## LOCAL GOVERNMENT OFFICER CONFLICTS DISCLOSURE STATEMENT

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
1 Name of Local Government Office	r	
Charles Rencher		
2 Office Held		
Board Member and Secretary		
Name of vendor described by Sections 176.001(7) and 176.003(a), Local Government Code		
The Muller Law Group, PLLC		
Description of the nature and extent of each employment or other business relationship and each family relationship with vendor named in item 3.		
Appraisal Services		
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)	
JENNIFER A. HENDRIX My Notary ID # 130999491 Expires February 8, 2021	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 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 176.003(a)(2)(B), Local Government Code.  Signature of Local Government Officer	
Sworn to and subscribed before me, by the said CHARLES RENCHEN , this the 19th day of March , 20 19 , 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		