

Campaign Bank Account

Type or Print in Ink

CALIFORNIA 1991 FORM **502**

Check One: Initial Amendment Termination

Office Use Only

I Candidate Information

FULL NAME OF CANDIDATE: (LAST, FIRST, MIDDLE)

ZANE, THOMAS MICHAEL

ADDRESS: (NO. AND STREET)

2310 W. TOKAY ST.

AREA CODE/DAYTIME PHONE

(209) 369-8591

CITY

LODI

STATE

CA

ZIP CODE

95242

SPECIFIC OFFICE SOUGHT:

MEMBER, LODI CITY COUNCIL

DATE OF ELECTION

11-3-92

II Account Information

FINANCIAL INSTITUTION:

FARMERS & MERCHANTS BANK

ADDRESS: (NO. AND STREET)

121 W. PINE ST.

AREA CODE/PHONE NUMBER

()

ACCOUNT NUMBER

00166367

CITY

LODI

STATE

CA

ZIP CODE

DATE OPENED

7-27-92

III Certification

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Executed on 1-28-93

DATE

At LODI, CA

CITY AND STATE

By Thomas M. Zane

SIGNATURE OF CANDIDATE

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

91 80506

State of California Fair Political Practices Commission.

Candidate Intention

Type or Print in Ink

CANDIDATE INTENTION

CALIFORNIA 1991 FORM **501**

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Candidate Information

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ADDRESS: (NO. AND STREET)

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AREA CODE/DAYTIME PHONE

(209) 369-8591

CITY

LODI

STATE

CA

ZIP CODE

95242

Specific Office Sought

SPECIFIC OFFICE:

MEMBER, LODI CITY COUNCIL

DISTRICT NUMBER

DATE OF ELECTION

11-3-92

PUBLIC AGENCY NAME:

CITY OF LODI

JURISDICTION AND LOCATION:

State

County of: SAN JOAQUIN

City of: LODI

Multi-County Jurisdiction:

Certification

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mailed on 1/28/93