LOCAL GOVERNMENT OFFICER FORM CIS CONFLICTS DISCLOSURE STATEMENT (Instructions for completing and filing this form are provided on the next page.) This questionnaire raflects 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 **Date Received** government officer has become aware of facts that require the officer to file this statement in accordance with Chapter 176, Local Government Code. Name of Local Government Officer DARREN ECKOLS Office Held WID TELECOMM. Name of vendor described by Sections 176.001(7) and 176.003(a), Local Government Code NETSVIC Description of the nature and extent of each employment or other business relationship and each family relationship with vendor named in Item 3. RUSINESS 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 4/4/16 Description of Gift ENTRY FEE 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. I acknowledge that the disclosure applies to each family member (as defined by Section 178.001(2), Local Government Code) of this local government officer. I also acknowledge that this statement LISA E. MOORE covers the 12-month period described by Section 176.003(a)(2)(B), Local Government Code. MY COMMISSION EXPIRES May 4, 2017 Signature of Local Government Officer AFFIX NOTARY STAMP / SEAL ABOVE Sworn to and subscribed before me, by the said <u>Darren Eckols</u> , 20 16 , to certify which, witness my hand and seal of office. Exec Dir. of Payroll Lisa Moore

Signature of officer administering oath

Printed name of officer administering oath

Title of officer administering oath