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

Sanjay Ramabhadr

2 Office Held

Board Member - Metropolitan Transit Authority of Harris County, Texas

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

Parsons

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

Officer's firm is on a team with the vendor for a project with another governmental entity. While the firm is not performing / has not performed any work, this form is being filed to disclose this relationship.

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.

[Signature of Local Government Officer]

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said __________, this the ______ day of __________, 20 __, 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