FORM CIS

(mstructions 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
Name of Local Government Officer		
Daniel D. Vela		
2 Office Held	300.57%	
Board of Trustees, Member		
Name of person described by Secti	ons 176.002(a) and 176.003(a), Local Government	Code
Daniel D. Vela		
Description of the nature and exten	t of employment or other business relationship w Board Meeting Item 10A-3 Approval of Interio	ith person named in item 3
_	nents. Sits on committee Friends of Quinta Ma	
: 	-	
List gifts accepted by the local go 176.003(a-1), if aggregate value of t period described by Section 176.00	vernment officer and any family member, excluding the gifts accepted from person named in item 3 excluding (2)(B)	ing gifts described by Section ceed \$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 NOTARY ID# 12989195-5 COMM EXP. 07-21-2022 AFFIX NOTARY STAMP / SEAL ABOV		ed by Section 176.001(2). Local acknowledge that this statement
Sworn to and subscribed before me, by the	TORS THE RESIDENCE OF THE PARTY.	this the // day
	ortify which, witness my hand and seal of office	
Sotalia Son	Natalia Goza See	reform Bot of Trusta
Signature of officer administering oath	Printed name of officer administering oath	Fitle of officer administering oath

FORM CIS

(Instruction to competing and filling this form are provided of the flext 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
1 Name of Local Government Officer	
Conrado Alvarado	
2 Office Held	
Board of Trustees Member	
Name of person described by Sections 176.002(a) and 176.003(a), Local Government	Code
Conrado Alvarado	
Description of the nature and extent of employment or other business relationship wi May 14, 2018 Regular Board Meeting Item #10B-2 Approval of RFP 2018-009 I	th person named in item 3 Property & Casualty
Insurance Plan, and Item #10B-3 EXECUTIVE DIRECTOR, TEXAS HEALTH HEALTH CARE	
List gifts accepted by the local government officer and any family member, excludi 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)	
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 said Conrado Alvarado	this the
of, 20 _ &, to certify which, witness my hand and seal of office.	, this the day
Ynhia Dock Natolia Goza San	mISO
	itle of officer administering oath

(instructions for completing and filling 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				
ge	his is the notice to the appropriate overnment officer has become awar accordance with Chapter 176, Loca	Date Received			
1	Name of Local Government Office	r			
	Tony Forina				
2	Office Held				
	Board of Trustees Presider	nt			
3	Name of person described by Sec	tions 176.002(a) and 176.003(a), Local Government	Code		
	Tony Forina				
4	Description of the nature and externil 0, 2010 P	ent of employment or other business relationship wi	th person named in item 3		
A M	pril 9, 2018 Regular Board Mee	ting item #9A-2 Interlocal Agreement 2017-149 of Education and P-16 Integration and MISD. W	UTRGV TexPREP; and #9B		
	to between office v conege t	Ducation and 1-10 integration and MISD. W	OIKS IOI O I KGV		
5	List gifts accepted by the local g 176.003(a-1), if aggregate value of period described by Section 176.0	overnment officer and any family member, excludi the gifts accepted from person named in item 3 exc 103(a)(2)(B)	ng gifts described by Section seed \$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)			
6	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(a)	ed by Section 176.001(2), Local acknowledge that this statement a), Local Government Code.		
	AFFIX NOTARY STAMP / SEAL ABO	VE	100000		
	Sworn to and subscribed before me, by the of April . 20 18 , to a	e said long Foring certify which, witness my hand and seal of office.	, this the 13 day		
	Addles Jon Signature of officer administering oath	Natalia Goza Printed name of officer administering oath	etang Bol of Truster		
	U	. Trace name of onicer dufficingtening oath	itle of officer administering oath		

FORM CIS

-	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 Company of the	Date Received	
1 Name of Local Government Office	er	
Conrado Alvarado		
2 Office Held		
Board of Trustees Member		
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 March 26, 2018 Item 2 C. Pendi	ent of employment or other business relationship wing and/or Potential Litigation EXECUTIVE DIR	Ith person named in item 3
PLAN, UNITED HEALTH CA		Letok, ILAAS IILALIII
List gifts accepted by the local of 176,003(a-1), if aggregate value of	government officer and any family member, excluding the gifts accepted from person named in item 3 exc	ing gifts described by Section
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	s true and correct. Lacknowledge
Will Coo	that the disclosure applies to a family member (as defin	ed by Section 176.001(2), Local
T AV PUB T	Government Code) of this local government officer. I also covers the 12-month period described by Section 176.003(•
13.01). , , , ,
23.1	Comalo W	var
7 TE OF TEL	Signature of Local	Government Officer
AFFIX NOTARY STAMP SEAL ABO	1	12
Swom to and subscribed before me, by t	he said CONTOCO HIVE QUID	, this the day
1 1 1 h	reerury writch, withess my nand and seal of office.	
Motalia Hon	Notalia Goza Secu	tam Bol of Tustees
Signature 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.)	
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 follows government officer has become aware of facts that require the officer to file this st in accordance with Chapter 176, Local Government Code.	
1 Name of Local Government Officer	
Conrado Alvarado	
2 Office Held	
Board of Trustees Member	
Name of person described by Sections 176.002(a) and 176.003(a), Local Go	vernment Code
Conrado Alvarado	
Description of the nature and extent of employment or other business related March 9, 2018 Special Board Meeting Item #2 Presentation and Discussions	ionship with person named in item 3
Benefit Plan. EXECUTIVE DIRECTOR, TEXAS HEALTH PLAN, U	• •
List gifts accepted by the local government officer and any family member 176.003(a-1), if aggregate value of the gifts accepted from person named in period described by Section 176.003(a)(2)(B)	er, excluding gifts described by Section 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 necessary)	
I swear under penalty of perjury that the above that the disclosure applies to a family member Government Code) of this local government of covers the 12-month period described by Section Signature.	er (as defined by Section 176.001(2), Local fficer. I also acknowledge that this statement
AFFIX NOTARY STAMP SEAL ABOVE	
Sworn to and subscribed before me, by the said Conrado Alvarado	, this the <u>27</u> day
ov 1018, 20 8, to certify which, witness my hand and seal of office.	
Astalia Gora Natalia Goza	Secretary Bol of Trustee
Signature of officer administering bath Printed name of officer administering os	th Title of officer administering oath

FORM CIS

This questionnaire reflects changes made to the law by H		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		
Conrado Alvarado		
2 Office Held		
Board of Trustees, Member		
Name of person described by Sections 176.002(a)	and 176.003(a), Local Government C	Code
Conrado Alvarado		
Description of the nature and extent of employme November 13, 2017 Regular Board Meeting item 8-C Discription DIRECTOR, TEXAS HEALTH PLAN, UNITED HEALT	ission and Action on Pending and/or Pote	
List gifts accepted by the local government office 176.003(a-1), if aggregate value of the gifts accept period described by Section 176.003(a)(2)(B)	er and any family member, excluding the following series and from person named in item 3 exce	g gifts described by Section and \$250 during the 12-month
Date Gift Accepted Description of C	9ift	
Date Gift Accepted Description of G	Sift	
Date Gift Accepted Description of C	9ift	
(attach addit	ional forms as necessary)	
AFFIX NOTARY STAME SEAL ABOVE Sworn to and subscribed before me, by the said	penalty of perjury that the above statement is sure applies to a family member (as defined ode) of this local government officer. I also a month period described by Section 176.003(a) Signature of Local Government of Local Go	d by Section 176.001(2), Local acknowledge that this statement), Local Government Code.
of <u>Jeanney</u> , 20 / 7, to certify which, witness	s my hand and seal of office.	
potalia Son Nata	lia Gora Secut	Eng Bod of Truster
6 Signature of officer administering bath Printed n	ame of officer administering oath Titi	le of officer administering oath

(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.	Date Received
Name of Local Government Officer	
Conrado Alvarado	
2 Office Held	
Board of Trustees, Member	
Name of person described by Sections 176.002(a) and 176.003(a), Local Government	Code
Conrado Alvarado	
Description of the nature and extent of employment or other business relationship w	ith person named in item 3
October 9, 2017 Regular Board Meeting 10B-1 Approval of Self-Funded Health and Dental Plan Fi 2017-18; 10B-2 Discussion and Possible Action on RFP for Medical & Dental Plan Administration	unding, Rates and Benefits for
Discussion of MISD Board Policy DEC(LOCAL) EXECUTIVE DIRECTOR, TEXAS HEALTH	I and Related Services; 106-3 I PLAN, UNITED HEALTH CAR
5 List gifts accepted by the local government officer and any family member, excludi	
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)	ceed \$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 I swear under penalty of perjury that the above statement i 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
Contado Alvarado (Oct 16, 2017)	
AFFIX NOTARY STAMP / SEAL ABOVE	Government Officer
Sworn to and subscribed before me, by the said Convado Alvarado	19
o CAHDEY 20 47 to certify which, witness my hand and seal of office.	, this the // / day
Jatalia Dom Natalia Goza San	Aug Bd of Trustees
Signature of officer administering bath Printed name of officer administering oath	Title of officer administering oath

(Instructions for completin	ng 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	on. OFFICE USE ONLY		
government officer has be	appropriate local governmental entity that the following loc ecome aware of facts that require the officer to file this stateme er 176, Local Government Code.			
1 Name of Local Govern	ment Officer	1000		
Larry Esparza				
2 Office Held				
Board of Trustees	s, Member			
Name of person descri	ibed by Sections 176.002(a) and 176.003(a), Local Governm	ient Code		
Larry Esparza				
Description of the nature	ure and extent of employment or other business relationsh :00 P.M. Regular Board Meeting Item 9A-4 Approval	ip with person named in item 3		
COLLEGE -	d Hidalgo County Head Start Program. Employed by I	•		
		104000		
176.003(a-1), if aggreg	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 stater that the disclosure applies to a family member (as Government Code) of this local government officer. covers the 12-month period described by Section 176	defined by Section 176.001(2), Local I also acknowledge that this statement		
AFFIX NOTARY STAMP	y 50001	11th		
Sworf to and subscribed be	office.	, this the day		
Antholica Asignature of officer admir	Notalia Proza Ristering bath Printed name of officer administering bath	Title of anicer administering oath		

(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.	Date Received		
Name of Local Government Officer			
Larry Esparza			
2 Office Held			
Board of Trustees, Member			
Name of person described by Sections 176.002(a) and 176.003(a), Local Government	Code		
Larry Esparza			
Description of the nature and extent of employment or other business relationship we September 11, 2017 5:00 P.M. Regular Board Meeting Item 9A-3 Approval of N	ith person named In item 3 4OU between MISD and		
Hidalgo County Head Start Program. Employed by Hidalgo County			
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)			
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 AFFIX NOTARY STAMP / SEAL ABOVE	ned by Section 176.001(2), Local of acknowledge that this statement (a), Local Government Code. Government Officer		
Sworn to and subscribed before me, by the said Toury Esquipers of the property of the said Toury Esquipers of the	By of Trustees		
Signature of officer administering oath Printed name of officer administering oath	Title 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	
gον	is is the notice to the appropriate local governmental entity that the following local vernment officer has become aware of facts that require the officer to file this statement accordance with Chapter 176, Local Government Code.	Date Received	
1 (Name of Local Government Officer		
	Larry Esparza		
2	Office Held		
	Board of Trustees, Vice-President		
3	Name of person described by Sections 176.002(a) and 176.003(a), Local Government	Code	
	Larry Esparza		
	Description of the nature and extent of employment or other business relationship w		
	September 4, 2017 5:00 P.M. Regular Board Meeting Item 9A-1 Approval of Midalgo County Head Start Program. Employed by Hidalgo County	MOU between MISD and the	
	Thouse County Tread Start Frogram. Employed by Findings County		
	List gifts accepted by the local government officer and any family member, excludi		
,	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	s true and correct. I acknowledge	
	that the disclosure applies to a family member (as defin	ed by Section 176.001(2), Local	
	Government Code) of this local government officer. I also covers the 12-month period described by Section 176.003(-	
	1-8-		
	Tun Sty		
	Signature of Local	Government Officer	
	AFFIX NOTARY STAMP / SEAL ABOVE		
	Sworn to and subscribed before me, by the said Xauru Espanya	, this the day	
	of per mber, 20 17, to certify which, witness my hand and seal of office.		
(Astalia Som Natalia Goza Seure	You Bd of Trustees	
•	Signature of officer administering oath Printed name of officer administering oath	itle of officer administering oath	

(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.	Date Received		
Name of Local Government Officer			
Marco Suarez			
2 Office Held			
Board of Trustees Vice-President Member			
Name of person described by Sections 176.002(a) and 176.003(a), Local Government	t Code		
Marco Suarez			
Description of the nature and extent of employment or other business relationship with person named in item 3 August 14, 2017 Regular Board Meeting item #8C-2 RFP #2017-037 - Fresh Produce for Child Nutrition Program. FAMILY MEMBER PLACED BID			
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)			
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 of Local Government Officer AFFIX NOTARY STAMP / SEAL ABOVE			
Sworn to and subscribed before me, by the said Marco Suarez	this the 21 day		
of August , 20 17 , to certify which, witness my hand and seal of office.			
Astalia Herri Natalia Goza See Signature of officer administering oath Printed name of officer administering oath	Letary Bol of Trustee Title of afficer administering oath		

L '''	istructions for completing and filing th	is form are provided on the next page.)	79
l		to the law by H.B. 1491, 80th Leg., Regular Session.	OFFICE USE ONLY
go\		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	Larry Esparza		
2	Office Held		
	Board of Trustees, Member		
3	Name of person described by Secti	ons 176.002(a) and 176.003(a), Local Government	Code
	Larry Esparza		
_		t of employment or other business relationship w	•
ı	•	ar Board Meeting Item 8A-3 Approval of Agre go County, Inc. Employed by Hidalgo County	ement No. 2017-071
		50 country, me. Employed by Manage Country	
Γ.		vernment officer and any family member, excluding gifts accepted from person named in item 3 excludion (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		ned by Section 176.001(2), Local oacknowledge that this statement
	AFFIX NOTARY STAMP / SEAL ABOV Sworn to and subscribed before me, by the		this the 2/ day
		ertify which, witness my hand and seal of office.	
	potalia Don	Natalia Goza Ser	Aug Bol of Trustees
/	Signature of officer administering oath	Printed name of officer administering oath	Title of officer administering oath