

**Officeholder, Candidate, and Controlled Committee Campaign Statement — Long Form**

(Government Code Sections 84200-84216.5)

Type or print in ink.

COVER PAGE LONG FORM

Statement covers period from <u>7-1-96</u> through <u>9-30-96</u>	Date Stamp <b>RECEIVED</b> OCT -7 AM 11:5 CALIFORNIA GENERAL ELECTION	CALIFORNIA 1994 FORM <b>490</b> Page <u>1</u> of <u>2</u> For Official Use Only
Date of election if applicable: (Month, Day, Year) <u>11-5-96</u>		

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.)

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

NAME OF OFFICEHOLDER OR CANDIDATE

Ray G. Davenport

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

1833 Robin Lane

RESIDENTIAL OR BUSINESS ADDRESS

(NO. AND STREET)

Lodi

CA

95240 (209) 333-3702

CITY

STATE

ZIP CODE

AREA CODE/DAYTIME PHONE

COMMITTEE NAME

I.D. NUMBER

Committee to Elect Ray Davenport

903252

COMMITTEE ADDRESS

(NO. AND STREET)

1833 Robin Lane, Lodi CA (209) 333-3702

CITY

STATE

ZIP CODE

AREA CODE/DAYTIME PHONE

NAME OF TREASURER

Ray G. Davenport

PERMANENT ADDRESS OF TREASURER

(NO. AND STREET)

1833 Robin Lane 95240 (209) 333-3702

CITY

STATE

ZIP CODE

AREA CODE/DAYTIME PHONE

Lodi, CA 95240

**II Other Committees Not Included in this Statement:** List any other committees not included in this consolidated statement that are controlled by you and any committees of which you have knowledge that are primarily formed to receive contributions or to make expenditures on behalf of your candidacy.

COMMITTEE NAME	I.D. NUMBER
<u>N/A</u>	
NAME OF TREASURER	CONTROLLED COMMITTEE?
<u>N/A</u>	<input type="checkbox"/> YES <input type="checkbox"/> NO
COMMITTEE ADDRESS (NO. AND STREET)	
CITY STATE ZIP CODE AREA CODE/DAYTIME PHONE	
COMMITTEE NAME	I.D. NUMBER
NAME OF TREASURER	CONTROLLED COMMITTEE?
COMMITTEE ADDRESS (NO. AND STREET)	
CITY STATE ZIP CODE AREA CODE/DAYTIME PHONE	

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 10/5/96 At Lodi, CA

By Ray Davenport 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 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 10-5-96 At Lodi CA

By Ray Davenport 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

SEE INSTRUCTIONS ON REVERSE

NAME OF OFFICER/HOLDER OR CANDIDATE AND CONTROLLED COMMITTEE

*Ray B. Muenster*

### Contributions Received

Statement covers period	from 7-1-96 through 9/30/96
I.D. NUMBER	902252
Page	2 of 2
CALIFORNIA 490 1994 FORM	

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

SUMMARY PAGE

Column A	Column B*	Column C
TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	TOTAL PREVIOUS PERIOD (SEE NOTE BELOW)	TOTAL TO DATE (ADD COLUMNS A + B)
1. Monetary Contributions ..... Schedule A, Line 3	\$ 3,179.00	\$ 3,179.00
2. Loans Received ..... Schedule B, Line 7	11,486.00	11,486.00
3. SUBTOTAL CASH CONTRIBUTIONS ..... Add Lines 1 + 2	14,665.00	14,665.00
4. Non-monetary Contributions ..... Schedule C, Line 3	294.00	294.00
5. SUBTOTAL CONTRIBUTIONS (Exclude Enforceable Promises) ..... Add Lines 3 + 4	14,959.00	14,959.00
6. Enforceable Promises (Exclude Loan Guarantees, Line 18 below) ..... Schedule D, Line 7	0	0
7. TOTAL CONTRIBUTIONS RECEIVED ..... Add Lines 5 + 6	14,959.00	14,959.00

Column A	Column B	Column C
Cash Payments Made (Other than Loans Made) ..... Schedule E, Line 5	14,296.60	14,296.60
Loans Made ..... Schedule H, Line 7	0	0
SUBTOTAL CASH PAYMENTS ..... Add Lines 8 + 9	14,296.60	14,296.60
Accrued Expenses (Unpaid Bills) ..... Schedule F, Line 5	0	0
TOTAL EXPENDITURES MADE ..... Add Lines 10 + 11	14,296.60	14,296.60

\* 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).

Column A	Column B	Column C
Beginning Cash Balance ..... Previous Summary Page, Line 17	0	0
Cash Receipts ..... Column A, Line 3 above	0	0
Miscellaneous Increases to Cash ..... Schedule I, Line 4	0	0
Cash Payments ..... Column A, Line 10 above	0	0
ENDING CASH BALANCE ..... Add Lines 13 + 14 + 15, then subtract Line 16	0	0

Column A	Column B	Column C
LOAN GUARANTEES RECEIVED ..... Schedule B, Part 1, Column (b)	0	0
h Equivalents and Outstanding Debts	0	0
Cash Equivalents ..... See instructions on reverse	0	0
22. Expenditures Made	0	0
21. Contributions Received	0	0

### Summary for Candidates in Both June and November Elections

7/1 through 6/30	0
7/1 to Date	0