

7/2/2013 8:07 AM (UTC -7:00)

From: 8009806858 To: 19723509429

READY ROSIE

CONFFLICT OF INTEREST QUESTIONNAIRE

For vendor or other person doing business with local governmental entity

FORM CIQ

This document requires a signed acknowledgement to the law by LGR 001, Sec 109. Register signature.

The document contains a conflict of interest provision with Chapter 176, Local Government Code. It is important to keep the conflict of interest relationship as defined by Section 176.0011-a, with close proximity to the entity, and the potential means of removals under Section 176.006(a).

Any written conflict of interest must be filed with the relevant governing authority of the local governmental entity no later than 10 business days after the date the person becomes aware of facts that require the disclosure to be filed. See Section 176.006, Local Government Code.

A conflict of interest disclosure of the person knowing violation Section 176.006, Local Government Code is a Class C misdemeanor.

OFFICE USE ONLY

Date Received:

W009806858

READY ROSIE

5700 PINICK

AUSTIN, TX 78701

11 Name of person who has a business relationship with local governmental entity.

 Physical Location Personal Contact

12 Check this box if you are filing an update to a previously filed questionnaire.

13 Check this box if you have an updated completed questionnaire with the new designating authority not being listed. This box must be checked when the person's title changes from one government body to another or jurisdiction.

14 Check this box if you are familiar with whom after being employed or having a relationship.



Name at Office

15 Check this box if you are familiar with whom the individual or entity is required to file an update to whom the new designating authority is not listed. This box must be checked when the person's title changes from one government body to another or jurisdiction.

16 Check this box if you are familiar with whom the individual or entity is required to file an update to whom the new designating authority is not listed. This box must be checked when the person's title changes from one government body to another or jurisdiction.

 Yes No

17 Check this box if the individual or entity is likely to receive income from other than employment from or at the governmental entity, or from another entity, either with or without compensation, from or at the governmental entity.

 Yes No

18 Check this box if the individual or entity is connected to other business entities with respect to whom the local government entity is required to file an update to whom the new designating authority is not listed.

 Yes No

19 Check this box if the individual or entity is connected to the local government entity.

Signature of Person Completing Questionnaire

Signature of Person Completing Questionnaire

Accepted On (Signature)