

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

RECEIVED
CITY OF LAKWOOD, CO
2009 OCT 19 P 12:58
CITY CLERK

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

Jurisdiction: State County Municipal
(required)

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

Name of Officeholder: DIANA ALLEN **Office Held/District:** CITY COUNCIL - WARD 5
(required) (required)

Address: 906 W. COLORADO PL **City:** LAKEWOOD **Colorado Zip:** 80232
(required) (required) (required)

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

Amount/Value: \$ _____ Date Received: _____
Description: _____

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: _____

Diana M Allen
Signature of Officeholder
(required)

10/15/09
Date
(required)