

CONFLICT OF INTEREST QUESTIONNAIRE

FORM CIQ

For vendor or other person doing business with local governmental entity

367340

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 Filed:

RECEIVED

MAR 20 2008

CITY SECRETARIES
CITY OF AMARILLO

1 Name of person doing business with local governmental entity.

Joseph Michael Catarineau
Fill in the full name of the person (you) who is trying to do business with the City. If the business is a corporation, partnership, etc., then each person who acts as an agent for the business in dealing with the City of Amarillo or their family member must complete this form.

CATARINEAU'S ARMORY
5810 Carew St.
Houston, TX 77074-7711
5-76-201-01-0G-01742

2 Initial Questionnaire

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 made invalid. Check box if the form is an update to a form previously completed. Updates are required to be filed by September 1 of each year in all of the person's status proposal, bid or response to the City of Amarillo either written, verbal or implied or by general contract discussions or negotiations with the City. Updates are also required by 5:00 p.m. on the month of September if an event that makes a statement previously filed questionnaire incomplete or invalid.)

3 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 how you are affiliated or related to a City employee or contractor with the City of Amarillo (such as an engineering or architectural firm) who makes recommendations to the City on expenditures of money. If no affiliation or business relationship exists state "None."

4 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.

None
Describe how you are affiliated or related to a local government officer (members of the City Commission or City Manager). If no affiliation or business relationship exists state "None."

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5 Name of local government officer with whom filer has affiliation or business relationship (If answer to A, B, or C is YES.) **NONE**

This section, item 5 including subparts A, B, C & D must be completed if you have a current business relationship. Attach additional pages to this Form CIQ as needed.

A Is the local government officer named in this section receiving or likely to receive a gift or other thing of value from you or your business?

Yes No

B Is the filer of the questionnaire receiving or likely to receive taxable income from the officer named in this section AND the taxable income is not from the officer's salary or wages?

Yes No

C Is the filer of this questionnaire affiliated with a corporation or other business entity as an officer or director, or holds an ownership of 10 percent or more of the entity?

Yes No

D Describe each affiliation or business relationship.

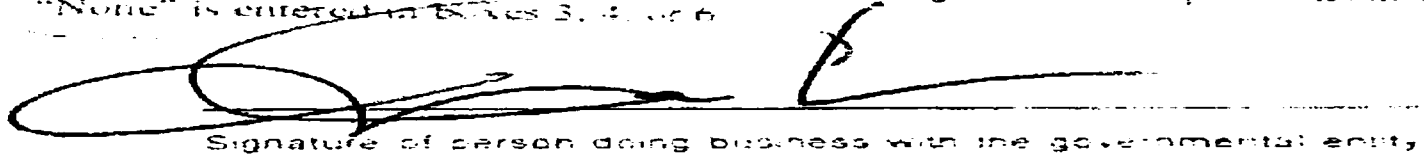
Complete this Section by listing the name of each local government officer or manager with whom there is an affiliation or business relationship and your answer to A, B, or C.

6 Describe any other affiliation or business relationship that might cause a conflict of interest.

Describe any other affiliation or business relationship that might cause a conflict of interest.

None

7 Signature box. Date and sign the form. A signature is required from the filer. If "None" is entered in 5, 6, or 7, no signature is required.


Signature of person doing business with the governmental entity

J. M. CATARINEAU

All questionnaires will be filed with and maintained by the City Secretary.

ANY INFORMATION YOU PROVIDE OR THAT IS PROVIDED TO THE CITY OF CHICAGO CONCERNING YOU OR YOUR BUSINESS UNDER CHAPTER 176 IS