

STATEMENT OF ECONOMIC INTERESTS

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CITY (MIDDLE) TORRANCE
CITY CLERK'S OFFICE
Ira

Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)
Numark Cliff Ira

1. Office, Agency, or Court

Agency Name
City of Torrance
Division, Board, Department, District, if applicable
Your Position
City Councilman

► 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 Torrance 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 ____/____/____
- Candidate: Election Year _____ Office sought, if different than Part 1: _____
- 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.

4. Schedule Summary

Check applicable schedules or "None."

► Total number of pages including this cover page: 3

- 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



herein and in any attached schedules is true and complete. I acknowledge this is
I certify under penalty of perjury under the laws of the State of California that

Date Signed March 27, 2011
(month, day, year)

Signature

SCHEDULE D
Income – Gifts

Name
 Cliff Numark

▶ NAME OF SOURCE
Gavin and Linda Wasserman
 ADDRESS (Business Address Acceptable)
1230 Crenshaw Blvd., Torrance, CA 90501
 BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>02 / 01 / 10</u>	<u>\$ 50</u>	<u>Baby gifts</u>
<u> / / </u>	<u>\$</u>	<u></u>
<u> / / </u>	<u>\$</u>	<u></u>

▶ NAME OF SOURCE
Jill Nishi and Howard Nakase
 ADDRESS (Business Address Acceptable)
6507 39th Avenue NE, Seattle, WA 98102
 BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>01 / 15 / 10</u>	<u>\$ 75</u>	<u>Baby clothes</u>
<u> / / </u>	<u>\$</u>	<u></u>
<u> / / </u>	<u>\$</u>	<u></u>

▶ NAME OF SOURCE
Torrance Police Officers Association
 ADDRESS (Business Address Acceptable)
22945 Arlington Ave., Torrance, CA 90501
 BUSINESS ACTIVITY, IF ANY, OF SOURCE
Association

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>02 / 25 / 10</u>	<u>\$ 100</u>	<u>Gift Card - for Baby</u>
<u> / / </u>	<u>\$</u>	<u></u>
<u> / / </u>	<u>\$</u>	<u></u>

▶ NAME OF SOURCE
Laborer's International Union of North America
 ADDRESS (Business Address Acceptable)
11135 Trade Ctr Dr, #100 Rancho Cordova CA95670
 BUSINESS ACTIVITY, IF ANY, OF SOURCE
Union

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>04 / 17 / 10</u>	<u>\$ 60</u>	<u>Ticket to policy lunch</u>
<u> / / </u>	<u>\$</u>	<u></u>
<u> / / </u>	<u>\$</u>	<u></u>

▶ NAME OF SOURCE
Paul Sullivan
 ADDRESS (Business Address Acceptable)
209 Farmington Ave., Farmington, CT 06032
 BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>01 / 31 / 10</u>	<u>\$ 60</u>	<u>Lincoln plaque-Baby</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>

Comments: Donated \$100 to Torrance Education Fund after receipt of TPOA gift.