

# 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

RECEIVED

DEC 07 2007

CTRMA  
AUSTIN, TEXAS

1 Name of Local Government Officer

HENRY GILMORE

2 Office Held

Director, Central Texas Regional Mobility  
Authority

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

MUNICIPAL SERVICES BUREAU

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

Provide legal counsel and services to business entity  
as a licensed attorney

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)

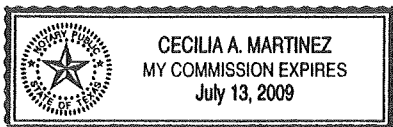
Date Gift Accepted \_\_\_\_\_ Description of Gift \_\_\_\_\_

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.

*Henry Gilmore*  
\_\_\_\_\_  
Signature of Local Government Officer

Henry Gilmore

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said HENRY GILMORE, this the 7TH day of DECEMBER, 20 07, to certify which, witness my hand and seal of office.

*Cecilia A. Martinez*  
\_\_\_\_\_  
Signature of officer administering oath

CECILIA A. MARTINEZ  
\_\_\_\_\_  
Printed name of officer administering oath

NOTARY PUBLIC  
\_\_\_\_\_  
Title of officer administering oath

**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

**RECEIVED**

**FEB 13 2008**

**CTRMA  
AUSTIN, TEXAS**

1 Name of person who has a business relationship with local governmental entity.

TCB INC. (formerly known as Turner Collie & Braden Inc.)

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.

Nikelle Meade, CTRMA Board Member

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

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?

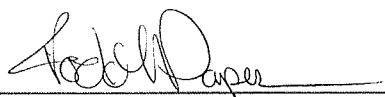
Yes  No

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

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

TCB has employed Nikelle Meade with respect to certain City of Austin issues. TCB last engaged Ms. Meade in December 2006. See Page 2 for additional disclosures.

4   
Signature of person doing business with the governmental entity

February 12, 2008  
Date

# CONFLICT OF INTEREST QUESTIONNAIRE

FORM CIQ

For vendor or other person doing business with local governmental entity

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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

RECEIVED

JUN 01 2009

CTRMA  
AUSTIN, TEXAS

1 Name of person who has a business relationship with local governmental entity.

PBS&J

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.

Mike Heiligenstein (Chris Heiligenstein - Family Member)

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

Chris is a part-time temporary employee of PBS&J.

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

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

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

PBS&J employs Chris Heiligenstein as a part-time temporary employee in our cultural resources laboratory.

4

  
\_\_\_\_\_  
Signature of person doing business with the governmental entity

June 1, 2009  
\_\_\_\_\_  
Date

**Additional Disclosures in Connection With Key CTRMA Personnel**

TCB INC. (TCB) is currently providing the following services:

- Subconsultant to HNTB Corporation (HNTB) on US 290 PMC project (Houston, TX)
- Subconsultant to HDR Engineering, Inc. on SR 78 Bridge project (San Diego, CA)

TCB, as GEC for the Hays County Bond Program and as an agent for Hays County, supervised the design work of HNTB and PBS&J.

Daron K. Butler (Officer-in-Charge of TCB's Austin office) and CTRMA Board Members Bob Tesch, James Mills, and Nikelle Meade are all members of the Austin Area Research Organization (AARO), a private, non-profit group dedicated to the improvement of the quality of life for all Central Texans.

**Management Plan to Deal with Potential Conflicts of Interest**

In accordance with TCB's General Memorandum 231, employees of the company shall report conflicts of interest or concerns about potential conflicts to their supervisor, Regional Officer-in-Charge, or the General Counsel.

# CONFLICT OF INTEREST QUESTIONNAIRE

FORM CIQ

For vendor or other person doing business with local governmental entity

OFFICE USE ONLY

Date Received

RECEIVED

APR 30 2008

CTRMA  
AUSTIN, TEXAS

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.

1 Name of person who has a business relationship with local governmental entity.

JP MORGAN SECURITIES INC.

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.

HENRY GILMORE, DIRECTOR CTRMA

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

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

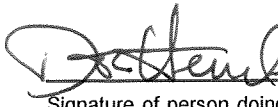
C. Is the filer of this questionnaire employed by a corporation or other business entity with respect to which the local government officer serves as an officer or director, or holds an ownership of 10 percent or more?

Yes  No

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

The local governmental officer is a law partner in the firm DuBois, Bryant & Campbell LLP, and the firm provides legal services to the filer.

4

 on Behalf of JP Morgan April 30, 2008  
Signature of person doing business with the governmental entity Securities, Inc Date

# CONFLICT OF INTEREST QUESTIONNAIRE

## FORM CIQ

For vendor or other person doing business with local governmental entity

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### OFFICE USE ONLY

Date Received

RECEIVED  
JUL 25 2008  
CTRMA  
AUSTIN, TEXAS

1 Name of person who has a business relationship with local governmental entity.

GILA CORPORATION d/b/a MUNICIPAL SERVICES BUREAU

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.

HENRY GILMORE

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.

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Yes  No

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

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

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

Mr. Gilmore provides legal representation to the filer as a licensed attorney.

4 By: [Signature]  
Gila Corporation d/b/a Municipal Services bureau 7/25/2008  
Signature of person doing business with the governmental entity Date

# LOCAL GOVERNMENT OFFICER CONFLICTS DISCLOSURE STATEMENT

FORM CIS

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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

RECEIVED

SEP 03 2008

CTRMA  
AUSTIN, TEXAS

1 Name of Local Government Officer

NIKELLE S. MEADE

2 Office Held

Director, Central Texas Regional Mobility  
Authority

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

TCB Inc., under consideration for contract procurement

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

Officer is a licensed attorney and a partner in a law firm  
(Brown McCarroll L.L.P.) that represents TCB Inc. in  
various legal matters

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 \_\_\_\_\_

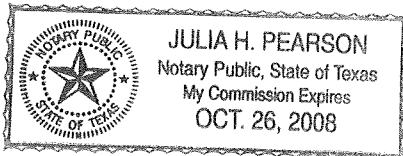
Date Gift Accepted \_\_\_\_\_ Description of Gift \_\_\_\_\_

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.



*Nikelle S. Meade*

Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Nikelle S. Meade, this the 2<sup>nd</sup> day of September, 2008, to certify which, witness my hand and seal of office.

*Julia Pearson*

Signature of officer administering oath

JULIA PEARSON

Printed name of officer administering oath

LEGAL SECRETARY

Title of officer administering oath

# LOCAL GOVERNMENT OFFICER CONFLICTS DISCLOSURE STATEMENT

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**OFFICE USE ONLY**

Date Received

RECEIVED

JUN 02 2009

CTRMA  
AUSTIN, TEXAS

**1 Name of Local Government Officer**

Mike Heiligenstein

**2 Office Held**

Executive Director, Central Texas Regional  
Mobility Authority

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

PBS&J

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

Mike Heiligenstein's son, Chris, is a part-time temporary  
employee of PBS&J.

**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 N/A Description of Gift \_\_\_\_\_

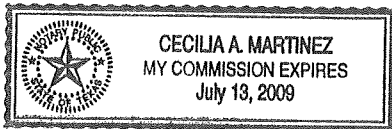
Date Gift Accepted \_\_\_\_\_ Description of Gift \_\_\_\_\_

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.



*Mike Heiligenstein*  
Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Mike Heiligenstein, this the 2 day  
of June, 20 09, to certify which, witness my hand and seal of office.

*Cecilia A. Martinez*      Cecilia A. Martinez      NOTARY  
Signature of officer administering oath      Printed name of officer administering oath      Title of officer administering oath

**LOCAL GOVERNMENT OFFICER  
CONFLICTS DISCLOSURE STATEMENT**

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**OFFICE USE ONLY**

Date Received

**RECEIVED**

**AUG 25 2009**

**CTRMA  
AUSTIN, TEXAS**

1 Name of Local Government Officer

*Nikelle S Meade*

2 Office Held

*Board Member, Central Texas RMA*

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

*PBS + J*

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

*Represent PBS + J as attorney and lobbyist on matters with [redacted] various agencies; represent [redacted] PBS + J in litigation matters*

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 \_\_\_\_\_

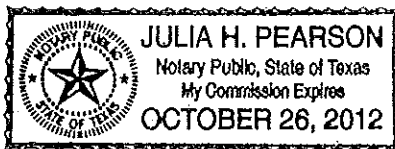
Date Gift Accepted   *∅*   Description of Gift \_\_\_\_\_

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.



*Nikelle S. Meade*

Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said *NIKELLE S. MEADE* this the *24<sup>th</sup>* day of *AUGUST*, 20 *09*, to certify which, witness my hand and seal of office.

*Julia H Pearson*  
Signature of officer administering oath

*JULIA H. PEARSON*  
Printed name of officer administering oath

*LEGAL SECRETARY*  
Title of officer administering oath

**LOCAL GOVERNMENT OFFICER  
CONFLICTS DISCLOSURE STATEMENT**

**FORM CIS**

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Date Received

**RECEIVED**

**AUG 25 2009**

**CTRMA  
AUSTIN, TEXAS**

1 Name of Local Government Officer

*Nikelle S. Meade*

2 Office Held

*Board Member, Central Texas RMA*

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

*AECOM*

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

*Represent AECOM in matters related to the City of Austin and SAWS.*

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)

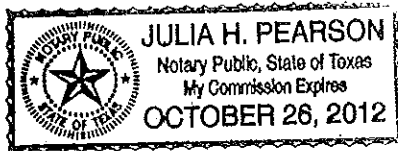
Date Gift Accepted   *∅*   Description of Gift \_\_\_\_\_

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.

*Nikelle S. Meade*  
\_\_\_\_\_  
Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said *NIKELLE S. MEADE*, this the *24<sup>th</sup>* day of *AUGUST*, 20 *09*, to certify which, witness my hand and seal of office.

*Julia H. Pearson*  
\_\_\_\_\_  
Signature of officer administering oath

*JULIA H. PEARSON*  
\_\_\_\_\_  
Printed name of officer administering oath

*LEGAL SECRETARY*  
\_\_\_\_\_  
Title of officer administering oath

**LOCAL GOVERNMENT OFFICER  
CONFLICTS DISCLOSURE STATEMENT**

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**OFFICE USE ONLY**

Date Received

1 Name of Local Government Officer

Nikelle S Meade

2 Office Held

Director

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

Greater Austin Development Company

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

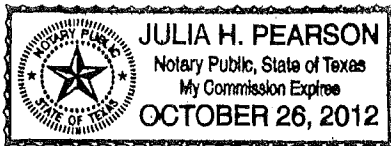
Brown Mc Carroll LLP serves as legal counsel to Greater Austin Development Company

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 n/a Description of Gift n/a  
 Date Gift Accepted n/a Description of Gift n/a  
 Date Gift Accepted n/a Description of Gift n/a

(attach additional forms as necessary)

6 AFFIDAVIT



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Nikelle S Meade  
 Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said NIKELLE S. MEADE, this the 29th day of SEPTEMBER, 2009, to certify which, witness my hand and seal of office.

Julia H Pearson  
 Signature of officer administering oath

JULIA H. PEARSON  
 Printed name of officer administering oath

SECRETARY  
 Title of officer administering oath