



CANDIDATE, OFFICEHOLDER AND CONTROLLED COMMITTEE CAMPAIGN STATEMENT - LONG FORM

(Government Code Sections 84200-84216.5) (Type or Print in Ink)

Statement covers period 10/1/90 through 10/20/90

REVIEWED BY PAGE 1 OF 4 C. Mansel City Clerk/Dep. City Clerk Date 11/2/90

FORM 490 1990

CHECK ONE OF THE FOLLOWING BOXES TO INDICATE THE TYPE OF STATEMENT BEING FILED: [X] PRE-ELECTION STATEMENT [ ] SEMI-ANNUAL STATEMENT [ ] TERMINATION STATEMENT [ ] SUPPLEMENTAL PRE-ELECTION STATEMENT

DATE OF ELECTION (MO., DAY, YR.) (IF APPLICABLE) November 6, 1990

A FOR OFFICIAL USE ONLY

I CANDIDATE/OFFICEHOLDER INCLUDED IN THIS CONSOLIDATED REPORT

NAME OF CANDIDATE/OFFICEHOLDER: Jack A. Sieglock OFFICE SOUGHT OR HELD: Member, Lodi City Council

RESIDENTIAL OR BUSINESS ADDRESS: 1702 Timberlake Circle Lodi CA 95242 (209) 368-6521

II CONTROLLED COMMITTEE INCLUDED IN THIS REPORT (See definition on reverse.)

NAME OF COMMITTEE: Citizens for Sieglock I.D. NUMBER: 902318

ADDRESS OF COMMITTEE: P. O. Box 2671 Lodi CA 95242 (209) 368-6521

NAME OF TREASURER: Larry M. Solari P. O. Box 1607 Stockton CA 95201 (209) 943-2222

PERMANENT ADDRESS OF TREASURER: 1044 N. El Dorado St. Stockton CA 95202 (209) 943-2222

III OTHER COMMITTEES: LIST ANY OTHER COMMITTEES NOT INCLUDED IN THIS STATEMENT WHICH ARE CONTROLLED BY YOU AND ANY COMMITTEES PRIMARILY FORMED TO RECEIVE CONTRIBUTIONS OR MAKE EXPENDITURES ON BEHALF OF YOUR CANDIDACY.

Table with 4 columns: COMMITTEE NAME AND I.D. NUMBER, COMMITTEE ADDRESS, TREASURER, CONTROLLED COMMITTEE? (YES/NO)

Attach additional information on appropriately labeled continuation sheets.

VERIFICATION

CANDIDATE OR OFFICEHOLDER:

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 10/23/90 AT Lodi, CA

BY Jack A. Sieglock (Signature)

TREASURER (if applicable):

I HAVE USED ALL REASONABLE DILIGENCE IN PREPARING THIS 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 10/23/90 AT Stockton, CA

BY Larry M. Solari (Signature)



CANDIDATE, OFFICEHOLDER AND CONTROLLED COMMITTEE  
CAMPAIGN STATEMENT - LONG FORM

(Government Code Sections 84200-84216.5)  
(Type or Print in Ink)

REVIEWED BY  
*A. Marvel*  
City Clerk/Dep. City Clerk  
Date 10/31/90

RECEIVED

1990 OCT 25 PM 1:10

Statement covers period 10/1/90 through 10/20/90

FORM 490  
1990

CHECK ONE OF THE FOLLOWING BOXES TO INDICATE THE TYPE OF STATEMENT BEING FILED:

PRE-ELECTION STATEMENT  
 SEMI-ANNUAL STATEMENT

SUPPLEMENTAL PRE-ELECTION STATEMENT (If filing a Supplemental Pre-Election Statement, attach a completed Form 495 to this statement.)

TERMINATION STATEMENT  
Attach a completed Form 415 to this statement.

ALICE M. REIMCHE  
CITY CLERK  
CITY OF LODI

DATE OF ELECTION (MO., DAY, YR.) (IF APPLICABLE)  
November 6, 1990

A FOR OFFICIAL USE ONLY

I CANDIDATE/OFFICEHOLDER INCLUDED IN THIS CONSOLIDATED REPORT

NAME OF CANDIDATE/OFFICEHOLDER:

Jack A. Sieglock

OFFICE SOUGHT OR HELD: (Include location and district number if applicable)

Member, Lodi City Council

RESIDENTIAL OR BUSINESS ADDRESS: NO. AND STREET CITY STATE ZIP CODE AREA CODE/DAY TIME PHONE NUMBER

1702 Timberlake Circle Lodi CA 95242 (209) 368-6521

II CONTROLLED COMMITTEE INCLUDED IN THIS REPORT (See definition on reverse.)

NAME OF COMMITTEE:

Citizens for Sieglock

I. D. NUMBER  
902318

ADDRESS OF COMMITTEE: NO. AND STREET CITY STATE ZIP CODE AREA CODE/DAY TIME PHONE NUMBER

P. O. Box 2671 Lodi CA 95242 (209) 368-6521

NAME OF TREASURER:

Larry M. Solari P. O. Box 1607 Stockton CA 95201 (209) 943-2222

PERMANENT ADDRESS OF TREASURER: NO. AND STREET CITY STATE ZIP CODE AREA CODE/DAY TIME PHONE NUMBER

1044 N. El Dorado St. Stockton CA 95202 (209) 943-2222

III OTHER COMMITTEES: LIST ANY OTHER COMMITTEES NOT INCLUDED IN THIS STATEMENT WHICH ARE CONTROLLED BY YOU AND ANY COMMITTEES PRIMARILY FORMED TO RECEIVE CONTRIBUTIONS OR MAKE EXPENDITURES ON BEHALF OF YOUR CANDIDACY.

COMMITTEE NAME AND I.D. NUMBER	COMMITTEE ADDRESS	TREASURER	CONTROLLED COMMITTEE?	
			YES	NO

Attach additional information on appropriately labeled continuation sheets.

VERIFICATION

CANDIDATE OR OFFICEHOLDER:

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 10/23/90 AT Lodi, CA  
(DATE) (CITY AND STATE)

BY *Jack A. Sieglock*  
(SIGNATURE OF CANDIDATE OR OFFICEHOLDER)  
Jack A. Sieglock

TREASURER (if applicable):

I HAVE USED ALL REASONABLE DILIGENCE IN PREPARING THIS 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 10/23/90 AT Stockton, CA  
(DATE) (CITY AND STATE)

BY *Larry M. Solari*  
(SIGNATURE OF TREASURER)  
Larry M. Solari

COPY

**SUMMARY PAGE  
FORM 490**

(Amounts May Be Rounded To Whole Dollars)

STATEMENT COVERS PERIOD  
FROM 10/1/90 THROUGH 10/20/90

I.D. NUMBER  
902318

NAME OF CANDIDATE OR OFFICEHOLDER AND CONTROLLED COMMITTEE:  
Citizens for Sieglock

**CONTRIBUTIONS RECEIVED**

	COLUMN A Cumulative total from previous period*
1. Monetary contributions .....	\$ 274.00
2. Loans received .....	2,000.00
3. SUBTOTAL CASH RECEIPTS .....	\$ 2,274.00 <small>LINES 1 + 2</small>
4. Non-monetary contributions .....	-0-
5. TOTAL CONTRIBUTIONS WITHOUT ENFORCEABLE PROMISES .....	2,274.00 <small>LINES 3 + 4</small>
6. Enforceable Promises (Except loan guarantees, see Line 18 below) .....	-0-
7. TOTAL CONTRIBUTIONS .....	\$ 2,274.00 <small>LINES 5 + 6</small>

COLUMN B Total this period from attached schedules
\$ 3,521.00 <small>SCHEDULE A, LINE 3</small>
-0- <small>SCHEDULE B, LINE 7</small>
\$ 3,521.00 <small>LINES 1 + 2</small>
-0- <small>SCHEDULE C, LINE 3</small>
3,521.00 <small>LINES 3 + 4</small>
-0- <small>SCHEDULE D, LINE 7</small>
\$ 3,521.00 <small>LINES 5 + 6</small>

COLUMN C Cumulative to date (Columns A + B)
\$ 3,795.00
2,000.00
\$ 5,795.00 <small>LINES 1 + 2</small>
-0-
5,795.00 <small>LINES 3 + 4</small>
-0-
\$ 5,795.00 <small>LINES 5 + 6 (SHOULD EQUAL LINE 7, COLUMNS A + B)</small>
-0-
3,133.70 <small>LINES 8 + 9</small>
-0-
\$ 3,133.70 <small>LINES 10 + 11 (SHOULD EQUAL LINE 12, COLUMNS A + B)</small>

**EXPENDITURES MADE**

8. Payments .....	\$ 2,119.29
9. Loans Made .....	-0-
10. SUBTOTAL .....	2,119.29 <small>LINES 8 + 9</small>
11. Accrued expenses (unpaid bills) .....	-0-
12. TOTAL EXPENDITURES .....	\$ 2,119.29 <small>LINES 10 + 11</small>

**\*IF THIS IS THE FIRST REPORT FILED FOR THE CALENDAR YEAR, COLUMN A SHOULD BE BLANK EXCEPT FOR LINES 2, 6, 9 AND 11 (if applicable).**

**STATEMENT OF CHANGES IN FINANCIAL CONDITION**

13. Cash on hand at the beginning of this period. (Enter amount from Summary Page, Line 17, from previous statement filed.) .....	\$ 154.71
14. Cash receipts this period (Line 3, Column B above) .....	3,521.00
15. Miscellaneous increases to cash (Schedule G, Line 4) .....	-0-
16. Cash payments this period (Line 10, Column B above) .....	1,014.41
17. Cash on hand at end of reporting period (Lines 13 + 14 + 15 - 16 above) (If this is a Termination Statement, Line 17 must be Zero.) .....	\$ 2,661.30
18. Amount of loan guarantees received (Schedule B, Part I, Column (b)) .....	\$ -0-
19. Cash equivalents (other assets held including outstanding loans made to others). Important: See instructions on reverse .....	\$ -0-
20. Outstanding debts (Line 2 + Line 11 of Column C above) .....	\$ 2,000.00

**SUMMARY FOR CANDIDATES IN BOTH A JUNE AND NOVEMBER ELECTION (See Instructions on Reverse)**

	1/1 THRU 6/30	7/1 TO DATE
21. CONTRIBUTIONS RECEIVED:	-0-	5,795.00
22. EXPENDITURES MADE:	-0-	3,133.70

**SCHEDULE A  
MONETARY CONTRIBUTIONS RECEIVED  
FORM 490**  
(Amounts May Be Rounded To Whole Dollars)

STATEMENT COVERS PERIOD	
FROM	THROUGH
10/1/90	10/20/90

NAME OF CANDIDATE OR OFFICEHOLDER AND CONTROLLED COMMITTEE:		I.D. NUMBER			
Citizens for Sieglock		902318			
DATE REC'D.	FULL NAME AND ADDRESS OF CONTRIBUTOR <small>(IF COMMITTEE, IN ADDITION TO COMMITTEE'S NAME AND ADDRESS, ENTER I.D. NUMBER OR, IF NO I.D. NUMBER HAS BEEN ASSIGNED, ENTER THE TREASURER'S NAME AND ADDRESS)</small>	OCCUPATION		AMOUNT	
		EMPLOYER <small>(IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)</small>	RECEIVED THIS PERIOD	CUMULATIVE TO DATE	
10/4/90	Mrs. Vickie Van Steenberge 1029 S. School St. Lodi, CA 95240	Occupation: President Employer: Lodi Iron Works	\$250.00	CALENDAR YEAR: \$ 250.00 FISCAL YEAR: \$	
10/10/90	Pearl E. Sanguinetti 1752 Wyn Way Lodi, CA 95240	Occupation: Retired Employer:	\$100.00	CALENDAR YEAR: \$ 100.00 FISCAL YEAR: \$	
10/10/90	Robert Barsamian 1045 Lucille Newman, CA 95360	Occupation: Pharmacist Employer: Patterson Drug	\$250.00	CALENDAR YEAR: \$ 250.00 FISCAL YEAR: \$	
10/15/90	The Grupe Company Concerned Businessmen Political Action Committee I.D. No. 831390 P.O. Box 7576 Stockton, CA 95207	Occupation: Employer:	\$250.00	CALENDAR YEAR: \$ 250.00 FISCAL YEAR: \$	
10/16/90	Robert W. Foy 517 N. Hunter Stockton, CA 95203	Occupation: President Employer: Pacific Storage Company	\$100.00	CALENDAR YEAR: \$ 100.00 FISCAL YEAR: \$	
10/16/90	Stefanie E. Orozco P. O. Box 565 Truckee	Occupation: Owner Employer: Cabona's Clothing Store	\$100.00	CALENDAR YEAR: \$ 100.00 FISCAL YEAR: \$	
10/17/90	Mr. Embree Cross P. O. Box 369 Truckee, CA 95734	Occupation: President Employer: Truckee Tahoe Lumber Co.	\$100.00	CALENDAR YEAR: \$ 100.00 FISCAL YEAR: \$	
<b>SUBTOTAL</b>			<b>\$ 1,150.00</b>		

**SUMMARY**

1. AMOUNT RECEIVED THIS PERIOD – CONTRIBUTIONS OF \$100 OR MORE (Include all Schedule A subtotals) .....	\$ 1,150.00
2. AMOUNT RECEIVED THIS PERIOD – CONTRIBUTIONS OF LESS THAN \$100 (Not itemized).....	2,371.00
3. TOTAL MONETARY CONTRIBUTIONS RECEIVED THIS PERIOD (Line 1 + Line 2) Enter here and on Line 1, Column B of Summary Page.....	\$ 3,521.00

**SCHEDULE E**  
**PAYMENTS AND CONTRIBUTIONS (OTHER THAN LOANS) MADE** PAGE 4 OF 4  
**FORM 490**

(Amounts May Be Rounded To Whole Dollars)

STATEMENT COVERS PERIOD	
FROM	THROUGH
10/1/90	10/20/90

NAME OF CANDIDATE OR OFFICEHOLDER AND CONTROLLED COMMITTEE: Citizens for Sieglock	I.D. NUMBER 902318
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**CODES FOR CLASSIFYING EXPENDITURES**

If one of the following codes is used to describe the expenditure, no written description is needed. (Note exceptions on the back of this schedule for code "T".) Refer to the back of this schedule and the back of the Schedule E Continuation Sheet for detailed explanations of each category.

- |                                                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                                                                                               |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <p>"C" – MONETARY AND IN-KIND (NON-MONETARY) CONTRIBUTIONS TO OTHER COMMITTEES</p> <p>"I" – INDEPENDENT EXPENDITURES</p> <p>"L" – LITERATURE</p> <p>"B" – BROADCAST ADVERTISING</p> <p>"N" – NEWSPAPER AND PERIODICAL ADVERTISING</p> <p>"O" – OUTSIDE ADVERTISING</p> | <p>"S" – SURVEYS, SIGNATURE GATHERING, DOOR-TO-DOOR SOLICITATIONS</p> <p>"F" – FUNDRAISING EVENTS</p> <p>"G" – GENERAL OPERATIONS AND OVERHEAD</p> <p>"T" – TRAVEL, ACCOMMODATIONS AND MEALS (MUST BE DESCRIBED. SEE BACK OF SCHEDULE E CONTINUATION SHEET.)</p> <p>"P" – PROFESSIONAL MANAGEMENT AND CONSULTING SERVICES</p> |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

If one of the above codes does not accurately or fully describe the expenditure, leave the "Code" column blank and provide a written description in the "Description of Payment" column.

**IMPORTANT:** Do not itemize the payment of accrued expenses on Schedule E. Report only the lump sum of these payments on Line 4 of the Summary section, below.

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 THE TREASURER'S NAME AND ADDRESS)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
U.S. Postmaster 120 S. School Lodi, CA 95240	L		\$125.00
The Non-Partisan Candidate Evaluation Council 6033 W. Sunset, #950 Los Angeles, CA 90045	L		\$490.00
The Lodi News Sentinel 125 N. Church Lodi, CA 95240	N		\$257.15
<b>SUBTOTAL</b>			<b>\$ 872.15</b>

**SUMMARY**

1. PAYMENTS OF \$100 OR MORE MADE THIS PERIOD (Include all Schedule E subtotals) .....	\$ 872.15
2. PAYMENTS UNDER \$100 THIS PERIOD (Not itemized) .....	142.26
3. TOTAL INTEREST PAID THIS PERIOD ON OUTSTANDING LOANS (Schedule B, Part 2, Column (d)) .....	-0-
4. TOTAL ACCRUED EXPENSES PAID THIS PERIOD (Not itemized) (Schedule F, Line 4) .....	-0-
5. TOTAL PAYMENTS THIS PERIOD (Line 1 + 2 + 3 + 4) Enter here and on Line 8, Column B of Summary Page .....	<b>\$1,014.41</b>