

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

Rec'd in
Brd. office
5-3-11
Cleno

1 Name of Local Government Officer
Lawrence D. Finder

2 Office Held
Member, Board of Managers, Harris County Hospital District

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

4 Description of the nature and extent of employment or other business relationship with person named in item 3
Lawrence D. Finder is a Partner with Haynes and Boone, LLP

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 _____

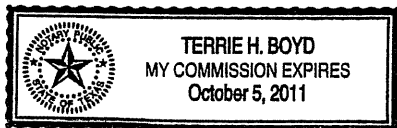
Date Gift Accepted n/a Description of Gift _____

Date Gift Accepted n/a 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.



AFFIX NOTARY STAMP / SEAL ABOVE

Lawrence D. Finder
Signature of Local Government Officer

Sworn to and subscribed before me, by the said Lawrence D. Finder, this the 27th day of April, 20 11, to certify which, witness my hand and seal of office.

Terrie H. Boyd
Signature of officer administering oath

Terrie H. Boyd
Printed name of officer administering oath

Legal Secretary
Title of officer administering oath

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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
30 Aug. 2011

Board office

1 Name of Local Government Officer

Lawrence D. FINDER

2 Office Held

Member, Board of Managers, Harris County Hospital District

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

The Methodist Hospital, Houston, TX

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

Janice FINDER, wife of Lawrence D. FINDER, is employed at The Methodist Hospital.

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 N/A Description of Gift _____

Date Gift Accepted N/A Description of Gift _____

(attach additional forms as necessary)

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Lawrence D. FINDER
Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Lawrence D. FINDER, this the 30th day of August, 2011, to certify which, witness my hand and seal of office.

Shelly D. Smith
Signature of officer administering oath

Shelly D. Smith
Printed name of officer administering oath

Notary
Title of officer administering oath