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Name (print) LOANDA WRIGHT Office (if applicable) STATE SENATE District (if applicable) 2  
 Mailing Address (include city and zip code) 10500 PYRAMID AVE RENO NV 89510 Telephone No. 775-425-0111  
 E-Mail Address \_\_\_\_\_

Select Appropriate Box(es)  CANDIDATE  PAC  BAG  POL/PRF  IN/DFE  AMENDED

- Report #1 — Due August 27, 2002**  
 Office with a 2-year term Period: Jan. 5, 2001 — Aug. 22, 2002  
 Office with a 4-year term Period: Dec. 20, 1998 — Aug 22, 2002  
 Office with a 6-year term Period: Dec. 6, 1996 — Aug 22, 2002  
 BAGs only: Period: Dec. 7, 2000 — Aug 22, 2002
- Report #2 Due — October 29, 2002**  
 Period: Aug. 23, 2002 — Oct. 24, 2002
- Report #3 Due — January 15, 2003**  
 Period: Oct. 25, 2002 — Jan. 3, 2003  
 BAGs only: Period: Oct. 25, 2002 — Dec. 5, 2002

**FILED** *LL*  
**AUG 16 2002** *CERTIFIED MAIL*  
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**BALANCE**

This figure should reflect the balance shown on your last Disposition of Unspent Contributions Report, or last Contributions & Expenses Report, if any \_\_\_\_\_

**CONTRIBUTIONS SUMMARY**

"Contribution" means a gift, loan, conveyance, deposit, payment, transfer or distribution of money or anything of value other than the services of a volunteer received. (NRS 294A.007)

- |  |                |
|--|----------------|
| 1. Total amount of monetary contributions in excess of \$100                 | <u>2325.00</u> |
| 2. Total amount of monetary contributions of \$100 or less                   | <u>1393.00</u> |
| Actual number of monetary contributions of \$100 or less                     | <u>25</u>      |
| 3. Interest and income earned on contributions, if any                       | _____          |
| 4. <b>TOTAL AMOUNT OF ALL MONETARY CONTRIBUTIONS</b> (add lines 1 through 3) | <u>3718.00</u> |
| 5. Total amount of In Kind Contributions                                     | <u>205.00</u>  |

**EXPENSES SUMMARY**

- |   |                |
|---|----------------|
| 6. Total amount of monetary expenses in excess of \$100                 | <u>2303.46</u> |
| 7. Total amount of monetary expenses of \$100 or less                   | <u>310.00</u>  |
| 8. Expense for filing fee   | <u>100.00</u>  |
| 9. <b>TOTAL AMOUNT OF ALL MONETARY EXPENSES</b> (add lines 6 through 8) | <u>2713.46</u> |
| <b>Remaining Balance</b> (Subtract line 9 from 4)                       | <u>999.54</u>  |
| 10. Total amount of In Kind Expenses                                    | <u>205.00</u>  |

**AFFIRMATION**

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

Signature *Loanda Wright* Date Executed On Aug 15, 2002