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. 1491, 80th Leg., Regular Sessio | OF FIGE OF ORLE |
| This is the notice to the appropriate local governmental entity that the following loc government officer has become aware of facts that require the officer to file this statement in accordance with Chapter 176, Local Government Code. | al Date Received |
| 1 Name of Local Government Officer | |
| Jimny R. Wiley | |
| 2 Office Held | |
| Commissioner PCt-4 | |
| Name of person described by Sections 176.002(a) and 176.003(a), Local Government | ent Code |
| Roys Recycling-olney LLC | |
| 313 State Hwy 114 E | |
| Description of the nature and extent of employment or other business relationship with person named in item 3 My wife own's Downett wiley | |
| , | |
| Roy's Recycling Tolvey hhe | |
| List gifts accepted by the local government officer and any family member, excluding gifts described by Section 176.003(a-1), if aggregate value of the gifts accepted from person named in item 3 exceed \$250 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) | |
| AFFIDAVIT | |
| I swear under penalty of perjury that the above statement is true and correct. I acknowledge that the disclosure applies to a 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), Local Government Code. | |
| SHARRI ASHLEY NOTARY PUBLIC STATE OF TEXAS | Government Officer |
| AFFIX NOTARY STAMP / SEAL ABOVE | a Government Omcer |
| of DCMOIN, 20 8, to certify which, witness my hand and seal of office. | , this the day |
| Signature of officer administering oath Sharri ASNLEY Printed name of officer administering oath | Asst. Auditor |
| O and a state of the state of t | Title of officer administering oath |
| Commissioners Cou | Adopted 06/29/2007 |

Exhibit _______

Page ____