LOCAL GOVERNMENT OFFICER CONFLICTS DISCLOSURE STATEMENT (Instructions for completing and filing this form are provided on the next page.)

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	
Nathan Wenske	
2 Office Held	
Trustao	SHOW SHIP HENDONE
3 Name of vendor described by Sections 176.001(7) and 176.003(a), Local Government Code	
Bock Hard Materials LLC	
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
owner gravel company	
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	
No more company and an area in company and a real firm of the company and a second and	, 000tton 11 0:000(Q/(Z/(Z)).
Date Gift Accepted NA Description of Gift NA	CONTRACT AND STREET
Date Gift Accepted <u>NA</u> Description of Gift <u>NA</u>	
Date Gift Accepted NIA Description of Gift NIA	
(attach additional forms as necessary)	And the state of the state of the
to each family member (as defined by Section 176.001(2), Local Government Codalso acknowledge that this statement covers the 12-month period described by Section 176.001(2), Local Government Codalson acknowledge that this statement covers the 12-month period described by Section 176.001(2), Local Government Codalson acknowledge that this statement covers the 12-month period described by Section 176.001(2), Local Government Codalson acknowledge that this statement covers the 12-month period described by Section 176.001(2), Local Government Codalson acknowledge that this statement covers the 12-month period described by Section 176.001(2), Local Government Codalson acknowledge that this statement covers the 12-month period described by Section 176.001(2), Local Government Codalson acknowledge that this statement covers the 12-month period described by Section 176.001(2), Local Government Codalson acknowledge that this statement covers the 12-month period described by Section 176.001(2), Local Government Codalson acknowledge that the 176.001(2) acknowledge the	
The state of the s	Government Onicer
Please complete either option below:	DUNEY: IS
(1) Affidavit	
NOTARY STAMP/SEAL	
1 Nothan Wassus	35th march
ANN SEIDEN	
20 to certify which, witness my hand and seal of office. NOTARY STATE OF	PUBLIC (
10 # 520	050-6 es 07-2Tig923 officer administering oath
OR	and a difficulty of the
(2) Unsworn Declaration	20 T C TO 1 THE TOTAL SEC. 1-15
My name is Nathan Wenske , and my date of birth is	11.26-1981
My address is 5680 US Highway 77-4N, Youlum TX	77995 USA
(street) (state	e) (zip code) (country)
Executed in Lavaca County, State of X , on the day of Mark	20 (year)
Se the recommendate of the first of the second section of the second sec	rnment Officer (Declarant)

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FORM CIS

This questionnaire reflec	ts changes made to the law by H.E	3. 23, 84th Leg., Regular Session.	OFFICE USE ONLY
government officer has		tal entity that the following local ire the officer to file this statement le.	Date Received
Name of Local Gove	rnment Officer		
2 Office Held	15tpp		- 1. 1. 1.
	ribed by Sections 176.001(7) an	d 176.003(a), Local Government	
cod nonica	Turk		
4 Description of the na with vendor named	iture and extent of each employs n item 3.	ment or other business relationshi	p and each family relationship
		and any family member, if aggreg the 12-month period described by	
Date Gift Accepted	Description of C	Sin N/a	
Date Gift Accepted	Description of (Gift	
Date Gift Accepted _	Description of Gif	1	
	(attach additio	nal forms as necessary)	
	vernment Code.	ers the 12-month period described by Sec	Government Officer
(1) A BOANT OF NOTARY OF NOTARY STATE (35)	id c. State of Texas ##D 05 03-17-2021 y iD 10801055	plete either option below:	N/4
Swom to and subscribed be	efore me by Johnny /	urk this the 8	Hu day of March
to certify w	nich, witness my hand and seal of office.		Makan
Signature of officer administerio		LY NY officer administering oath	Title of officer administering oath
	T TIME I IIII OT C	OR	This of one of the same of the
(2) Unsworn Declaration			-
My name is		, and my date of birth is	
My address is			
	(street)	(city) (state	e) (zip code) (country)
Executed in	County, State of	, on the day of(month)	, 20 (year)
		Signature of Local Gove	mment Officer (Declarant)

LOCAL GOVERNMENT OFFICER CONFLICTS DISCLOSURE STATEMENT (Instructions for completing and filing this form are provided on the next page.)

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This questionnaire ref	lects changes made to the law by	H.B. 23, 84th Leg., Regular Session.	OFFICE USE ONLY
government officer h		ental entity that the following local quire the officer to file this statement code.	Date Received
	vernment Officer		
Room J	Boswell		
	David JT 1	DI 11 7	CONTRACTOR IN THE PROPERTY OF
2 Name of vendor de	Board of Truste	and 176/003(a), Local Government	
Code	actionally occitoria trological	una 174000(a), 200ai Government	Land Ref.
Surport Ha	me Sand & Gran	1el/Tammy Steinmann	A STATE OF THE PARTY OF THE PAR
4 Description of the	nature and extent of each emple	oyment or other business relationsh	ip and each family relationship
with vendor name		ter-in-law	
5 List gifts accepte	d by the local government offic	er and any family member, if aggre	gate value of the gifts accepted
		g the 12-month period described b	
Date Gift Accepte	d Description of	of Gift	
Date Gift Accepte	d Description of	of Gift	
Date Gift Accepte	d Description of	Gift	
	(attach add	itional forms as necessary)	A STATE OF THE PARTY OF THE PAR
		Section 176.001(2), Local Government Coccovers the 12-month period described by Se	ction 176.003(a)(2)(B), Local
	Section 1	Signature of Loca	I Government Officer
(1) Affidavit	NOTARY PUBLI STATE OF TEXA ID # 13228413- My Comm. Expires 12-1	· · · · · · · · · · · · · · · · · · ·	
	Val: 0	SOSWELL this the ?	and Lein
Swom to and subscribed			day of Jen,
Class CI	y which, witness my hand and seal of offi		Amban Pul-tin
Signature of officer administ	aring onth Briston arms	el caroll	Title of officer administering oath
Signature of officer administra	ering dad. Printed name	of officer administering oath	The or officer administering dath
(2) Unsworn Declarat	ion	OR	
My name is		, and my date of birth is	
My address is		/E/	
- Sprandil - nen	(street)	(city) (sta	te) (zip code) (country)
Executed in	County, State of	, on theday of(month)	, 20 (year)
			Goul
		Signature of Local Gove	ernment Officer (Declarant)

LOCAL GOVERNMENT OFFICER CONFLICTS DISCLOSURE STATEMENT

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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	
Jeff Points	
2 Office Held	
SHISD Brand of Trustees Place 4	
3 Name of vendor described by Sections 176.001(7) and 176.003(a), Local Government Code	
Double P Construction - Dawn Points	
4 Description of the nature and extent of each employment or other business relationshi with vendor named in item 3.	p and each family relationship
5 List gifts accepted by the local government officer and any family member, if aggreg	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	N 175 175
Date Gift Accepted Description of Gift	
Date Gift Accepted Description of Gift	
(attach additional forms as necessary)	
to each family member (as defined by Section 176.001(2), Local Government Code also acknowledge that this statement covers the 12-month period described by Section 176.001(2), Local Government Code.	
MONICA TURK My Notary ID # 124347778 Expires September 27, 2022 Monica Turk	
NOTARY STAMP/SEAL Sworn to and subscribed before me by THEF POINTS this the	day of April .
20, to certify which, witness my hand and seal of office	Amin Assast
Signature of officer administering oath Printed name of officer administering oath	Title of officer administering oath
OR	
(2) Unsworn Declaration	
My name is Jeff Points and my date of birth is	7-16-67
My address is 1053 CR 395 . Yakum . Tx	.7795 Lavaca
(street) (city) (state	
Executed in Lavaca County, State of Texas, on the 8th day of 3	. 20 <u> </u>
Signature of Local Gove	rnment Officer (Declarant)