

## **Please Return To:**

City Clerk's Office Lakewood Civic Center 480 S. Allison Parkway Lakewood, CO 80226-3127

Phone: 303-987-7080 Fax: 303-987-7088 TDD: 303-987-7057

## DISCLOSURE BY PUBLIC OFFICEHOLDER REPORT OF GIFTS, HONORARIA, AND OTHER BENEFITS

Filing Period:			☐ 3 <sup>rd</sup> Quarter (Due October 15)	
NAME OF OFFICE	HOLDER			
ADDRESS				
CITY/ZIP				
OFFICE HELD/WA	RD			
Check one of th  I have notl  OR-		se sign and date belo	ow)	
	the following gifts, h	nonoraria, or benefits	during this period:	
Name of person	n giving	Description	Date Received	Amount/Value
Name of person	n giving	Description	Date Received	\$
Name of person	n giving	Description	Date Received	\$
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