

City of Lakewood
City Clerk's Office
480 S. Allison Pkwy
Lakewood, CO 80226
Ph: (303) 987-7080
Fax: (303) 987-7088

Below Space for Office Use Only



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2009 JUN 30 A 8:09

DISCLOSURE BY PUBLIC OFFICEHOLDER
REPORT OF GIFTS, HONORARIA AND OTHER BENEFITS
(C.R.S. 24-6-203)

Jurisdiction: (required) State County Municipal

Filing: (required) 1st Quarter (due April 15) 2nd Quarter (due July 15) 3rd Quarter (due October 15) 4th Quarter (due January 15)

Name of Officeholder: Adam Paul (required) **Office Held/District:** Councilmember Ward 4 (required)

Address: 1937 S. Cole Ct. (required) **City:** Lakewood (required), **Colorado** **Zip:** 80228 (required)

1) Name of Person from Whom the Gift, Honoraria or Other Benefit Was Received:

Olson & Associates Amount/Value: \$ 60⁰⁰ Date Received: 6/16/09

Description: CM2 Dinner

2) Name of Person from Whom the Gift, Honoraria or Other Benefit Was Received:

Amount/Value: \$ _____ Date Received: _____

Description: _____

3) Name of Person from Whom the Gift, Honoraria or Other Benefit Was Received:

Amount/Value: \$ _____ Date Received: _____

Description: _____

4) Name of Person from Whom the Gift, Honoraria or Other Benefit Was Received:

Amount/Value: \$ _____ Date Received: _____

Description: _____

[Signature]
Signature of Officeholder
(required)

6/29/09
Date
(required)