# 6 Conflict of Interest Questionnaire

**CONFLICT OF INTEREST QUESTIONNAIRE**  
**FORM CIQ**  
For vendor or other person doing business with a local government entity

This questionnaire reflects changes made to then law by H.B. 1491 80th Leg., Regular Session.  
This questionnaire is being filed in accordance with Chapter 176, Local Government Code by a person who has a business relationship as defined by Section 176.001(1-a) with a local government entity and the person meets the requirements under Section 176.006(a).

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 person becomes aware of facts that require the statement to be filed. See Section 176.006, Local Government Code. An offense under this section is a Class C misdemeanor.

1. Name of person who has a business relationship with a local government entity.

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<th>OFFICE USE ONLY</th>
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<tbody>
<tr>
<td>Date Reviewed</td>
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2. ☐ Check this box if you are filing an update to a previously filed questionnaire. (The law requires that you file an updated completed questionnaire with the appropriate filing authority not later than the 7th business day after the date the originally filed questionnaire becomes incomplete or inaccurate).

3. Name of local government officer with whom filer has employment or business relationship.

   Name of Officer

   This section (item 3 including subparts A, B, C & D) must be completed for each officer with whom the filer has an employment or other business relationship as defined by Section 176.001(1-a), Local Government Code. Attach additional pages to this Form CIQ as necessary.

   A. Is the local government officer named in this section receiving or likely to receive taxable income, other than investment income, from the filer of the questionnaire?  
      Yes    No

   B. Is the filer of the questionnaire receiving or likely to receive taxable income, other than investment income, from or at the direction of the local government officer named in this section AND the taxable income period is not received from the local governmental entity?  
      Yes    No

   C. Is the filer of this questionnaire employed by a corporation or other business entity with respect to which the local government officer serves as an officer or director, or holds an ownership of 10 percent or more?  
      Yes    No

   D. D. Describe each employment or business relationship with the local government officer named this section.

4. **IData has no known conflicts of interest.**  

   [Signature of person doing business with the governmental entity]  
   [Date]

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### 8. Conflict of Interest Questionnaire

**CONFLICT OF INTEREST QUESTIONNAIRE**

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1. Name of person who has a business relationship with local government entity:
   - **Not Applicable**

2. Check this box if you are filing an update to a previously filed questionnaire.
   (The law requires that you file an updated completed questionnaire with the appropriate filing authority not later than the 7th business day after the date the originally filed questionnaire becomes incomplete or inaccurate)

3. Name of local government officer with whom filer has employment or business relationship.
   - **Not Applicable**
   - Name of Officer

   This section (Item 3 including subparts A, B, C, and D) must be completed for each officer with whom the filer has an employment or other business relationship as defined by Section 176.001(1-a), Local Government Code. Attach additional pages to this Form CIQ as necessary.

   1. Is the local government officer named in this section receiving or likely to receive taxable income, other than investment income, from the filer of the questionnaire?
      - **Yes** □  **No** □

   2. Is the filer of the questionnaire receiving or likely to receive taxable income, other than investment income, from or at the direction of the local government officer named in this section AND the taxable income period is not received from the local governmental entity?
      - **Yes** □  **No** □

   3. Is the filer of this questionnaire employed by a corporation or other business entity with respect to which the local government officer serves as an officer or director, or holds an ownership of 10 percent or more?
      - **Yes** □  **No** □

   D. Describe each employment or business relationship with the local government officer named this section.

4. **Initials to signify SIG's understanding of LSCS Conflict of Interest Questionnaire**
CONFLICT OF INTEREST QUESTIONNAIRE
FORM CIQ
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1. Name of person who has a business relationship with local government entity.

PSS does not have a family or business relationship with a member of the LSCS Board of Trustees or an LSCS administrator and has not given a gift or gifts worth more than $250.00 to a member of the LSCS Board of Trustees or an LSCS administrator within the 12-month period prior to responding to this Request for Proposal.

2. Check this box if you are filing an update to a previously filed questionnaire.
(The law requires that you file an updated completed questionnaire with the appropriate filing authority not later than the 7th business day after the date the originally filed questionnaire becomes incomplete or inaccurate).

3. Name of local government officer with whom filer has employment or business relationship.

______________________________
Name of Officer

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A. Is the local government officer named in this section receiving or likely to receive taxable income, other than investment income, from the filer of the questionnaire?
Yes ____ No ____

B. Is the filer of the questionnaire receiving or likely to receive taxable income, other than investment income, from or at the direction of the local government officer named in this section AND the taxable income period is not received from the local governmental entity?
Yes ____ No ____

C. Is the filer of this questionnaire employed by a corporation or other business entity with respect to which the local government officer serves as an officer or director, or holds an ownership of 10 percent or more?
Yes ____ No ____

D. Describe each employment or business relationship with the local government officer named this section.

4. 

______________________________
Signature

______________________________
Date

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**CONFLICT OF INTEREST QUESTIONNAIRE**

**FORM CIQ**

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1. Name of person who has a business relationship with local government entity.
   
   N/A

2. Check this box if you are filing an update to a previously filed questionnaire.
   (The law requires that you file an updated completed questionnaire with the appropriate filing authority not later than the 7th business day after the date the originally filed questionnaire becomes incomplete or inaccurate).

3. Name of local government officer with whom filer has employment or business relationship.
   
   N/A

   Name of Officer

This section (item 3 including subparts A, B, C & D) must be completed for each officer with whom the filer has an employment or other business relationship as defined by Section 176.001(1-a), Local Government Code. Attach additional pages to this Form CIQ as necessary.

A. Is the local government officer named in this section receiving or likely to receive taxable income, other than investment income, from the filer of the questionnaire?
   
   Yes  N/A  No

B. Is the filer of the questionnaire receiving or likely to receive taxable income, other than investment income, from or at the direction of the local government officer named in this section AND the taxable income period is not received from the local governmental entity?
   
   Yes  N/A  No

C. Is the filer of this questionnaire employed by a corporation or other business entity with respect to which the local government officer serves as an officer or director, or holds an ownership of 10 percent or more?
   
   Yes  X  No

D. Describe each employment or business relationship with the local government officer named this section.
   
   N/A

4. 

Signature of person doing business with the governmental entity  7/16/09

Date
SunGard Higher Education certifies that neither it, nor any personnel of the company, has knowledge of or has been involved with certain prohibited activities.

## CONFLICT OF INTEREST QUESTIONNAIRE

### FORM CIQ

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### I. Name of person who has a business relationship with local government entity.

- Not applicable – no conflicts

### 2. Check this box if you are filing an update to a previously filed questionnaire.

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### 3. Name of local government officer with whom filer has employment or business relationship.

- Not applicable – no conflicts

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- Yes
- No

B. Is the filer of the questionnaire receiving or likely to receive taxable income, other than investment income, from or at the direction of the local government officer named in this section AND the taxable income period is not received from the local governmental entity?

- Yes
- No

C. Is the filer of this questionnaire employed by a corporation or other business entity with respect to which the local government officer serves as an officer or director, or holds an ownership of 10 percent or more?

- Yes
- No

D. Describe each employment or business relationship with the local government officer named this section.

### 4.

*Signature of authorized representative of Respondent*

*July 10, 2009*

*Date*