

STATEMENT OF ECONOMIC INTERESTS

Received

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ADMN/CITYMGR

COVER PAGE
PRACTICES COMMISSION



Please type or print in ink.

NAME OF FILER (LAST) Whalen (FIRST) Bob (MIDDLE) Michael, Jr.

1. Office, Agency, or Court

Agency Name

City of Clovis

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, Multi-County, City of Clovis, Judge or Court Commissioner, County of, Other

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

- Annual, Leaving Office, Assuming Office, Candidate

4. Schedule Summary

- Schedule A-1, A-2, B, C, D, E, None - No reportable interests on any schedule



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

Date Signed 3/22/13 (month, day, year)

SCHEDULE D
Income - Gifts

▶ NAME OF SOURCE (Not an Acronym)
Clarks Rodeo Association
 ADDRESS (Business Address Acceptable)
748 Rodeo Drive, Clovis, CA 93612
 BUSINESS ACTIVITY, IF ANY, OF SOURCE
Rodeo

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>4/26/12</u>	<u>\$ 175</u>	<u>Tickets</u>
____/____/____	\$ _____	_____
____/____/____	\$ _____	_____

▶ NAME OF SOURCE (Not an Acronym)

 ADDRESS (Business Address Acceptable)

 BUSINESS ACTIVITY, IF ANY, OF SOURCE

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

▶ NAME OF SOURCE (Not an Acronym)

 ADDRESS (Business Address Acceptable)

 BUSINESS ACTIVITY, IF ANY, OF SOURCE

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

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 BUSINESS ACTIVITY, IF ANY, OF SOURCE

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

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

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

Comments: _____