Report Period # 2

CAMPAIGN CONTRIBUTIONS

Howard Wade Bycroft — Name (print)

State Assembly — Office (if applicable)

District 4 — District (if applicable)

Contributions in Excess of $100 or, When Added Together from One Contributor Exceeds $100

Contributor's Name and Address	Date of Each Contribution	Amount of Each Contribution	Check Here If Loan
Dr. Dean Mondell 10230 James Hardin Ave. Las Vegas, Nevada 89129	8/24/02	$5,000.00	
Clark County Medical Society PAC 2590 E. Russell Road Las Vegas, Nevada 89120	8/23/02	$500.00	
Metro Medical Equipment 3925 W. Cheyenne Suite 407 N. Las Vegas, NV 89032	8/24/02	$200.00	
Dr. Michael Zimmerman 805 Petit Chalet Ct. Las Vegas, NV 89145	9/22/02	$500.00	
Dr. Ann Wierman		$200.00	
Dr. Steven Kozmary		$150.00	
Dr. Kay McMillian 2915 Charleston Blvd St. 10 Las Vegas, Nevada 89102		$200.00	
Dr. Gary Chopra 3101 Maryland Pkwy Ste 208 Las Vegas, NV 89109		$150.00	
Dr. Michael Seiff 2320 Paseo Del Prado Ste B-302 Las Vegas, Nevada 89102-4350	9/13/02	$250.00	
Sidney + Greta Mandell 9632 Ann Arbor Lane Las Vegas, NV 89134	9/12/02	$2,500.00	
Robin + Mitchell Rappazzo 2405 Satellite Beach Drive Las Vegas, Nevada 89134	10/1/02	$250.00	

This page may be copied or duplicated if additional space is needed.

Revised: Apr-02

EL201.doc

Report Period #2

CAMPAIGN CONTRIBUTIONS

Name (print): HOWARD WADE BYCROFT

Office (if applicable): State Assembly

District (if applicable): District 4

Contributions in Excess of $100 or, When Added Together from One Contributor Exceeds $100

CONTRIBUTOR'S NAME AND ADDRESS	DATE OF EACH CONTRIBUTION	AMOUNT OF EACH CONTRIBUTION	CHECK HERE IF LOAN
HOWARD Wade BYCROFT 10230 JAMES HARDIN AVE LAS VEGAS, NV 89129	10/2/02	$10,000.00	✓
Paradise Democratic Club 4964 Sepulveda LAS VEGAS, Nevada 89118	10/24/02	$200.00	

This page may be copied or duplicated if additional space is needed.

Revised: Apr-02

EL201.doc

Report Period # 2

CAMPAIGN CONTRIBUTIONS

Name (print): HOWARD WADE BYCROFT

Office (if applicable): State Assembly

District (if applicable): District 4

Contributions of $100 or Less

DATE OF EACH CONTRIBUTION	AMOUNT OF EACH CONTRIBUTION
8/28	25.00
8/30	50.00
9/2	100.00
9/3	75.00
9/3	75.00
9/3	75.00
9/3	75.00
9/3	75.00
9/3	75.00
9/3	75.00
9/3	75.00
9/3	75.00
9/3	75.00
9/3	75.00
9/3	75.00
9/3	75.00
9/3	75.00
9/3	75.00
9/3	75.00
9/3	75.00
9/5	60.00
9/7	45.00
9/8	50.00
9/8	100.00
9/11	100.00
9/11	50.00
9/[illegible]	50.00

DATE OF EACH CONTRIBUTION	AMOUNT OF EACH CONTRIBUTION
9/12	75.00
9/12	100.00
9/15	60.00
9/17	100.00
9/18	100.00
9/21	100.00
10/5	50.00
10/5	50.00
10/5	50.00
10/5	50.00
10/5	50.00
10/5	50.00
10/5	50.00
10/5	50.00
10/5	50.00
10/5	50.00
10/5	50.00
10/5	50.00
10/5	50.00
10/5	50.00
10/5	50.00
10/5	50.00
10/7	65.00
10/8	25.00
10/8	100.00

This page may be copied or duplicated if additional space is needed.

Revised: Apr-02

EL201.doc

CAMPAIGN CONTRIBUTIONS Report Period #2

Howard Wade Bycroft — Name (print)
State Assembly — Office (if applicable)
District 4 — District (if applicable)

Contributions of $100 or Less

DATE OF EACH CONTRIBUTION	AMOUNT OF EACH CONTRIBUTION	DATE OF EACH CONTRIBUTION	AMOUNT OF EACH CONTRIBUTION
10/8	50.00	10/20	100.00
10/9	100.00	10/20	100.00
10/11	100.00	10/22	100.00
10/11	100.00	10/22	50.00
10/11	55.00	10/23	75.00
10/14	100.00	10/23	45.00
10/14	60.00	10/24	50.00
10/14	35.00	10/24	100.00
10/15	25.00		
10/18	100.00		
10/18	45.00		
10/20	100.00		
10/20	100.00		
10/20	100.00		
10/20	100.00		
10/20	100.00		
10/20	100.00		
10/20	100.00		
10/20	100.00		
10/20	100.00		
10/20	100.00		
10/20	100.00		
10/20	100.00		
10/20	100.00		
10/20	100.00		
10/20	100.00		
10/20	100.00		

This page may be copied or duplicated if additional space is needed.

IN KIND CAMPAIGN CONTRIBUTIONS

Report Period # 2

Howard Wade Bycroft — Name (print)

State Assembly — Office (if applicable)

District 4 — District (if applicable)

IN KIND

Contributions in Excess of $100 or, When Added Together from One Contributor Exceeds $100

Contributor's Name and Address	Date of Each In Kind Contribution	Description of Each In Kind Contribution	Value or Cost of Each In Kind Contribution	Check Here If Loan
Rehabilitation Assoc. of Nevada 653 Town Center #418 Las Vegas, NV 89144	10/6/02	Postage, envelopes, and letterhead	$ 722.86	
PDQ Printing 3820 S. Valley View Las Vegas, NV 89103	10/15/02	Postage and copies of brochures	$ 2,819.47	
Joanie + Michael Mangiagli 8330 Hipwader Ct Las Vegas, NV 89113	10/5/02	Held Fundraiser w/ Food and Beverage	$ 278.47	
Joanie + Michael Mangiagli 8330 Hipwader Ct Las Vegas, NV 89113	10/20/02	Held Fund Raiser with Food and Beverage	$ 421.16	

This page may be copied or duplicated if additional space is needed.

CAMPAIGN EXPENSES Report Period #2

Howard Wade Bycroft — Name (print)
State Assembly — Office (if applicable)
District 4 — District (if applicable)

Expenses of $100 or Less

DATE OF EACH EXPENSE	AMOUNT OF EACH EXPENSE	CATEGORY
9/7	21.40	
9/16	13.80	
9/23	87.62	
10/5	27.64	
10/20	74.24	

DATE OF EACH EXPENSE	AMOUNT OF EACH EXPENSE	CATEGORY

This page may be copied or duplicated if additional space is needed.

20

CAMPAIGN EXPENSES Report Period # 2

HOWARD WADE BYCROFT State Assembly District 4

Name (print) Office (if applicable) 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 (See Previous Page) NRS 294A.365	DATE OF EACH EXPENSE	AMOUNT OF EACH EXPENSE
SunCity Link 9107 Del Webb Blvd. Las Vegas, NV 89134	D	10/1/02	$800.00
SunCity Community Center 10740 Thomas Ryan Las Vegas, NV 89134	H	10/19/02	$400.00
Beehive Newspaper 7251 W. Lake Mead. Ste 500 Las Vegas, NV 89128	D	8/23/02	$363.00
	D	9/23/02	$363.00
	D	10/23/02	$363.00
American Solutions for Business P.O. Box 1450 Minneapolis, MN 55485-7794	D	9/2/02	$4,301.44
PDQ Printing 3820 S. Valley View Las Vegas, Nev. 89103	D	9/15/02	$26,000.00
Bob Nixon 3820 S. Valley View Las Vegas, Nev. 89103	E	8/28/02	$796.00
United States Postal Office Summerlin Office Las Vegas, NV 89134	J	8/29/02	$1,061.07

This page may be copied or duplicated if additional space is needed.

CAMPAIGN EXPENSES Report Period # 2

Howard Wade Bycroft — Name (print)
State Assembly — Office (if applicable)
District 4 — 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 (See Previous Page) NRS 294A.365	DATE OF EACH EXPENSE	AMOUNT OF EACH EXPENSE
Sprint Telephone Services P.O. Box 79133 Phoenix, AZ 85062-9133	A	8/29/02	$ 161.50
	A	9/29/02	$ 87.44
Office Depot Rainbow/W. Lake Mead Las Vegas, NV 89129	A	9/1/02	$ 212.78

This page may be copied or duplicated if additional space is needed.