

Officeholder, Candidate,
and Controlled Committee
Campaign Statement — Long Form
(Government Code Sections 84200-84216.5)

Type or print in ink.

COVER PAGE - LONG FORM

SEE INSTRUCTIONS ON REVERSE

Check one of the following boxes to indicate the type of statement being filed:

- Pre-election Statement
- Supplemental Pre-election Statement (Attach a completed Form 495 to this statement.)
- Special Odd-Year Campaign Report
- Semi-annual Statement
- Termination Statement (Attach a completed Form 415 to this statement.)

Statement covers period from <u>8/1/98</u> through <u>9/30/98</u>	Date Stamp RECEIVED OCT -5 AM 9:10 CITY CLERK CITY OF LODI	CALIFORNIA 1994 FORM 490
Date of election if applicable: (Month, Day, Year) <u>11/3/98</u>	Page _____ of _____ For Official Use Only	

I Officeholder, Candidate, and Controlled Committee
Included in this Statement

NAME OF OFFICEHOLDER OR CANDIDATE

HARRY L. MARZOLF

OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE)

CITY COUNCIL MEMBER

RESIDENTIAL OR BUSINESS ADDRESS (NO. AND STREET)

445 MADRONE COURT

CITY STATE ZIP CODE AREA CODE/DAYTIME PHONE

Lodi CA 95242 209-333-7682

COMMITTEE NAME I.D. NUMBER

COMMITTEE TO ELECT HARRY L. MARZOLF 982032

COMMITTEE ADDRESS (NO. AND STREET)

445 MADRONE COURT

CITY STATE ZIP CODE AREA CODE/DAYTIME PHONE

Lodi CA 95242 209-333-7682

NAME OF TREASURER

CAROLINE MARZOLF

PERMANENT ADDRESS OF TREASURER (NO. AND STREET)

445 MADRONE COURT

CITY STATE ZIP CODE AREA CODE/DAYTIME PHONE

Lodi CA 95242 209-333-7682

II Other Committees Not Included in this Statement: List any other

COMMITTEE NAME	I.D. NUMBER

CITY	STATE	ZIP CODE	AREA CODE/DAYTIME PHONE

COMMITTEE NAME	I.D. NUMBER

Attach additional information on appropriately labeled continuation sheets

III 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 10/1/98 At Lodi, CA

By Caroline A. Marzolf
SIGNATURE OF TREASURER

An officeholder or candidate who controls a committee must also verify the campaign statement. I have used all reasonable diligence 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 10/1/98 At Lodi, CA

By [Signature]
SIGNATURE OF CANDIDATE/OFFICEHOLDER

Executed on _____ At _____

By _____
SIGNATURE OF CANDIDATE/OFFICEHOLDER

Executed on _____ At _____

By _____
SIGNATURE OF CANDIDATE/OFFICEHOLDER

Campaign Disclosure Statement Summary Page

Type or print in Ink.
Amounts may be rounded
to whole dollars.

SUMMARY PAGE

Statement covers period from <u>9/3/98</u> through <u>9/30/98</u>	CALIFORNIA 1099 FORM 490
Page _____ of _____	I.D. NUMBER 982032

SEE INSTRUCTIONS ON REVERSE

NAME OF OFFICEHOLDER OR CANDIDATE AND CONTROLLED COMMITTEE

COMMITTEE TO ELECT HARRY L. MARZOLF
Contributions Received

		Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B* TOTAL PREVIOUS PERIOD (SEE NOTE BELOW)	Column C TOTAL TO DATE (ADD COLUMNS A + B)
1. Monetary Contributions	Schedule A, Line 3	\$ 200. ⁰⁰	\$	\$ 200. ⁰⁰
2. Loans Received	Schedule B, Line 7	\$ 700. ⁰⁰	\$	\$ 700. ⁰⁰
3. SUBTOTAL CASH CONTRIBUTIONS	Add Lines 1 + 2	\$ 900. ⁰⁰	\$	\$ 900. ⁰⁰
4. Non-monetary Contributions	Schedule C, Line 3	\$ 0	\$	\$ 0
5. SUBTOTAL CONTRIBUTIONS (Exclude Enforceable Promises)	Add Lines 3 + 4	\$ 900. ⁰⁰	\$	\$ 900. ⁰⁰
6. Enforceable Promises (Exclude Loan Guarantees, Line 18 below)	Schedule D, Line 7	\$ 0	\$	\$ 0
7. TOTAL CONTRIBUTIONS RECEIVED	Add Lines 5 + 6	\$ 900. ⁰⁰	\$	\$ 900. ⁰⁰

Expenditures Made

8. Cash Payments (Other than Loans Made)	Schedule E, Line 5	\$ 743. ⁶⁹	\$	\$ 743. ⁶⁹
9. Loans Made	Schedule H, Line 7	\$ 0	\$	\$ 0
10. SUBTOTAL CASH PAYMENTS	Add Lines 8 + 9	\$ 743. ⁶⁹	\$	\$ 743. ⁶⁹
11. Accrued Expenses (Unpaid Bills)	Schedule F, Line 5	\$ 898. ⁶⁴	\$	\$ 898. ⁶⁴
12. TOTAL EXPENDITURES MADE	Add Lines 10 + 11	\$ 1642. ³³	\$	\$ 1642. ³³

Current Cash Statement

13. Beginning Cash Balance	Previous Summary Page, Line 17	\$ 0. ⁰⁰
14. Cash Receipts	Column A, Line 3 above	\$ 900. ⁰⁰
15. Miscellaneous Increases to Cash	Schedule I, Line 4	\$ 0. ⁰⁰
16. Cash Payments	Column A, Line 10 above	\$ 743. ⁶⁹
17. ENDING CASH BALANCE	Add Lines 13 + 14 + 15, then subtract Line 16	\$ 156. ³¹

If this is a termination statement, Line 17 must be zero.

ENDING CASH BALANCE SHOULD NOT BE A NEGATIVE AMOUNT

* From previous Statement Summary Page, Column C. However, if this is the first report filed for the calendar year, Column B should be blank except for Loans Received (Line 2), Enforceable Promises (Line 6), Loans Made (Line 9), and Accrued Expenses (Line 11).

Summary for Candidates in Both June and November Elections

	1/1 through 6/30	7/1 to Date
21. Contributions Received	\$	\$ 900. ⁰⁰
22. Expenditures Made	\$	\$ 1642. ³³

Cash Equivalents and Outstanding Debts

18. LOAN GUARANTEES RECEIVED	Schedule B, Part I, Column (b)	\$ 0
19. Cash Equivalents	See Instructions on reverse	\$
20. Outstanding Debts	Add Line 2 + Line 11 in Column C above	\$ 1598. ⁶⁴

Schedule
Monetary Contributions Received

Type or print.
Amounts may be rounded
to whole dollars.

SCHEDULE A

Statement covers period		CALIFORNIA BOATFORM 490
from <u>8/3/98</u>	through <u>9/30/98</u>	
Page _____ of _____		I.D. NUMBER <u>982032</u>

SEE INSTRUCTIONS ON REVERSE

NAME OF OFFICEHOLDER OR CANDIDATE AND CONTROLLED COMMITTEE

COMMITTEE TO ELECT HARRY L. MARZOLF

DATE RECEIVED	FULL NAME AND ADDRESS OF CONTRIBUTOR (IF COMMITTEE, IN ADDITION TO COMMITTEE'S NAME AND ADDRESS, ENTER I.D. NUMBER OR, IF NO I.D. NUMBER HAS BEEN ASSIGNED, ENTER TREASURER'S NAME AND ADDRESS)	OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	CUMULATIVE TO DATE OTHER (IF APPLICABLE)
SUBTOTAL \$					

Monetary Contributions Summary

1. Amount received this period — contributions of \$100 or more.
(Include all Schedule A subtotals.) \$ 0
2. Amount received this period — contributions of less than \$100.
(Do not itemize.) \$ 200.⁰⁰
3. Total monetary contributions received this period.
(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) TOTAL \$ 200.⁰⁰

Schedule - Part I
Loans Received

Type or print
Amounts may be rounded
to whole dollars.

SCH LE B - Part I

Statement covers period

from 8/3/98
through 9/30/98

CALIFORNIA
FORM 490

SEE INSTRUCTIONS ON REVERSE

Page of

NAME OF OFFICEHOLDER OR CANDIDATE AND CONTROLLED COMMITTEE

Committee To Elect Harry L. Marzolf

I.D. NUMBER

982092

DATE RECEIVED	LENDER OR GUARANTOR'S FULL NAME AND ADDRESS (IF COMMITTEE, ENTER FULL NAME, ADDRESS AND I.D. NUMBER. IF NO I.D. NUMBER HAS BEEN ASSIGNED, ENTER THE TREASURER'S NAME AND ADDRESS)	LENDER/GUARANTOR'S OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER BUSINESS NAME)	LENDER INFORMATION		GUARANTOR INFORMATION	
			DUE DATE/ INTEREST RATE	AMOUNT OF LOAN	AMOUNT GUARANTEED	CUMULATIVE TO DATE
8/3/98	HARRY L. MARZOLF 445 MADRONE CT LODI, CA. 95242 <input checked="" type="checkbox"/> Lender <input type="checkbox"/> Guarantor	RECYCLE PLUS		100.00		
9/16/98	HARRY L. MARZOLF 445 MADRONE CT LODI, CA 95242 <input checked="" type="checkbox"/> Lender <input type="checkbox"/> Guarantor	RECYCLE PLUS		600.00		
			SUBTOTAL	(a) \$ 700.00	(b) \$	Enter (b) on Summary Page, Line 18 only.

*See important instructions on reverse.

Loans Received - Part I Summary

1. Loans of \$100 or more received this period. (Include all Loans Received - Part I (a) subtotals.) \$ 700.00
 2. Loans under \$100 received this period. (Do not itemize.) \$ 0
 3. Total loans received this period. (Add Lines 1 and 2.) TOTAL \$ 700.00

Loans Received - Part II Summary


4. Loans of \$100 or more repaid, forgiven, or paid by a third party this period. (Include all Part II (c) subtotals. If forgiven or paid by a third party, also itemize the transaction on Schedule A.) \$ 0
 5. Loans under \$100 repaid, forgiven, or paid by a third party. (Do not itemize.) If forgiven or paid by a third party, include this amount on Schedule A Summary, Line 2. \$ 0
 6. Total loans repaid, forgiven, or paid by a third party this period. (Add Lines 4 + 5.) TOTAL \$ (0)
 7. Net change this period. (Subtract Line 6 from Line 3.)
 Enter the net here and on the Summary Page, Column A, Line 2. NET \$ 700.00

May be a negative number.

Schedule
Payments and Contributions
(Other Than Loans) Made

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE E

Statement covers period from <u>8/3/98</u> through <u>9/30/98</u>	 Page _____ of _____ I.D. NUMBER <u>982032</u>
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SEE INSTRUCTIONS ON REVERSE

NAME OF OFFICEHOLDER OR CANDIDATE AND CONTROLLED COMMITTEE

COMMITTEE TO ELECT HARRY L. MARZOLF

CODES FOR CLASSIFYING EXPENDITURES

If one of the following codes accurately describes the expenditure, you may enter the code and leave the "Description of Payment" column blank. Refer to the back of Schedule E-Continuation Sheet for detailed explanations of each category.

- | | | |
|---|---|---|
| *C - MONETARY AND IN-KIND (NON-MONETARY) CONTRIBUTIONS TO OTHER CANDIDATES AND COMMITTEES | *B - BROADCAST ADVERTISING | *G - GENERAL OPERATIONS AND OVERHEAD |
| *I - INDEPENDENT EXPENDITURES | *N - NEWSPAPER AND PERIODICAL ADVERTISING | *T - TRAVEL, ACCOMMODATIONS AND MEALS (MUST BE DESCRIBED) |
| *L - LITERATURE | *O - OUTSIDE ADVERTISING | *P - PROFESSIONAL MANAGEMENT AND CONSULTING SERVICES |
| | *S - SURVEYS, SIGNATURE GATHERING, DOOR-TO-DOOR SOLICITATIONS | |
| | *F - FUNDRAISING EVENTS | |

NAME AND ADDRESS OF PAYEE, CREDITOR, OR RECIPIENT OF CONTRIBUTION (IF COMMITTEE, IN ADDITION TO COMMITTEE'S NAME AND ADDRESS, ENTER I.D. NUMBER OR, IF NO I.D. NUMBER HAS BEEN ASSIGNED, ENTER TREASURER'S NAME AND ADDRESS)	IMPORTANT: DO NOT ITEMIZE THE PAYMENT OF ACCRUED EXPENSES ON SCHEDULE E. REPORT ONLY THE LUMP SUM OF SUCH PAYMENTS ON LINE 4 OF THE SUMMARY SECTION BELOW.			
	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
U.S. POSTMASTER	G		POSTAGE	32. ⁰⁰
LODI PRINTING LODI, CA.	L		CAMPAIGN SIGNS	704. ⁶⁹

Important: Contributions and expenditures made out of campaign funds to or on behalf of other officeholders, candidates, committees, or ballot measures must also be entered on the Allocation Page, Part I.

SUBTOTAL \$ 736.⁶⁹

Payments and Contributions Made Summary

1. Payments made this period of \$100 or more. (Include all Schedule E subtotals.)	\$ <u>736.⁶⁹</u>
2. Payments made this period of under \$100. (Do not itemize.)	\$ <u>7.⁰⁰</u>
3. Total interest paid this period on outstanding loans. (Enter amount from Schedule B, Part II, Column (d).)	\$ <u>0</u>
4. Total accrued expenses paid this period. (Do not itemize. Enter amount from Schedule F, Line 4.)	\$ _____
5. Total payments made this period. (Add Lines 1, 2, 3, and 4. Enter here and on the Summary Page, Column A, Line B.)	TOTAL \$ <u>743.⁶⁹</u>

Schedule F
Accrued Expenses (Unpaid Bills)

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE F

Statement covers period from <u>9/3/98</u> through <u>9/30/98</u>	CALIFORNIA 1998 FORM 490
Page _____ of _____	I.D. NUMBER <u>982032</u>

SEE INSTRUCTIONS ON REVERSE

NAME OF OFFICEHOLDER OR CANDIDATE AND CONTROLLED COMMITTEE

COMMITTEE TO ELECT HARRY L. MARZOLF

CODES FOR CLASSIFYING EXPENDITURES

If one of the following codes accurately describes the expenditure, you may enter the code and leave the "Description of Payment" column blank. Refer to the back of Schedule E-Continuation Sheet for detailed explanations of each category.

- | | | |
|--|--|--|
| *C* - MONETARY AND IN-KIND (NON-MONETARY) CONTRIBUTIONS TO OTHER CANDIDATES AND COMMITTEES | *B* - BROADCAST ADVERTISING | *G* - GENERAL OPERATIONS AND OVERHEAD |
| *I* - INDEPENDENT EXPENDITURES | *N* - NEWSPAPER AND PERIODICAL ADVERTISING | *T* - TRAVEL, ACCOMMODATIONS AND MEALS (MUST BE DESCRIBED) |
| *L* - LITERATURE | *O* - OUTSIDE ADVERTISING | *P* - PROFESSIONAL MANAGEMENT AND CONSULTING SERVICES |
| | *S* - SURVEYS, SIGNATURE GATHERING, DOOR-TO-DOOR SOLICITATIONS | |
| | *F* - FUNDRAISING EVENTS | |

NAME AND ADDRESS OF PAYEE, CREDITOR, OR RECIPIENT OF CONTRIBUTION (IF COMMITTEE, IN ADDITION TO COMMITTEE'S NAME AND ADDRESS, ENTER I.D. NUMBER OR, IF NO I.D. NUMBER HAS BEEN ASSIGNED, ENTER TREASURER'S NAME AND ADDRESS)	IMPORTANT: DO NOT ITEMIZE THE PAYMENT OF ACCRUED EXPENSES ON SCHEDULES E OR F. REPORT ONLY THE LUMP SUM OF PAYMENTS ON SCHEDULE F, LINE 4 AND ON SCHEDULE E, LINE 4. DO NOT RE-ITEMIZE ACCRUED EXPENSES REPORTED IN A PREVIOUS PERIOD.			
	CODE	OR	DESCRIPTION OF OUTSTANDING PAYMENT	AMOUNT ACCRUED
<u>LODI PRINTING</u> <u>LODI, CA</u>	<u>L</u>		<u>CAMPAIGN BROCHURES</u>	<u>898.⁶⁴</u>

Attach additional information on appropriately labeled continuation sheets.

SUBTOTAL \$ 898.⁶⁴

Accrued Expenses Summary

- | | |
|---|--|
| 1. Accrued expenses this period of \$100 or more. (Include all Schedule F subtotals.) | \$ <u>898.⁶⁴</u> |
| 2. Accrued expenses this period of under \$100. (Do not itemize.) | \$ <u>0</u> |
| 3. Total accrued expenses incurred this period. (Add Lines 1 and 2.) | INCURRED TOTAL \$ <u>898.⁶⁴</u> |
| 4. Total accrued expenses paid this period. (Do not itemize. Enter here and on Schedule E Summary, Line 4.) | PAID TOTAL \$ (<u> </u>) |
| 5. Net change this period. (Subtract Line 4 from Line 3. Enter the difference here and on the Summary Page, Column A, Line 11.) | NET \$ <u>898.⁶⁴</u> |

May be a negative number.