LOCAL GOVERNMENT OFFICER
CONFLICTS DISCLOSURE STATEMENT

(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.

1 Name of Local Government Officer
Lynne B. Foley

2 Office Held
Senior Adult and Travel Program Manager

3. Name of vendor described by Sections 176.001(7) and 176.003(a), Local Government Code
Collette Travel Service, Inc.

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).

<table>
<thead>
<tr>
<th>Date Gift Accepted</th>
<th>Description of Gift</th>
<th>Value</th>
<th>Recipient(s)</th>
</tr>
</thead>
<tbody>
<tr>
<td>4/21-4/28/2016</td>
<td>Travel Conference to Switzerland</td>
<td>$1256</td>
<td>Lynne B. Foley</td>
</tr>
<tr>
<td>4/21-4/28/2016</td>
<td>Travel Conference to Switzerland</td>
<td>$1256</td>
<td>Dan J. Foley</td>
</tr>
</tbody>
</table>

11 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 of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Lynne B. Foley, this the 24 day
of April, 2017, to certify which, witness my hand and seal of office.

Signature of officer administering oath

Printed name of officer administering oath

Title of officer administering oath

Form provided by Texas Ethics Commission

www.ethics.state.tx.us

Revised 11/30/2015