CAMPAIGN CONTRIBUTIONS

Report Period: #1

Teresa Price — Name (print)

Assembley 37 — Office (if applicable)

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
George + Marcia Chamie 2004 Eagle Trace Way 89117	8/5	500.	
Bob + Nancey Price 11907 Fam Camp Dr. 89115	8/5	450	
Gene + Birgetta Perry 10204 Orkney Dr. 89144	8/5	300.	
Marty Lies 2518 Del Rey 89128	7/20	300.	
Teresa Price 7857 Morning Flower 89128	5/25	600	✓
Ultimate Bedroom 5240 W Charleston	6/15	300.	
Sherie Price Steiner 610 22nd St Rosa Mesa, Ca.	6/1 8/5.	400.	

2550

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CAMPAIGN CONTRIBUTIONS Report Period #1

Teresa Price. Assembley 37.

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

Contributions of $100 or Less

DATE OF EACH CONTRIBUTION	AMOUNT OF EACH CONTRIBUTION	DATE OF EACH CONTRIBUTION	AMOUNT OF EACH CONTRIBUTION
June 15	100	8/5	50
June 15	100	8/5	50
June 15	50	8/5	60
June 17	50	8/5	50
June 20	50	8/5	50
June 20	100	8/5	65
May 24	100	8/5	50
May 25	100	8/5	50
May 30	100	8/5	50
July 1	100	8/5	25
July 5	100	8/5	95
Aug 3	25	8/5	25
Aug 5	40	8/5	140
Aug 5	25	8/5	100
8/5	70	8/5	35
8/5	35	8/15	25
8/5	50	8/15	100
8/5	70	8/15	50
8/5	41	8/15	20
8/5	50	8/15	50
8/1	25	8/16	100
8/5	100	8/17	20
8/5	50	8/17	10
8/5	35	8/17	25
8/5	100	8/19	15
8/5	100	8/05	50
8/5	155	8/2	45

2986
80
3066

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CAMPAIGN CONTRIBUTIONS Report Period #1

Teresa Price | Assembly | 37

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

Contributions of $100 or Less

DATE OF EACH CONTRIBUTION	AMOUNT OF EACH CONTRIBUTION	DATE OF EACH CONTRIBUTION	AMOUNT OF EACH CONTRIBUTION
8/19	100		
8/19	100		
8/19	50		
8/19	25		
8/20	100		
8/20	50		
7/6	50		
7/6	75		
7/5	20		
8/5	20		
8/5	25		
8/5	25		
8/5	50		
8/5	100		
7/5	50		
7/6	25		
7/6	75		
7/6	100		
7/8	100		
7/23	75		
7/22	25		
7/6	20		
7/8	100		
7/8	100		
7/9	50		

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CAMPAIGN EXPENSES Report Period # 1

Teresa Price | Assembly | 37.

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 # 1

Terrie Price — Name (print)
Assembly — Office (if applicable)
37 — 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
American Screen Printing 2916 S Highland Dr # A	D	6-27-2002	1335.27
Passkey 4395 Polaris Ave	D.	8/21/02	595.07
Advertising Gimmix 324 Wild Plum Ln 89107	D.	7/27/02	343.10
Discount Printing	D	8-22-02	540.00
Danner Outlet 6185 S Valley View #B	D	6/28/02	168.00
Sams club. Tropical Wy	H	8/2/02	359.06
Costco Charleston	H	8/3/02	254.05

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CAMPAIGN EXPENSES Report Period #1

Teresa Price — Name (print)
Assembly — Office (if applicable)
37 — District (if applicable)

Expenses of $100 or Less

DATE OF EACH EXPENSE	AMOUNT OF EACH EXPENSE	CATEGORY
4/20	13 50	A Office Supply
4/30	25 16	A Office Supply
5/12	30 56	A Office Sup
7/2	40 06	A
7/19	45 67	A
8/6	60 10	A
7/12	80 15	A
6/13	45	D
6/14	70 35	G
8/5	26 40	H
8/22	24 00	B
8/17	21	B
8/12	30 76	B
8/4	40 40	H
8/5	15	H
8/3	20	H
6/23	25 15	H
8/17	10 05	H
8/20	40	D

DATE OF EACH EXPENSE	AMOUNT OF EACH EXPENSE	CATEGORY
8/21	B	65
8/22	B	100

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IN KIND CAMPAIGN EXPENSES

Report Period #

Teresa Frale — Name (print)

Assembly — Office (if applicable)

37 — District (if applicable)

IN KIND

Expenses of $100 or Less

DATE OF EACH IN KIND EXPENSE	VALUE OR COST OF EACH IN KIND EXPENSE	DESCRIPTION OF EACH IN KIND EXPENSE
8/5	30	Cake.
8/5	100	Showtickets.
8/5	100	Bleach whitening kit.
8/5	100	Crafts.
8/5	50	restaraunt
8/5	60	restaraunt
8/5	70	restaraunt.
8/5	100	tour
8/5	50	Dinner

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Prescribed by Secretary of State
NRS 294A.120, 294A.140, 294A.150
294A.200, 294A.210, 294A.220, 294A.362

IN KIND CAMPAIGN EXPENSES — Report Period #1

Teresa Price — Name (print)
Assembly — Office (if applicable)
37 — District (if applicable)

IN KIND

Expenses of $100 or Less

DATE OF EACH IN KIND EXPENSE	VALUE OR COST OF EACH IN KIND EXPENSE	DESCRIPTION OF EACH IN KIND EXPENSE
8/5	80	Haircuts
8/5	60	pedicure manicure
8/5	30	sandwich Tray
8/5	40	food.
8/5	100	Art Piece
8/5	100	Art Piece

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Prescribed by Secretary of State
NRS 294A.120, 294A.140, 294A.150
294A.200, 294A.210, 294A.220, 294A.362