CONFLICT OF INTEREST QUESTIONNAIRE

FORM CIQ

For vendor or other person doing business with local governmental entity

This questionnaire is being filed in accordance with chapter 176 of the Local Government Code by a person doing business with the governmental entity.

By law this questionnaire must be filed with the records administrator of the local government 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.

A person commits an offense if the person violates Section 176.006, Local Government Code. An offense under this section is a Class C misdemeanor.

OFFICE USE ONLY

Date Received

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1 **Name of person doing business with local governmental entity.**

Robert S. Bookhammer III, ARM-P

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 September 1 of the year for which an activity described in Section 176.006(a), Local Government Code, is pending and not later than the 7th business day after the date the originally filed questionnaire becomes incomplete or inaccurate.)

3

Describe each affiliation or business relationship with an employee or contractor of the local governmental entity who makes recommendations to a local government officer of the local governmental entity with respect to expenditure of money.

None

4

Describe each affiliation or business relationship with a person who is a local government officer and who appoints or employs a local government officer of the local governmental entity that is the subject of this questionnaire.

None

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FORM CIQ
Page 2

5 **Name of local government officer with whom filer has affiliation or business relationship. (Complete this section only if the answer to A, B, or C is YES.)**

This section, item 5 including subparts A, B, C & D, must be completed for each officer with whom the filer has affiliation or business relationship. 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 from the filer of the questionnaire?

☐ Yes ☐ No

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

☐ Yes ☐ No

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

☐ Yes ☐ No

D. Describe each affiliation or business relationship.

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6 **Describe any other affiliation or business relationship that might cause a conflict of interest.**

None

7

Signature of person doing business with the governmental entity

06/12/07
Date

Wachovia Insurance Services, Inc.
GA1516
5956 Sherry Lane, Suite 2000
Dallas, TX 75225-6531

Tel 214 365-9150
Fax 214 365-9141
800 531-2034

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June 12, 2007

WACHOVIA INSURANCE SERVICES

Office of the City Clerk
P. O. Box 839966
San Antonio, TX 78283-3966

Re: Request for Proposal for Insurance Broker of Record

Dear Sir or Madam,

Please find enclosed a completed conflict of interest questionnaire as required in connection with your RFP for Insurance Broker of Record on behalf of Robert S. Bookhammer III.

Thank you for this opportunity.

Sincerely,

Anne Street

Anne Street, CPCU, AU
Commercial Account Executive

Enclosure

Insurance Products:
Not Insured by FDIC or Any Federal Government Agency | May Lose Value | Not a Deposit of or Guaranteed by a Bank or Any Bank Affiliate.