

**LOCAL GOVERNMENT OFFICER  
CONFLICTS DISCLOSURE STATEMENT**

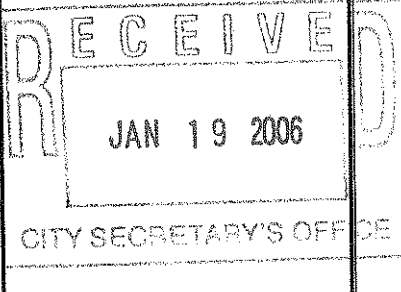
**FORM CIS**

(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

*Chester Nolen*

2 Office Held

*City Manager*

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

*Cleburne Independent School District*

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

*Sally D. Nolen / part time employee*

5 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)

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 described by Section 176.003(a)(2)(b), Local Government Code.

Signature of Local Government Officer

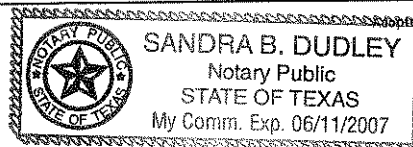
AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Chester R. Nolen, this the 19<sup>th</sup> day of January, 2006, to certify which, witness my hand and seal of office.

*Sandra B. Dudley*  
Signature of officer administering oath

*Sandra B. Dudley*  
Printed name of officer administering oath

*Notary Public*  
Title of officer administering oath



11/02/2005