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☑ REQUIRED FORM – RETURN WITH SIGNATURE

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CONFLICT OF INTEREST QUESTIONNAIRE For vendor or other person doing business with local governmental entity	form CIQ
This questionnaire is being filed in accordance with chapter 176 of the Local Government Code by a person doing business with the governmental entity.	OFFICE USE ONLY
By law this questionnaire must be filed with the records administrator of the local government not later than the 7th business day after the date the person becomes aware of facts that require the statement to be filed. <i>See</i> Section 176.006, Local Government Code. A person commits an offense if the person violates Section 176.006, Local Government Code. An offense under this section is a Class C misdemeanor.	
1 Name of person doing business with local governmental entity. PROFIT PLUS, INC., 9874 Taunen Rd.,	Heustm, TK. 77041
 Check this box if you are filing an update to a previously filed. (The law requires that you file an updated completed questionnaire with the appropria September 1 of the year for which an activity described in Section 176.006(a), Local Go not later than the 7th business day after the date the originally filed questionnaire becomes Name each employee or contractor of the local governmental entity who makes recomm officer of the governmental entity with respect to expenditures of money AND describe the sources. 	te filing authority not later than overnment Code, is pending and s incomplete or inaccurate.) endations to a local government
Name each local government officer who appoints or employs local government officer which this questionnaire is filed AND describe the affiliation or business relationship.	s of the governmental entity for

Cor	mpany Name: $PROFIT PLUS, TUC.$	
	CONFLICT OF INTEREST QUESTIONNAIRE FORM For vendor or other person doing business with local governmental entity	CIQ Page 2
	Name of local government officer with whom filer has affiliation or business relationship. (Complete this sect the answer to A, B, or C is YES.)	ion only if
	This section, item 5 including subparts A, B, C & D, must be completed for each officer with whom the filer has affi- relationship. Attach additional pages to this Form CIQ as necessary.	iation or other
	 A. Is the local government officer named in this section receiving or likely to receive taxable income from the filer of questionnaire? Yes No 	the
	 B. Is the filer of the questionnaire receiving or likely to receive taxable income from or at the direction of the local gofficer named in this section AND the taxable income is not from the local governmental entity? Yes No 	overnment
	 C. Is the filer of this questionnaire affiliated with a corporation or other business entity that the local government offic an officer or director, or holds an ownership of 10 percent or more? Yes No 	er serves as
	D. Describe each affiliation or business relationship.	
	NONE	
6	Cheif Wilt 8/1	4/06
	Signature of person doing business with the governmental entity Da	te