LOCAL GOVERNMENT OFFICER CONFLICTS DISCLOSURE STATEMENT (Instructions for completing and filing this form are provided on the next page.)

FORM CIS

| 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 Officer | |
| Wes Graham | |
| 2 Office Held | |
| Principal | |
| 3 Name of vendor described by Sections 176.001(7) and 176.003(a), Local Government Code | |
| Dipped & Deelicious | |
| Description of the nature and extent of each employment or other business relationship and each family relationship with vendor named in Item 3. LISD may order goods from Dipped & Deelicious at times. This business is owned by my sister-in-law. | |
| 5 List gifts accepted by the local government officer and any family member, if aggreg | ate 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 | <u> </u> |
| Date Gift Accepted Description of Gift | |
| (attach additional forms as necessary) | |
| 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 76.003(a)(2)(B), Local Government Code. Signature of Local Government Officer | |
| Please complete either option below: | |
| IVAD. DAVIS My Notary ID # 3842587 OUT A Shiftes May 2, 2024 Sworn to and subscribed before me by | |
| 20 2/ , to certify which, witness my hand and seal of office. | Motary |
| eignature of officer administering oath Printed name of officer administering oath | Title of office administering oath |
| OR | |
| (2) Unsworn Declaration | |
| 1 444 44 44 44 44 44 44 44 44 44 44 44 4 | 2/17/1977 |
| My address is 1511 W Ave B Lampasas TX | |
| (street) (city) (state | |
| Executed in County, State of, on the day of (month) | , 20 <u>2</u> . (year) |
| Signature of Local Govern | oment Officer (Declarant) |