

Type or print in Ink.

Officeholder, Candidate, and Controlled Committee Campaign Statement - Long Form

Government Code Sections 84200-84216.5

INSTRUCTIONS ON REVERSE

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

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

Officeholder, Candidate, and Controlled Committee Included in this Statement

NAME OF OFFICEHOLDER OR CANDIDATE

JOAN BARRY

OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTINCT NUMBER IF APPLICABLE)

STATE SENATE DISTRICT 6 980819

RESIDENTIAL OR BUSINESS ADDRESS

5110 RUSCAL WAY FAIR OAKS CA 95628 916

CITY

FAIR OAKS CA 95628 916 988-1800

COMMITTEE NAME

JOAN BARRY for STATE SENATE

COMMITTEE ADDRESS

9267 GREENBAK Lane

CITY

ORANGEVALE CA 95662 916-989-9428

NAME OF TREASURER

SUZANNE TJOELKER

PERMANENT ADDRESS OF TREASURER

4759 CONCORD DR

CITY

FAIR OAKS CA 95628 916-961-3903

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 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 3/23/98 DATE AT ORANGEVALE CA CITY AND STATE

An officeholder or candidate 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 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 3-23-98 DATE AT Orangevale Ca CITY AND STATE

Executed on _____ DATE AT _____ CITY AND STATE

Executed on _____ DATE AT _____ CITY AND STATE

Statement covers period from <u>January 1 1998</u> through <u>March 17 1998</u>	Date Stamp RECEIVED AND FILED JUDICIAL INFORMATION DIVISION OFFICE OF SECRETARY OF STATE MAR 24 AM 9:12 3-23-98 BILL JONES SECRETARY OF STATE
Date of election if applicable: 98 (Month, Day, Year) <u>June 2, 1998</u> CA	Page <u>1</u> of <u>4</u> For Official Use Only

Other Committees Not Included in this Statement: List any other committees not included in this consolidated statement that are controlled by you and any committees of which you have knowledge that are primarily formed to receive contributions or to make expenditures on behalf of your candidacy.

COMMITTEE NAME _____ I.D. NUMBER _____

NAME OF TREASURER _____ CONTROLLED COMMITTEE? YES NO

COMMITTEE ADDRESS _____ (NO. AND STREET)

CITY _____ STATE _____ ZIP CODE _____ AREA CODE/DAYTIME PHONE _____

COMMITTEE NAME _____ I.D. NUMBER _____

NAME OF TREASURER _____ CONTROLLED COMMITTEE? YES NO

COMMITTEE ADDRESS _____ (NO. AND STREET)

CITY _____ STATE _____ ZIP CODE _____ AREA CODE/DAYTIME PHONE _____

Attach additional information on appropriately labeled continuation sheets.

By Suzanne Tjoelker SIGNATURE OF TREASURER

By Joan Barry SIGNATURE OF CANDIDATE/OFFICEHOLDER

By _____ SIGNATURE OF CANDIDATE/OFFICEHOLDER

By _____ SIGNATURE OF CANDIDATE/OFFICEHOLDER

Campaign Disclosure Statement Summary Page

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

SUMMARY PAGE

INSTRUCTIONS ON REVERSE

NAME OF OFFICEHOLDER OR CANDIDATE AND CONTROLLED COMMITTEE

JOAN BARRY

Contributions Received

Statement covers period from Jan 1-98 through March 17-98

Page 2 of 4
I.D. NUMBER Not assigned yet

	Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B* TOTAL PREVIOUS PERIOD (SEE NOTE BELOW)	Column C TOTAL TO DATE (ADD COLUMNS A + B)
Monetary Contributions	Schedule A, Line 3		
Loans Received	Schedule B, Line 7		
SUBTOTAL CASH CONTRIBUTIONS	Add Lines 1 + 2		
Non-monetary Contributions	Schedule C, Line 3		
SUBTOTAL CONTRIBUTIONS (Exclude Enforceable Promises)	Add Lines 3 + 4		
Enforceable Promises (Exclude Loan Guarantees, Line 16 below)	Schedule D, Line 7		
TOTAL CONTRIBUTIONS RECEIVED	Add Lines 5 + 6		
Expenditures Made			
Cash Payments (Other than Loans Made)	Schedule E, Line 5		
Loans Made	Schedule H, Line 7		
SUBTOTAL CASH PAYMENTS	Add Lines 8 + 9		
Accrued Expenses (Unpaid Bills)	Schedule F, Line 5		
TOTAL EXPENDITURES MADE	Add Lines 10 + 11		

Current Cash Statement

Beginning Cash Balance	Previous Summary Page, Line 17	
Cash Receipts	Column A, Line 3 above	
Miscellaneous Increases to Cash	Schedule I, Line 4	
Cash Payments	Column A, Line 10 above	
ENDING CASH BALANCE	Add Lines 13 + 14 + 15, then subtract Line 16	

If this is a termination statement, Line 17 must be zero.

LOAN GUARANTEES RECEIVED	Schedule B, Part I, Column (b)	\$	0
Cash Equivalents and Outstanding Debts		\$	0
Cash Equivalents	See instructions on reverse	\$	0
Contributions Received	1/1 through 6/30	\$	0
Expenditures Made	7/1 to Date	\$	0

* From previous Statement Summary Page, Column C. However, if this is the first report filed for the calendar year, Column B should be blank except for Loans Received (Line 2), Enforceable Promises (Line 6), Loans Made (Line 9), and Accrued Expenses (Line 11).

Summary for Candidates in Both June and November Elections

