

COVER PAGE

RECEIVED

2010 Public Document

2010 DEC 21 PM 3:41

Please type or print in ink.

NAME (LAST)	(FIRST)	(MIDDLE)	CITY
OLIVIER	CLINTON	JAMES	
MAILING ADDRESS	STREET	CITY	STATE ZIP CODE

1. Office, Agency, or Court

Name of Office, Agency, or Court:
FRESNO City Council

Division, Board, District, if applicable:
DISTRICT 7 COUNCIL MEMBER

Your Position:
Council Member

► If filing for multiple positions, list additional agency(ies)/ position(s): (Attach a separate sheet if necessary.)

Agency: _____

Position: _____

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

State

County of _____

City of FRESNO

Multi-County _____

Other _____

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

Assuming Office/Initial Date: 12, 2, 2010

Annual: The period covered is January 1, 2009, through December 31, 2009.

-or-

The period covered is ____/____/____, through December 31, 2009.

Leaving Office Date Left: ____/____/____ (Check one)

The period covered is January 1, 2009, through the date of leaving office.

-or-

The period covered is ____/____/____, through the date of leaving office.

Candidate Election Year: _____

4. Schedule Summary

► Total number of pages including this cover page: 3

► Check applicable schedules or "No reportable interests."

I have disclosed interests on one or more of the attached schedules:

Schedule A-1 Yes - schedule attached
Investments (Less than 10% Ownership)

Schedule A-2 Yes - schedule attached
Investments (10% or Greater Ownership)

Schedule B Yes - schedule attached
Real Property

Schedule C Yes - schedule attached
Income, Loans, & Business Positions (Income Other than Gifts and Travel Payments)

Schedule D Yes - schedule attached
Income - Gifts

Schedule E Yes - schedule attached
Income - Gifts - Travel Payments

-or-

No reportable interests on any schedule

5. Verification

I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information contained herein and in any attached schedules is true and complete.

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date Signed: 12-21-2010

Signature: _____

SCHEDULE C
Income, Loans, & Business
Positions
 (Other than Gifts and Travel Payments)

CALIFORNIA FORM 700
 FAIR POLITICAL PRACTICES COMMISSION

Name
Clinton J Olivier

1. INCOME RECEIVED

NAME OF SOURCE OF INCOME
Alisha Olivier (wife)

ADDRESS (Business Address Acceptable)
1777 B Street Fresno, CA

BUSINESS ACTIVITY, IF ANY, OF SOURCE
Primary employment

YOUR BUSINESS POSITION
Assignment Editor, ABC News

GROSS INCOME RECEIVED
 \$500 - \$1,000 \$1,001 - \$10,000
 \$10,001 - \$100,000 OVER \$100,000

CONSIDERATION FOR WHICH INCOME WAS RECEIVED
 Salary Spouse's or registered domestic partner's income
 Loan repayment
 Sale of _____
(Property, car, boat, etc.)
 Commission or Rental Income, list each source of \$10,000 or more
 Other _____
(Describe)

1. INCOME RECEIVED

NAME OF SOURCE OF INCOME

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

YOUR BUSINESS POSITION

GROSS INCOME RECEIVED
 \$500 - \$1,000 \$1,001 - \$10,000
 \$10,001 - \$100,000 OVER \$100,000

CONSIDERATION FOR WHICH INCOME WAS RECEIVED
 Salary Spouse's or registered domestic partner's income
 Loan repayment
 Sale of _____
(Property, car, boat, etc.)
 Commission or Rental Income, list each source of \$10,000 or more
 Other _____
(Describe)

2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PERIOD

* You are not required to report loans from commercial lending institutions, or any indebtedness created as part of a retail installment or credit card transaction, made in the lender's regular course of business on terms available to members of the public without regard to your official status. Personal loans and loans received not in a lender's regular course of business must be disclosed as follows:

NAME OF LENDER*
Roman Olivier (Father)

INTEREST RATE
 _____ % None

TERM (Months/Years)
n/a

ADDRESS (Business Address Acceptable)
5160 E. Atherton St. #71 Long Beach CA 90815

SECURITY FOR LOAN
 None Personal residence
 Real Property _____
Street address

City
 Guarantor _____
 Other _____
(Describe)

BUSINESS ACTIVITY, IF ANY, OF LENDER
n/a

HIGHEST BALANCE DURING REPORTING PERIOD
 \$500 - \$1,000
 \$1,001 - \$10,000
 \$10,001 - \$100,000
 OVER \$100,000

Comments: _____

RECEIVED
 SCHEDULE D
 Income - Gifts
 2011 JAN 10 AM 9:01

CALIFORNIA FORM 700
 FAIR POLITICAL PRACTICES COMMISSION

Name
Clinton J Olivier

▶ NAME OF SOURCE
Fresno Art Museum
 ADDRESS (Business Address Acceptable)
2233 N. First St.
 BUSINESS ACTIVITY, IF ANY, OF SOURCE
Fresno, CA 93703

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
___/___/___	\$ 75 ⁰⁰	Museum membership
11/13/10	\$ 170 ⁰⁰	Art Show
___/___/___	\$	

▶ NAME OF SOURCE

 ADDRESS (Business Address Acceptable)

 BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
___/___/___	\$	
___/___/___	\$	
___/___/___	\$	

▶ NAME OF SOURCE
Atot
 ADDRESS (Business Address Acceptable)
5555 E. Olive #108
 BUSINESS ACTIVITY, IF ANY, OF SOURCE
Fresno CA 93727

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
10/28/10	\$ 40.00	Fresno EDC Luncheon
9/9/10	\$ 225.00	Maddy Tribute Dinner
___/___/___	\$	

▶ NAME OF SOURCE

 ADDRESS (Business Address Acceptable)

 BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
___/___/___	\$	
___/___/___	\$	
___/___/___	\$	

▶ NAME OF SOURCE
FPOA (Vim Stoppers)
 ADDRESS (Business Address Acceptable)
994 N. Van Ness
 BUSINESS ACTIVITY, IF ANY, OF SOURCE
Fresno, 93728

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
9/26/10	\$ 159 ⁰⁰	golf tournament tickets
___/___/___	\$	
___/___/___	\$	

▶ NAME OF SOURCE

 ADDRESS (Business Address Acceptable)

 BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
___/___/___	\$	
___/___/___	\$	
___/___/___	\$	

Comments: _____

TP

RECEIVED
2011 APR -8 PM 2:23
CITY CLERK, FRESNO CA

SCHEDULE D
Income - Gifts

▶ NAME OF SOURCE
Fresno Art Museum

ADDRESS (Business Address Acceptable)
2233 N. First St.

BUSINESS ACTIVITY, IF ANY, OF SOURCE
Fresno, CA 93703

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>10, 31, 10</u>	<u>\$ 75⁰⁰</u>	<u>MUSEUM membership</u>
	\$	
	\$	

▶ NAME OF SOURCE

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

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

▶ NAME OF SOURCE

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

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

▶ NAME OF SOURCE

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

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

▶ NAME OF SOURCE

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

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

Verification

Print Name Clinton J. Oliver

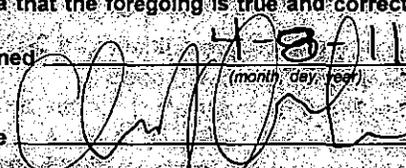
Office, Agency or Court Fresno City Council

Statement Type
 2009/2010 Annual
 Annual (yr)
 Assuming Candidate
 Leaving

I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information contained herein and in any attached schedules is true and complete.

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date Signed 4/8/11
(month, day, year)

Signature 

RECEIVED
FAIR POLITICAL PRACTICES COMMISSION
11 APR 15 PM 2:43

Comments: