

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. 1491, 80th 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

Marcus Fernandez

2 Office Held

City of Big Spring
City Councilmember - District 1

3 Name of person described by Sections 176.002(a) and 176.003(a), Local Government Code

The GEO Group, Inc. (formerly Cornell Corrections of Texas, Inc.)

4 Description of the nature and extent of employment or other business relationship with person named in item 3

I am a full time employee of the Geo Group, Inc.

5 List gifts accepted by the local government officer and any family member, excluding gifts described by Section 176.003(a-1), if aggregate value of the gifts accepted from person named in item 3 exceed \$250 during the 12-month period described by Section 176.003(a)(2)(B)

Date Gift Accepted _____ Description of Gift _____

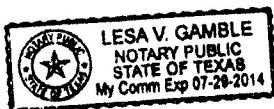
Date Gift Accepted _____ Description of Gift _____

Date Gift Accepted _____ Description of Gift _____

(attach additional forms as necessary)

6 AFFIDAVIT

I swear under penalty of perjury that the above statement is true and correct. I acknowledge that the disclosure applies to a 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), Local Government Code.



[Handwritten Signature]

Signature of Local Government Officer

SEEK NOTARY STAMP - REAL AGENTS

Witnessed and subscribed before me by the said Marcus Fernandez this the 12th day of July 20 11 to wit by whom, witness my hand and seal of office.

Lesa V. Gamble

Admin. Asst.

Signature of Notary Public

Printed name of officer administering oath

Title of officer administering oath