

COVER PAGE

City of Riverside
City Clerk's Office

Please type or print in ink.

CG

NAME OF FILER (LAST) Michael (FIRST) Philip (MIDDLE) Soubirous

1. Office, Agency, or Court

Agency Name (Do not use acronyms)

Riverside City Council

Division, Board, Department, District, if applicable

Ward 3

Your Position

Councilmember

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

Agency: N/A

Position:

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

- State
- Multi-County _____
- City of Riverside
- 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, 2014, through December 31, 2014.
- or-
- The period covered is ____/____/____, through December 31, 2014.
- Assuming Office:** Date assumed ____/____/____
- Candidate:** Election year 2015 and office sought, if different than Part 1: _____
- Leaving Office:** Date Left ____/____/____ (Check one)
- The period covered is January 1, 2014, through the date of leaving office.
- The period covered is ____/____/____, through the date of leaving office.

4. Schedule Summary

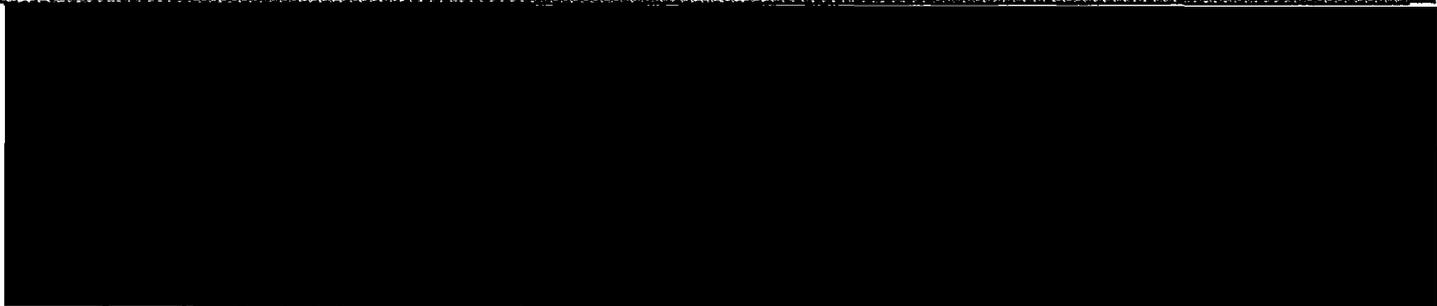
Check applicable schedules or "None."

► Total number of pages including this cover page: 4

- 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



Date Signed March 1, 2015
(month, day, year)

**SCHEDULE D
 Income – Gifts**

▶ NAME OF SOURCE (Not an Acronym)
 Greater Riverside Chambers of Commerce

ADDRESS (Business Address Acceptable)
 3985 University Avenue, Riverside, CA 92501

BUSINESS ACTIVITY, IF ANY, OF SOURCE
 Chamber of Commerce - Board installation

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
3 / 27 / 14	\$ 220.00	Admission for 2 to gala
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

▶ NAME OF SOURCE (Not an Acronym)
 Building Industry Association

ADDRESS (Business Address Acceptable)
 3891 11th Street, Riverside, CA 92501

BUSINESS ACTIVITY, IF ANY, OF SOURCE
 Legislative Affairs update luncheon

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
3 / 7 / 14	\$ 25.00	Legislative Luncheon
10 / 8 / 14	\$ 25.00	Legislative Luncheon
12 / 10 / 14	\$ 25.00	Legislative Luncheon

▶ NAME OF SOURCE (Not an Acronym)
 Howard Boylan

ADDRESS (Business Address Acceptable)
 5454 Apricot Lane, Riverside CA 92506-3343

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
1 / 21 / 14	\$ 55.00	Dinner at Victoria Club
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

▶ 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)
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

▶ 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)
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

Comments: _____