

Memorandum

To : John Keplinger
Fair Political Practices Commission

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FEB 8 11 32 AM '78

Date: February 7, 1978

A#-78-187



From : **Secretary of State** - DAVID B. PITMAN, Manager
Political Reform Division

Copy to
Berma

Subject: Misrouting of Correspondence

The attached letter from Mayor Lawson of the City of Seaside is being returned to your office for appropriate response.

In that he contacted your office and does seem to be confused as to his duties under the Political Reform Act, I suggest that it is more appropriate for you to respond to the campaign disclosure and possible conflict of interest provisions which may affect him.

Oscar Lawson, Seaside: Confirmed by phone (February 15, 1978) that his semi-annual campaign disclosure statement was filed properly. JG.

Attachment

DBP:tf

**CITY OF
SEASIDE**



P.O. BOX 157, 440 HARCOURT AVE. SEASIDE, CALIFORNIA 93955 TEL. [408] 394-8531

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OFFICE OF THE MAYOR

January 30, 1978

Fair Political Practices Commission
Campaign Disclosure
1100 Kay Street
Sacramento, California 95814

Gentlemen:

During the reporting period of July 1 through December 31, 1977, I was the elected Mayor of the City of Seaside. (The reporting for this period is covered by an enclosed Form 430.) On November 19, 1977, I publicly announced that I would not be seeking re-election. By that statement, I terminated my "candidacy". The income and expenditures which appear on the enclosed Form 430 took place prior to my public announcement and termination of my candidacy.

Yours truly,

A handwritten signature in cursive script that reads "Oscar C. Lawson".

OSCAR C. LAWSON
Mayor, City of Seaside

OCL/ddl

Encl.: Form 430



Form 430

CANDIDATE AND OFFICEHOLDER CAMPAIGN STATEMENT

(Government Code Section 84200-84216)

RECEIVED

In the office of the Secretary of State of the State of California

FEB 3 1978

RECEIVED
OFFICE OF CITY CLERK
SEASIDE, CALIFORNIA

FEB 27 1978 JAN 31

Candidates and officeholders who receive or spend \$200 or more or on whose behalf \$200 or more has been raised or spent for the entire campaign.

(Type or Print in Ink)

Statement covers period from 7/1/77 through 12/31/77

MARCH FORG... OFFICIAL USE ONLY

NAME OF CANDIDATE: OSCAR C. LAWSON				Office sought or held (Include location and district number if applicable): MAYOR			
RESIDENTIAL ADDRESS:	NO. AND STREET	CITY	STATE	ZIP CODE	AREA CODE	PHONE N.	
	1045 Sonoma Ave.	Seaside,	CA	93955	408	394-0145	
BUSINESS ADDRESS:	NO. AND STREET	CITY	STATE	ZIP CODE	AREA CODE	PHONE N.	

TYPE OF ELECTION (Circle one if applicable): Primary <input type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Recall <input type="checkbox"/>	CIRCLE IF APPLICABLE: semi-annual <input type="checkbox"/> campaign statement <input type="checkbox"/>	DATE OF ELECTION (MO. DAY YR.):	TOTAL PAGES
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* On November 19, 1977, I publicly announced that I would not be seeking re-election. *g*

I LIST ALL COMMITTEES CONTROLLED BY YOU WHICH HAVE RECEIVED CONTRIBUTIONS OR MADE EXPENDITURES ON BEHALF OF YOUR CANDIDACY

(A controlled committee is one which is controlled directly or indirectly by you or which acts jointly with you or one of your controlled committees in connection with the making of expenditures. You control a committee if you, your agent or any other committee you control has significant influence on the actions or decisions of the committee.)

COMMITTEE NAME AND I.D. NUMBER	COMMITTEE ADDRESS	TREASURER	TREASURER'S PERMANENT ADDRESS	PHONE NUMBER

Attach additional information on appropriately labeled continuation sheets.

II LIST ALL ADDITIONAL COMMITTEES OF WHICH YOU HAVE KNOWLEDGE WHICH HAVE RECEIVED CONTRIBUTIONS OR MADE EXPENDITURES ON BEHALF OF YOUR CANDIDACY

COMMITTEE NAME AND I.D. NUMBER	COMMITTEE ADDRESS	TREASURER	TREASURER'S PERMANENT ADDRESS	PHONE NUMBER

Attach additional information on appropriately labeled continuation sheets.

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D
E
F

VERIFICATION

I declare under penalty of perjury that to the best of my knowledge this statement and its attached schedules are true, correct and complete and that I have used all reasonable diligence in their preparation.

Executed on 1-31-78 at Seaside, Ca. by Oscar C. Lawson
(DATE) (CITY AND STATE) (SIGNATURE OF CANDIDATE OR OFFICEHOLDER)

NAME OSCAR C. LAWSON

MAYOR

I.D. NUMBER (Committee)

Statement covers period from 7/1/77 through 12/31/77

SCHEDULE A, FORM 420, 430 or 490
MONETARY CONTRIBUTIONS RECEIVED
(Amounts may be rounded off to whole dollars)

PART 1 - RECEIVED FROM RECIPIENT COMMITTEES: (See information manual for directions and examples)

Table with 5 columns: DATE, FULL NAME AND ADDRESS OF COMMITTEE (Street, City, State), I.D. NUMBER OR TREASURER'S FULL NAME AND PERMANENT ADDRESS, AMOUNT RECEIVED, CUMULATIVE TO DATE. The first row contains a handwritten signature in the second column.

Attach additional information on appropriately labeled continuation sheets.

SUBTOTAL (Carry with any additional Subtotals to line 1, part 3, page 4) \$

Statement covers period from _____ through _____

**SCHEDULE B, FORM 420, 430 or 490
LOANS**

(Amounts may be rounded off to whole dollars)

PART 1 – LOANS RECEIVED: (See information manual for directions and examples)

DATE	FULL NAME AND ADDRESS OF LENDER AND ANY GUARANTORS OR COSIGNERS	OCCUPATION	EMPLOYER (If self-employed list street address and city of business.)	Interest Rate	AMOUNT OF LOAN	CUMULATIVE AMOUNT
Subtotal					\$	

Attach additional information on appropriately labeled continuation sheets.

PART 2 – LOANS REPAYED, FORGIVEN, OR PAID BY A THIRD PARTY:

(See information manual for directions and examples)

DATE	FULL NAME AND ADDRESS OF THE LENDER PLUS PERSON WHO REPAYED THE LOAN IF DIFFERENT FROM FILER	(a) AMOUNT REPAYED	(b) AMOUNT FORGIVEN (Enter on Sched. A)	(c) AMOUNT PAID BY A THIRD PARTY (Enter on Sched. A)	(d) UNPAID BALANCE
Subtotal					\$

Attach additional information on appropriately labeled continuation sheets.

PART 3 – SUMMARY

- 1. LOANS OF \$50 OR MORE THIS PERIOD (Part 1) \$ _____
- 2. LOANS UNDER \$50 THIS PERIOD (Not Itemized) _____
- 3. TOTAL LOANS RECEIVED (Line 1 + 2) _____
- 4. LOANS REPAYED OF \$50 OR MORE THIS PERIOD (Part 2, Column a) _____
- 5. LOANS FORGIVEN OF \$50 OR MORE THIS PERIOD (Part 2, Column b) _____
- 6. LOANS PAID BY A THIRD PARTY OF \$50 OR MORE THIS PERIOD (Part 2, Column c) _____
- 7. LOANS REPAYED, FORGIVEN, OR PAID BY A THIRD PARTY UNDER \$50 THIS PERIOD (Not Itemized) _____
- 8. TOTAL LOANS REPAYED, FORGIVEN OR PAID BY A THIRD PARTY THIS PERIOD (Line 4 + 5 + 6 + 7) _____
- 9. NET CHANGE THIS PERIOD (Subtract Line 8 from Line 3 and enter the difference on this line and on Line 2, Column 8 of Summary Page.) \$ _____

MAY BE A NEGATIVE FIGURE.

