

COMMITTEE FOR POLITICAL ACTION  
 SUMMARY OF CAMPAIGN CONTRIBUTIONS AND EXPENSES  
 2000 PRIMARY AND GENERAL ELECTIONS

NEVADA  
 SECRETARY OF STATE *State of Nevada*

2 PAC453

*Triumph Neighborhood P.A.C.*  
 Committee Name (print) OCT 24 2000

*225 South 16th St L.V. NV 89101*  
 Mailing Address (include city and zip code) 386/5991  
 Telephone Number

SECURITIES DIVISION

**REPORT NUMBER 2 - DUE OCTOBER 31, 2000**

Report Period Begins: August 24, 2000  
 Report Period Ends: October 25, 2000

CONTRIBUTIONS SUMMARY

<ol style="list-style-type: none"> <li>1. From Report Number 1, total amount of contributions in excess of \$100</li> <li>2. From Report Number 1, total amount of contributions of \$100 or less</li> <li>3. Report Number 2, amount of contributions in excess of \$100</li> <li>4. Report Number 2, total amount of contributions of \$100 or less                      From Report Numbers 1 and 2, actual number of                      contributions of \$100 or less _____</li> <li>5. Interest and income earned, if any, during this report period</li> <li>6. <b>TOTAL AMOUNT OF ALL CONTRIBUTIONS</b>                      (add lines 1 through 5)</li> </ol>	<p style="writing-mode: vertical-rl; transform: rotate(180deg);">                         DEAN HELLER                          SECRETARY OF STATE                          2000 OCT 25                          FILED                          CARSON CITY                          NEVADA                          A 10 5 11                     </p>
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EXPENSES SUMMARY

<ol style="list-style-type: none"> <li>7. From Report Number 1, total amount of expenses in excess of \$100</li> <li>8. From Report Number 1, total amount of expenses of \$100 or less</li> <li>9. Report Number 2, total amount of expenses in excess of \$100</li> <li>10. Report Number 2, total amount of expenses of \$100 or less</li> <li>11. <b>TOTAL AMOUNT OF ALL EXPENSES</b>                      (add lines 7 through 10)</li> </ol>	<p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p>
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*If no contributions or expenses are listed during this Report Period, only this page of the report needs to be filed with your filing officer.*

I declare under penalty of perjury that the foregoing is true and correct.

Executed on \_\_\_\_\_ Date *[Signature]* Signature of Authorized Person or Representative of Committee

Prescribed by Secretary of State  
 NRS 294A.140, 294A.210  
 EL202.002(rev. 07/00)