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
Name of Local Government Officer	
Dr. Cesar Maldonado	
2 Office Held	
Chancellor	
Name of vendor described by Sections 176.001(7) and 176.003(a), Local Government Code	
Texans	
Description of the nature and extent of each ampleument as other husiness relationship	n and each family relationship
Description of the nature and extent of each employment or other business relationship and each family relationship with vendor named in item 3.	
HCC does not have an executed agreement at this time.	
5 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).	
09/24/2018 2 Tickets to Texans game 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 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. KEIANA BLAKE Notary ID #128399614 My Commission Expires September 27, 2022	
Sworn to and subscribed before me, by the said Cesar Maldonado, this the 24th day	
Sworn to and subscribed before me, by the said <u>LeSay Maldonado</u> , this the <u>LT</u> day of <u>Sepember</u> , 20 <u>18</u> , to certify which, witness my hand and seal of office.	
HimaBlake Heiana Blake Sr. Executive Assistant	
Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath	