LOCAL GOVERNMENT OFFICER CONFLICTS DISCLOSURE STATEMENT (Instructions for completing and filing this form are provided on the next particular statement)					FORM CIS
This questionnaire	reflects changes made to the law by H	The second se			USEONLY
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					
Johnny Knight					
2 Office Held					
Red Oak ISD School Board, Place 4					
3 Name of vendor described by Sections 176.001(7) and 176.003(a), Local Government Code N/A					
100/	he nature and extent of each employ	ument or other husiness relati	onchir	and each fee	- ile veletie bie
4 Description of the nature and extent of each employment or other business relationship and each family relationship with vendor named in item 3. N/A					
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 Accep	ted <u>N/A</u> Description of	Gift			
Date Gift Accepted N/A Description of Gift					
Date Gift Accepted N/A 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.					
Signature of Local Government Officer					
(1) Affidavit					
NOTART STAME/S					
	ed before me by		e	day of	,
20, to cert	tify which, witness my hand and seal of office	ı.			
Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath					
		OR			
(2) Unsworn Declara	ation				
My name is, and my date of birth is					
My address is		, and my date of birth	TX	75154	USA
	(street)	(city)	(state)	(zip code)	(country)
Executed in Ellis	County, State of Texas	, on the <u>18th</u> day of <u>Octo</u>	ber	20 <u>21</u> (year)	
Signature of Local Government Officer (Declarant)					
form provided by Texas Ethics Commission www.ethics.state.tx.us Revised 8/17/2020					