

**LOCAL GOVERNMENT OFFICER
CONFLICTS DISCLOSURE STATEMENT**

FORM CIS

(Instructions for completing and filing this form are provided on the back.)

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

1 Name of Local Government Officer

Pamela J. Crowe

2 Office Held

Buckholts ISD School Trustee

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

Buckholts State Bank

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

My husband and I own stock in the Buckholts State Bank and I am employed as a bookkeeper.

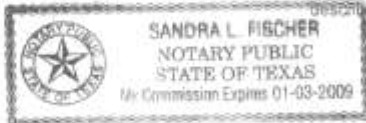
5 List gifts if aggregate value of the gifts received from person named in item 3 exceed \$250

- Date Gift Received _____ Description of Gift none 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)

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 a government officer. I also acknowledge that this statement covers the 12-month period defined by Section 176.003(a)(2)(b), Local Government Code.



Pamela J. Crowe
Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Pamela J. Crowe this the 23rd day of February 2006, to certify which, witness my hand and seal of office.

Sandra L. Fischer SANDRA L. FISCHER
Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath