

# 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

MERL BRANDON

2 Office Held

SUPERINTENDENT

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

NOT APPLICABLE

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

NOT APPLICABLE

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 N/A Description of Gift NOT APPLICABLE

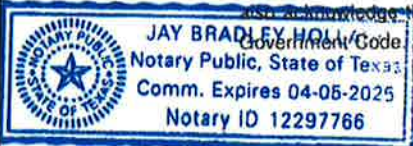
Date Gift Accepted I Description of Gift I

Date Gift Accepted I Description of Gift I

(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 MERL BRANDON this the 28TH day of JANUARY.

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

Jay Bradley Holland  
Signature of officer administering oath

JAY BRADLEY HOLLAND  
Printed name of officer administering oath

NOTARY PUBLIC  
Title of officer administering oath

OR

(2) Unsworn Declaration

My name is MERL BRANDON, and my date of birth is 10-20-1965.

My address is 3419 CR B2240, STANTON, TX, 79782, USA.  
(street) (city) (state) (zip code) (country)

Executed in MARTIN County, State of TEXAS, on the 28TH day of JANUARY, 20 21.  
(month) (year)

[Signature]  
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

KELLY ALLRED

2 Office Held

TRUSTEE - DISTRICT #1 (APPOINTED)

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

FRANKLIN S. SON, INC.

4 Description of the nature and extent of each employment or other business relationship and each family relationship with vendor named in item 3. EMPLOYEE, BUSINESS SUPPLIES FUEL, OIL, AND TIRES TO THE DISTRICT.

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 N/A Description of Gift N/A

Date Gift Accepted 3 Description of Gift 3

Date Gift Accepted 3 Description of Gift 3

(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.

Kelly Allred  
Signature of Local Government Officer

Please complete either option below:

(1) Affidavit

NOTARY STAMP / SEAL

Sworn to and subscribed before me by KELLY ALLRED this the 10TH day of MARCH

20 22, to certify which, witness my hand and seal of office.

Jay Bradley Holland  
Signature of officer administering oath

JAY BRADLEY HOLLAND  
Printed name of officer administering oath

Notary Public  
Title of officer administering oath

OR

(2) Unsworn Declaration

My name is KELLY ALLRED, and my date of birth is 4-26-1972

My address is 704 N. ST. MARY, STANTON, TX, 79782, USA

(street)

(city)

(state)

(zip code)

(country)

Executed in MARTIN County, State of TEXAS, on the 10 day of March, 20 22

(month)

(year)

Kelly Allred  
Signature of Local Government Officer (Declarant)

# 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

RAMIRO REYES

2 Office Held

TRUSTEE - DISTRICT # 2

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

NOT APPLICABLE

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

NOT APPLICABLE

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 N/A Description of Gift NOT APPLICABLE

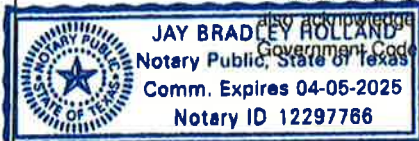
Date Gift Accepted I Description of Gift I

Date Gift Accepted I Description of Gift I

(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 of Local Government Officer

Please complete either option below:

(1) Affidavit

NOTARY STAMP / SEAL

Sworn to and subscribed before me by RAMIRO REYES this the 27TH day of JANUARY, 20 21, 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

OR

(2) Unsworn Declaration

My name is RAMIRO REYES, and my date of birth is 02-13-1986

My address is 3356 CR 2050, STANTON, TX, 79782, USA  
(street) (city) (state) (zip code) (country)

Executed in MARTIN County, State of TEXAS, on the 27TH day of JANUARY, 20 21.  
(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

JEREMY LOUDER

2 Office Held

TRUSTEE - DISTRICT #3

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

AMANDA B. LOUDER

4 Description of the nature and extent of each employment or other business relationship and each family relationship with vendor named in item 3. SPOUSE PROVIDES CONSULTING SERVICES FOR LIFE SKILLS AND PPOD SPECIAL EDUCATION STUDENTS.

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).

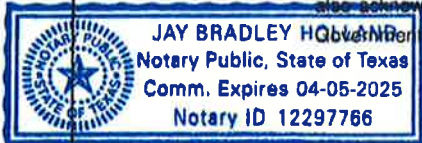
Date Gift Accepted N/A Description of Gift NOT APPLICABLE

Date Gift Accepted I Description of Gift I

Date Gift Accepted I Description of Gift I

(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 of Local Government Officer

Please complete either option below:

### (1) Affidavit

NOTARY STAMP / SEAL

Sworn to and subscribed before me by JEREMY LOUDER this the 8TH day of FEBRUARY, 2021, to certify which, witness my hand and seal of office.

Signature of officer administering oath

Printed name of officer administering oath

Notary Public

OR

### (2) Unsworn Declaration

My name is JEREMY LOUDER, and my date of birth is 12-05-1977.

My address is 506 W. 6TH STREET, STANTON, TX, 79782, USA.  
(street) (city) (state) (zip code) (country)

Executed in MARTIN County, State of TEXAS, on the 8TH day of FEBRUARY, 2021.  
(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

REGGIE FRANKLIN

2 Office Held

TRUSTEE - DISTRICT #4 (APPOINTED)

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

FRANKLIN & SON, INC.

4 Description of the nature and extent of each employment or other business relationship and each family relationship with vendor named in item 3. BUSINESS SUPPLIES FUEL, OIL, AND TIRES TO THE DISTRICT.

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 N/A Description of Gift N/A

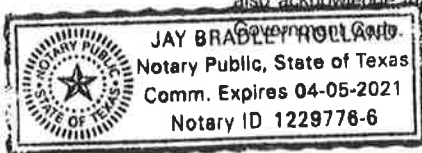
Date Gift Accepted 1 Description of Gift 1

Date Gift Accepted 1 Description of Gift 1

(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



Reggie Franklin  
Signature of Local Government Officer

Please complete either option below:

(1) Affidavit

NOTARY STAMP / SEAL

Sworn to and subscribed before me by REGGIE FRANKLIN this the 11TH day of JANUARY, 20 20, to certify which, witness my hand and seal of office.

Jay Bradley Holland  
Signature of officer administering oath

JAY BRADLEY HOLLAND  
Printed name of officer administering oath

NOTARY PUBLIC  
Title of officer administering oath

OR

(2) Unsworn Declaration

My name is REGGIE FRANKLIN, and my date of birth is 11-20-1969.

My address is 3423 CR B 2240, STANTON, TX, 79782, USA.  
(street) (city) (state) (zip code) (country)

Executed in MARTIN County, State of TEXAS, on the 11TH day of JANUARY, 20 20.  
(month) (year)

Reggie Franklin  
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**

Jana D. Cook

**2 Office Held**

School Trustee - District #5

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

NOT APPLICABLE

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

NOT APPLICABLE

**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 \_\_\_\_\_

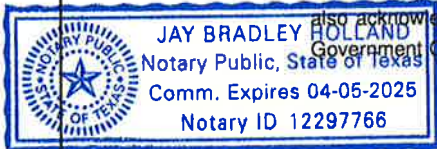
(attach additional forms as necessary)

**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.



*Jana D. Cook*

Signature of Local Government Officer

**Please complete either option below:**

**(1) Affidavit**

NOTARY STAMP / SEAL

Sworn to and subscribed before me by JANA D. COOK this the 18TH day of FEBRUARY

20 2022, to certify which, witness my hand and seal of office.

*Jay Bradley Holland*

Signature of officer administering oath

JAY BRADLEY HOLLAND

Printed name of officer administering oath

NOTARY PUBLIC

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

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## OFFICE USE ONLY

Date Received

1 Name of Local Government Officer

TIFFANY CARSON

2 Office Held

TRUSTEE - PLACE #6 (AT-LARGE)

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

GREG MADISON FARMS, INC.

4 Description of the nature and extent of each employment or other business relationship and each family relationship with vendor named in Item 3. FATHER, GREG PROVIDES LAND CLEARING SERVICES FOR STANTON ISD.

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 N/A Description of Gift NOT APPLICABLE

Date Gift Accepted I Description of Gift I

Date Gift Accepted I Description of Gift I

(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.



Tiffany Carson  
Signature of Local Government Officer

Please complete either option below:

(1) Affidavit

NOTARY STAMP / SEAL

Sworn to and subscribed before me by TIFFANY CARSON this the 1ST day of FEBRUARY, 20 21, to certify which, witness my hand and seal of office.

Jay Bradley Holland  
Signature of officer administering oath

JAY BRADLEY HOLLAND  
Printed name of officer administering oath

NOTARY PUBLIC  
Title of officer administering oath

OR

(2) Unsworn Declaration

My name is TIFFANY CARSON, and my date of birth is 04-08-1980.  
My address is 2307 WESTSIDE DRIVE, STANTON, TX, 79762, USA.  
(street) (city) (state) (zip code) (country)

Executed in MARTIN County, State of TEXAS, on the 1ST day of FEBRUARY, 20 21.  
(month) (year)

Tiffany Carson  
Signature of Local Government Officer (Declarant)

# LOCAL GOVERNMENT OFFICER CONFLICTS DISCLOSURE STATEMENT

FORM CIS

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## OFFICE USE ONLY

Date Received

1 Name of Local Government Officer

MARTY GRAHAM

2 Office Held

TRUSTEE - PLACE #7 (AT-LARGE)

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

NOT APPLICABLE

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

NOT APPLICABLE

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 N/A Description of Gift NOT APPLICABLE

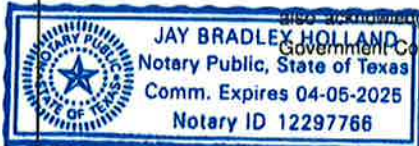
Date Gift Accepted I Description of Gift I

Date Gift Accepted I Description of Gift I

(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.



*Marty Graham*

Signature of Local Government Officer

Please complete either option below:

(1) Affidavit

NOTARY STAMP / SEAL

Sworn to and subscribed before me by MARTY GRAHAM this the 1st day of FEBRUARY, 20 21, to certify which, witness my hand and seal of office.

*Jay Bradley Holland*  
Signature of officer administering oath

JAY BRADLEY HOLLAND  
Printed name of officer administering oath

NOTARY PUBLIC  
Title of officer administering oath

OR

(2) Unsworn Declaration

My name is MARTY GRAHAM, and my date of birth is 04-03-1968.

My address is 1948 CR 3201, STANTON, TX, 79782, USA.  
(street) (city) (state) (zip code) (country)

Executed in MARTIN County, State of TEXAS, on the 1st day of FEBRUARY, 20 21.  
(month) (year)

*Marty Graham*

Signature of Local Government Officer (Declarant)



# LOCAL GOVERNMENT OFFICER CONFLICTS DISCLOSURE STATEMENT

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## OFFICE USE ONLY

Date Received

**1 Name of Local Government Officer**

JAN McCOWN

**2 Office Held**

ASSISTANT SUPERINTENDENT

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

NET ASCENDANT SOLUTIONS

**4 Description of the nature and extent of each employment or other business relationship and each family relationship with vendor named in item 3.** SPOUSE. CONSULTATION / IT ASSESSMENT OF STANTON ISD'S TECHNOLOGY INFRASTRUCTURE.

**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 N/A Description of Gift NOT APPLICABLE

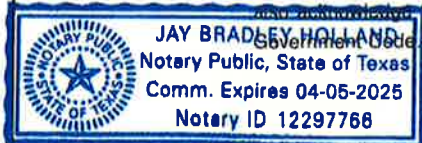
Date Gift Accepted I Description of Gift I

Date Gift Accepted I Description of Gift I

(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 acknowledge that this statement covers the 12-month period described by Section 176.003(a)(2)(B), Local Government Code.



*Jan McCown*

Signature of Local Government Officer

Please complete either option below:

**(1) Affidavit**

NOTARY STAMP / SEAL

Sworn to and subscribed before me by JAN McCOWN this the 28TH day of JANUARY, 20 21, to certify which, witness my hand and seal of office.

*Jay Bradley Holland*

JAY BRADLEY HOLLAND

NOTARY PUBLIC

Signature of officer administering oath

Printed name of officer administering oath

Title of officer administering oath

OR

**(2) Unsworn Declaration**

My name is JAN McCOWN, and my date of birth is 09-05-1978.

My address is 507 W. 6TH STREET, STANTON, TX, 79762, USA.  
(street) (city) (state) (zip code) (country)

Executed in MARTIN County, State of TEXAS, on the 28TH day of JANUARY, 20 21.  
(month) (year)

*Jan McCown*  
Signature of Local Government Officer (Declarant)

# LOCAL GOVERNMENT OFFICER CONFLICTS DISCLOSURE STATEMENT

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## OFFICE USE ONLY

Date Received

1 Name of Local Government Officer

JAY BRADLEY HOLLAND

2 Office Held

CHIEF FINANCIAL OFFICER

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

NOT APPLICABLE

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

NOT APPLICABLE

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 N/A Description of Gift NOT APPLICABLE

Date Gift Accepted I Description of Gift I

Date Gift Accepted I Description of Gift I

(attach additional forms as necessary)

6 SIGNATURE

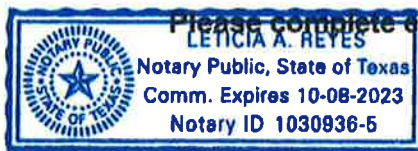
I swear under penalty of perjury that the above statement is true and correct. I acknowledge that the disclosure applies to each family member (as defined by Section 176.001(2), Local Government Code) of this local government officer. I also acknowledge that this statement covers the 12-month period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

Jay Bradley Holland  
Signature of Local Government Officer

Please complete either option below:

(1) Affidavit

NOTARY STAMP / SEAL



Sworn to and subscribed before me by JAY BRADLEY HOLLAND this the 28TH day of JANUARY, 20 21, to certify which, witness my hand and seal of office.

Leticia A. Reyes

LETICIA A. REYES

NOTARY PUBLIC OF TEXAS

Signature of officer administering oath

Printed name of officer administering oath

Title of officer administering oath

OR

(2) Unsworn Declaration

My name is JAY BRADLEY HOLLAND, and my date of birth is 06-28-1971.

My address is 604 W. 4TH STREET, STALTON, TX, 79782, USA.  
(street) (city) (state) (zip code) (country)

Executed in MARTIN County, State of TEXAS, on the 28TH day of JANUARY, 20 21.  
(month) (year)

Jay Bradley Holland  
Signature of Local Government Officer (Declarant)

# LOCAL GOVERNMENT OFFICER CONFLICTS DISCLOSURE STATEMENT

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## OFFICE USE ONLY

Date Received

**1 Name of Local Government Officer**

SHASTA BRYAN

**2 Office Held**

DIRECTOR OF BUSINESS SERVICES & HR

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

KB DESIGNS

**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 OF KB DESIGNS, SCREEN PRINT AND T-SHIRT EMBROIDERY.

**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).**

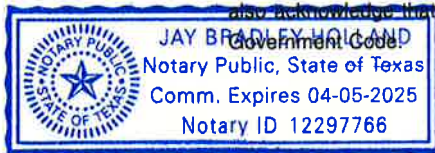
Date Gift Accepted N/A Description of Gift N/A

Date Gift Accepted 2 Description of Gift 2

Date Gift Accepted 2 Description of Gift 2

(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 of Local Government Officer

Please complete either option below:

**(1) Affidavit**

NOTARY STAMP / SEAL

Sworn to and subscribed before me by SHASTA BRYAN this the 7TH day of OCTOBER,

20 22, to certify which, witness my hand and seal of office.

Jay Bradley Holland JAY BRADLEY HOLLAND NOTARY PUBLIC  
Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath

OR

**(2) Unsworn Declaration**

My name is SHASTA BRYAN, and my date of birth is 09-27-1986.

My address is \_\_\_\_\_, STANTON, TX, 79782, USA.  
(street) (city) (state) (zip code) (country)

Executed in MARTIN County, State of TEXAS, on the 7TH day of OCTOBER, 20 22.  
(month) (year)

Signature of Local Government Officer (Declarant)