

# Recipient Committee Campaign Statement — Short Form

Type or print in ink.

SEE INSTRUCTIONS ON REVERSE

For use by recipient committees which have not received a contribution or other receipt which must be itemized, have not received or made loans, and have no outstanding accrued expenses or enforceable promises received.

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

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

Statement covers period from <u>JAN 1, 1995</u> through <u>JUNE 30, 1995</u>	Date Stamp <u>RECEIVED</u> <u>AM 10:58</u> <u>ANDREW H. PERRON</u> <u>CITY CLERK</u>	CALIFORNIA 1997 FORM <b>450</b>
Date of election if applicable: (Month, Day, Year) <u>05 15</u>	Page <u>1</u> of <u>2</u>	For Official Use Only

## I Committee Information

NAME OF COMMITTEE  
Committee To Recall Davenport

ADDRESS OF COMMITTEE (NO. AND STREET)  
1111 W. Tokoy St. State A

CITY Lodi STATE Cal. ZIP CODE 95242

AREA CODE/PHONE NUMBER  
NONE

I.D. NUMBER  
930573

NAME OF TREASURER  
Thomas J. Nauston

PERMANENT ADDRESS OF TREASURER (NO. AND STREET)  
529 Plum Ct.

CITY Lodi STATE Cal. ZIP CODE 95242

AREA CODE/DAYTIME PHONE NUMBER  
209-369-6771

II Committee Type (check boxes) Is this a controlled committee?  Yes  No Is this a sponsored committee?  Yes  No Is this a broad based committee?  Yes  No

## III Verification

This committee has not received any contributions, cumulative contributions or miscellaneous receipts from a single source totaling \$100 or more which must be itemized, and this committee has not made or received loans, and has no accrued expenses or outstanding enforceable promises received.

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 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 Aug 15th 1995 At Lodi Calif By Thomas J. Nauston  
DATE CITY AND STATE SIGNATURE OF TREASURER

An officeholder, candidate, or state measure proponent 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 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 \_\_\_\_\_ At \_\_\_\_\_ By \_\_\_\_\_  
DATE CITY AND STATE SIGNATURE OF OFFICEHOLDER, CANDIDATE, PROPONENT, OR RESPONSIBLE OFFICER

Executed on \_\_\_\_\_ At \_\_\_\_\_ By \_\_\_\_\_  
DATE CITY AND STATE SIGNATURE OF OFFICEHOLDER, CANDIDATE, OR PROPONENT

Executed on \_\_\_\_\_ At \_\_\_\_\_ By \_\_\_\_\_  
DATE CITY AND STATE SIGNATURE OF OFFICEHOLDER, CANDIDATE, OR PROPONENT

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.

Recipient Committee  
 Campaign Disclosure Statement  
 Summary Page

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

SHORT FORM

Statement covers period from <u>Jan 1, 1995</u> through <u>June 30, 1995</u>	CALIFORNIA 1995 FORM <b>450</b>
Page <u>2</u> of <u>2</u>	I.D. NUMBER <u>930573</u>

NAME OF COMMITTEE

Committee to Recall Davongjart

Expenditures Made

- 1. Expenditures of \$100 or more made this period ..... \$ 0
- 2. Expenditures under \$100 (Not itemized.) ..... 0
- 3. SUBTOTAL EXPENDITURES MADE THIS PERIOD ..... Add Lines 1 + 2 \$ 0
- 4. Total expenditures made from previous statement ..... Previous Summary Page, Line 5 13,436  
 (If this is the first statement for the calendar year, enter zero.)
- 5. TOTAL EXPENDITURES MADE TO DATE ..... Add Lines 3 + 4 \$ 13,436

Contributions Received

- 6. Monetary contributions received this period ..... \$ 0
- 7. Non-monetary contributions received this period ..... 0
- 8. Total contributions received from previous statement ..... Previous Summary Page, Line 9 \$ 17,037  
 (If this is the first statement for the calendar year, enter zero.)
- 9. TOTAL CONTRIBUTIONS RECEIVED TO DATE ..... Add Lines 6 + 7 + 8 \$ 17,037

Current Cash Statement

- 10. Beginning cash balance ..... Previous Summary Page, Line 14 \$ 101
- 11. Cash receipts this period ..... Line 6 above 0
- 12. Miscellaneous increases to cash ..... 0
- 13. Cash expenditures this period ..... Line 3 above 0
- 14. ENDING CASH BALANCE THIS PERIOD ..... Add Lines 10 + 11 + 12, then subtract Line 13 \$ 101



**CITY OF LODI**

*Finance Department*

*P.O. Box 3006*

*Lodi, CA 95241-1910*

*(209) 333-6717*

*Pa. Check # 487  
on 8/15/95*

Date: 08/01/95  
 Invoice No.: CC-92300

- Tom Newton
- (Lodi Citizens for Good Government)
- P.O. Box 1193
- Lodi, CA 95241

*Make your check payable to: CITY OF LODI*

Description	Amount
FPPC Form 490 - 1st semi-annual campaign filing (due July 31, 1995)	
10 day late charge at \$10.00 per day	\$ 100.00

**CITY OF LODI**

*Please detach and return this stub with your payment*

Date: 08/01/95  
 Invoice No.: CC-92300

- Tom Newton
- (Lodi Citizens for Good Government)
- P.O. Box 1193
- Lodi, CA 95241

Amount: \$ 100.00

*Reminder: Include this stub with your payment*