

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)  1<sup>st</sup> Quarter (due April 15)  2<sup>nd</sup> Quarter (due July 15)  3<sup>rd</sup> Quarter (due October 15)  4<sup>th</sup> Quarter (due January 15)

**Name of Officeholder:** BOB MURPHY **Office Held/District:** MAYOR  
(required) (required)

**Address:** 480 S. ALLISON PKWY **City:** LAKEWOOD, Colorado **Zip:** 80215  
(required) (required) (required)

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

DR. JOHN WU Amount/Value: \$ 179 Date Received: 1/28/09

**Description:** (1) BOTTLE MARTELL COGNAC: DONATED ON 1/28/09 TO THE HERITAGE, CULTURE ARTS SILENT AUCTION. PICKED UP BY GEORGE ON 1/29 VALUCK

**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:** \_\_\_\_\_

Bob Murphy  
**Signature of Officeholder**  
(required)

3/30/09  
**Date**  
(required)