## LOCAL GOVERNMENT OFFICER CONFLICTS DISCLOSURE STATEMENT (Instructions for completing and filing this form are provided on the next page.)

FORM CIS

This questionnaire reflects changes made to the law by H.B. 23, 84th 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	Date Received
in accordance with Chapter 176, Local Government Code.	FILED
Name of Local Government Officer     At	1:27 o'clock - P
Rusen Gomez ORtegA Date_	127/21
2 Office Held	sarah Vasquez
Commissioned by Sections 176 001/7) and 176 002/0) Level County	Clerk, Brewster County, TX
3 Name of vehicle described by Sections 176.001(7) and 176.003(a), Local Government	Line M. Wyli Depi
Code P / D · AAA P	200 DO 100 DO 10
Kinnacle Proprie: ARP Securio	
Description of the nature and extent of each employment or other business relationshi with vendor named in item 3.	
520 Shapse to Court, me being a Delvic! Alege Wife 5 List gifts accepted by the local government officer and any family member, if aggreg	own Compay 1 528 for
5 List gifts accepted by the local government officer and any family member, if aggreg from vendor named in item 3 exceeds \$100 during the 12-month period described by	ate value of the gifts accepted
nom 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)	
to each family member (as defined by Section 176.001(2), Local Government Tode also acknowledge that this statement covers the 12-month period described by Section 176.001(2), Local Government Tode also acknowledge that this statement covers the 12-month period described by Section 176.001(2), Local Government Tode also acknowledge that this statement covers the 12-month period described by Section 176.001(2), Local Government Tode also acknowledge that this statement covers the 12-month period described by Section 176.001(2), Local Government Tode also acknowledge that this statement covers the 12-month period described by Section 176.001(2), Local Government Tode also acknowledge that this statement covers the 12-month period described by Section 176.001(2), Local Government Tode also acknowledge that this statement covers the 12-month period described by Section 176.001(2), Local Government Tode also acknowledge that this statement covers the 12-month period described by Section 176.001(2), Local Government Tode also acknowledge that this statement covers the 12-month period described by Section 176.001(2), Local Government Tode also acknowledge that this statement covers the 12-month period described by Section 176.001(2), Local Government Tode also acknowledge that this statement covers the 12-month period described by Section 176.001(2), Local Government Tode also acknowledge that this statement covers the 12-month period described by Section 176.001(2), Local Government Tode also acknowledge that this statement covers the 12-month period described by Section 176.001(2), Local Government Tode also acknowledge that this statement covers the 12-month period described by Section 176.001(2), Local Government Tode also acknowledge that this statement covers the 12-month period described by Section 176.001(2), Local Government Tode acknowledge that the 12-month period described by Section 176.001(2), Local Government Tode acknowledge that the 12-month period described by Section 176.001(2), Local Government Tod	ion 176.003(a)(2)(B), Local
NOTARY STAMP/SEAL  Sworn to and subscribed before me by Ruben Orlega this the 20 21, to certify which, witness my hand and seal of office.  Sysan Bentley  Sysan Bentley	27th day of January.
Signature of officer administering oath  Printed name of officer administering oath	Title of officer administering oath
OR	
(2) Unsworn Declaration	
My name is Rubin Orlega , and my date of birth is A  My address is 544 NW 6th Strict , Magaflan , N	PRL 28 1964
	(zip code) (country)
Executed in County, State of, on the day of	(zip code) (country)
(month)	zo (year)
Signature of Local Govern	ment Officer (Declarant)

SOUTH VILLEGE