

DISCLOSURE STATEMENT

ANNUAL CONFLICT OF INTEREST DISCLOSURE
MILLARD COUNTY

20 26

Amended 1/7/26
2:41 pm

Utah Code Annotated, Section 17-70-509

STATE OF UTAH)
COUNTY of MILLARD) : ss.

The undersigned, Shauna Nelson
415 E 450 N. Delta, UT 84624
(Name and address)

herby gives notice pursuant to Section 17-70-509, of Utah Code Annotated, as to the following:

- A. The name and address of each of the undersigned's current employers and each of the undersigned employers during the preceding year:

Intermountain Health - ~~Boaz~~

- B. A brief description of the employment described in section (A), including the undersigned's occupation and job title:

Home Health: Hospice Nurse

- C. The name of the undersigned's spouse and any other adult residing in the undersigned's household who is not related by blood or marriage, as applicable:

Bill G. Nelson

- D. The name and address of each of the undersigned's spouse's current employers and each of the undersigned employers during the preceding year:

Delta Valley Trucking

- E. A brief description of the employment and occupation of each adult who: resides in the undersigned's household and is not related to the undersigned by blood or marriage.

Truck Driver

- F. For each entity in which the undersigned is an owner or officer: the name of the entity, a brief description of the type of business or activity conducted by the entity, and the regulated officeholder's position in the entity:

n/a

- G. A list of each individual, from whom, or entity, from which, the undersigned has received \$5,000 or more in income during the preceding year: the name of the individual or entity and a brief description of the type of business or activity conducted by the individual or entity.

n/a

- H. For each entity in which the undersigned holds any stocks or bonds having a fair market value of \$5,000 or more as of the date of the disclosure form or during the preceding year, but excluding funds that are managed by a third party, including blind trusts, managed investment accounts, and mutual funds: the name of the entity and a brief description of the type of business or activity conducted by the entity:

n/a

- I. For each entity not listed above, in which the undersigned currently serves, or served in the preceding year, in a paid leadership capacity or in a paid or unpaid position on a board of directors: the name of the entity or organization, a brief description of the type of business or activity conducted by the entity, and the type of position held by the undersigned:

n/a

- J. (Optional) A description of any real property in which the regulated officeholder holds an ownership or other financial interest that the regulated officeholder believes may constitute a conflict of interest, including a description of the type of interest held by the regulated officeholder in the property:

n/a

K. (Optional) A description of any other matter or interest that the regulated officeholder believes may constitute a conflict of interest

Son-in-law is ^{Deputy} Millard County Attorney

The undersigned believes this form to be true and accurate to the best of the undersigned's knowledge.

DATED this 1/5/26 day of January, 2026

Shauna Nelson
Signature

SWORN TO this 5 day of January, 2026

Nadja Rmby
Notary Public/Clerk