CAMPAIGN CONTRIBUTIONS

REPORT PERIOD Number 3

Linda Howard — Candidate's Name (print)

Regent "A" — Office

2 — District (if applicable)

Contributions in Excess of $100 or, When Added Together Exceed $100

CONTRIBUTOR'S NAME AND ADDRESS	DATE(S) OF EACH CONTRIBUTION	AMOUNT OF EACH CONTRIBUTION(S)	CHECK ✓ IF LOAN	CHECK ✓ IF IN KIND
P. L. Cunningham Phoenix, Az	11-30-00	500.00	✓	
Nevada Faculty Alliance Reno, NV	12-20-00	1,000.00 (Debt Ret.)		
Joe Neal North Las Vegas, NV 89030	10-10-00	1,000.00		
Station Casinos Las Vegas, NV	12-29-00	250.00 (Debt Ret.) $2,750.00		
Please Note!				
*① Contributions $100 or less = $200.00 (Sheet was not included)				
*② Erroneously reported $160.00 from Sen. Neal on				
*③ October 28 in Report #2 No financial disclosure statement required for Regents				
*④ No unspent contributions				

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Linda Howard — Candidate's Name (print)
Regent "A" — Office
2 — District (if applicable)

Expenses Categories

CATEGORIES	CODE	TOTALS
Office expenses	A	
Expenses related to volunteers	B	500.00
Expenses related to travel	C	120.00
Expenses related to advertising	D	1,025.00
Expenses related to paid staff	E	0
Expenses related to consultants (& Volunteers)	F	1,750.00
Expenses related to polling	G	
Expenses related to special events	H	150.00
Goods and services provided in kind for which money would otherwise have been paid	I	
Other miscellaneous expenses	J	275.00
		3,820

CAMPAIGN EXPENSES REPORT PERIOD Number 3

Linda Howard — Regent "A" — 2

Candidate's Name (print) — *Office* — *District (if applicable)*

Expenses of $100 or Less

DATE OF EACH EXPENDITURE	AMOUNT OF EACH EXPENDITURE	CATEGORY
11-1-00	10.00	C
11/2-11/7	60.00	C
11-2	100.00	D
11-2	100.00	B
11-3	100.00	B
11-4	100.00	B
11-5	100.00	B
11-6	100.00	B
11-6	100.00	D
11-4	100.00	D
11-5	100.00	D
11-7	100.00	D
11-7	50.00	C
11-2	80.00	J
11-4	90.00	J
11-1	100.00	D
11-2	25.00	D
	1,415.00	

DATE OF EACH EXPENDITURE	AMOUNT OF EACH EXPENDITURE	CATEGORY

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CAMPAIGN EXPENSES REPORT PERIOD Number 3

Linda Howard	Regent "A"	2
Candidate's Name (print)	*Office*	*District (if applicable)*

Expenses in Excess of $100

NAME AND ADDRESS OF PERSON, GROUP OR ORGANIZATION WHO RECEIVED THE PAYMENT FOR THE EXPENSE(S)	CATEGORY	DATE(S) OF EACH EXPENSE	AMOUNT(S) OF EACH EXPENSE
Charleta Byrd	F	11-7-00	1,750.00
Sentinnel Voice	D	11-1-00	250.00
Paran Lodge Elks	H	12-22-00	150.00
~~NARCP~~	~~D~~	~~11-1-00~~	~~100.00~~
Signs	D	11-1-00	270.00
Apparrel	J	11-1-00	105.00
			$ 2,525

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