LOCAL GOVERNMENT OFFICER CONFLICTS DISCLOSURE STATEMENT

FORM CIS

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

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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
Name of Local Government Officer	RECEIVED
George H. Scott	JUL 2 3 2018
2 Office Held Katy 150 School Boud Pos. 1	Board of Trustees Katy ISD
Name of vendor described by Sections 176.001(7) and 176.003(a), Local Governmen	t Code
Description of the nature and extent of each employment or other business relationsh with vendor named in item 3.	ip and each family relationship
,	
List gifts accepted by the local government officer and any family member, if aggre from vendor named in item 3 exceeds \$100 during the 12-month period described by	
	, , , , , , , , , , , , , , , , , , , ,
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 de Government Code) of this local government officer. I als	
covers the 12-month period described by Section 176.003	
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Dene N.	:C1
Signature of Loca	I Government Officer
I swear under penalty of perjury that the above statement that the disclosure applies to each family member (as de Government Code) of this local government officer. I also covers the 12-month period described by Section 176.003 AFFIX NOVALLA ABOVE Sworn to and subscribed before me, by the said CLOVAL SCATT AFFIX NOVALLA ABOVE	
Sworn to and subscribed before me, by the said TOVAL SCUTT	, this the day
of, 20, to certify which, witness my hand and seal of office.	/
elichelle DKOM MICHELLE D. ROSS	Notary Public
Signature of officer administering oath Printed name of officer administering oath	Title of officer administering oath