

Semi-annual Statement of No Activity

Type or print in ink.

STATEMENT OF NO ACTIVITY

For use by recipient committees, except controlled committees, that have not received any contributions and have not made any expenditures during the six-month period covered by a semi-annual statement. Committees controlled by an officeholder or candidate may not use this form.

NOTE: If the committee had, at any time during the year, any outstanding loans made or received, this form may not be used for the semi-annual statement on which the "Annual Report of Outstanding Loans" must be completed.

Date Stamp	RECEIVED JUN 31 PM 2:56 WIL PEARSON COUNTY CLERK	CALIFORNIA 1994 FORM 425
		For Official Use Only

NAME OF COMMITTEE		I.D. NUMBER	
Citizen's Watch Committee		930305	
445 Almond Drive #47			
CITY	STATE	ZIP CODE	
Lodi	CA	95240	
AREA CODE/PHONE NUMBER			
(209) 369-3032 or (209) 333-0777			

NAME OF TREASURER		
Cheryl Reinke		
445 Almond Drive #47		
CITY	STATE	ZIP CODE
Lodi	CA	95240
AREA CODE/DAYTIME PHONE NUMBER		
(209) 369-3032		

II Period of No Activity

No contributions have been received and no expenditures have been made during the period covering the dates below: Check one of the following boxes and complete the year.

January 1, through June 30, 19__ July 1, through December 31, 1994__

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 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 1-30-95 At Lodi, California
DATE CITY AND STATE

By *Cheryl E. Reinke*
SIGNATURE OF TREASURER