

STATEMENT OF ECONOMIC INTERESTS
COVER PAGE

Date Received
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Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)
Gipson Mike Anthony

1. Office, Agency, or Court

Agency Name (Do not use acronyms)
City of Carson
Division, Board, Department, District, if applicable
Your Position
City Council/Successor Agency/Housing Authority Council/Agency/Authority Board Member

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

Agency: South-Bay Council of Government Position: Board Member (Alternate)

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

- State
- Multi-County _____
- City of Carson
- Judge or Court Commissioner (Statewide Jurisdiction)
- County of _____
- Other _____

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

- Annual:** The period covered is January 1, 2013, through December 31, 2013.
-or-
The period covered is 01 / 01 / 2013, through December 31, 2013.
- Assuming Office:** Date assumed _____
- Candidate:** Election year _____ and office sought, if different than Part 1: _____
- Leaving Office:** Date Left _____ (Check one)
 - The period covered is January 1, 2013, 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

5. Verification



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

Date Signed 01/06/2014
(month, day, year)

SCHEDULE D Income – Gifts

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION

Name

Mike A. Gipson

▶ NAME OF SOURCE (Not an Acronym)
Cal Water Service Company

ADDRESS (Business Address Acceptable)
2632 West 237th street Torrance Ca

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>11 / 15 / 13</u>	<u>\$ 400.00</u>	<u>Turkey Vouchers</u>
<u> / / </u>	<u>\$ </u>	<u> </u>
<u> / / </u>	<u>\$ </u>	<u> </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)
<u> / / </u>	<u>\$ </u>	<u> </u>
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Comments: _____