

#### CITY OF TOMBALL

### APPLICATION FOR CITY BOARDS/COMMISSIONS/COMMITTEES

As an Applicant for a City Board, Commission, or Committee, your application will be public information. You will be contacted before any appointments are considered to confirm your continued interest in serving. All appointments are made by the Tomball City Council. Incumbents whose terms expire may be automatically considered for reappointment unless they indicate non-interest or have been appointed to two (2) consecutive terms. A member who is <u>absent</u> for more than 25% of called meetings in any twelve consecutive months or absent from more than two consecutive meetings, for <u>other</u> than medical reasons, will be automatically removed from service. Applicant must be a citizen of the United States and must reside within the city limits of Tomball unless otherwise stated in the position announcement. Applications will be kept on file for two years and will expire at the end of two years; for instance, an application dated in 2022 will expire in 2024.

Please Type or Print Clearly:	Date:	10141	2029	
Name: Elen Warren	Phone:	832-3	358-5355	
Address: 200-1 Mocre Street	Phone:	1 (	(Home)	
City/State/Zip TOMOUL X 7737	Cell:		(Work)	
Email:				
I have lived in Tomball years.	I am	am not_	a U.S. Citizen	
Occupation: AST CHM VISTOS  VOLUMENTO COMPANION  VO		Construction	Mach.	
Professional and/or Community Activities:	ian, 1	estival	l Williamsel	$\mathcal{R}$
leal the member & Ve	dunte	er.	<b>.</b>	<del>-</del>
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			Manager 1-1 Interest to the Control of the Control	,

Additional Pertinent Information/References:  Though Ned Informati	Menting of few houses form,			
Please attach a short biography to this application.				
Briefly tell us why you would like to be conside Board/Commission.	red for appointment to a City of Tomball			
Community home Tom  [we to help rep if the	ball beautiful & a loving town is known as the atway. I we volunteen fellow			
Please complete the attached Conflict of Interest Statement (CIS), Board Member Election on	Questionnaire (CIQ), Conflict of Interest Disclosure, and Appendix D (page 33)			
Acknowledgment of Receipt and Understanding from Handbook.				
Applications for the following Council-ap Committees will be kept on file in the City Sec				
If you are interested in serving on more than one board, please indicate your preference by numbering in order of preference (i.e., 1, 2, 3, etc.)				
Decision-Making Boards and Commissions  ( ) Planning & Zoning Commission  (b) Board of Adjustments	Meeting Information Second Monday each month, 6 p.m. To Be Announced; Evenings			
Separate Legal Entities  (/) Tomball Economic Development Corporation	Meeting Information Six (6) regular scheduled meetings, usually on the second Tuesday of the Month, 5:30 p.m.; the annual meeting is			
( ) Tomball Regional Health Foundation	in May (special meetings may be called) Fourth Wednesday each month, 4 p.m.			
Ad Hoc/Advisory Committees  ( ) Downtown Tomball Advisory Committee DTAC does not require Tomball residency	Meeting Information As called			
Non-profit Corporation Boards (*) Tomball Legacy Fund, Inc. Position 7, Tomball Legacy Fund, does not require Tomball residency	Meeting Information As called			

I AM INTERESTED IN SERVING ON THE ABOVE-INDICATED BOARDS, COMMISSIONS,

AND COMMITTEES.

Signature of Applicant

(Must be signed/signature typed in)

Please return this application to: City Secretary

City of Tomball 401 Market Street Tomball, TX 77375 cso@tomballtx.gov office: 281-290-1002

fax: 281-351-6256

Attachments: Conflict of Interest Questionnaire

Conflict of Interest Statement

Election on Disclosure

Acknowledgment of Receipt and Understanding (Page 33, Handbook)

# CONFLICT OF INTEREST QUESTIONNAIRE For vendor doing business with local governmental entity

FORM CIQ

This questionnaire reflects changes made to the law by H.B. 23, 84th Leg., Regular Session.	OFFICE USE ONLY			
This questionnaire is being filed in accordance with Chapter 176, Local Government Code, by a vendor who has a business relationship as defined by Section 176.001(1-a) with a local governmental entity and the evendor meets requirements under Section 176.006(a).	Date Received			
By law this questionnaire must be filed with the records administrator of the local governmental entity not later than the 7th business day after the date the vendor becomes aware of facts that require the statement to be filed. See Section 176.008(a-1), Local Government Code.				
A vendor commits an offense if the vendor knowingly violates Section 176.006, Local Government Code. An offense under this section is a misdemeanor.				
1 Name of vendor who has a business relationship with local governmental entity.				
Check this box if you are filing an update to a previously filed questionnaire. (The law re completed questionnaire with the appropriate filing authority not later than the 7th busines	s day after the date on which			
you became aware that the originally filed questionnaire was incomplete or inaccurate.)				
3 Name of local government officer about whom the information is being disclosed.				
Name of Officer				
4 Describe each employment or other business relationship with the local government offi	cer or a family member of the			
officer, as described by Section 176.003(a)(2)(A). Also describe any family relationship with the local government officer. Complete subparts A and B for each employment or business relationship described. Attach additional pages to this Form CIQ as necessary.  A. Is the local government officer or a family member of the officer receiving or likely to receive taxable income, other than investment income, from the vendor?  Yes  No  B. Is the vendor receiving or likely to receive taxable income, other than investment income, from or at the direction of the local government officer or a family member of the officer AND the taxable income is not received from the local governmental entity?				
Yes No				
Describe each employment or business relationship that the vendor named in Section 1 maintains with a corporation or other business entity with respect to which the local government officer serves as an officer or director, or holds an ownership interest of one percent or more.				
Check this box if the vendor has given the local government officer or a family member as described in Section 176.003(a)(2)(B), excluding gifts described in Section 176.003(b).				
7				
Signature of vendor doing business with the governmental entity	Pate			

# LOCAL GOVERNMENT OFFICER CONFLICTS DISCLOSURE STATEMENT (Instructions for completing and filling 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 in accordance with Chapter 176, Local Government Code.	Date Received	
1 Name of Local Government Officer		
2 Office Held		
3 Name of vendor described by Sections 176.001(7) and 176.003(a), Local Government Code		
4 Description of the nature and extent of each employment or other business relationshi with vendor named in item 3.	p and each family relationship	
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		
from vendor named in item 5 exceeds \$100 during the 12-month period described by	Section 170.003(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 SIGNATURE I swear under penalty of perjury that the above statement is true and correct. I ack to each family member (as defined by Section 176.001(2), Local Government Cod also acknowledge that this statement covers the 12-month period described by Sec Government Code.	e) of this local government officer.	
Signature of Local	Government Officer	
Please complete either option below:		
(1) Affidavit		
(7)		
NOTARY STAMP/SEAL		
Sworn to and subscribed before me by this the	day of	
20, to certify which, witness my hand and seal of office.		
Signature of officer administering oath Printed name of officer administering oath	Title of officer administering oath	
OR		
(2) Unsworn Declaration		
My name is, and my date of birth is		
My address is		
(street) (city) (state	e) (zip code) (country)	
Executed in County, State of, on the day of(month)	20	
Signature of Local Gove	mment Officer (Declarant)	



## **Board Member Election on Disclosure**

An appointed Board Member may choose whether or not to allow public access to the information in the custody of the City relating to the Board Member's home address, home telephone number, cellular and pager numbers (if not paid for by City), emergency contact information, personal email address, and information that reveals whether the person has family members.

Each Board Member shall state his/her choice in writing to the City Secretary's Office. If a Board Member elects <u>not</u> to allow public access to this information, the information is protected by Sections 552.024 and 552.117 of the Public Information Act and rulings of the Texas Attorney General. If a Board Member fails to report his/her choice, the information may be subject to public access.

If during the course of their term a Board Member wishes to close or open public access to the information, the individual may request in writing to the City Secretary's Office to close or open access as the case may be. A Board Member may request to close or open public access to the information by submitting a written request to the City Secretary's Office. Only the City Secretary's Office is allowed to disclose the information listed above.

(Please strike through any information that you do not wish to be made accessible to the public)

Please complete the information below and return to the City Secretary's Office within fourteen days of receipt.

I DO elect public access to my: (please indicate items you would like available, if any)
home address
home telephone number
personal email address
cell or pager numbers not paid for by the City
emergency contact information
information that reveals whether I have family members.
1 DO NOT elect public access to my home address, home telephone number, cell or pager numbers, emergency contact information, or any information that reveals whether I have family
900m War 10412
Board Member's Signature Date
Board Member's Printed Name

### Appendix D

# Acknowledgment of Receipt and Understanding

I acknowledge that I have received a copy of the City of Tomball Boards, Commissions and Committees Handbook on (date).

I understand the eligibility requirements, policies, and procedures set forth in this Handbook.

I have read and understood the contents of this handbook and will act in accordance with these eligibility requirements, policies and procedures as a condition of my appointment to a board, commission, or committee.

I have read and understood the Standards of Conduct expected by the City of Tomball and I agree to act in accord with the Standards of Conduct as a condition of my appointment by the City of Tomball.

Finally, I understand that the contents of this Handbook are policies and guidelines established by the City Council of the City of Tomball and that the City Council may amend the Handbook at its discretion.

Please read this Handbook carefully to understand these conditions of appointment before you sign this document.

Signature of Applicant for Appointment

Printed Name of Applicant

Date: