

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



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: Debbie Koop (required) **Office Held/District:** City Council (required)

Address: 7301 W. Ellsworth Ave. (required) **City:** Lakewood (required), **Colorado** **Zip:** 80226 (required)

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

_____ **Amount/Value:** \$ 0 **Date Received:** _____

Description: _____

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

_____ **Amount/Value:** \$ 0 **Date Received:** _____

Description: _____

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

_____ **Amount/Value:** \$ 0 **Date Received:** _____

Description: _____

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

_____ **Amount/Value:** \$ 0 **Date Received:** _____

Description: _____

Debbie Koop
Signature of Officeholder
(required)

3/30/09
Date
(required)