[ms-0398.005.003.001]

CONSOLIDATED CAMPAIGN STATEMENT

(Government Code Sections 84200-84217)

Type or Print in Ink

FORM 490
1986

Statement covers period 7/1/86 through 12/31/86

RECEIVED
JAN 23 9 16 AM '87
COUNTY OF SAN DIEGO
REGISTRAR OF VOTERS
BY A DEPUTY

CHECK ONE OF THE FOLLOWING BOXES TO INDICATE THE TYPE OF STATEMENT BEING FILED.

- [X] 1ST SEMI-ANNUAL STATEMENT
- [X] 2ND SEMI-ANNUAL STATEMENT
- [ ] SUPPLEMENTAL PRE-ELECTION STATEMENT (If filing a Supplemental Pre-Election Statement, you must complete Form 495 and attach it to this statement.)
- [ ] 1ST PRE-ELECTION STATEMENT
- [ ] 2ND PRE-ELECTION STATEMENT

DATE OF ELECTION (MO., DAY, YR.) (IF APPLICABLE): June, 1990

TOTAL PAGES: 8

OFFICIAL USE ONLY

I CANDIDATE/OFFICEHOLDER INCLUDED IN THIS CONSOLIDATED REPORT

NAME OF CANDIDATE: Leon Lawson Williams

OFFICE SOUGHT OR HELD (Include location and district number if applicable): Fourth Supervisorial District

RESIDENTIAL ADDRESS: NO. AND STREET: 3024 E Street | CITY: San Diego | STATE: Calif. | ZIP CODE: 92102 | AREA CODE / PHONE NUMBER: (619) 234-5544

BUSINESS ADDRESS: NO. AND STREET: 1600 Pacific Highway | CITY: San Diego | STATE: Calif. | ZIP CODE: 92101 | AREA CODE / PHONE NUMBER: (619) 236-4444

II CONTROLLED COMMITTEES* INCLUDED IN THIS CONSOLIDATED REPORT

NAME OF COMMITTEE: Citizens for Leon Williams | I.D. NUMBER: 810934

ADDRESS OF COMMITTEE: NO. AND STREET: Post Office Box 33568 | CITY: San Diego | STATE: Calif. | ZIP CODE: 92103 | AREA CODE / PHONE NUMBER:

NAME OF TREASURER: William Grote

PERMANENT ADDRESS OF TREASURER: NO. AND STREET: 4743 Mountainbrook Road | CITY: Santa Ysabel | STATE: Calif. | ZIP CODE: 92070 | AREA CODE/ BUSINESS PHONE NUMBER: (619)765-2520

NAME OF COMMITTEE: | I.D. NUMBER:

ADDRESS OF COMMITTEE: NO. AND STREET | CITY | STATE | ZIP CODE | AREA CODE / PHONE NUMBER

NAME OF TREASURER:

PERMANENT ADDRESS OF TREASURER: NO. AND STREET | CITY | STATE | ZIP CODE | AREA CODE / BUSINESS PHONE NUMBER

** A controlled committee is one which is controlled directly or indirectly by a candidate or which acts jointly with a candidate or controlled committee in connection with the making of expenditures. A candidate controls a committee if the candidate, the candidate's agent, or any other committee he or she controls, has significant influence on the actions or decisions of the committee.*

Attach additional information or appropriately labeled continuation sheets.

III CANDIDATE/OFFICEHOLDER ONLY: LIST ANY OTHER COMMITTEES NOT INCLUDED IN THIS CONSOLIDATED STATEMENT WHICH ARE CONTROLLED BY YOU OR ARE PRIMARILY FORMED TO RECEIVE CONTRIBUTIONS OR MAKE EXPENDITURES ON BEHALF OF YOUR CANDIDACY.

COMMITTEE NAME AND I.D. NUMBER	COMMITTEE ADDRESS	TREASURER	CONTROLLED COMMITTEE? YES	NO

Attach additional information on appropriately labeled continuation sheets.

VERIFICATION

I have used all reasonable diligence in preparing this Statement. I have reviewed the Statement and to the best of my knowledge the information contained herein and in the attached schedules is true and complete.

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

Executed on January 26 1987 (DATE) at Santa Ysabel Calif. (CITY AND STATE) by William Grote (SIGNATURE OF TREASURER)

Executed on _____ (DATE) at _____ (CITY AND STATE) by _____ (SIGNATURE OF TREASURER)

I have used all reasonable diligence and to the best of my knowledge the treasurer has used all reasonable diligence in preparing this Statement. I have reviewed the Statement and to the best of my knowledge the information contained herein and in the attached schedules is true and complete.

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

Executed on 1/28/87 (DATE) at San Diego, Calif (CITY AND STATE) by [signature] (SIGNATURE OF CANDIDATE OR OFFICEHOLDER)

For information required to be provided to you pursuant to the Information Practices Act of 1977, see "Information Manual on Campaign Disclosure Provisions of the Political Reform Act."

STATEMENT COVERS PERIOD FROM	THROUGH
7/1/86	12/31/86

NAME OF COMMITTEE: Citizens for Leon Williams

I.D. NUMBER: 810934

IV ALLOCATION OF CONTRIBUTIONS AND EXPENDITURES MADE TO OR ON BEHALF OF OTHER CANDIDATES, OFFICEHOLDERS AND MEASURES (Allocate expenditures from Schedules E, EE & F made to or on behalf of another candidate, officeholder or measure. Amounts may be rounded off to whole dollars.)

DATE	IND EXP*	NAME OF CANDIDATE OR OFFICEHOLDER AND OFFICE OR MEASURE AND BALLOT NUMBER OR LETTER	CHECK ONE SUPPORT	CHECK ONE OPPOSE	AMOUNT	CUMULATIVE TO DATE
8/29/86		Tom Bradley (Friends of)	X		200	200
10/1/86		Tom Bradley (Friends of)	X		50	250
10/13/86	X	New Democratic Business Associates	X		250	250
10/22/86	X	California Leadership Fund	X		250	250

Attach additional information on appropriately labeled continuation sheets.

*Check box if "independent expenditure." (See instructions below.)

INSTRUCTIONS FOR PREPARING COVER PAGE

CONSOLIDATED CAMPAIGN STATEMENT FORM 490

PERIOD COVERED BY STATEMENT:
The period covered begins the day after the closing date of the last campaign statement filed. If no previous statement has been filed, the period begins on January 1 of the current calendar year. (See exceptions to calendar year cumulation and information concerning the closing date in the "Information Manual on Campaign Disclosure Provisions of the Political Reform Act.")

DATE OF ELECTION:
If this statement is filed in connection with an election held on a date other than June 3 or November 4, enter the date of the election.

PART I:
Provide the candidate's or officeholder's full name, residential address, business address and telephone numbers, and the office sought or held.

PART II:
Identify the controlled committee(s) included in the consolidated report and the treasurer(s) of the committee(s). Use the full name(s) of the committee(s) as they appear on the Statement(s) of Organization filed with the Secretary of State. A permanent business or residential address and telephone number(s) must be provided for the treasurer(s). The identification number(s) must be included. (If not yet received from the Secretary of State's office, that fact must be noted.) NOTE: You must provide a telephone number where the treasurer(s) can be reached during business hours.

PART III:
The candidate or officeholder must list all additional committees not included in this consolidated report which are controlled by the candidate or officeholder or are primarily formed to receive contributions or make expenditures on the candidate's behalf and indicate whether or not they are controlled committees.

VERIFICATION:
The statement must be signed by each committee treasurer included in the consolidated report and by the candidate or officeholder who controls the committee. The treasurer and candidate or officeholder must review the information contained in the statement before signing the verification.

ALLOCATION OF CONTRIBUTIONS AND EXPENDITURES MADE TO OR ON BEHALF OF OTHER CANDIDATES, OFFICEHOLDERS AND MEASURES:
List all contributions (including loans) and independent expenditures itemized on Schedules E, EE and F to support or oppose officeholders, candidates, and ballot measures (other than those controlling this committee or for which this committee is primarily formed). Also list in-kind contributions and independent expenditures which involve goods or services provided to or on behalf of a candidate or committee when a payment is not made (e.g., employee services, in-house printing, etc.) A description of the goods or services must also be provided. Indicate the date of the expenditure; if the expenditure is an independent expenditure (an expenditure not made at the behest of the candidate or a committee primarily formed to support or oppose the candidate or measure on whose behalf it is made) **check the box.** Also indicate the office sought or held (or the measure's number or letter and the jurisdiction); the amount of the expenditure; and the cumulative amount to date. The "Cumulative to Date" column should include the total of expenditures for or against each candidate or measure since January 1 of the current calendar year. (See "Information Manual on Campaign Disclosure Provisions of the Political Reform Act" for discussion and examples of "cumulative amount.")

CAMPAIGN DISCLOSURE STATEMENT SUMMARY PAGE

FORM 420, 430 OR 490

(Amounts May Be Rounded To Whole Dollars)

STATEMENT COVERS PERIOD FROM 7/1/86 THROUGH 12/31/86

NAME OF CANDIDATE OR COMMITTEE: Citizens for Leon Williams

I.D. NUMBER (IF COMMITTEE): 810934

	COLUMN A Cumulative total from previous period*	COLUMN B Total this period from attached schedules	COLUMN C Cumulative to date (Columns A + B)
CONTRIBUTIONS RECEIVED			
1. Monetary contributions	$ 23,302	$ 171 (SCHEDULE A, LINE 3)	$ 23,473
2. Loans	-0-	-0- (SCHEDULE B, LINE 3)	-0-
3. Subtotal	$ 23,302 (LINES 1 + 2)	$ 171 (LINES 1 + 2)	$ 23,473 (LINES 1 + 2)
4. Non-monetary contributions	35	45 (SCHEDULE C, LINE 3)	80
5. Pledges	-0-	-0- (SCHEDULE D, LINE 7)	-0-
6. TOTAL CONTRIBUTIONS	$ 23,337 (LINES 3 + 4 + 5)	$ 186 (LINES 3 + 4 + 5)	$ 23,553 (LINES 3 + 4 + 5 (SHOULD EQUAL COLUMNS A + B))
EXPENDITURES MADE			
7. Payments	$ 13,072	$ 5466 (SCHEDULE E, LINE 3)	$ 18,368
8. Accrued expenses (unpaid bills)	-0-	-0- (SCHEDULE F, LINE 3)	-0-
9. TOTAL EXPENDITURES	$ 13,072 (LINES 7 + 8)	$ 5466 (LINES 7 + 8)	$ 18,368 (LINES 7 + 8 (SHOULD EQUAL COLUMNS A + B))

STATEMENT OF CHANGES IN FINANCIAL CONDITION

10. Cash on hand at the beginning of this period	$ 8595	
11. Cash receipts this period (Line 3, Column B above)	186	
12. Miscellaneous adjustments to cash (Schedule G, Line 7)	72	
13. Cash payments this period (Line 7, Column B above)	5466	
14. Cash on hand at closing date (Lines 10+11+12-13 above)	3387	
15. Outstanding debts (Line 2 + Line 8 of Column C above)	-0-	
** 16. Ending surplus (if Line 14 is greater than Line 15, subtract Line 15 from Line 14)		$ 3387
17. Ending deficit (if Line 15 is greater than Line 14, subtract Line 14 from Line 15)		$ ( )

If this is the first report filed for the calendar year, Column A should be blank except for unpaid loans, bills and pledges.

SUMMARY OF JUNE AND NOVEMBER ELECTIONS *(See Instructions on Reverse)*

	1/1 thru 6/30	7/1 to date
18. CONTRIBUTIONS RECEIVED:		
19. EXPENDITURES MADE:		

**See statement Schedule G

SCHEDULE A

MONETARY CONTRIBUTIONS RECEIVED
FORM 420, 430 OR 490

(Amounts May Be Rounded To Whole Dollars)

STATEMENT COVERS PERIOD FROM 7/1/86 THROUGH 12/31/86

NAME OF CANDIDATE OR COMMITTEE: Citizens for Leon Williams

I.D. NUMBER (IF COMMITTEE) 810934

DATE REC'D	FULL NAME AND ADDRESS OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER OR TREASURER'S NAME AND ADDRESS)	OCCUPATION	EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED	AMOUNT CUMULATIVE TO DATE
7/16/86	James E. Stoddart,MD 3719-6th Ave. San Diego,Ca.92101	Physician	Self	100	100
			SUBTOTAL	100	

☐ If more space is needed, check box at left and attach additional Schedules A.

SUMMARY

1. AMOUNT RECEIVED — CONTRIBUTIONS OF $100 OR MORE (Include all Schedule A subtotals) ..... $	100	
2. AMOUNT RECEIVED — CONTRIBUTIONS OF LESS THAN $100 (Not itemized)	41	
3. TOTAL MONETARY CONTRIBUTIONS THIS PERIOD (Line 1 + Line 2) Enter here and on Line 1 Column B of Summary Page	141	$ 141

SCHEDULE E

PAYMENTS AND CONTRIBUTIONS (OTHER THAN LOANS) MADE FORM 420, 430 OR 490

(Amounts May Be Rounded To Whole Dollars)

STATEMENT COVERS PERIOD FROM 7/1/86 THROUGH 12/31/86

I.D. NUMBER (IF COMMITTEE) 810934

NAME OF CANDIDATE OR COMMITTEE: Citizens for Leon Williams

CODES FOR CLASSIFYING EXPENDITURES

If one of the following codes is used to describe the expenditure, no written description is needed. (Note exceptions on the back of this schedule for codes "C", "I" and "T".) Refer to the back of this schedule for detailed explanations of each category.

"C" — CONTRIBUTIONS TO OTHER CANDIDATES OR COMMITTEES
"I" — INDEPENDENT EXPENDITURES
"L" — LITERATURE
"B" — BROADCAST ADVERTISING
"N" — NEWSPAPER AND PERIODICAL ADVERTISING
"O" — OUTSIDE ADVERTISING
"S" — SURVEYS, SIGNATURE GATHERING, DOOR-TO-DOOR SOLICITATIONS
"F" — FUNDRAISING EVENTS
"G" — GENERAL OPERATIONS AND OVERHEAD
"T" — TRAVEL, ACCOMMODATIONS AND MEALS
"P" — PROFESSIONAL MANAGEMENT AND CONSULTING SERVICES

If one of the above codes does not accurately or fully describe the expenditure, leave the "Code" column blank and provide a written description in the "Description of Payment" column.

IMPORTANT: Do not itemize the payment of accrued expenses on Schedule E. Report only the lump sum of these payments on Line 4 of the Summary section, below.

NAME AND ADDRESS OF PAYEE, CREDITOR OR RECIPIENT OF CONTRIBUTION (IF COMMITTEE, ALSO ENTER I.D. NUMBER OR NAME AND ADDRESS OF TREASURER)	CODE	OR DESCRIPTION OF PAYMENT	AMOUNT PAID
Postmaster U.S. Postal Department		Bulk mail permit	$116.37
Stoorza, Ziegaus & Metzger 225 Broadway San Diego, Calif. 92101	"P"		902.63
Ad Man Graphics 1399-9th ~~San Diego, Calif. 92101~~	"L"		118.51
Brian Matthews 4931 Dassco Court ~~San Diego, Calif. 92102~~		Provided music at annual picnic	150.00
		SUBTOTAL	1287.51

☐ If more space is needed, check box at left and attach additional Schedules E.

IMPORTANT: Contributions and expenditures on behalf of other candidates or committees must also be entered in the allocation section at the front of the campaign statement.

SUMMARY

1. PAYMENTS OF $100 OR MORE MADE THIS PERIOD (Include all Schedule E subtotals) ..... $ 4795.71
2. PAYMENTS UNDER $100 THIS PERIOD (Not itemized) ..... $ 670.00
3. TOTAL INTEREST PAID THIS PERIOD ON OUTSTANDING LOANS (Schedule B, Part 2, Column (b)) ..... $ -0-
4. TOTAL ACCRUED EXPENSES PAID THIS PERIOD (Schedule F, Line 4) ..... $ -0-
5. TOTAL PAYMENTS THIS PERIOD (Line 1 + 2 + 3 + 4) Enter here and on Line 7, Column B of Summary Page ..... $ 5465.71

SCHEDULE E

PAYMENTS AND CONTRIBUTIONS (OTHER THAN LOANS) MADE
(CONTINUATION SHEET)
FORM 420, 430 OR 490

(Amounts May Be Rounded To Whole Dollars)

STATEMENT COVERS PERIOD FROM 7/1/86 THROUGH 12/31/86

NAME OF CANDIDATE OR COMMITTEE: Citizens for Leon Williams

I.D. NUMBER (IF COMMITTEE) 810934

CODES FOR CLASSIFYING EXPENDITURES

If one of the following codes is used to describe the expenditure, no written description is needed. (Note exceptions on the back of this schedule for codes "C", "I" and "T".) Refer to the back of this schedule for detailed explanations of each category.

- "C" — CONTRIBUTIONS TO OTHER CANDIDATES OR COMMITTEES
- "I" — INDEPENDENT EXPENDITURES
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- "N" — NEWSPAPER AND PERIODICAL ADVERTISING
- "O" — OUTSIDE ADVERTISING
- "S" — SURVEYS, SIGNATURE GATHERING, DOOR-TO-DOOR SOLICITATIONS
- "F" — FUNDRAISING EVENTS
- "G" — GENERAL OPERATIONS AND OVERHEAD
- "T" — TRAVEL, ACCOMMODATIONS AND MEALS
- "P" — PROFESSIONAL MANAGEMENT AND CONSULTING SERVICES

If one of the above codes does not accurately or fully describe the expenditure, leave the "Code" column blank and provide a written description in the "Description of Payment" column.

NAME AND ADDRESS OF PAYEE, CREDITOR OR RECIPIENT OF CONTRIBUTION (IF COMMITTEE, ALSO ENTER I.D. NUMBER OR NAME AND ADDRESS OF TREASURER)	CODE	OR DESCRIPTION OF PAYMENT	AMOUNT PAID
Ed Rowe Catering 6259 Alderley San Diego,Ca. 92114		Food-annual picnic	1484.00
Coca Cola Bottling Co. Dept. 1810 Pasadena, Ca.91050		Drinks-annual picnic	104.20
Friends of Tom Bradley ID#850440 P.O. Box127736 San Diego,Ca. 92112	"C"		250.00
SBBC Freedom Banquet P.O. Box 80193 San Diego,Ca.92138	"G"		120.00
New Democratic Business Associates ID#850266 1130-6th Avenue San Diego,Ca. 92101	"C"		250.00
Neil Good 1600 Pacific Highway c/o Leon Williams San Diego,Ca.92101		Reimbursement for attendance at Catfish Club	100.00
California Leadership Fund ID#850246 P.O. Box 1515 Chula Vista, Calif. 92012	"C"		250.00
Idea Man 1945 La Cienega, LA Los Angeles, Ca.90034		Trophies for awards to campaign aids.	850.00
[X] If more space is needed, check box at left and attach additional Schedules E.		SUBTOTAL	3408.20

SCHEDULE E

PAYMENTS AND CONTRIBUTIONS (OTHER THAN LOANS) MADE
(CONTINUATION SHEET)
FORM 420, 430 OR 490

(Amounts May Be Rounded To Whole Dollars)

STATEMENT COVERS PERIOD FROM 7/1/86 THROUGH 12/31/86

NAME OF CANDIDATE OR COMMITTEE: Citizens for Leon Williams

I.D. NUMBER (IF COMMITTEE) 810934

CODES FOR CLASSIFYING EXPENDITURES

If one of the following codes is used to describe the expenditure, no written description is needed. (Note exceptions on the back of this schedule for codes "C", "I" and "T".) Refer to the back of this schedule for detailed explanations of each category.

- "C" — CONTRIBUTIONS TO OTHER CANDIDATES OR COMMITTEES
- "I" — INDEPENDENT EXPENDITURES
- "L" — LITERATURE
- "B" — BROADCAST ADVERTISING
- "N" — NEWSPAPER AND PERIODICAL ADVERTISING
- "O" — OUTSIDE ADVERTISING
- "S" — SURVEYS, SIGNATURE GATHERING, DOOR-TO-DOOR SOLICITATIONS
- "F" — FUNDRAISING EVENTS
- "G" — GENERAL OPERATIONS AND OVERHEAD
- "T" — TRAVEL, ACCOMMODATIONS AND MEALS
- "P" — PROFESSIONAL MANAGEMENT AND CONSULTING SERVICES

If one of the above codes does not accurately or fully describe the expenditure, leave the "Code" column blank and provide a written description in the "Description of Payment" column.

NAME AND ADDRESS OF PAYEE, CREDITOR OR RECIPIENT OF CONTRIBUTION (IF COMMITTEE, ALSO ENTER I.D. NUMBER OR NAME AND ADDRESS OF TREASURER)	CODE	OR DESCRIPTION OF PAYMENT	AMOUNT PAID
N.A.A.C.P. 2057 Imperial San Diego, Ca. 92012		Ad in banquet program	100.00
		SUBTOTAL	100.00

☐ If more space is needed, check box at left and attach additional Schedules E.

SCHEDULE C

NON-MONETARY CONTRIBUTIONS RECEIVED
FORM 420, 430 OR 490

(Amounts May Be Rounded To Whole Dollars)

STATEMENT COVERS PERIOD
FROM 7/1/86 THROUGH 12/31/86

NAME OF CANDIDATE OR COMMITTEE: Citizens for Leon Williams

I.D. NUMBER (IF COMMITTEE) 810934

DATE REC'D	FULL NAME AND ADDRESS OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER OR TREASURER'S NAME AND ADDRESS)	OCCUPATION	EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	DESCRIPTION OF GOODS OR SERVICES	FAIR MARKET VALUE RECEIVED	CUMULATIVE AMOUNT
8/6/86	Rbt. N. Sandler 1130-6th Ave. San Diego,Ca.92101	Publisher	New Democrat Publishing Co.	Free ad	45	45DLDD
				SUBTOTAL	45	

☐ If more space is needed, check box at left and attach additional Schedules C.

SUMMARY

1. NON-MONETARY CONTRIBUTIONS OF $100 OR MORE THIS PERIOD ..... $ _____
2. NON-MONETARY CONTRIBUTIONS UNDER $100 THIS PERIOD (Not itemized) 45
3. TOTAL NON-MONETARY CONTRIBUTIONS THIS PERIOD (Line 1 + 2) Enter here and on Line 4 Column B of Summary Page ..... $ 45

SCHEDULE G

MISCELLANEOUS ADJUSTMENTS TO CASH POSITION
FORM 420, 430 OR 490

(Amounts May Be Rounded To Whole Dollars)

STATEMENT COVERS PERIOD FROM 7/1/86 THROUGH 12/31/86

NAME OF CANDIDATE OR COMMITTEE: Citizens for Leon Williams

I.D. NUMBER (IF COMMITTEE) 810934

DATE	NAME AND ADDRESS OF SOURCE (IF RECEIPT) OR PAYEE (IF EXPENDITURE). (IF COMMITTEE, ALSO ENTER I.D. NUMBER OR NAME AND ADDRESS OF TREASURER.)	DESCRIPTION OF ADJUSTMENT	AMOUNT OF INCREASE TO CASH	AMOUNT OF DECREASE TO CASH
8/18/86	San Diego Union/Tribune Publishing Co. P.O. Box 191 San Diego, Calif.92112	Refund from cost of ad.	71.75	
		SUBTOTAL	(a) 71.75	(b) -0-

NOTE: The "Ending Surplus" indicated on the Summary Page indicates a discrepancy with actual amount of "suplus" in the bank. A December, 1986 bank statement indicates approximately $1700 more intthe bank than is indicated on the summary sheet. A cursory audit indicates the discrepancy is due to an accounting error committed in 1985. An audit is currently being conducted. When the audit is completed, the Treasurer will submit amended forms to indicated the arithmetical ~~erro~~ errors.

William Gate

☐ If more space is needed, check box at left and attach additional Schedules G

SUMMARY

1. INCREASES TO CASH OF $100 OR MORE THIS PERIOD (Column (a))	$ -0-	
2. INCREASES TO CASH OF LESS THAN $100 THIS PERIOD (Not itemized)	71.75	
3. TOTAL OF ALL INTEREST RECEIVED THIS PERIOD (Schedule EE, Part 2 (b))	-0-	
4. TOTAL INCREASES TO CASH THIS PERIOD (Line 1 + 2 + 3)		71.75
5. DECREASES TO CASH OF $100 OR MORE THIS PERIOD (Column (b))		
6. DECREASES TO CASH OF LESS THAN $100 THIS PERIOD (Not itemized)		
7. TOTAL DECREASES TO CASH THIS PERIOD (Line 5 + 6)		
8. TOTAL MISCELLANEOUS ADJUSTMENTS TO CASH THIS PERIOD (Line 4 minus Line 7) Enter here and on Line 14 of Summary Page		$ 71.75 (May be negative figure)

William Grote
~~5175 Canterbury Drive~~
~~San Diego, Calif. 92116~~

RECEIVED
JUL 23 1986
LEON
WILLIAMS

7/21/86

Jo:-

These papers (amendments) are the result of my meeting with the Registrar. They come directly from Mr. Garrett's decision re: contributions made during the time of Leon's loan. They follow the format laid out for me by Mz. Caldera in the Registrar's office.

Leon should sign each of the five forms, and they should then go to Mz. Caldera.

Take care.

(It's raining here, and the power just went off.)

— Bill

P.S. Copies please?