

# 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. 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.

**OFFICE USE ONLY**

Date Received

**JUL 02 2019**

1 Name of Local Government Officer

Patrick Kuhns

2 Office Held Board of Directors  
Nacogdoches County Hospital District  
Precinct One

3 Name of vendor described by Sections 176.001(7) and 176.003(a), Local Government Code

Radiology Consultants of Nacogdoches, L.L.P  
G.P.s. Mary Beth Calme, MD & Alan Grisson, MD

4 Description of the nature and extent of each employment or other business relationship and each family relationship with vendor named in item 3.

Radiology Consultants of Nacogdoches, L.L.P has a contract w/ Nacogdoches Memorial Hospital for the provision of medical services in the Radiology Department. M.B. Calme is my spouse

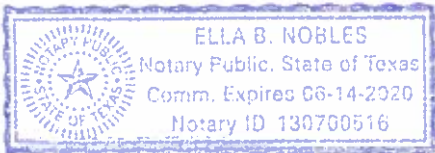
5 List gifts accepted by the local government officer and any family member, if aggregate value of the gifts accepted from vendor named in item 3 exceeds \$100 during the 12-month period described by Section 176.003(a)(2)(B).

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 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.



Patrick Kuhns

Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Patrick Kuhns, this the 2 day of July, 2019, to certify which, witness my hand and seal of office.

Ella B. Nobles  
Signature of officer administering oath

Ella B. Nobles  
Printed name of officer administering oath

Notary  
Title of officer administering oath