

A0204

STATEMENT OF ECONOMIC INTERESTS

Date Received  
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COVER PAGE



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Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)  
Carrigan Nicole

1. Office, Agency, or Court

Agency Name (Do not use acronyms)

City of Calipatria

Division, Board, Department, District, if applicable

City Council

Your Position

Councilmember

► If filing for multiple positions, list below or on an attachment. (Do not use acronyms)

Agency: \_\_\_\_\_

Position: \_\_\_\_\_

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

State

Judge or Court Commissioner (Statewide Jurisdiction)

Multi-County \_\_\_\_\_

County of \_\_\_\_\_

City of \_\_\_\_\_

Other \_\_\_\_\_

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

Annual: The period covered is January 1, 2013, through December 31, 2013.

Leaving Office: Date Left \_\_\_\_/\_\_\_\_/\_\_\_\_  
(Check one)

-or-  
The period covered is \_\_\_\_/\_\_\_\_/\_\_\_\_, through December 31, 2013.

The period covered is January 1, 2013, through the date of leaving office.

Assuming Office: Date assumed 02 / 25 / 2014

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

Candidate: Election year \_\_\_\_\_ and office sought, if different than Part 1: \_\_\_\_\_

4. Schedule Summary

Check applicable schedules or "None."

► Total number of pages including this cover page: \_\_\_\_\_

Schedule A-1 - Investments - schedule attached

Schedule C - Income, Loans, & Business Positions - schedule attached

Schedule A-2 - Investments - schedule attached

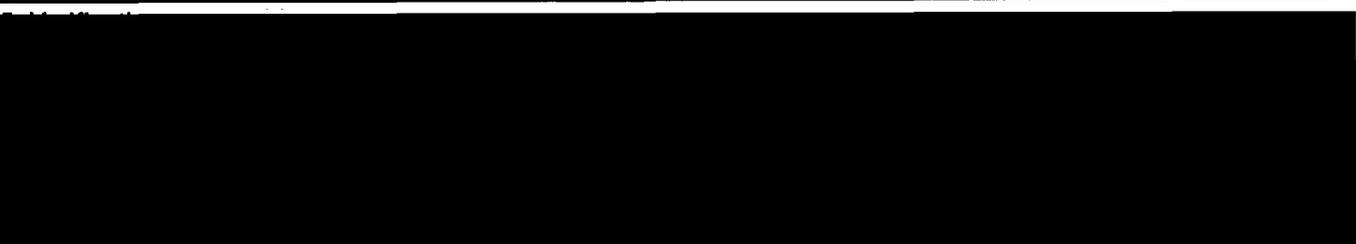
Schedule D - Income - Gifts - schedule attached

Schedule B - Real Property - 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 the information provided on this form 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 information provided on this form and in any attached schedules is true and complete.

Date Signed 03/25/2014  
(month, day, year)

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2