

**Contributor and Candidate
Campaign Statement
Form 470 Supplement**
(Government Code Section 84206)

FORM 470 SUPPLEN

SEE INSTRUCTIONS ON REVERSE

Type or print in ink.

This form is written notification that the officeholder/candidate listed below has received contributions totaling \$1,000 or more or has made expenditures of \$1,000 or more during the calendar year.

Date Stamp

For Official Use Only

I Officeholder or Candidate Information

NAME OF OFFICEHOLDER OR CANDIDATE

GERALD KEAAS

RESIDENTIAL OR BUSINESS ADDRESS

5109 Melvin Drive

(NO. AND STREET)

CITY

Carmichael

STATE

CA

ZIP CODE

95608

AREA CODE/DAYTIME PHONE NUMBER

916-322-7057

II Information on Office Sought

OFFICE SOUGHT

STATE SENATE

DISTRICT NUMBER
(IF APPLICABLE)

6

DATE OF ELECTION (MONTH, DAY, YEAR)

JUNE 2, 1998

III Date Contributions Totalling \$1,000 or More Were Received or Date Expenditures of \$1,000 or More Were Made

March 6, 1998
(MONTH, DAY, YEAR)