

## DISCLOSURE OF RELATIONS WITH CITY COUNCIL MEMBER, OFFICER, OR EMPLOYEE OF CITY OF WACO

Failure to fully and truthfully disclose the information required by this form may result in the termination of any business the City is now doing with the entity listed below and/or could impact future dealings.

Name of Entity/Business/Perso	on doing business with City	:	
	eck <u>one)</u>	_	orietorship or an individual
Other (specify):			
Check all applicable boxes.			
financially dependent on Co	uncil member, officer, or	employee of	•
	n		er of this entity/business/person
is: (Check all applicable bo	•	*	a magnetic and the course become hald as
☐ related to by blood or marriage* and/or ☐ a member of the same household as and / or ☐ financially dependent upon** and/or ☐ financially supporting**			
to a City of Waco  City Council member,  officer or employee.			
** As used herein, "financially do assistance—including for lodging, for	ving (the marriage is considere ependent upon" and "financiood, education, and debt payn	d to continue as ally supporting tents—is provid	or parent's spouse. It also includes a former long as a child of that marriage lives).  "refers to situations in which monetary led by owner, principal or manger of #1 to fficer or employee of City of Waco provides
to owner, principal or manger of #1.	or enty or water, or man cou	nen memoer, o	inter of employee of early of white provides
	department the City office	er or employ	he name of the City Council member, ree works for, if known), and (c) if a pre space is needed)
a) Name of owner, principal, or manager	(b) Name of Council member, officer or employee & department		(c) What is relationship or household arrangement
principal, manager, or emplo	oyee, or employed as a c	ontractor for	
<ul><li>NO (no person involved/working for</li><li>YES, a person is (Check all</li></ul>		ember, officer or e	mployee of the City).
(a) a current City of Waco	• • • • • • • • • • • • • • • • • • • •	officer or	employee ,
(b) <b>and is</b> ☐ an owner, ☐ a principal, or ☐ a manager of the entity/business/person listed in #1,			
	r □an independent contra	•	entity/business/person listed in #1.
• •			independent contractor who is a City cer or employee works for, if known.
Signature:	Phone #:		Date:
Drint Namo:	Drint Titlo:		