

# 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.

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.

### OFFICE USE ONLY

Date Received

1 Name of Local Government Officer

*Heath Yates*

2 Office Held

*Board. Trustee*

3 Name of vendor described by Sections 176.001(7) and 176.003(a), Local Government Code

*Excel*

4 Description of the nature and extent of each employment or other business relationship and each family relationship with vendor named in item 3.

*Subcontractor*

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).

Date Gift Accepted \_\_\_\_\_ Description of Gift \_\_\_\_\_

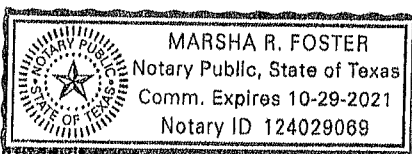
Date Gift Accepted \_\_\_\_\_ Description of Gift \_\_\_\_\_

Date Gift Accepted \_\_\_\_\_ Description of Gift \_\_\_\_\_

(attach additional forms as necessary)

6 SIGNATURE

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]*  
Signature of Local Government Officer

Please complete either option below:

(1) Affidavit

NOTARY STAMP/SEAL

Sworn to and subscribed before me by *Heath Yates* this the *13* day of *April*

20 *21*, to certify which, witness my hand and seal of office.

*Marsha R Foster*

*Marsha R Foster*

*Admin Sec / Notary*

Signature of officer administering oath

Printed name of officer administering oath

Title of officer administering oath

OR

(2) Unsworn Declaration

My name is \_\_\_\_\_, and my date of birth is \_\_\_\_\_.

My address is \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_.

(street)

(city)

(state)

(zip code)

(country)

Executed in \_\_\_\_\_ County, State of \_\_\_\_\_, on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

(month)

(year)

\_\_\_\_\_  
Signature of Local Government Officer (Declarant)

ETHICS  
CONFLICT OF INTEREST DISCLOSURES

BBFA  
(EXHIBIT)

EXHIBIT A

AFFIDAVIT DISCLOSING SUBSTANTIAL INTEREST  
IN A BUSINESS ENTITY OR REAL PROPERTY

STATE OF TEXAS  
COUNTY OF Van Zandt (name)

I, Heath Yates (name), as a local public official of  
Fruitvale ISD School board (name), make this affidavit and on my  
oath state the following:

1. I, or a person(s) related to me in the first degree, have a substantial interest in:
- ☒ a business entity, as those terms are defined in Local Government Code Sections 171.001-.002, that would experience a special economic effect distinguishable from its effect on the public by a vote or decision of the Board.

OR

- ☐ real property for which it is reasonably foreseeable that the Board's action or my action will have a special economic effect on the value of the property distinguishable from its effect on the public.

2. The business entity or real property is  
EXCEED Engineering 17580 FM 47 Wills Point, TX 75169  
(name/address of business or description of property).

Heath Yates ("I" or name of relative and relationship) (have)(has) a  
substantial interest in this business entity or real property as follows:

(Check all that apply.)

- ☐ Ownership of ten percent or more of the voting stock or shares of the business entity.
- ☐ Ownership of ten percent or more of the fair market value of the business entity.
- ☐ Ownership of \$15,000 or more of the fair market value of the business entity.
- ☐ Funds received from the business entity exceed ten percent of \_\_\_\_\_ (my, her, his) gross income for the previous year.
- ☐ Real property is involved and \_\_\_\_\_ (I, she, he)(have)(has) an equitable or legal ownership with a fair market value of \$2,500 or more.

3. The statements in this affidavit are based on my personal knowledge and are true and correct.
4. Upon the filing of this affidavit with the Board's official record keeper, I affirm that I will abstain from participation in any decision involving this business entity or real property, unless permitted according to Local Government Code 171.004(c).

ETHICS  
CONFLICT OF INTEREST DISCLOSURES

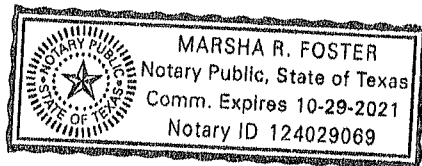
BBFA  
(EXHIBIT)

Signed: 4/12/21 (date)  
Signature of official: [Signature]  
Title: Board President

STATE OF TEXAS  
COUNTY OF Van Zandt (name)

Sworn to and subscribed before me on this 13 (date) day of April  
(month), 2013 (year).

Marsha R Foster, Notary Public, State of Texas



# LOCAL GOVERNMENT OFFICER CONFLICTS DISCLOSURE STATEMENT

FORM CIS

(Instructions for completing and filling this form are provided on the next page.)

This questionnaire reflects changes made to the law by H.B. 23, 84th Leg., Regular Session.

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.

## OFFICE USE ONLY

Date Received

2-7-23

1 Name of Local Government Officer

Heath Yates

2 Office Held

Board Member

3 Name of vendor described by Sections 176.001(7) and 176.003(a), Local Government Code

Salt Lickers

4 Description of the nature and extent of each employment or other business relationship and each family relationship with vendor named in item 3.

Owner.

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).

Date Gift Accepted \_\_\_\_\_ Description of Gift \_\_\_\_\_

Date Gift Accepted \_\_\_\_\_ Description of Gift \_\_\_\_\_

Date Gift Accepted \_\_\_\_\_ Description of Gift \_\_\_\_\_

(attach additional forms as necessary)

6 SIGNATURE

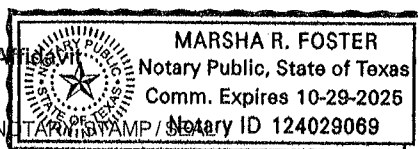
I swear under penalty of perjury that the above statement is true and correct. I acknowledge that the disclosure applies to each family member (as defined by Section 176.001(2), Local Government Code) of this local government officer. I also acknowledge that this statement covers the 12-month period described by Section 176.003(a)(2)(B), Local Government Code.

*[Signature]*

Signature of Local Government Officer

Please complete either option below:

(1) Affidavit



Sworn to and subscribed before me by Heath Yates this the 7 day of February,

20 23, to certify which, witness my hand and seal of office.

*[Signature]*

Signature of officer administering oath

*Marshall Foster*

Printed name of officer administering oath

*Notary*

Title of officer administering oath

OR

(2) Unsworn Declaration

My name is \_\_\_\_\_, and my date of birth is \_\_\_\_\_.

My address is \_\_\_\_\_,

(street)

(city)

(state)

(zip code)

(country)

Executed in \_\_\_\_\_ County, State of \_\_\_\_\_, on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

(month)

(year)

Signature of Local Government Officer (Declarant)

# 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.

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.

## OFFICE USE ONLY

Date Received

1 Name of Local Government Officer

Kimbra Pettiet

2 Office Held

Trustee

3 Name of vendor described by Sections 176.001(7) and 176.003(a), Local Government Code

4 Description of the nature and extent of each employment or other business relationship and each family relationship with vendor named in item 3.

Occasional vinyl signs

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).

Date Gift Accepted \_\_\_\_\_ Description of Gift \_\_\_\_\_

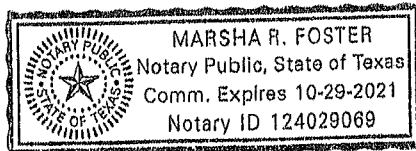
Date Gift Accepted \_\_\_\_\_ Description of Gift \_\_\_\_\_

Date Gift Accepted \_\_\_\_\_ Description of Gift \_\_\_\_\_

(attach additional forms as necessary)

## 6 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 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.



Kimbra Pettiet

Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Kimbra Pettiet, this the 14 day of May, 2018, to certify which, witness my hand and seal of office.

Marsha R Foster

Signature of officer administering oath

Marsha R Foster

Printed name of officer administering oath

Notary

Title of officer administering oath

**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. 1491, 80th Leg., Regular Session.

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

**OFFICE USE ONLY**

Date Received

1 Name of Local Government Officer

William R. Hunt

2 Office Held

School Board Trustee

3 Name of person described by Sections 176.002(a) and 176.003(a), Local Government Code

William R. Hunt

4 Description of the nature and extent of employment or other business relationship with person named in item 3

Frog Street Press ; Educational Materials

5 List gifts accepted by the local government officer and any family member, excluding gifts described by Section 176.003(a-1), if aggregate value of the gifts accepted from person named in item 3 exceed \$250 during the 12-month period described by Section 176.003(a)(2)(B)

Date Gift Accepted \_\_\_\_\_ Description of Gift \_\_\_\_\_

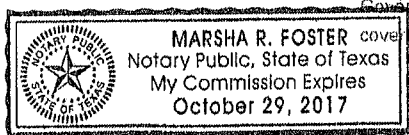
Date Gift Accepted \_\_\_\_\_ Description of Gift \_\_\_\_\_

Date Gift Accepted \_\_\_\_\_ Description of Gift \_\_\_\_\_

(attach additional forms as necessary)

6 AFFIDAVIT

I swear under penalty of perjury that the above statement is true and correct. I acknowledge that the disclosure applies to a 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), Local Government Code



*[Signature]*

Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said William R. Hunt, this the 20<sup>th</sup> day of February, 20 14, to certify which, witness my hand and seal of office.

*[Signature]*

Signature of officer administering oath

Marsha R Foster

Printed name of officer administering oath

Admin Sec./Notary

Title of officer administering oath

ETHICS  
CONFLICT OF INTEREST DISCLOSURES

BBFA  
(EXHIBIT)

EXHIBIT A

AFFIDAVIT DISCLOSING SUBSTANTIAL INTEREST  
IN A BUSINESS ENTITY OR REAL PROPERTY

STATE OF TEXAS  
COUNTY OF Van Zandt (name)

I, William R. Hunt (name), as a local public official of  
Fruitvale ISD School Board (name), make this affidavit and on my  
oath state the following:

1. I, or a person(s) related to me in the first degree, have a substantial interest in:
- ☒ a business entity, as those terms are defined in Local Government Code Sections 171.001-.002, that would experience a special economic effect distinguishable from its effect on the public by a vote or decision of the Board.

OR

- ☐ real property for which it is reasonably foreseeable that the Board's action or my action will have a special economic effect on the value of the property distinguishable from its effect on the public.

2. The business entity or real property is  
FROG STREET PRESS, LLC  
(name/address of business or description of property).
- William R. Hunt ("I" or name of relative and relationship) (have)(has) a  
substantial interest in this business entity or real property as follows:

(Check all that apply.)

- ☐ Ownership of ten percent or more of the voting stock or shares of the business entity.
- ☒ Ownership of ten percent or more of the fair market value of the business entity.
- ☒ Ownership of \$15,000 or more of the fair market value of the business entity.
- ☒ Funds received from the business entity exceed ten percent of my (my, her, his) gross income for the previous year.
- ☐ Real property is involved and \_\_\_\_\_ (I, she, he) (have)(has) an equitable or legal ownership with a fair market value of \$2,500 or more.
3. The statements in this affidavit are based on my personal knowledge and are true and correct.
4. Upon the filing of this affidavit with the Board's official record keeper, I affirm that I will abstain from participation in any decision involving this business entity or real property, unless permitted according to Local Government Code 171.004(c).

ETHICS  
CONFLICT OF INTEREST DISCLOSURES

BBFA  
(EXHIBIT)

Signed: 04.15.21 (date)

Signature of official: [Signature]

WILLIAM R HUNT

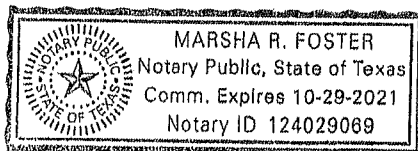
Title: VP OPERATIONS

STATE OF TEXAS

COUNTY OF Van Zandt (name)

Sworn to and subscribed before me on this 15 (date) day of April  
(month), 2021 (year).

Marsha R Foster, Notary Public, State of Texas





# LOCAL GOVERNMENT OFFICER CONFLICTS DISCLOSURE STATEMENT

FORM CIS

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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.

## OFFICE USE ONLY

Date Received

1 Name of Local Government Officer

Jason Wade Brown

2 Office Held

Board member

3 Name of vendor described by Sections 176.001(7) and 176.003(a), Local Government Code

None

4 Description of the nature and extent of each employment or other business relationship and each family relationship with vendor named in item 3.

None

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).

Date Gift Accepted \_\_\_\_\_ Description of Gift \_\_\_\_\_

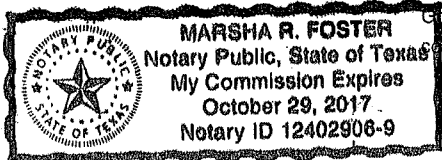
Date Gift Accepted \_\_\_\_\_ Description of Gift \_\_\_\_\_

Date Gift Accepted \_\_\_\_\_ Description of Gift \_\_\_\_\_

(attach additional forms as necessary)

## 6 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 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.



*Jason Brown*

Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Jason Brown, this the 15<sup>th</sup> day of June, 20 17, to certify which, witness my hand and seal of office.

*Marsha R Foster*

Signature of officer administering oath

Marsha R Foster

Printed name of officer administering oath

Admin Sec.

Title of officer administering oath

# LOCAL GOVERNMENT OFFICER CONFLICTS DISCLOSURE STATEMENT

FORM CIS

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This questionnaire reflects changes made to the law by H.B. 23, 84th Leg., Regular Session.

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.

## OFFICE USE ONLY

Date Received

1 Name of Local Government Officer

Zach Masterson

2 Office Held

School board member

3 Name of vendor described by Sections 176.001(7) and 176.003(a), Local Government Code

N/A

4 Description of the nature and extent of each employment or other business relationship and each family relationship with vendor named in item 3.

N/A

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).

Date Gift Accepted \_\_\_\_\_ Description of Gift \_\_\_\_\_

Date Gift Accepted \_\_\_\_\_ Description of Gift \_\_\_\_\_

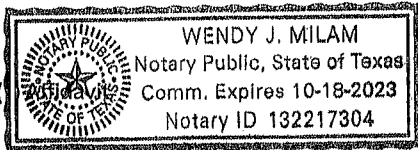
Date Gift Accepted \_\_\_\_\_ Description of Gift \_\_\_\_\_

(attach additional forms as necessary)

6 SIGNATURE

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.

*Zach Masterson*  
Signature of Local Government Officer



NOTARY STAMP/SEAL

Please complete either option below:

Sworn to and subscribed before me by Zach Masterson this the 6<sup>th</sup> day of May,

2021, to certify which, witness my hand and seal of office.

Wendy J. Milam Wendy Milam Notary  
Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath

OR

## (2) Unsworn Declaration

My name is \_\_\_\_\_, and my date of birth is \_\_\_\_\_.

My address is \_\_\_\_\_,  
(street) (city) (state) (zip code) (country)

Executed In \_\_\_\_\_ County, State of \_\_\_\_\_, on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.  
(month) (year)

Signature of Local Government Officer (Declarant)

# LOCAL GOVERNMENT OFFICER CONFLICTS DISCLOSURE STATEMENT

FORM CIS

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This questionnaire reflects changes made to the law by H.B. 23, 84th Leg., Regular Session.

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.

## OFFICE USE ONLY

Date Received

1 Name of Local Government Officer

Chastity Sneed

2 Office Held

Fruitvale ISD Board Trustee

3 Name of vendor described by Sections 176.001(7) and 176.003(a), Local Government Code

Sweet Additions

4 Description of the nature and extent of each employment or other business relationship and each family relationship with vendor named in item 3.

bakery items

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).

Date Gift Accepted \_\_\_\_\_ Description of Gift \_\_\_\_\_

Date Gift Accepted \_\_\_\_\_ Description of Gift \_\_\_\_\_

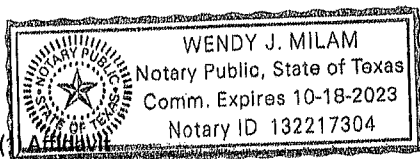
Date Gift Accepted \_\_\_\_\_ Description of Gift \_\_\_\_\_

(attach additional forms as necessary)

6 SIGNATURE

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.

Chastity Sneed  
Signature of Local Government Officer



Please complete either option below:

NOTARY STAMP/SEAL

Sworn to and subscribed before me by Chastity Sneed this the 16<sup>th</sup> day of May, 2022, to certify which, witness my hand and seal of office.

Wendy J. Milam  
Signature of officer administering oath

Wendy J. Milam  
Printed name of officer administering oath

Business Manager  
Title of officer administering oath

OR

## (2) Unsworn Declaration

My name is \_\_\_\_\_, and my date of birth is \_\_\_\_\_.

My address is \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_.  
(street) (city) (state) (zip code) (country)

Executed in \_\_\_\_\_ County, State of \_\_\_\_\_, on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.  
(month) (year)

\_\_\_\_\_  
Signature of Local Government Officer (Declarant)

# LOCAL GOVERNMENT OFFICER CONFLICTS DISCLOSURE STATEMENT

FORM CIS

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This questionnaire reflects changes made to the law by H.B. 23, 84th Leg., Regular Session.

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.

## OFFICE USE ONLY

Date Received

1 Name of Local Government Officer

Andrew Dinkins

2 Office Held

Fruitvale ISD Board Trustee

3 Name of vendor described by Sections 176.001(7) and 176.003(a), Local Government Code

N/A

4 Description of the nature and extent of each employment or other business relationship and each family relationship with vendor named in item 3.

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).

Date Gift Accepted \_\_\_\_\_ Description of Gift \_\_\_\_\_

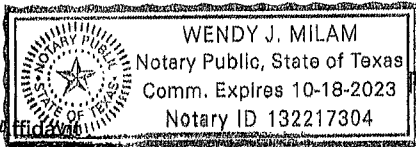
Date Gift Accepted \_\_\_\_\_ Description of Gift \_\_\_\_\_

Date Gift Accepted \_\_\_\_\_ Description of Gift \_\_\_\_\_

(attach additional forms as necessary)

6 SIGNATURE

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]*

Signature of Local Government Officer

Please complete either option below:

(1) Affidavit

NOTARY STAMP/SEAL

Sworn to and subscribed before me by Andrew Dinkins this the 16 day of May, 2022, to certify which, witness my hand and seal of office.

*[Signature]*  
Signature of officer administering oath

Wendy J. Milam  
Printed name of officer administering oath

Business Manager  
Title of officer administering oath

OR

(2) Unsworn Declaration

My name is \_\_\_\_\_, and my date of birth is \_\_\_\_\_.

My address is \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_.  
(street) (city) (state) (zip code) (country)

Executed in \_\_\_\_\_ County, State of \_\_\_\_\_, on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.  
(month) (year)

Signature of Local Government Officer (Declarant)