(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. 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.			
Name of Local Government Offic	er		
Conrado Alvarado			
2 Office Held			
Board of Trustees Member			
3 Name of person described by Se	ctions 176.002(a) and 176.003(a), Local Government	Code	
Conrado Alvarado			
Description of the nature and ext June 19, 2017 Regular Board M	ent of employment or other business relationship wi feeting 9B-2 Approval of RFP 2017-049 Student	th person named in Item 3	
	surance EXECUTIVE DIRECTOR, TEXAS HE		
HEALTH CARE	N. N. N. S.	, 2	
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)		
AFFIX NOTARY STAMP SEAL ABO	I swear under penalty of perjury that the above statement is that the disclosure applies to a family member (as define Government Code) of this local government officer. I also covers the 12-month period described by Section 176.003(	ed by Section 176.001(2), Local acknowledge that this statement a), Local Government Code.	
Sworn to and subscribed before me, by the	ne said Conrado alvarado	, this the day	
of <u>TTIAGUST</u> , 20 / 1 , to	certify which, witness my hand and seal of office.		
Aptalia John Signature of officer administering oath	Natalia Goza Sea	Aug Bolg Trustees	
O.g. Carlo of Officer administrating Oath	Printed name of officer administering oath T	itle of officer administering oath	

(Instructions for completing and filing this form are provided on the next page.)			
This questionnaire reflects changes mad	e to the law by H.B. 1491, 80th Leg., Regular Session.	OFFICE USE ONLY	
	local governmental entity that the following local of facts that require the officer to file this statement Government Code.	Date Received	
Name of Local Government Officer	,		
Debbie Crane Aliseda			
2 Office Held			
Board of Trustees Secretary			
3 Name of person described by Sect	tions 176.002(a) and 176.003(a), Local Government	Code	
Debbie Crane Aliseda			
Description of the nature and exte	nt of employment or other business relationship we eting item 9C-1 Approval of Athletic Field Use	ith person named in item 3	
_	McAllen. Board of Director for Boys and Girls	-	
	·		
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)		
AFFIDAVIT	I swear under penalty of perjury that the above statement is that the disclosure applies to a family member (as defin Government Code) of this local government officer. I also covers the 12-month period described by Section 176.003(	ned by Section 176.001(2), Local o acknowledge that this statement	
AFFIX NOTARY STAMP / SEAL ABOVE Sworn to and subscribed before me, by the	ve esaid <u>Debbie Clane Alixeda</u>	, this the day	
	certify which, witness my hand and seal of office.		
Josephia Dage	Natalia Goza See	retary Board of Trusto	
Signature of officer administering oath	Printed name of officer administering oath	Title of officer administering oath	

(metroctions for completing and filing this form)	are provided on the next page.)	
This questionnaire reflects changes made to the i	aw by H.B. 1491, 80th Leg., Regular Session.	OFFICE USE ONLY
This is the notice to the appropriate local go government officer has become aware of facts in accordance with Chapter 176, Local Government	that require the officer to file this statement	Date Received
Name of Local Government Officer		
Conrado Alvarado		
2 Office Held		
Board of Trustees Member	OC.	
Name of person described by Sections 176	3.002(a) and 176.003(a), Local Government	Code
Conrado Alvarado		
4 Description of the nature and extent of em April 10, 2017 Regular Board Meeting 8	ployment or other business relationship wi SC Approval of Superintendent's Recom	ith person named in item 3
Renewal of 2016-2017 Employee Contra		
School year. Spouse employed with Dis	trict.	
List gifts accepted by the local governme 176.003(a-1), if aggregate value of the gifts period described by Section 176.003(a)(2)(	accepted from person named in item 3 exc	ng gifts described by Section ceed \$250 during the 12-month
Date Gift Accepted Descript	tion of Gift	× ×
Date Gift Accepted Descrip	tion of Gift	
Date Gift Accepted Descript	tion of Gift	
	ch additional forms as necessary)	
that the government of the control o	ar under penalty of perjury that the above statement in the disclosure applies to a family member (as defining the following that the following that the following the following that the following the fol	ed by Section 176.001(2), Local acknowledge that this statement
AFFIX NOTARY STAMP / SEAL ABOVE	7 , 22	
Sworn to and subscribed before me, by the said		, this the day
. 20 / to certify which	ch, witness my hand and seal of office.	
Autalia Doga No	stolia Goza Assi	etary Bot of Trustas
Signature of officer administering oath	Printed name of officer administering oath	itle of officer administering oath

(Instructions for completing and filling th	is form are provided on the next page.)	
This questionnaire reflects changes made	to the law by H.B. 1491, 80th Leg., Regular Session.	OFFICE USE ONLY
	ocal governmental entity that the following local of facts that require the officer to file this statement Government Code.	Date Received
1 Name of Local Government Officer		
Conrado Alvarado		
2 Office Held		
Board of Trustees Member		
3 Name of person described by Secti	ions 176.002(a) and 176.003(a), Local Government	Code
Conrado Alvarado		
4 Description of the nature and exter April 10, 2017 Regular Board Me	nt of employment or other business relationship weeting 9B-1 Approval of agreement for RFQ fo	ith person named in item 3
	PLAN, UNITED HEALTH CARE	n na snots. Enecotive
List gifts accepted by the local go 176.003(a-1), if aggregate value of t	vernment officer and any family member, excluding the gifts accepted from person named in item 3 exc	ing gifts described by Section ceed \$250 during the 12-month
period described by Section 176.00	3(a)(2)(B)	
Date Gift Accepted	Description of Gift	
Date Gift Accepted	Description of Gift	
Date Gift Accepted	Description of Gift	
6 AEEIDAMT	(attach additional forms as necessary)	
AFFIDAVIT	I swear under penalty of perjury that the above statement is that the disclosure applies to a family member (as defin Government Code) of this local government officer. I also covers the 12-month period described by Section 176.0030	ned by Section 176.001(2), Local o acknowledge that this statement
21 20100		Standing Giller
AFFIX NOTARY STAMP / SEAL ABOV	1	0-
Sworn to and subscribed before me, by the	said Consado al Varado ertify which, witness my hand and seal of office.	, this the day
Charles Pro	No lolo	. 4 01 15 2
Signature of officer administering oath	Printed name of officer administering oath	Title of officer administering oath

FORM CIS

(	iodono loi compicang and illing and	nontrare provided on the next page.	
This qu	estionnaire reflects changes made t	o the law by H.B. 1491, 80th Leg., Regular Session.	OFFICE USE ONLY
govern		cal governmental entity that the following local facts that require the officer to file this statement overnment Code.	Date Received
1 Nam	e of Local Government Officer		
Mar	co Suarez		
2 Offic	e Held		
Boa	ord of Trustees Vice-Preside	ent	
3 Nam	e of person described by Sectio	ns 176.002(a) and 176.003(a), Local Government	Code
Ма	rco Suarez		30
Febn	ary 27, 2017 Regular Board I	of employment or other business relationship was deeting item #9D-2 RFP #16-000016 - Restaurant Research Research Products & Services. FAMILY MEMBER PL	urants, Food, Fundraising, Renta
176.0		ernment officer and any family member, exclude e gifts accepted from person named in item 3 exc (a)(2)(B)	
Date	Gift Accepted D	escription of Gift	
Date	Gift Accepted D	escription of Gift	
Date	Gift Accepted D	escription of Gift	
		(attach additional forms as necessary)	
6 AFF	IDAVIT	I swear under penalty of perjury that the above statement is that the disclosure applies to a family member (as defin Government Code) of this local government officer. I also covers the 12-month period described by Section 176.003(	ed by Section 176.001(2), Local acknowledge that this statement
AFF	IX NOTARY STAMP / SEAL ABOVE		
Swor	n to and subscribed before me, by the sa	_	, this the day
of <u>F</u>	ebruary, 2017, to cert	ify which, witness my hand and seal of office.	
Ta	talia Son	Notalia Goza Secr	retary Bd of Trustees
/ Sign	nature of officer administering oath	Printed name of officer administering oath	Fitle of officer administering oath

FORM CIS

(····	<u> </u>	
,	nade to the law by H.B. 1491, 80th Leg., Regular Session.	OFFICE USE ONLY
	ate local governmental entity that the following local ware of facts that require the officer to file this statement cal Government Code.	Date Received
1 Name of Local Government Off	cer	
_		
Marco Suarez		
2 Office Held		
Board of Trustees Vice-Pr	esident	
3 Name of person described by S	sections 176.002(a) and 176.003(a), Local Government	Code
Marco Suarez		
	xtent of employment or other business relationship wi	
	Board Meeting Item #9D-5 MISD October Budget	
beginning July 1, 2016 and en	ding June 30, 2017 DOES BUSINESS WITH PR	ODUCE COMPANY
	I government officer and any family member, excludition of the gifts accepted from person named in item 3 except. 6.003(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)	
AFFIDAVIT	I swear under penalty of perjury that the above statement is that the disclosure applies to a family member (as define Government Code) of this local government officer. I also covers the 12-month period described by Section 176.003(	ed by Section 176.001(2), Local acknowledge that this statement
AFFIX NOTARY STAMP / SEAL A		1.
Sworn to and subscribed before me, b		, this the day
of anuary 20 17.	to certify which, witness my hand and seed of office.	,
Sotalia Son	Natalia Goza	scretary Bold Turata
Signature of officer admiris ering or	th Printed name of officer administering oath 7	itle of officer administering oath

## FORM CIS

This questionnaire reflects changes made to the law by H.B. 1491, 80th 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		
Tony Forina		
2 Office Held		
Board of Trustees Secretary		
Name of person described by Sections	s 176.002(a) and 176.003(a), Local Government	Code
Tony Forina		
	employment or other business relationship w	
	eeting item #9B-4 RFQ #16-000001 Flu Sh	ots. W <del>orks for UTRGV</del>
WIFE 16 EMPLOYED BY	HOTELTIAL VENUOIZ	
	nment officer and any family member, excludi gifts accepted from person named in item 3 exc )(2)(B)	
Date Gift Accepted Des	cription of Gift	<del></del>
Date Gift Accepted Des	cription of Gift	
Date Gift Accepted Des	cription of Gift	
ı	(attach additional forms as necessary)	
6 AFFIDAVIT	swear under penalty of perjury that the above statement is	s true and correct. Lacknowledge
TALIA CONTRACTOR	nat the disclosure applies to a family member (as define	ed by Section 176.001(2), Local
EXELT PART AND LET	Sovernment Code) of this local government officer. I also overs the 12-month period described by Section 176.003(	_
	TV.	
	A JAM	
O EXPIRES	Signature of Local	Government Officer
AFFIX NOTARY STAMP SEAL ABOVE		
Sworn to and subscribed before me, by the said	Tony Ferina	this the /6 day
1.	which witness my hand and seal of office.	
Intolia Som	Nataha Roza _ Secu	etar Bd of Thenton
Signature of officer administering oath	10	itle of officer administering oath

FORM CIS

This questionnaire reflects changes made to the law by H.B. 1491, 80th 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.			
1 Name of Local Government	Officer		7
Conrado Alvarado			
2 Office Held			7
Board of Trustees Mer	nber		
3 Name of person described	by Sections 176.002(a) and	176.003(a), Local Governme	nt Code
Conrado Alvarado			
Description of the nature a November 14, 2016 Regul Clinical Edits, 9B-4 Appro HEALTH PLAN, UNITEI	ar Board Meeting 9B-3 Apval of RFQ #No 16-0000	pproval of Pharmacy Plan	
	alue of the gifts accepted fr		uding gifts described by Section exceed \$250 during the 12-month
Date Gift Accepted	Description of Gift		
Date Gift Accepted	Description of Gift		
Date Gift Accepted	Description of Gift		
	(attach additional	forms as necessary)	
AFFIDAVIT	that the disclosure a Government Code) of	pplies to a family member (as definition to the first this local government officer. I apperiod described by Section 176.0	nt is true and correct. I acknowledge efined by Section 176.001(2), Local Iso acknowledge that this statement 03(a), Local Government Code.
AFFIX NOTARY STAMP / SE	0	A	11
Sworn to and subscribed before r	ne, by the said <b>ONLOGO</b> , to certify which, witness my t		, this the day
Make Mar	1/2 La 1.	Cara L	who Red and Travet
Signature of officer administering	ng oath Printed name of	officer administering oath	Title of officer administering oath
			_

FORM CIS

(Instructions for completing and liling	instormate provided on the flext page./	
This questionnaire reflects changes mad	e to the law by H.B. 1491, 80th Leg., Regular Session.	OFFICE USE ONLY
	local governmental entity that the following local e of facts that require the officer to file this statement l Government Code.	Date Received
1 Name of Local Government Office	r	
Marco Suarez		
2 Office Held		
Board of Trustees Vice-Pres	ident	
3 Name of person described by Sec	tions 176.002(a) and 176.003(a), Local Government	Code
Marco Suarez		
	ent of employment or other business relationship wular Board Meeting - Item 10C-4 - Purchase #20	
,	m 10D-2 Approval of RFP 2016-070 Restaurant	
catering, field trips and related pr	roducts & services rebid. DOES BUSINESS W	TITH PRODUCE
	overnment officer and any family member, exclud the gifts accepted from person named in item 3 ex 03(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)	
AFFIDAVIT		ed by Section 176.001(2), Local acknowledge that this statement
AFFIX NOTARY STAMP / SEAL ABO	Λ /	2
Sworn to and subscribed before me, by the	certify which, witness my hand and seal of office.	, this the day
01/ <b>FOURTHEOC</b> , 20 / V , 10		
Jatolia Son		tary Bd of Trustees
/Signature of officer adm/nistering oath	Printed name of officer administering oath	Title of officer administering oath

(instructions for completing and filing	this form are provided on the next page.)	
This questionnaire reflects changes ma	de to the law by H.B. 1491, 80th Leg., Regular Session.	OFFICE USE ONLY
This is the notice to the appropriate government officer has become awar in accordance with Chapter 176, Local	Date Received	
1 Name of Local Government Office	er	
Larry Esparza		
2 Office Held		
Board of Trustees, Membe	er	
3 Name of person described by Sec	ctions 176.002(a) and 176.003(a), Local Government	Code
Larry Esparza		
	ent of employment or other business relationship wi egular Board Meeting Item 10A-1 Approval of I	
·	ogram Works with Hidalgo County.	MOU detween MISD and
	government officer and any family member, excludi f the gifts accepted from person named in item 3 exc 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)	
AFFIDAVIT	I swear under penalty of perjury that the above statement is that the disclosure applies to a family member (as define Government Code) of this local government officer. I also covers the 12-month period described by Section 176.003(	ed by Section 176.001(2), Local acknowledge that this statement
Sworn to and subscribed before me, by the street of the subscribed before me, by the subscribed before	4 600	, this the day
Aphilia Jose Signature of officer administering oath	Natalia Gora Secre	Hay Blof Tustes

'	(Instructions for completing and filing	this form are provided on the next page.)	
T∤	nis questionnaire reflects changes mad	le to the law by H.B. 1491, 80th Leg., Regular Session.	OFFICE USE ONLY
go		local governmental entity that the following local e of facts that require the officer to file this statement of local government Code.	Date Received
1	Name of Local Government Office	r	
	Tony Forina		
2	Office Held		
	Board of Trustees Secretar	PRESIDENT	
3	Name of person described by Sec	tions 176.002(a) and 176.003(a), Local Government	Code
	Tony Forina		
		ent of employment or other business relationship w	
1	ctober 9, 2017 Regular Board M nrollment. Works for UTRGV	leeting item #9A-4 MOU 2017-100 between MI	ISD and UTRGV for Dual
	monnent. Works for OTROV		
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)	29
6	AFFIDAVIT		ed by Section 176.001(2), Local acknowledge that this statement
	AFFIX NOTARY STAMP / SEAL ABO	T -	12
	of OCHSher, 20 17, to a	certify which, witness my hand and seal of office.	, this the day
	Aptalia Home Signature of officer administering oath	Natalia Goza Secre Printed name of officer administering path T	tan Bol of Trustees  Title of efficer administering path
	, , , , , , , , , , , , , , , , , , , ,	Times hame of emeet administrately early	wo of amount administrating catu

FORM CIS

(instructions for completing and iming this formate provided on the next page.)	
This questionnaire reflects changes made to the law by H.B. 1491, 80th 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	
Tony Forina	
2 Office Held	
Board of Trustees Secretary	
Name of person described by Sections 176.002(a) and 176.003(a), Local Government	Code
Tony Forina	
Description of the nature and extent of employment or other business relationship we September 26, 2016 3:00 P.M. Regular Board Meeting - Item 9A-5 - Approval of	
Understanding Between McAllen Independent School District and Rio Grande V	
Education for the College Prep Mathematics and English Language Arts Courses	•
List gifts accepted by the local government officer and any family member, excluding 176.003(a-1), if aggregate value of the gifts accepted from person named in item 3 excepted 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)	-
1 swear under penalty of perjury that the above statement in that the disclosure applies to a family member (as define Government Code) of this local government officer. I also covers the 12-month period described by Section 176.003(	ed by Section 176.001(2), Local acknowledge that this statement
Sworn to and subscribed before me, by the said Tory Found	, this the $3$ day
of Ottober , 20 16 , to certify which, withess my hand and seal of office.	100
Matalia Goza Secretar	Title of officer administering oath

FORM CIS

(	unio ionni are provided on the next page.	
This questionnaire reflects changes made	le to the law by H.B. 1491, 80th Leg., Regular Session.	OFFICE USE ONLY
	local governmental entity that the following local e of facts that require the officer to file this statement I Government Code.	Date Received
Name of Local Government Office	r	
Larry Esparza		*
Office Held		
Board of Trustees, Membe	r	
Name of person described by Sec	tions 176.002(a) and 176.003(a), Local Government	Code
Larry Esparza		
	ent of employment or other business relationship wi Regular Board Meeting Item 9A-2 Approval of	
-	d Hidalgo County Head Start Program and 9C-2	
Agreement between MISD and	Hidalgo County JJAEP for Catering Services.	Works with Hidalgo
	overnment officer and any family member, excludi the gifts accepted from person named in item 3 exc 03(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)	
AFFIDAVIT	I swear under penalty of perjury that the above statement is that the disclosure applies to a family member (as define Government Code) of this local government officer. I also covers the 12-month period described by Section 176.003(s).  Signature of Local Company of the content of the cont	ed by Section 176.001(2), Local acknowledge that this statement a), Local Government Code.
Sworn to and subscribed before me, by the of Applember 20 / 4 , to	Lan 8000	_, this the 13 day
Signature of officer administering oath	Printed name of officer administering oath T	itle of officer administering oath

FORM CIS

("	iod dollorio for compreting and illing t	, iio ioi iii ai a piovidada	on the next page.)	
This	questionnaire reflects changes mad	e to the law by H.B. 14	191, 80th Leg., Regular Session.	OFFICE USE ONLY
gov	s is the notice to the appropriate ernment officer has become aware ccordance with Chapter 176, Local	of facts that require t		
1 N	lame of Local Government Office	r		1
7	Tony Forina	_		
2 (	Office Held			
	Board of Trustees Secretar	у		
3 N	lame of person described by Sec	tions 176.002(a) and	176.003(a), Local Governmer	ıt Code
,	Tony Forina			
_	Description of the nature and exte			
•	otember 12, 2016 5:00 P.M. Re ntract between McAllen ISD a	-		<del>-</del>
	induct both con thornion 155 a.		Tomas Inc. Stander varies	, works for or the
_ 1	ist gifts accepted by the local g 76.003(a-1), if aggregate value of eriod described by Section 176.0	the gifts accepted fr		
{	Date Gift Accepted	Description of Gift _		
(	Date Gift Accepted	Description of Gift _		
C	Date Gift Accepted	Description of Gift		
		(attach additional	forms as necessary)	
6	AFFIDAVIT	that the disclosure a	applies to a family member (as def if this local government officer. I als period described by Section 176.00	at is true and correct. I acknowledge fined by Section 176.001(2), Local so acknowledge that this statement 33(a), Local Government Code.
	AFFIX NOTARY STAMP / SEAL ABO	VE	14	
s	Sworn to and subscribed before me, by the	e said 70ng	founc	, this the day
•	of Apptember 20 1 G, to a	certify which, witness my	hand and seal of office.	
٠	Mather Dog	Notali	a Gora Sec	way Bod of Truster
	Signature of officer administering oath	Printed name o	f officer administering oath	Title of officer admiristering oath

## FORM CIS

This questionnaire reflects changes made to the law by H.B. 1491, 80th Leg., Regular Session	OTT TOE GOL OTTE	
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.		
Name of Local Government Officer		
Conrado Alvarado		
2 Office Held	7	
Board of Trustees Member		
Name of person described by Sections 176.002(a) and 176.003(a), Local Government	ent Code	
Conrado Alvarado		
Description of the nature and extent of employment or other business relationship August 22, 2016 5:00 P.M. Regular Board Meeting - Item 9B-5 and 9B-6, RF		
Benefit Management Services and RFP #2015-139 Medical & Dental Adm w	·	
EXECUTIVE DIRECTOR, TEXAS HEALTH PLAN, UNITED HEALTH C		
List gifts accepted by the local government officer and any family member, excl 176.003(a-1), if aggregate value of the gifts accepted from person named in item 3 period described by Section 176.003(a)(2)(B)	uding gifts described by Section exceed \$250 during the 12-month	
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 that the disclosure applies to a family member (as discovers the 12-month period described by Section 176.0 Signature of Lo	efined by Section 176.001(2), Local also acknowledge that this statement	
Sworn to and subscribed before me, by the said Consado Alvarada	this the 22 day	
of August, 20 // , to certify which, witness my hand and seal of office.	und udy	
Motalia Som Natalia Goza Seal Signature of officer administering bath Printed name of officer administering oath	Hara Bol Trusters Title of officer administering oath	

FORM CIS

(111511	detions for completing and filling this form are provided on the flext page.)		
This q	estionnaire reflects changes made to the law by H.B. 1491, 80th Leg., Regular Session.	OFFICE USE ONLY	
goven	the notice to the appropriate local governmental entity that the following local ment officer has become aware of facts that require the officer to file this statement ordance with Chapter 176, Local Government Code.	Date Received	
1 Nar	ne of Local Government Officer	i I	
Laı	ry Esparza		
2 Offi	ce Held		
В	oard of Trustees, Member		
3 Nan	ne of person described by Sections 176.002(a) and 176.003(a), Local Government	Code	
L	arry Esparza		
	cription of the nature and extent of employment or other business relationship was 22, 2016 5:00 P.M. Regular Board Meeting Item 9A4 Approval of Me		
	tween MISD and Hidalgo County Head Start Program and 9B3 Approval of	91	the
	unty of Hidalgo and MISD. Works with Hidalgo County.	8	
176	gifts accepted by the local government officer and any family member, exclud 003(a-1), if aggregate value of the gifts accepted from person named in item 3 ex od described by Section 176.003(a)(2)(B)	ing gifts described by Section ceed \$250 during the 12-month	
Dat	e Gift Accepted Description of Gift		
Dat	e Gift Accepted Description of Gift		
Dat	e Gift Accepted Description of Gift		
	(attach additional forms as necessary)		
_	I swear under penalty of perjury that the above statement that the disclosure applies to a family member (as defin Government Code) of this local government officer. I also covers the 12-month period described by Section 176.003  Signature of Local	ed by Section 176.001(2), Local acknowledge that this statement	
Swo	m to and subscribed before me, by the said Laure Sparser, 20 / 6, to certify which, witness my hand and seal of office.	, this the day	
Sig	nature of officer administering oath  Printed name of officer administering oath	Fitle of officer administering oath	

(Instructions for completing and filing this form are provided on the next page	3.) 
This questionnaire reflects changes made to the law by H.B. 1491, 80th Leg., R	egular Session. OFFICE USE ONLY
This is the notice to the appropriate local governmental entity that the government officer has become aware of facts that require the officer to file in accordance with Chapter 176, Local Government Code.	
1 Name of Local Government Officer	
Sam Saldivar	
2 Office Held	
Board of Trustees President	
Name of person described by Sections 176.002(a) and 176.003(a), Loc	cal Government Code
Sam Saldivar	
Description of the nature and extent of employment or other business	
August 22, 2016 5:00 P.M. Regular Board Meeting - Item 9A2 - A Agreement No. 2016-014 UTRGV Speech Language Intervention	= =
works at Speech Language division.	and Diagnostic Services. Sister-in-law
List gifts accepted by the local government officer and any family n 176.003(a-1), if aggregate value of the gifts accepted from person nan period described by Section 176.003(a)(2)(B)	nember, excluding gifts described by Section ned in item 3 exceed \$250 during the 12-month
Date Gift Accepted Description of Gift	
Date Gift Accepted Description of Gift	
Date Gift Accepted Description of Gift	
(attach additional forms as neces	sary)
that the disclosure applies to a family Government Code) of this local government covers the 12-month period described by Creater	e above statement is true and correct. I acknowledge member (as defined by Section 176.001(2), Local ment officer. I also acknowledge that this statement by Section 176.003(a), Local Government Code.  Signature of Local Government Officer
Sworn to and subscribed before me, by the said Aam Saldi Va	1 this the 23 day
of August . 20 / 4 , to certify which, witness my hand and seal of o	ffice.
Andrea Dom Natalia Goza Signature of officer administering oath  Printed name of officer administer	ing oath Title of officer administering oath
7 miles have a small state	This of philosi administering datif

	(Instructions for completing and filing this	s form are provided on the next page.)	
TI	nis questionnaire reflects changes made	to the law by H.B. 1491, 80th Leg., Regular Session.	OFFICE USE ONLY
g		ocal governmental entity that the following local of facts that require the officer to file this statement Government Code.	Date Received
1	Name of Local Government Officer		1 I
	Tony Forina		
2	Office Held		
	Board of Trustees Secretary		
3	Name of person described by Section	ons 176.002(a) and 176.003(a), Local Government	t Code
	Tony Forina		
4		of employment or other business relationship w	
	_	Board Meeting - Item 9A2 - Approval of Inge Intervention and Diagnostic Services. Wor	
_	sio of to the topoon bangung	o mor volutor and Diagnostic Sor vices. (10)	and for o the v
5		ernment officer and any family member, exclud se gifts accepted from person named in item 3 ex g(a)(2)(B)	
	Date Gift Accepted D	escription of Gift	
	Date Gift Accepted D	Description of Gift	
	Date Gift Accepted D	escription of Gift	
		(attach additional forms as necessary)	
6	AFFIDAVIT	I swear under penalty of perjury that the above statement that the disclosure applies to a family member (as defin Government Code) of this local government officer. I also covers the 12-month period described by Section 176.003	ned by Section 176.001(2), Local o acknowledge that this statement
	AFFIX NOTARY STAMP / SEAL ABOVE		oc
	Sworn to and subscribed before me, by the sa	aid Jony Buna	, this the <u>23</u> day
	of 70, 20 / 4 , to cert	tify which, withess my hand and seal of office.	
	Signature of officer administering oath	Nafalia Goza Soa Printed name of officer administering oath	return Bol of Tuest  Title of office administering oath
		g vou	Si sinsa administrating batti

FORM CIS

This questionnaire reflects changes n	ade to the law by H.B. 1491, 80th Leg., Regular Session.	OFFICE USE ONLY
	te local governmental entity that the following local are of facts that require the officer to file this statement cal Government Code.	Date Received
1 Name of Local Government Offi	cer	
Marco Suarez		
2 Office Held		
Board of Trustees Vice-Pro	esident	
3 Name of person described by S	ections 176.002(a) and 176.003(a), Local Government	Code
Marco Suarez		
August 08, 2016 5:00 P.M. Re	ctent of employment or other business relationship w gular Board Meeting - Item 9C-5 - Purchase #201 SINESS WITH PRODUCE COMPANY	
	government officer and any family member, excluding of the gifts accepted from person named in item 3 executions (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)	
AFFIDAVIT	I swear under penalty of perjury that the above statement is that the disclosure applies to a family member (as defin Government Code) of this local government officer. I also covers the 12-month period described by Section 176.003(	ed by Section 176.001(2), Local acknowledge that this statement
AFFIX NOTARY STAMP / SEAL AS	1	, this the
Life at the life	to certify which, witness my hand and seal of office.	
Astolia Sou	- Natalia Goza See	utary Bd of Trute
Signature of officer administering oa	h Printed name of officer administering oath 1	Title of officer administering oath

FORM CIS

This questionnaire reflects changes m	ade to the law by H.B. 1491, 80th Leg., Regular Session.	OFFICE USE ONLY
This is the notice to the appropriat government officer has become awain accordance with Chapter 176, Loc	Date Received	
1 Name of Local Government Office	er	
Conrado Alvarado		
2 Office Held		
Board of Trustees Preside	ent	
3 Name of person described by Se	ctions 176.002(a) and 176.003(a), Local Government	Code
Conrado Alvarado		
	tent of employment or other business relationship w	
	rular Board Meeting - Item 9B-1, 2 - RFP #2015- #2015-139 Medical & Dental Adm with Preferre	•
<u> </u>	XAS HEALTH PLAN, UNITED HEALTH CAR	
	government officer and any family member, excluded the gifts accepted from person named in item 3 exc003(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)	
AFFIX NOTARY STAMP SEAL AB	·	ed by Section 176.001(2), Local acknowledge that this statement
Sworn to and subscribed before me, by	the said Comado alvarado	, this the day
of Hugust , 20 16 , t	o certify which, witness my hand and seal of office.	
Actalia Loga Signature of officer administering oati	Natalia Goza Secundario Printed name of officer administering oath	the Bd of Truste
Signature of onlocal autilities of the Oati	. Emited hame of oncer administering oatri	nuo ocenicei auministelling catif