CONFLICT	OF	INTEREST	QUESTIONNAIRE
OUNI LIOI	~ .		

FORM CIQ

For vendor or other person doing business with local governmental entity

This questionnaire is being filed in accordance with chapter 176 of the Local Government Code by a person doing business with the governmental entity.

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. See 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.

OFFICE USE ONLY

Date Received

ITY OF AMARILLO

1 Name of person doing business with local governmental entity.

Alert Services Inc

2

Check this box if you are filing an update to a previously filed questionnaire.

(The law requires that you file an updated completed questionnaire with the appropriate filing authority not later than September 1 of the year for which an activity described in Section 176.006(a), Local Government Code, is pending and not later than the 7th business day after the date the originally filed questionnaire becomes incomplete or inaccurate.)

Describe each affiliation or business relationship with an employee or contractor of the local governmental entity who makes recommendations to a local government officer of the local governmental entity with respect to expenditure of money.

None

Describe each affiliation or business relationship with a person who is a local government officer and who appoints or employs a local government officer of the local governmental entity that is the subject of this questionnaire.

ALERT SERVICES, INC. P. O. Box 1088 San Marcos, Texas 78667

CONFLICT OF INTEREST QUESTIONNAIRE

FORM CIQ Page 2

For vendor or other person doing business with local govern	mental entity		ugo =
Name of local government officer with whom filer has affiliation or business reanswer to A, B, or C is YES.)	lationship. (Com	plete this section	n only if the
			Ne. T.
This section, item 5 including subparts A, B, C & D, must be completed for ea business relationship. Attach additional pages to this Form CIQ as necessary.		om the filer has	affiliation or
		-	
A. Is the local government officer named in this section receiving or likely to rec- questionnaire?	zeive taxable incom	e from the filer o	of the
questionnamer		200	51 20
Yes No	5.		
		10 mar - 10 as	
B. Is the filer of the questionnaire receiving or likely to receive taxable income fro officer named in this section AND the taxable income is not from the local go			remment
Vac Alla			
Yes No		a 21 Xt	
			7
C. Is the filer of this questionnaire affiliated with a corporation or other business e as an officer or director, or holds an ownership of 10 percent or more?	ntity that the local of	government office	er serves
<u></u>	8 25		
Yes No		27	
D. Describe each affiliation or business relationship.			
Topic and a second control of the second con			•
Describe any other affiliation or business relationship that might cause a con	nflict of Interest		
pescribe any duter anniadon of business relationship that imgin seaso a ser	micro marcae		
None			
1404/6		# 5	
		540	* 1
			11 100
	19		
Diagra Masin	Z/11/	107	
Summer I wants	0/14	101	
Signature of person doing business with the governmental entity	ALEP-Pater	ERVICES, I	NO
1 0 0	P.O	Box 1088	NC.
to allost promo almo	San Marco	s, Texas 78	8667
The most on home like			-557