

# 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.

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.

## OFFICE USE ONLY

Date Received

1 Name of Local Government Officer

KEVIN NAUMANN

2 Office Held

MFISD  
BOARD OF TRUSTEES, PLACE 6

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

PFLUGER ARCHITECTS

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

NONE

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 9/23/16 Description of Gift DINNER

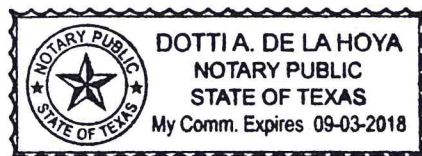
Date Gift Accepted \_\_\_\_\_ Description of Gift \_\_\_\_\_

Date Gift Accepted \_\_\_\_\_ Description of Gift \_\_\_\_\_

(attach additional forms as necessary)

6 AFFIDAVIT

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.



[Signature]  
Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Kevin Naumann, this the 7 day of Nov, 20 16, to certify which, witness my hand and seal of office.

[Signature]  
Signature of officer administering oath

Dotti A. de la Hoya  
Printed name of officer administering oath

Notary Public  
Title of officer administering oath



**To:** Dr. Chris Allen  
Superintendent  
Marble Falls ISD  
1800 Colt Circle  
Marble Falls, Texas  
78654

Cc: Johnny Campbell, MFAEMS Executive Director

**From:** Kevin Naumann  
Operations Director  
Marble Falls Area EMS, Inc.  
609 Industrial Blvd  
Marble Falls, Texas  
78654

**Date:** November 7, 2016  
**Re:** Disclosure Affidavit

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To Whom It May Concern:

I am filing an affidavit of disclosure regarding my employment with Marble Falls Area EMS. This letter intends to serve as some explanation behind the disclosure and to assure that there is no conflict of interest regarding my role as a member of the Marble Falls ISD Board of Trustees.

While I am employed with Marble Falls Area EMS as the Operations director and I am compensated in that regard, the relationship between MFAEMS and MFISD is independent of my service to either organization and I receive no financial or other benefit due directly to my service in either capacity.

The school district and EMS have a relationship with regards to the facilitation of the High School EMT course. I am involved with some of the administration and direction of the program for MFAEMS. Most in class teaching and daily interaction is facilitated by our employees. My participation in this program is completely independent from my capacity as a member of the MFISD Board.

If there are any questions regarding this relationship, please let me know.

Kevin Naumann  
830-613-5919