LOCAL GOVERNMENT OFFICER
CONFLICTS DISCLOSURE STATEMENT

FORM CIS

(Instructions for completing and filing this form are provided on the next page.)

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 in accordance with Chapter 176, Local Government Code.	Date Received Abilene City Secretary OCT 3 0 2017 Filed for Record

1 **Name of Local Government Officer**

Robert Hanna

2 **Office Held**

City Manager

3 **Name of vendor described by Sections 176.001(7) and 176.003(a), Local Government Code**

Direct Path

4 **Description of the nature and extent of employment or other business relationship with vendor named in item 3**

my your 20t sister works for DirectPath. I became aware of this today 10/30/2017.

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).
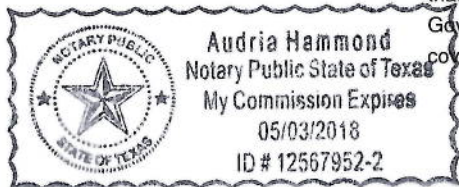
Date Gift Accepted _____ Description of Gift _____

Date Gift Accepted _____ Description of Gift _____

Date Gift Accepted _____ Description of Gift _____

(attach additional forms as necessary)

6 **AFFIDAVIT**

Audria Hammond
Notary Public State of Texas
My Commission Expires
05/03/2018
ID # 12567952-2

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.

Robert Hanna
Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said ROBERT HANNA , this the 30TH day of OCTOBER, 20 17 , to certify which, witness my hand and seal of office.

Audria Hammond	AUDRIA HAMMOND	NOTARY PUBLIC
Signature of officer administering oath	Printed name of officer administering oath	Title of officer administering oath

Adopted 8/7/2015