

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

DR. JAYME MATHIAS

2 Office Held

AISD DISTRICT 2 TRUSTEE

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

E3S

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

CONSULTANT SERVICES PROVIDED BY THE
GOVERNMENT OFFICER TO E3S

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).

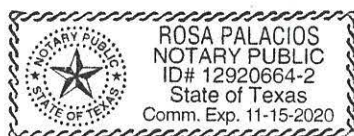
Date Gift Accepted _____ Description of Gift _____

Date Gift Accepted _____ Description of Gift _____

Date Gift Accepted _____ Description of Gift _____

(attach additional forms as necessary)

6 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 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

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Jayme Mathias, this the 9th day of February, 20 18, 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

LOCAL GOVERNMENT OFFICER CONFLICTS DISCLOSURE STATEMENT

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OFFICE USE ONLY

Date Received

1 Name of Local Government Officer

DR. JAYME MATHIAS

2 Office Held

AISD DISTRICT 2 TRUSTEE

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

AECOM

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

THE BROTHER OF THE GOVERNMENT OFFICER IS
EMPLOYED BY AECOM'S OFFICE IN TOLEDO, OHIO.

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).

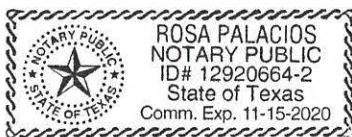
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(attach additional forms as necessary)

6 AFFIDAVIT



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Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Jayme Mathias, this the 9th day of February, 20 18, 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

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OFFICE USE ONLY

Date Received

1 Name of Local Government Officer

DR. JAYME MATHIAS

2 Office Held

ALSD DISTRICT 2 TRUSTEE

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

MEXICAN AMERICAN SCHOOL BOARDS ASSOCIATION

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

THE GOVERNMENT OFFICER IS EMPLOYED AS
EXECUTIVE DIRECTOR OF THIS ORGANIZATION.

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).

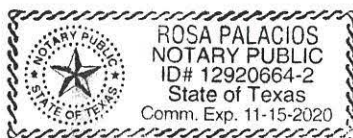
Date Gift Accepted _____ Description of Gift _____

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(attach additional forms as necessary)

6 AFFIDAVIT



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Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Jayme Mathias, this the 9th day of February, 20 18, 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

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OFFICE USE ONLY

Date Received

1 Name of Local Government Officer

DR. JAYME MATHIAS

2 Office Held

ALSD DISTRICT 2 TRUSTEE

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

JOSE I. GUERRA, 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.

CONSULTANT SERVICES PROVIDED BY THE
GOVERNMENT OFFICER TO JOSE I. GUERRA, INC.

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).

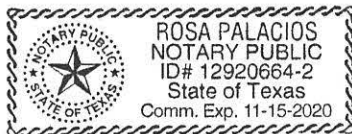
Date Gift Accepted _____ Description of Gift _____

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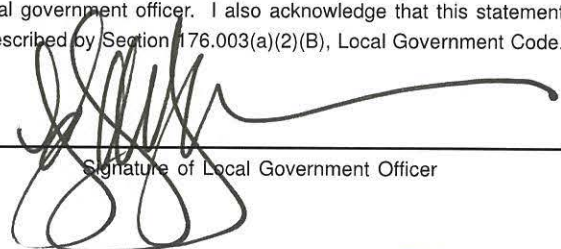
(attach additional forms as necessary)

6 AFFIDAVIT

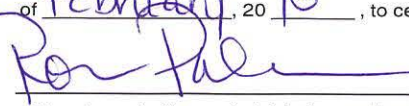


AFFIX NOTARY STAMP / SEAL ABOVE

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

Sworn to and subscribed before me, by the said Jayme Mathias, this the 9th day of February, 2019, to certify which, witness my hand and seal of office.


Signature of officer administering oath

Rosa Palacios
Printed name of officer administering oath

EA
Title of officer administering oath