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	
Sharyn Sharp	
Assistant Principal	
Name of vendor described by Sections 176.001(7) and 176.003(a), Loçal Government	Code
Houghton Mittlin Harcourt	
Description of the nature and extent of each employment or other business relationshi with vendor named in item 3.	p and each family relationship
with vendor named in item 3. My Siskr is a sokes man for the Co	ompany; However
the does not service our District.	
List gifts accepted by the local government officer and any family member, if aggreg	gate value of the gifts accepted
. Annual consideration of the second of the	
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  Date Gift Accepted Description of Gift	
Date Gift Accepted Description of Gift  Date Gift Accepted Description of Gift  Date Gift Accepted Description of Gift  (attach additional forms as necessary)  AFFIDAVIT	
Date Gift Accepted Description of Gift  Date Gift Accepted Description of Gift  Date Gift Accepted Description of Gift  (attach additional forms as necessary)	is true and correct. I acknowledge
Date Gift Accepted Description of Gift  Date Gift Accepted Description of Gift  Date Gift Accepted Description of Gift  (attach additional forms as necessary)  AFFIDAVIT  I swear under penalty of perjury that the above statement that the disclosure applies to each family member (as def Government Code) of this local government officer. I also	is true and correct. I acknowledge ined by Section 176.001(2), Local o acknowledge that this statement
Date Gift Accepted Description of Gift  Date Gift Accepted Description of Gift  Date Gift Accepted Description of Gift  (attach additional forms as necessary)  AFFIDAVIT  I swear under penalty of perjury that the above statement that the disclosure applies to each family member (as def Government Code) of this local government officer. I also covers the 12-month period described by Section 176.003(	is true and correct. I acknowledge ined by Section 176.001(2), Local o acknowledge that this statement
Date Gift Accepted Description of Gift  Date Gift Accepted Description of Gift  Date Gift Accepted Description of Gift  (attach additional forms as necessary)  AFFIDAVIT  I swear under penalty of perjury that the above statement that the disclosure applies to each family member (as def Government Code) of this local government officer. I also covers the 12-month period described by Section 176.003(	is true and correct. I acknowledge ined by Section 176.001(2), Local o acknowledge that this statement
Date Gift Accepted Description of Gift  Date Gift Accepted Description of Gift  Date Gift Accepted Description of Gift  (attach additional forms as necessary)  AFFIDAVIT  I swear under penalty of perjury that the above statement that the disclosure applies to each family member (as def Government Code) of this local government officer. I also covers the 12-month period described by Section 176.003(	is true and correct. I acknowledge ined by Section 176.001(2), Local o acknowledge that this statement a)(2)(B), Local Government Code.
Date Gift Accepted Description of Gift  Date Gift Accepted Description of Gift  Date Gift Accepted Description of Gift  (attach additional forms as necessary)  AFFIDAVIT  I swear under penalty of perjury that the above statement that the disclosure applies to each family member (as def Government Code) of this local government officer. I also covers the 12-month period described by Section 176.003(	is true and correct. I acknowledge ined by Section 176.001(2), Local o acknowledge that this statement
Date Gift Accepted Description of Gift  Date Gift Accepted Description of Gift  Date Gift Accepted Description of Gift  (attach additional forms as necessary)  AFFIDAVIT   I swear under penalty of perjury that the above statement that the disclosure applies to each family member (as def Government Code) of this local government officer. I also covers the 12-month period described by Section 176.003(  STATE OF TEXAS	is true and correct. I acknowledge ined by Section 176.001(2), Local o acknowledge that this statement a)(2)(B), Local Government Code.
Date Gift Accepted Description of Gift	is true and correct. I acknowledge ined by Section 176.001(2), Local o acknowledge that this statement a)(2)(B), Local Government Code.
Date Gift Accepted Description of Gift  Date Gift Accepted Description of Gift  Date Gift Accepted Description of Gift  (attach additional forms as necessary)  AFFIDAVIT   I swear under penalty of perjury that the above statement that the disclosure applies to each family member (as def Government Code) of this local government officer. I also covers the 12-month period described by Section 176.003(  STATE OF TEXAS	is true and correct. I acknowledge ined by Section 176.001(2), Local o acknowledge that this statement (a)(2)(B), Local Government Code.
Date Gift Accepted Description of Gift	is true and correct. I acknowledge ined by Section 176.001(2), Local o acknowledge that this statement (a)(2)(B), Local Government Code.

(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.		OFFICE USE ONLY
This is the notice to the appropriate local governmental entity that government officer has become aware of facts that require the officer to in accordance with Chapter 176, Local Government Code.	the following local of file this statement	Date Received
1 Name of Local Government Officer		
Heather Hyde Wargo	li si	
2 Office Held		
Assistant Bund Director Color Gu	ector	
Name of vendor described by Sections 176.001(7) and 176.003(a),	Local Government (	Code
Hw Music and Visual Design	, uc	
Description of the nature and extent of each employment or other by with vendor named in item 3.		and each family relationship
Owner and only member of busines	i <b>S</b> .	
List gifts accepted by the local government officer and any family from vendor named in item 3 exceeds \$100 during the 12-month p	member, if aggrega eriod described by S	te 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 Accepted WIA Description of Gift		
(attach additional forms as ne	cessary)	
AFFIDAVIT		
I swear under penalty of perjury that the disclosure applies to each	family member (as define	ed by Section 176.001(2) Local
Government Code) of this local go covers the 12-month period describ	vernment officer. I also a	cknowledge that this statement
CYNTHIA JANE MARTINEZ D Notary Public	4	/ / Local dovernment Godg.
STATE OF TEXAS My Comm. Exp. July 7, 2016	( Ayel	- Way
	Signature of Local Go	overnment Officer
Sworn to and subscribed before me, by the said That	1.1	4600
of March . 20 10 , to certify which, witness my hand and seal	- Wargo of office.	_, this the day
Signature of officer administering path Printed name of officer admin		Imais Secretary  e of officer administering dath

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., Requise Session. OFFICE USE ONLY This is the notice to the appropriate local governmental entity that the following local Cate Received government officer has become aware of facte that require the officer to tile this statement In accordance with Chapter 176, Local Government Code. Name of Local Government Officer Kristen Barton 2 Office Hald teacher/coach 2 Name of vendor described by Sections 170,001(7) and 175,003(a), Lacal Government Code Prescotts Pancewear 4 Description of the nature and extent of each employment or other business relationship and each family relationship with render named in Hem 3. nuner 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 175.003(s)(2)(B). Date Gift Accepted \_\_\_\_\_\_ Description of Gift \_\_\_\_\_ Description of Gill Date Gift Accepted \_\_\_\_\_ Description of Gift\_ (attach additional forms as necessary) APPIDAYIT I sweet under penalty of perjury that the above statement is true and correct. I acknowledge that the disclosure applies to each family member (sa 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 175.000(e)(2)(B), Local Government Cods. LORGE TUCKER My Notary ID # 126584524 Expires July 5, 2020 AFFIX NOTARY STAMP ( SEAL ABOVE Kristen Barton , who the 3rd day orn to and subscribed before me, by the stild \_\_\_\_ Lor: P Tucker Registra 20 17 . to certify which, waness my hand and avail of office. figg principlaniae recitio to mate

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	
Darren Tidwell	
Office Held	
Teacher	
Name of vendor described by Sections 176.001(7) and 176.003(a), Local Government (	Code
Brazos Designs	
Description of the nature and extent of each employment or other business relationship with vendor named in item 3.	and each family relationship
Teacher is Owner of "Brazos Design	Ns"
List gifts accepted by the local government officer and any family member, if aggrega	ate 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)	
AFFIDAVIT  I swear under penalty of perjury that the above statement is that the disclosure applies to each family member (as define Government Code) of this local government officer. I also a covers the 12-month period described by Section 176.003(x)  Notary Public STATE OF TEXAS My Comm. Exp. 12-09-2017  Signature of Local G	ed by Section 176.001(2), Local acknowledge that this statement (2)(B), Local Government Code.
Sword to and subscribed before me, by the said Darren Tidwell of Wyllst , 20 / 6 , to certify which, witness my hand and seal of office.  Angela Suy Angela Garza and Signature of officer administering oath Printed name of officer administering oath	_, this the

(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	
Britany Rosenbohm	
Director of Governmental affairs, Aternative Funding Exe. Dir. BISD tod. Foundation	
Exe. Dir. BISD tod. Foundation	
Name of vendor described by Sections 176.001(7) and 176.003(a), Local Government	Code
The Fill Station	
Description of the nature and extent of each employment or other business relationsh with vendor named in item 3.	lp and each family relationship
Hubband is an owner	
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)	
AFFIDAVIT  I swear under penalty of perjury that the above statement that the disclosure applies to each family member (as de Government Code) of this local government officer. I als	fined by Section 176.001(2), Local o acknowledge that this statement
DELAINE CLIFTON My Notary ID # 125565707 Expires January 31, 2022	
AFFIX NOTARY STAMP / SEAL ABOVE	Government Officer
of December, 20 21, to certify which, witness my hand and seal of office.	this the 1645 day
Delane Clifton  Signature of officer administering oath  Printed name of officer administering oath	Payoll Specialist Title of officer administering eath

(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	
Britany Rosenbohn	
Brithmy Rosembohm  2) Office Held  Director of Governmental Cyfairs, Atemative Funding  Exe. Dir. BISD Ed. Foundation	
Exe. Dir. 1315D Ed. toundation	
Name of vendor described by Sections 176.001(7) and 176.003(a), Local Government (	Code
Ponan's BBOX	
Description of the nature and extent of each employment or other business relationship with vendor named in item 3.	and each family relationship
1	
Husband is an owner	
List gifts accepted by the local government officer and any family member, if aggregation	ite 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)	
AFFIDAVIT  I swear under penalty of perjury that the above statement is	true and correct Lacknowledge
that the disclosure applies to each family member (as defin	ed by Section 176.001(2), Local
Government Code) of this local gevernment officer. I also a second described by Section 176.003(a)	
DELAINE CLIFTON My Notary ID # 125565707	
Expires January 31, 2022	
Signature of Local G	overnment Officer
AFFIX NOTARY STAMP / SEAL ABOVE	
Swarn to and subscribed before me, by the said Brittary Rosenbohm	_, this the 16 th day
of December, 20 21, to certify which, witness my hand and seal of office.	
Delaini Chlito Delaine Clifton	Asimul Consider
Determe of the	le of officer administering oath
	and a second sec

(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	4 18 X USS2
Kelly Lackey 2 Office Held	
2 Office Held	
Director of Finance	
Name of vendor described by Sections 176.001(7) and 176.003(a), Local Government	
hackey Electric & Refriger	
Description of the nature and extent of each employment or other business relationship with vendor named in item 3.	p and each family relationship
Husband is owner	
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
by	Section 170.003(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)	
I swear under penalty of perjury that the above statement is that the disclosure applies to each family member (as defin Government Code) of this local government officer. I also covers the 12-month period described by Section 176.003(a My Notary ID # 125565707 Expires January 31, 2022	acknowledge that this statement (2)(2)(B), Local Government Code.
AFFIX NOTARY STAMP / SEAL ABOVE	1.44
Swom to and subscribed before me, by the said Kelly Lackey	, this the day
Delaine Chiffon	Payroll Specialist
Signature of officer administering oath Printed name of officer administering oath Ti	itle of officer administering oath

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	
Clara Sale-Davis	
Chief Academic Officer	
Solution Tree	
Description of the nature and extent of each employment or other business relationship with vendor named in item 3.	and each family relationship
Educational Consultant	
List gifts accepted by the local government officer and any family member, if aggrega from vendor named in item 3 exceeds \$100 during the 12-month period described by \$	te value of the gifts accepted
Date Gift Accepted Description of Gift  Date Gift Accepted Description of Gift	
Date Gift Accepted Description of Gift	
(attach additional forms as necessary)	
I swear under penalty of perjury that the above statement is that the disclosure applies to each family member (as define Government Code) of this local government officer. I also a covers the 12-month period described by Section 176.003(a) (September 18, 2010)  DARLA J. BAINES MY COMMISSION EXPIRES September 18, 2010  Signature of Local Geometric September 18, 2010	ed by Section 176.001(2), Local acknowledge that this statement (2)(B), Local Government Code.
AFFIX NOTARY STAMP / SEAL ABOVE	
of February 20 18, to certify which, witness my hand and seal of office.	this the 26 day
Soula J. Parlo J. Raines H	IR Specialist
Signature of officer administering oath Printed name of officer administering oath Title	e of officer administering oath