	, a present		
5	List gifts if aggregate value of	the gifts received from person named in item 3 exce	ed \$250
SOURCE	Date Gift Received	Description of Gift	Did Not Accept Gift
1		Description of Gift	
BEAUCIJESA		Description of on	Did Not Accept Gift
- separation of the separation	Date Gift Received	Description of Gift	Did Not Accept Gift
-		(attach additional forms as necessary)	
6	AFFIDAVIT	I swear under penalty of perjury that the above statemen	t is true and correct. I acknowledge that
ecued/bildbiologiaecubidelalusid	Gay Huddleston My Commission Expires May 20, 2006	the disclosure applies to a family member (as defined by	Section 176.001(2), Local Government is statement covers the 12-month period
CONTRACTOR	300000	X Teny Rfs	
mondial		Signature of Local	al Government Officer
	AFFIX NOTARY STAMP / SEAL A	BOVE	
- ·	Sworn to and subscribed before me, by	ythe said Terry Jones	this the 13th day
	F-1	to certify which, witness my hand and seal of office.	day
L	Las Shuld lest	on Gay Huddleston r	notary Dublic
	Signalura of officer administering oa		Title of officer administering oath

FORM CIQ

For vendor or other person doing business with local governmental entity This questionnaire is being filed in accordance with chapter 176 of the Local **OFFICE USE ONLY** Government Code by a person doing business with the governmental entity. Date Received By law this questionnaire must be filed with the records administrator of the local government 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 76.006, Local Government Code. A person committs an offense if the person violates Section 176.006, Local Government Code. An offense under this section is a Class C misdemeanor. Name of person doing business with local governmental entity. Texas Association of School Boards, Inc. (TASB) 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 September 1 of the year for which an activity described in Section 176.006(a), Local Government Code, is pending and not later than the 7th business day after the date the originally filed questionnaire becomes incomplete or inaccurate.) Describe each affiliation or business relationship with an employee or contractor of the local governmental entity who makes recommendations to a local government officer of the local governmental entity with respect to expenditure of money. N/A Describe each affiliation or business relationship with a person who is a local government officer and who appoints or employs a local government officer of the local governmental entity that is the subject of this questionnaire. N/A

FORM CIQ

For vendor or other person doing business with local governmental entity

Page 2

	Page 2			
5	Name of local government officer with whom filer has affiliation or business relationship. (Complete this section only if the answer to A, B, or C is YES.)			
	This section, item 5 including subparts A, B, C & D, must be completed for each officer with whom the filer has affiliation or business relationship. Attach additional pages to this Form CIQ as necessary.			
	A. Is the local government officer named in this section receiving or likely to receive taxable income from the filer of the questionnaire?			
	Yes No N/A			
	B. Is the filer of the questionnaire receiving or likely to receive taxable income from or at the direction of the local government officer named in this section AND the taxable income is not from the local governmental entity?			
	Yes No N/A			
	C. Is the filer of this questionnaire affiliated with a corporation or other business entity that the local government officer serves as an officer or director, or holds an ownership of 10 percent or more?			
	Yes No N/A			
	D. Describe each affiliation or business relationship.			
6	Describe any other affiliation or business relationship that might cause a conflict of interest.			
	N/A			
7		_		
	Signature of person doing business with the governmental entity Date			
		- 1		

FORM CIQ

	For vendor or other person doing business with local governmental entity	у
	This questionnaire is being filed in accordance with chapter 176 of the Local	OFFICE USE ONLY
	Government Code by a person doing business with the governmental entity.	Date Received
	By law this questionnaire must be filed with the records administrator of the local government 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.	
	A person commits an offense if the person violates Section 176.006, Local	
	Government Code. An offense under this section is a Class C misdemeanor.	
1	Name of person doing business with local governmental entity.	
	Texas Association of School Administrators	
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	e filing authority not later than
	September 1 of the year for which an activity described in Section 176.006(a), Local Governot later than the 7th business day after the date the originally filed questionnaire become	ernment Code, is pending and nes incomplete or inaccurate.)
3	Describe each affiliation or business relationship with an employee or contractor of the local	governmental entity who makes
	recommendations to a local government officer of the local governmental entity with respe	ect to expenditure of money.
	Not Applicable	
-		
4	•	
Ť	Describe each affiliation or business relationship with a person who is a local government employs a local government officer of the local governmental entity that is the subject of the	officer and who appoints or is questionnaire.
	Not Applicable	

FORM CIQ Page 2

5	Name of local government officer with whom filer has affilitation or business relationship. (Complete this section only if the answer to A, B, or C is YES.)
	This section, item 5 including subparts A, B, C & D, must be completed for each officer with whom the filer has affiliation or business relationship. Attach additional pages to this Form CIQ as necessary.
	A. Is the local government officer named in this section receiving or likely to receive taxable income from the filer of the questionnaire?
	Yes No
	B. Is the filer of the questionnaire receiving or likely to receive taxable income from or at the direction of the local government officer named in this section AND the taxable income is not from the local governmental entity?
	Yes No
	C. Is the filer of this questionnaire affiliated with a corporation or other business entity that the local government officer serves as an officer or director, or holds an ownership of 10 percent or more?
	Yes No
	D. Describe each affiliation or business relationship.
	Describe any other affiliation or business relationship that might cause a conflict of interest.
	Not Applicable
7	Texas_Association of School Administrators
	Johnny L Veselha 2/7/06
	Signature of person doing business with the governmental entity Date
	Johnny L. Veselka, Executive Director

FORM CIQ

For vendor or other person doing business with local governmental entity OFFICE USE ONLY This guestionnaire is being filed in accordance with chapter 176 of the Local Government Code by a person doing business with the governmental entity. Date Received By law this questionnaire must be filed with the records administrator of the local government 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. A person committs an offense if the person violates Section 176.006, Local Government Code. An offense under this section is a Class C misdemeanor. 1 Name of person doing business with local governmental entity. Schwartz & Eichelbaum, P.C. 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 authority not later than September 1 of the year for which an activity described in Section 176.006(a), Local Government Code, is pending and not later than the 7th business day after the date the originally filed questionnaire becomes incomplete or inaccurate.) Describe each affiliation or business relationship with an employee or contractor of the local governmental entity who makes recommendations to a local government officer of the local governmental entity with respect to expenditure of money. None Describe each affiliation or business relationship with a person who is a local government officer and who appoints or employs a local government officer of the local governmental entity that is the subject of this questionnaire. None

FORM CIQ Page 2

J	Name of local government officer with whom filer has affilitation or business relationship. (Complete this section only if the answer to A, B, or C is YES.)
	This section, item 5 including subparts A, B, C & D, must be completed for each officer with whom the filer has affiliation or business relationship. Attach additional pages to this Form CIQ as necessary.
	A. Is the local government officer named in this section receiving or likely to receive taxable income from the filer of the questionnaire?
	Yes X No
	B. Is the filer of the questionnaire receiving or likely to receive taxable income from or at the direction of the local government officer named in this section AND the taxable income is not from the local governmental entity?
	Yes X No
	C. Is the filer of this questionnaire affiliated with a corporation or other business entity that the local government officer serves as an officer or director, or holds an ownership of 10 percent or more?
	Yes X No
	D. Describe each affiliation or business relationship.
	Describe any other affiliation or business relationship that might cause a conflict of interest.
_	
	7/A. (TA EXCENSION A) 2/40.000.000.000.000.000.000.000.000.000.
	1/17/06
	Signature of person doing business with the governmental entity Date

FORM CIQ

For vendor or other person doing business with local governmental entity	y
This questionnaire is being filed in accordance with chapter 176 of the Local	OFFICE USE ONLY
Government Code by a person doing business with the governmental entity.	Date Received
By law this questionnaire must be filed with the records administrator of the local government 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.	
A person commits an offense if the person violates Section 176.006, Local Government Code. An offense under this section is a Class C misdemeanor.	
Name of person doing business with local governmental entity.	
Center for Equity and Adequacy in Public School Finance Inc.	
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 appropriat September 1 of the year for which an activity described in Section 176.006(a), Local Gov not later than the 7th business day after the date the originally filed questionnaire become	vernment Code, is pending and
recommendations to a local government officer of the local governmental entity with resp None	oct to experiment of money.
Describe each affiliation or business relationship with a person who is a local government employs a local government officer of the local governmental entity that is the subject of t	
None	

FORM CIQ Page 2

Name of local government officer with whom filer has affilitation or business relation answer to A, B, or C is YES.)	nship. (Complete this section only if the
This section, item 5 including subparts A, B, C & D, must be completed for each offi business relationship. Attach additional pages to this Form CIQ as necessary.	ficer with whom the filer has affiliation or
A. Is the local government officer named in this section receiving or likely to receive to questionnaire?	axable income from the filer of the
Yes X No	
B. Is the filer of the questionnaire receiving or likely to receive taxable income from or a officer named in this section AND the taxable income is not from the local government.	
Yes X No	
C. In the file of this question again of filiated with a paragration as ather hypinass action to	that the least sourcement officer conver
C. Is the filer of this questionnaire affiliated with a corporation or other business entity t as an officer or director, or holds an ownership of 10 percent or more?	that the local government officer serves
Yes X No	
D. Describe each affiliation or business relationship.	
Describe any other affiliation or business relationship that might cause a conflict	t of interest.
Wayne Pierce, Executive Director	
Center for Equity and Adequacy in Public School Finan	nce Inc.
May a serve	February 9, 2006
Signature of person doing business with the governmental entity	Date

FORM CIQ

For vendor or other person doing business with local governmental entity OFFICE USE ONLY This questionnaire is being filed in accordance with chapter 176 of the Local Government Code by a person doing business with the governmental entity. Date Received By law this questionnaire must be filed with the records administrator of the local government 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. A person commits an offense if the person violates Section 176,006, Local Government Code. An offense under this section is a Class C misdemeanor. Name of person doing business with local governmental entity. Public Education Resource Equity Center Inc. 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 authority not later than September 1 of the year for which an activity described in Section 176.006(a), Local Government Code, is pending and not later than the 7th business day after the date the originally filed questionnaire becomes incomplete or inaccurate.) Describe each affiliation or business relationship with an employee or contractor of the local governmental entity who makes recommendations to a local government officer of the local governmental entity with respect to expenditure of money. None Describe each affiliation or business relationship with a person who is a local government officer and who appoints or employs a local government officer of the local governmental entity that is the subject of this questionnaire. None

FORM CIQ

For vendor or other person doing business with local governmental entity

Name of local government officer with whom filer has affilitation or business relationship. (Complete this section only if the answer to A, B, or C is YES.) This section, item 5 including subparts A, B, C & D, must be completed for each officer with whom the filer has affiliation or business relationship. Attach additional pages to this Form CIQ as necessary. A. Is the local government officer named in this section receiving or likely to receive taxable income from the filer of the questionnaire? Yes B. Is the filer of the questionnaire receiving or likely to receive taxable income from or at the direction of the local government officer named in this section AND the taxable income is not from the local governmental entity? Yes C. Is the filer of this questionnaire affiliated with a corporation or other business entity that the local government officer serves as an officer or director, or holds an ownership of 10 percent or more? Yes D. Describe each affiliation or business relationship. Describe any other affiliation or business relationship that might cause a conflict of interest. Wayne Pierce, Executive Director Public Education Resource Equity Center Inc. February 9, 2006 Signature of person doing business with the governmental entity Date