Houston Forensic Science Center
Financial Conflict of Interest Disclosure Statement

This Houston Forensic Science Center ("HFSC") Financial Conflict of Interest Disclosure Statement is to be completed annually by all persons with decision-making authority regarding any HFSC contract or transaction. Completed forms should be submitted to the secretary of the Board of Directors by June 1 of each year.

1. I, Peter Stout, have received a copy of and have read and understand the HFSC Financial Conflict of Interest Policy (the "Policy"). I agree to comply with the Policy.

2. If I have an actual or perceived conflict of interest (as defined in the Policy), I will promptly disclose it as required by the Policy.

3. I do not have, nor am I negotiating, a contract or transaction (as defined in the Policy) with HFSC for goods or services (other than any employment contract that may exist between HFSC and me), and this statement is true with regard to any family member of mine (as *family member* is defined in the Policy).

4. I do not have (nor does a family member have) a financial interest in a contract or transaction that exists or is being negotiated between HFSC and any entity in which *(a)* I am (or a family member is) a director, officer, agent, partner, associate, employee, trustee, or legal representative or *(b)* I am (or a family member is) engaged in some other capacity.

5. I am not (nor is a family member) engaged in any capacity with a business or enterprise that competes with HFSC nor do I or a family member have a financial interest in a business or enterprise that competes with HFSC.

6. I do not and will not engage in any business or financial activity that adversely affects or is detrimental to the best interests of HFSC.

7. I will not accept gifts, gratuities, entertainment, or other favors from individuals or entities when the party offering the gift, gratuity, entertainment or favor does so under circumstances that might create the perception that such action was intended to influence me in the performance of my HFSC duties.

Check one of the following:

☑ I agree with all of the statements in this Financial Conflict of Interest Disclosure Statement. My statements concerning my family members are made to the best of my knowledge.

☐ I cannot agree with a certain statement (or statements). Below I identify the statement(s) by number and disclose the following circumstances:

N/A

Peter Stout 6/2/26

SIGNATURE DATE

Houston Forensic Science Center
Financial Conflict of Interest Disclosure Statement

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1. I, Amy Castillo, have received a copy of and have read and understand the HFSC Financial Conflict of Interest Policy (the "Policy"). I agree to comply with the Policy.

2. If I have an actual or perceived conflict of interest (as defined in the Policy), I will promptly disclose it as required by the Policy.

3. I do not have, nor am I negotiating, a contract or transaction (as defined in the Policy) with HFSC for goods or services (other than any employment contract that may exist between HFSC and me), and this statement is true with regard to any family member of mine (as *family member* is defined in the Policy).

4. I do not have (nor does a family member have) a financial interest in a contract or transaction that exists or is being negotiated between HFSC and any entity in which *(a)* I am (or a family member is) a director, officer, agent, partner, associate, employee, trustee, or legal representative or *(b)* I am (or a family member is) engaged in some other capacity.

5. I am not (nor is a family member) engaged in any capacity with a business or enterprise that competes with HFSC nor do I or a family member have a financial interest in a business or enterprise that competes with HFSC.

6. I do not and will not engage in any business or financial activity that adversely affects or is detrimental to the best interests of HFSC.

7. I will not accept gifts, gratuities, entertainment, or other favors from individuals or entities when the party offering the gift, gratuity, entertainment or favor does so under circumstances that might create the perception that such action was intended to influence me in the performance of my HFSC duties.

Check one of the following:

☑ I agree with all of the statements in this Financial Conflict of Interest Disclosure Statement. My statements concerning my family members are made to the best of my knowledge.

☐ I cannot agree with a certain statement (or statements). Below I identify the statement(s) by number and disclose the following circumstances:

Amy Castillo Digitally signed by Amy Castillo Date: 2026.05.19 14:08:51 -05'00' 5/19/26

SIGNATURE DATE

Houston Forensic Science Center
Financial Conflict of Interest Disclosure Statement

This Houston Forensic Science Center ("HFSC") Financial Conflict of Interest Disclosure Statement is to be completed annually by all persons with decision-making authority regarding any HFSC contract or transaction. Completed forms should be submitted to the secretary of the Board of Directors by June 1 of each year.

1. I, David Leach, have received a copy of and have read and understand the HFSC Financial Conflict of Interest Policy (the "Policy"). I agree to comply with the Policy.

2. If I have an actual or perceived conflict of interest (as defined in the Policy), I will promptly disclose it as required by the Policy.

3. I do not have, nor am I negotiating, a contract or transaction (as defined in the Policy) with HFSC for goods or services (other than any employment contract that may exist between HFSC and me), and this statement is true with regard to any family member of mine (as *family member* is defined in the Policy).

4. I do not have (nor does a family member have) a financial interest in a contract or transaction that exists or is being negotiated between HFSC and any entity in which *(a)* I am (or a family member is) a director, officer, agent, partner, associate, employee, trustee, or legal representative or *(b)* I am (or a family member is) engaged in some other capacity.

5. I am not (nor is a family member) engaged in any capacity with a business or enterprise that competes with HFSC nor do I or a family member have a financial interest in a business or enterprise that competes with HFSC.

6. I do not and will not engage in any business or financial activity that adversely affects or is detrimental to the best interests of HFSC.

7. I will not accept gifts, gratuities, entertainment, or other favors from individuals or entities when the party offering the gift, gratuity, entertainment or favor does so under circumstances that might create the perception that such action was intended to influence me in the performance of my HFSC duties.

Check one of the following:

☑ I agree with all of the statements in this Financial Conflict of Interest Disclosure Statement. My statements concerning my family members are made to the best of my knowledge.

☐ I cannot agree with a certain statement (or statements). Below I identify the statement(s) by number and disclose the following circumstances:

David Leach — 5/19/2026

SIGNATURE — DATE

David Leach

Houston Forensic Science Center
Financial Conflict of Interest Disclosure Statement

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1. I, Natalee Veazey Haley, have received a copy of and have read and understand the HFSC Financial Conflict of Interest Policy (the "Policy"). I agree to comply with the Policy.

2. If I have an actual or perceived conflict of interest (as defined in the Policy), I will promptly disclose it as required by the Policy.

3. I do not have, nor am I negotiating, a contract or transaction (as defined in the Policy) with HFSC for goods or services (other than any employment contract that may exist between HFSC and me), and this statement is true with regard to any family member of mine (as *family member* is defined in the Policy).

4. I do not have (nor does a family member have) a financial interest in a contract or transaction that exists or is being negotiated between HFSC and any entity in which *(a)* I am (or a family member is) a director, officer, agent, partner, associate, employee, trustee, or legal representative or *(b)* I am (or a family member is) engaged in some other capacity.

5. I am not (nor is a family member) engaged in any capacity with a business or enterprise that competes with HFSC nor do I or a family member have a financial interest in a business or enterprise that competes with HFSC.

6. I do not and will not engage in any business or financial activity that adversely affects or is detrimental to the best interests of HFSC.

7. I will not accept gifts, gratuities, entertainment, or other favors from individuals or entities when the party offering the gift, gratuity, entertainment or favor does so under circumstances that might create the perception that such action was intended to influence me in the performance of my HFSC duties.

Check one of the following:

☑ I agree with all of the statements in this Financial Conflict of Interest Disclosure Statement. My statements concerning my family members are made to the best of my knowledge.

☐ I cannot agree with a certain statement (or statements). Below I identify the statement(s) by number and disclose the following circumstances:

N/A

Natalee Veazey Haley 6/2/26

SIGNATURE DATE

Houston Forensic Science Center
Financial Conflict of Interest Disclosure Statement

This Houston Forensic Science Center ("HFSC") Financial Conflict of Interest Disclosure Statement is to be completed annually by all persons with decision-making authority regarding any HFSC contract or transaction. Completed forms should be submitted to the secretary of the Board of Directors by June 1 of each year.

1. I, Ellen Cohen, have received a copy of and have read and understand the HFSC Financial Conflict of Interest Policy (the "Policy"). I agree to comply with the Policy.

2. If I have an actual or perceived conflict of interest (as defined in the Policy), I will promptly disclose it as required by the Policy.

3. I do not have, nor am I negotiating, a contract or transaction (as defined in the Policy) with HFSC for goods or services (other than any employment contract that may exist between HFSC and me), and this statement is true with regard to any family member of mine (as *family member* is defined in the Policy).

4. I do not have (nor does a family member have) a financial interest in a contract or transaction that exists or is being negotiated between HFSC and any entity in which *(a)* I am (or a family member is) a director, officer, agent, partner, associate, employee, trustee, or legal representative or *(b)* I am (or a family member is) engaged in some other capacity.

5. I am not (nor is a family member) engaged in any capacity with a business or enterprise that competes with HFSC nor do I or a family member have a financial interest in a business or enterprise that competes with HFSC.

6. I do not and will not engage in any business or financial activity that adversely affects or is detrimental to the best interests of HFSC.

7. I will not accept gifts, gratuities, entertainment, or other favors from individuals or entities when the party offering the gift, gratuity, entertainment or favor does so under circumstances that might create the perception that such action was intended to influence me in the performance of my HFSC duties.

Check one of the following:

☑ I agree with all of the statements in this Financial Conflict of Interest Disclosure Statement. My statements concerning my family members are made to the best of my knowledge.

☐ I cannot agree with a certain statement (or statements). Below I identify the statement(s) by number and disclose the following circumstances:

Ellen Cohen — SIGNATURE

5/30/26 — DATE

Houston Forensic Science Center
Financial Conflict of Interest Disclosure Statement

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1. I, Joni Baird, have received a copy of and have read and understand the HFSC Financial Conflict of Interest Policy (the "Policy"). I agree to comply with the Policy.

2. If I have an actual or perceived conflict of interest (as defined in the Policy), I will promptly disclose it as required by the Policy.

3. I do not have, nor am I negotiating, a contract or transaction (as defined in the Policy) with HFSC for goods or services (other than any employment contract that may exist between HFSC and me), and this statement is true with regard to any family member of mine (as *family member* is defined in the Policy).

4. I do not have (nor does a family member have) a financial interest in a contract or transaction that exists or is being negotiated between HFSC and any entity in which *(a)* I am (or a family member is) a director, officer, agent, partner, associate, employee, trustee, or legal representative or *(b)* I am (or a family member is) engaged in some other capacity.

5. I am not (nor is a family member) engaged in any capacity with a business or enterprise that competes with HFSC nor do I or a family member have a financial interest in a business or enterprise that competes with HFSC.

6. I do not and will not engage in any business or financial activity that adversely affects or is detrimental to the best interests of HFSC.

7. I will not accept gifts, gratuities, entertainment, or other favors from individuals or entities when the party offering the gift, gratuity, entertainment or favor does so under circumstances that might create the perception that such action was intended to influence me in the performance of my HFSC duties.

Check one of the following:

☑ I agree with all of the statements in this Financial Conflict of Interest Disclosure Statement. My statements concerning my family members are made to the best of my knowledge.

☐ I cannot agree with a certain statement (or statements). Below I identify the statement(s) by number and disclose the following circumstances:

Joni Baird — 05/18/26

SIGNATURE — DATE

Houston Forensic Science Center
Financial Conflict of Interest Disclosure Statement

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1. I, Ana M. Vasquez, have received a copy of and have read and understand the HFSC Financial Conflict of Interest Policy (the "Policy"). I agree to comply with the Policy.

2. If I have an actual or perceived conflict of interest (as defined in the Policy), I will promptly disclose it as required by the Policy.

3. I do not have, nor am I negotiating, a contract or transaction (as defined in the Policy) with HFSC for goods or services (other than any employment contract that may exist between HFSC and me), and this statement is true with regard to any family member of mine (as *family member* is defined in the Policy).

4. I do not have (nor does a family member have) a financial interest in a contract or transaction that exists or is being negotiated between HFSC and any entity in which *(a)* I am (or a family member is) a director, officer, agent, partner, associate, employee, trustee, or legal representative or *(b)* I am (or a family member is) engaged in some other capacity.

5. I am not (nor is a family member) engaged in any capacity with a business or enterprise that competes with HFSC nor do I or a family member have a financial interest in a business or enterprise that competes with HFSC.

6. I do not and will not engage in any business or financial activity that adversely affects or is detrimental to the best interests of HFSC.

7. I will not accept gifts, gratuities, entertainment, or other favors from individuals or entities when the party offering the gift, gratuity, entertainment or favor does so under circumstances that might create the perception that such action was intended to influence me in the performance of my HFSC duties.

Check one of the following:

☑ I agree with all of the statements in this Financial Conflict of Interest Disclosure Statement. My statements concerning my family members are made to the best of my knowledge.

☐ I cannot agree with a certain statement (or statements). Below I identify the statement(s) by number and disclose the following circumstances:

Ana M. Vasquez — SIGNATURE

5-18-26 — DATE

Houston Forensic Science Center
Financial Conflict of Interest Disclosure Statement

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1. I, Scott Durfee, have received a copy of and have read and understand the HFSC Financial Conflict of Interest Policy (the "Policy"). I agree to comply with the Policy.

2. If I have an actual or perceived conflict of interest (as defined in the Policy), I will promptly disclose it as required by the Policy.

3. I do not have, nor am I negotiating, a contract or transaction (as defined in the Policy) with HFSC for goods or services (other than any employment contract that may exist between HFSC and me), and this statement is true with regard to any family member of mine (as *family member* is defined in the Policy).

4. I do not have (nor does a family member have) a financial interest in a contract or transaction that exists or is being negotiated between HFSC and any entity in which *(a)* I am (or a family member is) a director, officer, agent, partner, associate, employee, trustee, or legal representative or *(b)* I am (or a family member is) engaged in some other capacity.

5. I am not (nor is a family member) engaged in any capacity with a business or enterprise that competes with HFSC nor do I or a family member have a financial interest in a business or enterprise that competes with HFSC.

6. I do not and will not engage in any business or financial activity that adversely affects or is detrimental to the best interests of HFSC.

7. I will not accept gifts, gratuities, entertainment, or other favors from individuals or entities when the party offering the gift, gratuity, entertainment or favor does so under circumstances that might create the perception that such action was intended to influence me in the performance of my HFSC duties.

Check one of the following:

☑ I agree with all of the statements in this Financial Conflict of Interest Disclosure Statement. My statements concerning my family members are made to the best of my knowledge.

☐ I cannot agree with a certain statement (or statements). Below I identify the statement(s) by number and disclose the following circumstances:

9b09ad29-9d11-4fed-ad8e-1dbd4d6eaa13 Digitally signed by 9b09ad29-9d11-4fed-ad8e-1dbd4d6eaa13 Date: 2026.05.31 16:22:33 -05'00' 5/31/26

SIGNATURE DATE

Houston Forensic Science Center
Financial Conflict of Interest Disclosure Statement

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1. I, Jorn Yu, have received a copy of and have read and understand the HFSC Financial Conflict of Interest Policy (the "Policy"). I agree to comply with the Policy.

2. If I have an actual or perceived conflict of interest (as defined in the Policy), I will promptly disclose it as required by the Policy.

3. I do not have, nor am I negotiating, a contract or transaction (as defined in the Policy) with HFSC for goods or services (other than any employment contract that may exist between HFSC and me), and this statement is true with regard to any family member of mine (as *family member* is defined in the Policy).

4. I do not have (nor does a family member have) a financial interest in a contract or transaction that exists or is being negotiated between HFSC and any entity in which *(a)* I am (or a family member is) a director, officer, agent, partner, associate, employee, trustee, or legal representative or *(b)* I am (or a family member is) engaged in some other capacity.

5. I am not (nor is a family member) engaged in any capacity with a business or enterprise that competes with HFSC nor do I or a family member have a financial interest in a business or enterprise that competes with HFSC.

6. I do not and will not engage in any business or financial activity that adversely affects or is detrimental to the best interests of HFSC.

7. I will not accept gifts, gratuities, entertainment, or other favors from individuals or entities when the party offering the gift, gratuity, entertainment or favor does so under circumstances that might create the perception that such action was intended to influence me in the performance of my HFSC duties.

Check one of the following:

☑ I agree with all of the statements in this Financial Conflict of Interest Disclosure Statement. My statements concerning my family members are made to the best of my knowledge.

☐ I cannot agree with a certain statement (or statements). Below I identify the statement(s) by number and disclose the following circumstances:

Jorn Yu — Digitally signed by Jorn Yu Date: 2026.05.26 20:15:19 -05'00' — 05-26-2026

SIGNATURE DATE

Houston Forensic Science Center
Financial Conflict of Interest Disclosure Statement

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1. I, Asma Mirza, have received a copy of and have read and understand the HFSC Financial Conflict of Interest Policy (the "Policy"). I agree to comply with the Policy.

2. If I have an actual or perceived conflict of interest (as defined in the Policy), I will promptly disclose it as required by the Policy.

3. I do not have, nor am I negotiating, a contract or transaction (as defined in the Policy) with HFSC for goods or services (other than any employment contract that may exist between HFSC and me), and this statement is true with regard to any family member of mine (as *family member* is defined in the Policy).

4. I do not have (nor does a family member have) a financial interest in a contract or transaction that exists or is being negotiated between HFSC and any entity in which *(a)* I am (or a family member is) a director, officer, agent, partner, associate, employee, trustee, or legal representative or *(b)* I am (or a family member is) engaged in some other capacity.

5. I am not (nor is a family member) engaged in any capacity with a business or enterprise that competes with HFSC nor do I or a family member have a financial interest in a business or enterprise that competes with HFSC.

6. I do not and will not engage in any business or financial activity that adversely affects or is detrimental to the best interests of HFSC.

7. I will not accept gifts, gratuities, entertainment, or other favors from individuals or entities when the party offering the gift, gratuity, entertainment or favor does so under circumstances that might create the perception that such action was intended to influence me in the performance of my HFSC duties.

Check one of the following:

☑ I agree with all of the statements in this Financial Conflict of Interest Disclosure Statement. My statements concerning my family members are made to the best of my knowledge.

☐ I cannot agree with a certain statement (or statements). Below I identify the statement(s) by number and disclose the following circumstances:

Asma Mirza Digitally signed by Asma Mirza Date: 2026.06.05 11:21:47 -05'00' 06/01/2026

SIGNATURE DATE

Houston Forensic Science Center
Financial Conflict of Interest Disclosure Statement

This Houston Forensic Science Center ("HFSC") Financial Conflict of Interest Disclosure Statement is to be completed annually by all persons with decision-making authority regarding any HFSC contract or transaction. Completed forms should be submitted to the secretary of the Board of Directors by June 1 of each year.

1. I, Sonia Corrales, have received a copy of and have read and understand the HFSC Financial Conflict of Interest Policy (the "Policy"). I agree to comply with the Policy.

2. If I have an actual or perceived conflict of interest (as defined in the Policy), I will promptly disclose it as required by the Policy.

3. I do not have, nor am I negotiating, a contract or transaction (as defined in the Policy) with HFSC for goods or services (other than any employment contract that may exist between HFSC and me), and this statement is true with regard to any family member of mine (as *family member* is defined in the Policy).

4. I do not have (nor does a family member have) a financial interest in a contract or transaction that exists or is being negotiated between HFSC and any entity in which *(a)* I am (or a family member is) a director, officer, agent, partner, associate, employee, trustee, or legal representative or *(b)* I am (or a family member is) engaged in some other capacity.

5. I am not (nor is a family member) engaged in any capacity with a business or enterprise that competes with HFSC nor do I or a family member have a financial interest in a business or enterprise that competes with HFSC.

6. I do not and will not engage in any business or financial activity that adversely affects or is detrimental to the best interests of HFSC.

7. I will not accept gifts, gratuities, entertainment, or other favors from individuals or entities when the party offering the gift, gratuity, entertainment or favor does so under circumstances that might create the perception that such action was intended to influence me in the performance of my HFSC duties.

Check one of the following:

☑ I agree with all of the statements in this Financial Conflict of Interest Disclosure Statement. My statements concerning my family members are made to the best of my knowledge.

☐ I cannot agree with a certain statement (or statements). Below I identify the statement(s) by number and disclose the following circumstances:

_____

_____ 6/1/20

SIGNATURE DATE

Houston Forensic Science Center
Financial Conflict of Interest Disclosure Statement

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1. I, Vicki Huff, have received a copy of and have read and understand the HFSC Financial Conflict of Interest Policy (the "Policy"). I agree to comply with the Policy.

2. If I have an actual or perceived conflict of interest (as defined in the Policy), I will promptly disclose it as required by the Policy.

3. I do not have, nor am I negotiating, a contract or transaction (as defined in the Policy) with HFSC for goods or services (other than any employment contract that may exist between HFSC and me), and this statement is true with regard to any family member of mine (as *family member* is defined in the Policy).

4. I do not have (nor does a family member have) a financial interest in a contract or transaction that exists or is being negotiated between HFSC and any entity in which *(a)* I am (or a family member is) a director, officer, agent, partner, associate, employee, trustee, or legal representative or *(b)* I am (or a family member is) engaged in some other capacity.

5. I am not (nor is a family member) engaged in any capacity with a business or enterprise that competes with HFSC nor do I or a family member have a financial interest in a business or enterprise that competes with HFSC.

6. I do not and will not engage in any business or financial activity that adversely affects or is detrimental to the best interests of HFSC.

7. I will not accept gifts, gratuities, entertainment, or other favors from individuals or entities when the party offering the gift, gratuity, entertainment or favor does so under circumstances that might create the perception that such action was intended to influence me in the performance of my HFSC duties.

Check one of the following:

☑ I agree with all of the statements in this Financial Conflict of Interest Disclosure Statement. My statements concerning my family members are made to the best of my knowledge.

☐ I cannot agree with a certain statement (or statements). Below I identify the statement(s) by number and disclose the following circumstances:

Vicki Huff Digitally signed by Vicki Huff Date: 2026.05.18 16:45:46 -05'00'

SIGNATURE DATE

Houston Forensic Science Center
Financial Conflict of Interest Disclosure Statement

This Houston Forensic Science Center ("HFSC") Financial Conflict of Interest Disclosure Statement is to be completed annually by all persons with decision-making authority regarding any HFSC contract or transaction. Completed forms should be submitted to the secretary of the Board of Directors by June 1 of each year.

1. I, Christopher L. Tritico, have received a copy of and have read and understand the HFSC Financial Conflict of Interest Policy (the "Policy"). I agree to comply with the Policy.

2. If I have an actual or perceived conflict of interest (as defined in the Policy), I will promptly disclose it as required by the Policy.

3. I do not have, nor am I negotiating, a contract or transaction (as defined in the Policy) with HFSC for goods or services (other than any employment contract that may exist between HFSC and me), and this statement is true with regard to any family member of mine (as *family member* is defined in the Policy).

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5. I am not (nor is a family member) engaged in any capacity with a business or enterprise that competes with HFSC nor do I or a family member have a financial interest in a business or enterprise that competes with HFSC.

6. I do not and will not engage in any business or financial activity that adversely affects or is detrimental to the best interests of HFSC.

7. I will not accept gifts, gratuities, entertainment, or other favors from individuals or entities when the party offering the gift, gratuity, entertainment or favor does so under circumstances that might create the perception that such action was intended to influence me in the performance of my HFSC duties.

Check one of the following:

☑ I agree with all of the statements in this Financial Conflict of Interest Disclosure Statement. My statements concerning my family members are made to the best of my knowledge.

☐ I cannot agree with a certain statement (or statements). Below I identify the statement(s) by number and disclose the following circumstances:

f0e5ec6b-a4b1-4691-a26a-1c53bb8e655e
Digitally signed by f0e5ec6b-a4b1-4691-a26a-1c53bb8e655e
Date: 2026.08.10 17:23:18 -05'00'

SIGNATURE