

2011 MAR 25 AM 1:46

Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)
 Flores José Guadalupe

1. Office, Agency, or Court

Agency Name
 City of Clovis, California
 Division, Board, Department, District, if applicable
 City Council
 Your Position
 Council Member
 ▶ If filing for multiple positions, list below or on an attachment.
 Agency: _____ Position: _____

2. Jurisdiction of Office (Check at least one box)

State Judge (Statewide Jurisdiction)
 Multi-County _____ County of _____
 City of Clovis, California Other _____

3. Type of Statement (Check at least one box)

Annual: The period covered is January 1, 2010, through December 31, 2010.
 -or-
 The period covered is ____/____/____, through December 31, 2010.
 Assuming Office: Date ____/____/____
 Leaving Office: Date Left ____/____/____ (Check one)
 The period covered is January 1, 2010, through the date of leaving office.
 The period covered is ____/____/____, through the date of leaving office.
 Candidate: Election Year _____ Office sought, if different than Part 1: _____

4. Schedule Summary

Check applicable schedules or "None."
 ▶ Total number of pages including this cover page: 2
 Schedule A-1 - Investments - schedule attached
 Schedule A-2 - Investments - schedule attached
 Schedule B - Real Property - schedule attached
 Schedule C - Income, Loans, & Business Positions - schedule attached
 Schedule D - Income - Gifts - schedule attached
 Schedule E - Income - Gifts - Travel Payments - schedule attached
 -or-
 None - No reportable interests on any schedule



I certify under penalty of perjury under the laws of the State of California that

Date Signed 02/28/2011 Signatu
 (month, day, year)

SCHEDULE D
Income – Gifts

Name
 José G. Flores

▶ NAME OF SOURCE
Clovis Rodeo Association
 ADDRESS (Business Address Acceptable)
P.O. Box 217, Clovis, CA 93613
 BUSINESS ACTIVITY, IF ANY, OF SOURCE
Non- Profit Rodeo Association

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>04 / 01 / 10</u>	<u>\$ 160.00</u>	<u>Tickets to Rodeo</u>
<u> / / </u>	<u>\$ </u>	<u> </u>
<u> / / </u>	<u>\$ </u>	<u> </u>

▶ NAME OF SOURCE
California State University, Fresno
 ADDRESS (Business Address Acceptable)
1530 E. Shaw Avenue, Fresno, CA 93710
 BUSINESS ACTIVITY, IF ANY, OF SOURCE
Public University

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>08 / 01 / 10</u>	<u>\$ 160.00</u>	<u>Campus Parking Pass</u>
<u> / / </u>	<u>\$ </u>	<u> </u>
<u> / / </u>	<u>\$ </u>	<u> </u>

▶ NAME OF SOURCE
Bulldog Sports Properties
 ADDRESS (Business Address Acceptable)
1510 E. Shaw Ave., Suite #101, Fresno, CA 93710
 BUSINESS ACTIVITY, IF ANY, OF SOURCE
College Sports Marketing Company

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>10 / 09 / 10</u>	<u>\$ 200.00</u>	<u>4 Football Tickets</u>
<u> / / </u>	<u>\$ </u>	<u> </u>
<u> / / </u>	<u>\$ </u>	<u> </u>

▶ NAME OF SOURCE

 ADDRESS (Business Address Acceptable)

 BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u> / / </u>	<u>\$ </u>	<u> </u>
<u> / / </u>	<u>\$ </u>	<u> </u>
<u> / / </u>	<u>\$ </u>	<u> </u>

▶ NAME OF SOURCE

 ADDRESS (Business Address Acceptable)

 BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u> / / </u>	<u>\$ </u>	<u> </u>
<u> / / </u>	<u>\$ </u>	<u> </u>
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<u> / / </u>	<u>\$ </u>	<u> </u>
<u> / / </u>	<u>\$ </u>	<u> </u>

Comments: _____