IN THE NAME AND BY THE AUTHORITY OF

THE STATE OF TEXAS

OATH OF OFFICE

i, Your	name	, do Solemnly swear or affirm,
that I will faith	fully execute the dut	ties of the office of Name of Voas
of the State of	Texas, and will, to th	ne best of my ability, preserve, protect and
defend the Con	stitution and Laws c	of the United States and of this State, so help me
God.		
		Your Signature Afflant Signature
I, Notari to Your	1's name, name	declare that I administered the Oath of Office on this day of, 20
		Notary's Signature Signature of Person Administering Oath
SWORN TO A	ND EXECUTED be	efore me JOUT NAME (Person Administering , 20
Oath of Office)	on this day of _	
(SEAL)		Notary's signature
(SZIZ)		Notary Public In and For
		The State of T E X A S

Please return form to Shannon Ramirez-Conklin, Director of Boards and Commissions,

901 Bagby, 3rd Floor, Houston, Texas 77002 or
Fax to 832-393-1084

City of Houston

As provided by the Texas Public Information Act, Tex. Gov't Code Ann. 552.024(a), I understand that I may choose to close access by the public to information regarding my home telephone number, or information that reveals whether I have family members.

I further understand that without my specific written notice to prohibit release of this information within fourteen calendar days of my appointment, such information will be provided to the public upon request.

In the event that I wish to either close or open access to this information in

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STATEMENT OF OFFICER

Statement

do directly or indirectly paid, offered, promised to promise or thing of value, or promised any pure withholding of a vote at the election at which appointment or confirmation, whichever the case	pay, contributed, or promised to contribute any ablic office or employment for the giving or I was elected or as a reward to secure my
Position to Which Appointed: City and/or County: CITY OF HOUSTON, To	EXAS
Execu	ıtion
Under penalties of perjury, I declare that I have stated therein are true.	read the foregoing statement and that the facts
Date:	Lour Signature Signature of Officer

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