

CONFLICT OF INTEREST QUESTIONNAIRE

FORM CIQ

For vendor or other person doing business with local governmental entity

This questionnaire reflects changes made to the 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 governmental entity and the person meets 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.

A person commits an offense if the person knowingly 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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FM

1 Name of person who has a business relationship with local governmental 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 No N/A

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 is not received from the local governmental entity?

Yes No N/A

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 N/A

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

4

Lewis S. Fisher, Fisher Heck Architects

Signature of person doing business with the governmental entity

1/20/2015

Date



CONFLICT OF INTEREST QUESTIONNAIRE ADDENDUM FORM CIQ-A
For vendor or other person doing business with local governmental entity

Completed Conflict of Interest Questionnaires and Conflict of Interest Questionnaire Addenda are to be submitted by all individuals and/or entities who seek to do business with the City of San Antonio.

A CIQ and CIQ Addendum are required to be filed for EACH solicitation submitted, and are required to be submitted together.

1 Name of person who has or is seeking to have a business relationship with the City of San Antonio.

Lewis Fisher

2 Name of Company that has or is seeking to have a business relationship with the City of San Antonio.

Fisher Heck Architects

2a Business Contact information for Company listed above.

Business Address: 915 South ST. Mary's Street

Phone: 210-299-1500

Email: LFisher@Fisherheck.com

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3 Bid Name or Description of Service

Brackenridge Park Masterplan Project # 23-01449

4 Printed name of person doing business with the City of San Antonio (same as denoted on Box 4 of Form CIQ).

Lewis S. Fisher

Completed Conflict of Interest Questionnaires and Addenda should be mailed or hand-delivered separately from the solicitation (bid) to one of the following addresses:

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

Physical Address: Office of the City Clerk City Hall, 2nd Floor 100 Military Plaza San Antonio, TX 78205

Print Form