CAMPAIGN CONTRIBUTIONS Report Period # 3

BOB COFFIN — Name (print)
STATE SENATE — Office (if applicable)
10 — 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
PARDEC Homes 10880 WILSHIRE Los Angeles	10/25	500	
PACIFICARE P.O. Box 6100 Cypress CA	10/25	500	
NAIFA PAC P.O. Box 10358 Reno	10/25	500	
MFG Home Community Owners PAC 4055 S. SPENCER Las Vegas	10/25	500	
Phillip Morris Mgt. Corp 120 PARK Ave NY, NY	10/25	1000	
Keith Lee 3400 KAUAI Ct. Reno	10/30	200	
Nev. Hospital Assoc. PAC 5250 Neil Rd Reno	10/30	750	
Republic Disposal URBAN MAINT. P.O. Box 98508 Las Vegas	10/30 12/18	250 250	
Republic Services PO Box 98508 Las Vegas	10/30 12/18	250 250	
Concerned Physicians of Nev. 1930 Village Center Cir Las Vegas	11/8	1000	
IBEW Educ. Cmte 1125 15th NW Washington DC	11/8	500	

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CAMPAIGN CONTRIBUTIONS

Report Period # 3

Bob Coffin — Name (print)
State Senate — Office (if applicable)
10 — 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
WELLS FARGO PAC 3800 Howard Hughes Las Vegas	11/8	250	
Republic Environmental Tech. P.O. Box 98508 Las Vegas	12/18	250	
Rhodes Design + Dev. Corp 252 Angels Trace Ct. Las Vegas	1/3	1000	
Nev. Credit Union League PAC 9500 Cleveland Ave Rancho Cucamonga CA	1/3	500	

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CAMPAIGN CONTRIBUTIONS Report Period # 3

BOB COFFIN STATE SENATE 10

Name (print) Office (if applicable) District (if applicable)

Contributions of $100 or Less

DATE OF EACH CONTRIBUTION	AMOUNT OF EACH CONTRIBUTION
10/25	20
10/25	100
10/25	100

DATE OF EACH CONTRIBUTION	AMOUNT OF EACH CONTRIBUTION

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BOB COFFIN STATE SENATE 10

Name (print) Office (if applicable) District (if applicable)

Expense Categories

CATEGORIES	CODE
Office expenses	A
Expenses related to volunteers	B
Expenses related to travel	C
Expenses related to advertising	D
Expenses related to paid staff	E
Expenses related to consultants	F
Expenses related to polling	G
Expenses related to special events	H
** Goods and services provided in kind for which money would otherwise have been paid	I
Other miscellaneous expenses	J

***** NRS 294A.362 requires "In Kind" contributions and expenses to be reported on a separate form, which is attached.***

CAMPAIGN EXPENSES Report Period # 3

BOB COFFIN — Name (print)
STATE SENATE — Office (if applicable)
10 — 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 Back Page) NRS 294A.365	DATE OF EACH EXPENSE	AMOUNT OF EACH EXPENSE
HELP OF SOUTHERN NEV. 953 E. SAHARA LAS VEGAS	H	10/25	~~400~~ BC 275
CLASS PUBLICATIONS 4505 MARYLAND PKWY LAS VEGAS NV	H	10/25	400
C.S. HOOPER 4701 E. SAHARA LAS VEGAS	E	10/30	987
PALADIN ADVERTISING 2290 S. JONES LAS VEGAS	F	11/7	5000
PALADIN ADVERTISING 2290 S. JONES LAS VEGAS	D	11/7	7505
~~Employee's Holiday Fund~~ C. HOOPER 4701 E. SAHARA	E	11/18	1177
GARY REESE CAMPAIGN 9706 BRACKEN AVE LAS VEGAS	J	11/19	250
~~ASSISTANCE LEAGUE OF NV~~ ABBOTT TROPHY 953 E. SAHARA LAS VEGAS NV	D	11/20	165
SPRINT PCS PO BOX 79357 CITY OF INDUSTRY, CA	A	11/25	641

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CAMPAIGN EXPENSES Report Period # 3

BOB COFFIN — Name (print)
STATE SENATE — Office (if applicable)
10 — 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
C. Hooper 4701 E. Sahara Las Vegas	E	12/16	1250
State Museum Private Dedicated Trust Fund 600 N. Carson Carson City	J	12/23	500
HELP of Southern Nev 953 E. Sahara Las Vegas	J	12/23	500
Class Publications Sandy Thompson Fund 4505 Maryland Pkwy Las Vegas	J	12/23	500
Anti-Defamation League 1050 E. Flamingo Las Vegas	J	12/23	500
KNPR 1289 So. Torrey Pines Las Vegas	J	12/23	365
New Horizon Academy Foundation 6701 W. Charleston Las Vegas	J	12/23	1000
First Good Shepherd School Library Fund 301 S. Maryland Pkwy Las Vegas	J	12/23	500
The Shade Tree 1 West Owens North Las Vegas	J	12/23	500

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CAMPAIGN EXPENSES — Report Period # 3

BOB COFFIN — STATE SENATE — 10

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
NEVADA ASSOC. FOR MENTALLY ILL 6150 TRANSVERSE DR. LAS VEGAS	J	12/23	750
Boy Scouts of AMERICA 7220 So. PARADISE Rd LAS VEGAS NV	J	12/23	500
FRONTIER GIRL SCOUT COUNCIL 2941 HARRIS AVE LAS VEGAS	J	12/23	500
Catholic Charities OF Southern 808 So. MAIN ST. LAS VEGAS	J	12/23	500
Southwest AIRLINES PHOENIX ARIZ	C	12/31	2483
Comp USA 3535 W. SAHARA AVE LAS VEGAS	A	12/31	7673

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CAMPAIGN EXPENSES Report Period: #3

BOB COFFIN State Senate 10

Name (print) Office (if applicable) District (if applicable)

Expenses of $100 or Less

DATE OF EACH EXPENSE	AMOUNT OF EACH EXPENSE	CATEGORY
11/19	25	H
11/19	75	H
11/20	60	H

DATE OF EACH EXPENSE	AMOUNT OF EACH EXPENSE	CATEGORY

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