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Sent to Registrar's Office on 7/26/85 by Wes

CONSOLIDATED CAMPAIGN STATEMENT

(Government Code Sections 84200-84217)

Form 490
1984

For use by candidates/officeholders and their controlled committees.

(Type or Print in Ink)

Statement covers period from 1/1/85 through 6/30/85.

A OFFICIAL USE ONLY

DATE OF ELECTION (MO., DAY, YR.) (IF APPLICABLE): 1986

TOTAL PAGES: 3

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): Supervisor-4th District

RESIDENTIAL ADDRESS: NO. AND STREET	CITY	STATE	ZIP CODE	AREA CODE	PHONE NUMBER
3024 E Street	San Diego	Calif.	921 02	619	234-5544

BUSINESS ADDRESS: NO. AND STREET	CITY	STATE	ZIP CODE	AREA CODE	PHONE NUMBER
1600 Pacific Highway	San Diego	Calif.	92101	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	CITY	STATE	ZIP CODE	AREA CODE	PHONE NUMBER
5175 Canterbury Drive	San Diego	Calif.	92116	619	280-7079

NAME OF TREASURER: William Grote

PERMANENT ADDRESS OF TREASURER: NO. AND STREET	CITY	STATE	ZIP CODE	AREA CODE	PHONE NUMBER
5175 Canterbury Drive	San Diego	Calif.	92116	619	280-7079

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	PHONE NUMBER

Attach additional information on 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.

(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.)

VERIFICATION

I declare under penalty of perjury that to the best of my knowledge this statement and its schedules are true, correct and complete and that I have used all reasonable diligence in their preparation.

Executed on 7/24/85 (DATE) at San Diego Calif. (CITY AND STATE) by William Grote (SIGNATURE OF TREASURER(S))

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

I declare under penalty of perjury that to the best of my knowledge this statement and its schedules are true, correct and complete and the treasurer(s) of this committee(s) has used all reasonable diligence in the preparation of this statement and its schedules.

Executed on 7/26/85 (DATE) at San Diego Ca (CITY AND STATE) by Leon Williams (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," Part V.

CAMPAIGN DISCLOSURE STATEMENT SUMMARY PAGE

FORM 420, 430 OR 490

(Amounts May Be Rounded To Whole Dollars)

STATEMENT COVERS PERIOD

FROM	THROUGH
1-1-85	6-30-85

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	$ -0-	$ -0- (SCHEDULE A, LINE 3)	$
2. Loans	-0-	-0- (SCHEDULE B, LINE 8)	
3. Subtotal	$ -0- (LINES 1 + 2)	$ -0- (LINES 1 + 2)	$ (LINES 1 + 2)
4. Non-monetary contributions	-0-	-0- (SCHEDULE C, LINE 3)	
5. Pledges	-0-	-0- (SCHEDULE D, LINE 7)	
6. TOTAL CONTRIBUTIONS	$ -0- (LINES 3 + 4 + 5)	$ -0- (LINES 3 + 4 + 5)	$ (LINES 3 + 4 + 5 (SHOULD EQUAL LINE 6, COLUMNS A + B))
EXPENDITURES MADE			
7. Payments	$ -0-	$ 726.00 (SCHEDULE E, LINE 4)	$
8. Accrued expenses (unpaid bills)	-0-	-0- (SCHEDULE F, LINE 5)	
9. TOTAL EXPENDITURES	$ -0- (LINES 7 + 8)	$ 726 (LINES 7 + 8)	$ (LINES 7 + 8 (SHOULD EQUAL LINE 9, COLUMNS A + B))

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

STATEMENT OF CHANGES IN FINANCIAL CONDITION

10. Cash on hand at the beginning of this period. (Line 14 of previous statement) . $ 2006
11. Cash receipts this period (Line 3, Column B above) . . . . . -0-
12. Miscellaneous adjustments to cash (Schedule G, Line 7) . . . . . -0-
13. Cash payments this period (Line 7, Column B above) 726
14. Cash on hand at closing date (Lines 10+11+12-13 above)* 1280
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). . . . . $ 1280
17. Ending deficit (if Line 15 is greater than Line 14, subtract Line 14 from Line 15) . . . . . $ ( )

Ending cash on hand should not be a negative amount.

SUMMARY FOR CANDIDATES IN BOTH A JUNE AND NOVEMBER ELECTION *(See Instructions on Reverse)*

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

SCHEDULE E

PAYMENTS AND CONTRIBUTIONS MADE

FORM 420, 430 OR 490

(Amounts May Be Rounded To Whole Dollars)

STATEMENT COVERS PERIOD FROM	THROUGH
1/1/85	6/30/85

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 and the *Information Manual on Campaign Disclosure* for detailed explanations and examples 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 3 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	DESCRIPTION OF PAYMENT	AMOUNT PAID
Democratic Central Committee 4037 El Cajon Boulevard San Diego, Calif.92105		Program participation in Jefferson-Jackson Dinner	$160.00
Janice Lipocan Staff Member,Supervisor Williams'Office 1600 Pacific Highway San Diego,Calif.92101	"F"	Reimbursement	100.00
Chicano Federation of San Diego County P.O. Box 8116 San Diego,Calif.92102	"I"		115.00
☐ If more space is needed, check box and attach additional Schedules E.		SUBTOTAL	

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) ..... $ 375.00
2. Payments under $100 this period (not itemized) ..... $ 351.00
3. Total Accrued Expenses paid this period (Schedule F, Line 4) ..... $ -0-
4. Total Payments this period (Line 1 + 2 + 3) Enter here and on Line 7, Column B of Summary Page ..... $ 726.00