LOCAL GOVERNMENT OFFICER FORM CIS CONFLICTS DISCLOSURE STATEMENT (Instructions for completing and filing this form are provided on the back.) OFFICE USE ONLY This is the notice to the appropriate local governmental entity that the following local government officer has become aware of facts that require Date Received the officer to file this statement in accordance with chapter 176, Local Government Code. Name of Local Government Officer Elaine E Shaw Office Held Trustee, Celeste 1.S.D. School Board Name of person described by Sections 176.002(a) and 176.003(a), Local Government Code Description of the nature and extent of employment or business relationship with person named in item 3 N/A List gifts if aggregate value of the gifts received from person named in item 3 exceed \$250 Date Gift Received _____ Description of Gift _____ Did Not Accept Gift Date Gift Received _____ Description of Gift _____ Did Not Accept Gift Date Gift Received _____ Description of Gift _____ Did Not Accept Gift (attach additional forms as necessary) **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 a 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 _____, 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