[ms-0398.005.003.003]

Hand Delivered to Registrar's Office 5/22/86

CONSOLIDATED CAMPAIGN STATEMENT

(Government Code Sections 84200-84217)

Type or Print in Ink

FORM 490
1986

Statement covers period 3/18/86 through 5/17/86

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

- [ ] 1ST SEMI-ANNUAL STATEMENT
- [ ] 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
- [x] 2ND PRE-ELECTION STATEMENT

DATE OF ELECTION (MO., DAY, YR.) (IF APPLICABLE): June 3, 1986

TOTAL PAGES: 10

A 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

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: 5175 Canterbury Drive | CITY: San Diego | STATE: Calif. | ZIP CODE: 92116 | AREA CODE / PHONE NUMBER: 619 280-7079

NAME OF TREASURER: William Grote

PERMANENT ADDRESS OF TREASURER: NO. AND STREET: 5175 Canterbury Drive | CITY: San Diego | STATE: Calif. | ZIP CODE: 92116 | AREA CODE / BUSINESS PHONE NUMBER: 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 / 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 5/20/86 (DATE) at San Diego 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 5/21/86 (DATE) at San Diego Calif. (CITY AND STATE) by Leon L. Williams (SIGNATURE OF CANDIDATE OR OFFICEHOLDER)

CAMPAIGN DISCLOSURE STATEMENT SUMMARY PAGE
FORM 420, 430 OR 490

(Amounts May Be Rounded To Whole Dollars)

STATEMENT COVERS PERIOD FROM 3/18/86 THROUGH 5/17/86

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	$ 15,997	$ 7005 SCHEDULE A, LINE 3	$ 23,002
2. Loans received	-0-	-0- SCHEDULE B, LINE 7	-0-
3. SUBTOTAL CASH RECEIPTS	$ 15,997 LINES 1 + 2	$ 7005 LINES 1 + 2	$ 23,002 LINES 1 + 2
4. Non-monetary contributions	-0-	35 SCHEDULE C, LINE 3	35
5. Pledges	-0-	-0- SCHEDULE D, LINE 7	-0-
6. TOTAL CONTRIBUTIONS	$ 15,997 LINES 3 + 4 + 5	$ 7040 LINES 3 + 4 + 5	$ 23,037 LINES 3 + 4 + 5 (SHOULD EQUAL LINE 6, COLUMNS A + B)
EXPENDITURES MADE			
7. Payments	$ 4445	$ 3888 SCHEDULE E, LINE 5	$ 8,333
8. Loans made**	-0-	-0- SCHEDULE EE, LINE 7	-0-
9. SUBTOTAL	4445 LINES 7 + 8	3888 LINES 7 + 8	8,333 LINES 7 + 8
10. Accrued expenses (unpaid bills)	-0-	-0- SCHEDULE F, LINE 5	-0-
11. TOTAL EXPENDITURES	$ 4445 LINES 9 + 10	$ 3888 LINES 9 + 10	$ 8333 LINES 9 + 10 (SHOULD EQUAL LINE 11, COLUMNS A + B)

*IF THIS IS THE FIRST REPORT FILED FOR THE CALENDAR YEAR, COLUMN A SHOULD BE BLANK EXCEPT FOR UNPAID LOANS RECEIVED, PLEDGES, OUTSTANDING LOANS MADE AND UNPAID BILLS (LINES 2, 5, 8 AND 10).

**(IMPORTANT: SEE INSTRUCTIONS ON REVERSE FOR PREPARING THE SUMMARY PAGE CONCERNING REPORTING LOANS MADE, LINE 8, COLUMN A.)

STATEMENT OF CHANGES IN FINANCIAL CONDITION

12. Cash on hand at the beginning of this period. (Enter "Cash on Hand at Closing Date" from previous statement filed.) $ 9745
13. Cash receipts this period (Line 3, Column B above) 7005
14. Miscellaneous adjustments to cash (Schedule G, Line 8) -0-
15. Cash payments this period (Line 9, Column B above) 3719
16. Cash on hand at closing date (Lines 12 + 13 + 14 - 15 above) $ 13,031 ENDING CASH ON HAND SHOULD NOT BE A NEGATIVE AMOUNT
17. Cash equivalents (other assets held including outstanding loans made to others). Important: See instructions on reverse $ -0-
18. Outstanding debts (Line 2 + Line 10 of Column C above) $ -0-

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

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

SCHEDULE A

MONETARY CONTRIBUTIONS RECEIVED
FORM 420, 430 OR 490

(Amounts May Be Rounded To Whole Dollars)

STATEMENT COVERS PERIOD FROM 3/18/86 THROUGH 5/17/86

NAME OF CANDIDATE OR COMMITTEE:

I.D. NUMBER (IF COMMITTEE)

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
3/20/86	C.B. Spangler 335 Fern Glen La Jolla, Ca.92037	Executive	R. Group Management Corp.	250	250
/20/86	Arthur L. Rivken 7633 Caminito Coromandel La Jolla, Ca. 92037	Executive	Redi-Crete Corp.	250	250
'20/86	Henry F. Hunte P.O. Box 350 San Diego, Ca.92112	President	Frank DeVore Consulting	250	250
3/20/86	Frank DeVore 8537 Jackie Drive San Diego,Ca.92113	Self/Consultant	Frank DeVore Consulting	100	100
3/25/86	Virgil Pedersen 1784 Circo Del Cielo El Cajon,Cal.92020	Retired		100	100
3/25/86	James C. Schmidt 11038 Horizon Hills El Cajon, Ca.92020	President	Scripps Clinic	250	250
3/25/86	Chas. C. Edwards,MD 9351 La Jolla Farms Rd. La Jolla, Ca.92037	Physician	Self	100	100
			SUBTOTAL	1300	

[X] 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) ..... $ 6535
2. AMOUNT RECEIVED — CONTRIBUTIONS OF LESS THAN $100 (Not itemized) 470
3. TOTAL MONETARY CONTRIBUTIONS THIS PERIOD (Line 1 + Line 2) Enter here and on Line 1 Column B of Summary Page ..... $ 7005

SCHEDULE A

MONETARY CONTRIBUTIONS RECEIVED
(CONTINUATION SHEET)
FORM 420, 430 OR 490

(Amounts May Be Rounded To Whole Dollars)

STATEMENT COVERS PERIOD FROM 3/18/86 THROUGH 5/17/86

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
4/14/86	Paul E. Robinson 100 Financial Square San Diego,Ca.92102	Attorney	McDonald,Hect & Solberg	100	100
4/14/86	Hugh Pates 6186 Stetson Pl. San Diego,Ca.92122	Psychologist	UCSD	100	100
4/14/86	S.F.Nielsen 3035 Locust San Diego,Ca.92110	Retired		100	100
4/14/86	Rodney G. Hood, MD 4875 Taltec Dr. La Mesa, Ca.92041	Physicia n	Self	200	200
4/14/86	Napoleon A. Jones, Jr. 3024 Greely Ave. San Diego,Ca.92113	Superior Court Judge	State of Calif.	100	100
4/14/86	Kim Fletcher PO Box 2070 San Diego,Ca.92112	Chairman of Board	Home Federal Savings	100	100
4/14/86	Daniel Bunn 510 E. Washington El Cajon,Ca.92020	Self	Executive Management Group	100	100
4/14/86	Robert F. Adelizzi 511 San Fernando St. San Diego,Ca.92106	President	Home Federal Savings	100	100
4/14/86	Daniel F. Mulvihill 5848 Rutgers Rd. La Jolla,Ca.92037	President	Pacific South-west Mortgage Co.	100	100
4/14/86	James S. Milch 5282 Marlborough San Diego,Ca.92116	Attorney	Self	100	225
4/14/86	Bruce Hazard PO Box 3217 San Diego,Ca.92103	President	Hazard Construction Co.	250	250
			SUBTOTAL	1350	

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

SCHEDULE A

MONETARY CONTRIBUTIONS RECEIVED

(CONTINUATION SHEET)

FORM 420, 430 OR 490

(Amounts May Be Rounded To Whole Dollars)

STATEMENT COVERS PERIOD FROM 3/18/86 THROUGH 5/17/86

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
4/14/86	William E. Nelson 1020 Prospect La Jolla, Ca.92037	Lawyer	Self	100	100
4/14/86	M.L. Lawrence 1500 Orange Coronado, Ca.92118	Chairman/Bd.	Hotel Del Coronado	100	100
4/14/86	P.M. Klauber 4239 Palmetto Way San Diego,Ca. 92103	Retired		100	100
4/14/86	Sue J. Ogle 426 Silvergate Ave.; San Diego,Ca.92196	Homemaker		100	100
4/14/86	Donald L. Daley PO Box 20188 San Diego,Ca.92120	Chairman of Board	Daley Corp.	210	250
4/20/86	Robert Spelman 1113 Sycamour View Encinitas,Ca.92024	Vice-Pres.	Miller and Schroeder	100	100
4/20/86	Raymond A. Hooper 3510 Calle Colina Roca Alpine,Ca. (2001	Attorney	Palma,Ceasar & Hooper	100	100
4/20/86	Walter A. Turner;Jr. 4401 Topa Topa Dr. La Mesa,Ca.92041	Ex.Vice-Pres for Finance	Sunward Enterprises	200	200
4/20/86	Bruce N. Moore 3655 Femlon St. San Diego,Ca.92106	Exec.Partner	Barney & Barney	25	150
4/20/86	Adm. USG Sharp 876 San Antonio Pl. San Diego,Ca.92106	USN Retired		50	100
4/20/86	Carlton A. Hargrave 7308 Bolero La Costa,Ca.92008	Owner	McDonald Franchise	100	100
			SUBTOTAL	1185	

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

SCHEDULE A

MONETARY CONTRIBUTIONS RECEIVED

(CONTINUATION SHEET)

FORM 420, 430 OR 490

(Amounts May Be Rounded To Whole Dollars)

STATEMENT COVERS PERIOD FROM 3/18/86 THROUGH 5/17/86

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
4/20/86	Louis M. Wolfsheimer 1200 Third Ave. San Diego,Ca.92101	Attorney	Milch,Wolfsheimer	100	100
4/20/86	Paul A. Peterson 7020 Neptune Pl. La Jolla,Ca. 92037	Attorney	Phelan,Peterson,Garrett	100	100
4/21/86	Lewis Silverberg 3252 Fifth Ave. San Diego,Ca.92103	Lawyer	Lewis Silverberg, Inc.	200	200
4/21/86	Michael R. Stringer 2880 Victoria Dr. Alpine,Ca.92001	Director	UCSD Medical Center	200	250
4/21/86	William J. Watson 8140 Paseo del Ocasa La Jolla, Ca. 92037	Architect	Mosher,Dow,Watson & Ferguson	100	100
/21/86	Macey L. McMillan;Jr. 2727 Hoover Ave. National City,Ca. 92050	Builder	McMillan Const.Co.	200	200
/21/86	Ben Townes 2320 Fifth Ave. San Diego,Ca.92101	Self	Ben Townes Realty	100	100
/21/86	Bruce E. Tabb 4969 Ocean Blvd. San Diego,Ca.92109	Consultant	Frank DeVore Consulting Co.	200	200
/21/86	M.L.Chilcote 2160 Fletcher Parkway El Cajon,Ca.92020	President	Chilcote Homes,Inc.	250	250
/25/86	Anne L. Evans 7819 La Jolla Vista La Jolla,Ca.92037	Owner	Bahia Hotel	250	250
/25/86	Gail Stoorza Gill 727 Gage San Diego,Ca.92106	President	Stoorza,Ziegaus & Metzger	200	200
			SUBTOTAL	1900	

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

SCHEDULE A

MONETARY CONTRIBUTIONS RECEIVED

(CONTINUATION SHEET)

FORM 420, 430 OR 490

(Amounts May Be Rounded To Whole Dollars)

STATEMENT COVERS PERIOD FROM 3/18/86 THROUGH 5/17/86

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
4/30/86	Robert F. Driver 1620 Fifth Ave. San Diego,Ca. 92101	Ch/Board	Rbt. F. Driver Co.	100	100
5/13/86	Frederick Schnaubelt 2727 Camino Del Rio S. San Diego,Ca.92108	President	F. Schnaubelt & Sons	100	100
5/13/86	Robert S. Lawrence 1991 Linwood St. San Diego,Ca.92110	Vice-Pres.	San T Development Corp.	100	100
5/13/86	Jill C. Vivanco 5652 Loping Lane Bonita,Ca.92002	Prop. Manager	Charlton Raynd Ltd.	250	250
5/13/86	Steven L. Davis 3838 Camino Del Rio N. San Diego,Ca.92108	Developer	Phase One Development,Inc.	250	250
5/15/86	Tom Hom 2936 Meade Ave. San Diego, Ca. 92116	Self	Tom Hom & Assocs.	100	100

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

SUBTOTAL 800

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 3/18/86 THROUGH 5/17/86

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.

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
Maggie Mazur 10085 Grandview Dr. La Mesa, Ca.92041	"F"		$873.05
V.I.P. Printing 4747 Ponderosa,San Diego,Ca.92123	"L"		986.51
Stoorza, Ziegaus & Metzger 225 Broadway;San Diego,Ca.92101	"P"		331.60
Kellan Winslow Flag Football League 6065 Mission Gorge;San Diego,Ca.92120	"I"		175.00
The Catfish Club 3025 Fir St.;San Diego,Ca.92102	"O"		100.00
[X] If more space is needed, check box at left and attach additional Schedules E.		SUBTOTAL	2466.16

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) ..... $ 3450.66
2. PAYMENTS UNDER $100 THIS PERIOD (Not itemized) ..... $ 437.50
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 ..... $ 3888.16

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 3/18/86 THROUGH 5/17/86

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
Bruce Hazard PO Box 92103 San Diego,Calif.92103		Return of excessive contribution	150.00
Valle Rose Restaurant 2660 Via de la Valle Del Mar, Ca.92014	"F"		317.50
Anne L. Evans 7819 La Jolla Vista Dr. La Jolla,Ca.92037		Return of excessive contribution	100.00
San Diego Voice & Viewpoint 3006 Imperial Avenue San Diego,Ca.92112	"N"		192.00
San Diego Newsline 3609 Fourth Ave. San Diego,Ca.92103	"N"		225.00

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

SUBTOTAL 984.50

SCHEDULE C

NON-MONETARY CONTRIBUTIONS RECEIVED
FORM 420, 430 OR 490

(Amounts May Be Rounded To Whole Dollars)

STATEMENT COVERS PERIOD
FROM 3/18/86 THROUGH 5/17/86

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
4/20/86	Rbt. N. Sandler 1399-9th Ave. San Diego,Ca.92101	Publisher	New Democrat Publishing Co.	Free ad	35	35
				SUBTOTAL	35	

☐ 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 ..... $ -0-
2. NON-MONETARY CONTRIBUTIONS UNDER $100 THIS PERIOD (Not itemized) 35
3. TOTAL NON-MONETARY CONTRIBUTIONS THIS PERIOD (Line 1 + 2) Enter here and on Line 4 Column B of Summary Page ..... $ 35