

CAMPAIGN CONTRIBUTIONS AND EXPENSES REPORT

State of Nevada

1199

Name (print) ALCUS CONSULTING Office (if applicable)
 Mailing Address (include city and zip code) 6005 PLUMAS STE 301 RENO, NV. 89509 District (if applicable)
 E-Mail Address SCRAIGIE12@AOL.COM Telephone No. 775-829-7080

Select Appropriate Box(es) CANDIDATE PAC BAG POL PRY IND EXP AMENDED ANNUAL FILING

Annual Filing - Due January 15, 2004
 Period: January 1, 2003 - December 31, 2003

Report #1 - Due August 31, 2004
 Incumbents in an Office with a 4-year term Period: Jan. 5, 2001 - Aug 26, 2004
 Incumbents in an Office with a 6-year term Period: Dec. 20, 1998 - Aug 26, 2004
 All others Period: Jan. 1, 2004 - Aug. 26, 2004
 Ballot Advocacy Groups (BAGs) only: Period: Dec. 5, 2002 - Aug 26, 2004

Report #2 Due - October 26, 2004
 Period: Aug. 27, 2004 - Oct. 21, 2004

Report #3 Due - January 15, 2005*
 BAGs only: Period: Oct. 22, 2004 - Dec. 31, 2004
 Period: Oct. 22, 2004 - Dec. 5, 2004

Annual Filing - Due January 15, 2005
 Period: January 1, 2004 - December 31, 2004

* Third Report suffices for 2005 Annual Filing if candidate also filed Report Nos. 1 and 2

2004 AUG 30 11:11
 FILED
 CARSON COUNTY
 NEVADA
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CLERK
 SECRETARY OF STATE

CONTRIBUTIONS SUMMARY

	This Period	Cumulative From Beginning of Report Period #1 through End of This Reporting Period
1. Total Monetary Contributions Received in Excess of \$100	18,000.00	18,000.00
2. Total Monetary Contributions Received of \$100 or Less	- 0 -	- 0 -
3. Total Amount of Monetary Contributions Received (Add Lines 1 and 2)	18,000.00	18,000.00
4. Total Value of In Kind Contributions Received in Excess of \$100	- 0 -	- 0 -

EXPENSES SUMMARY

5. Total Monetary Expenses Paid in Excess of \$100	14,000.00	14,000.00
6. Total Monetary Expenses Paid of \$100 or Less	- 0 -	- 0 -
7. Total Amount of All Monetary Expenses Paid (Add Lines 5 and 6)	14,000.00	14,000.00
8. Total Value of In Kind Expenses in Excess of \$100	2961.60	2961.60

AFFIRMATION

I Declare Under Penalty of Perjury That the Foregoing is True and Correct.

Signature [Handwritten Signature]

Date 8/27/04

CAMPAIGN CONTRIBUTIONS

Report Period # /

ALRUS CONSULTING

Name (print)

Office (if applicable)

District (if applicable)

Contributions in Excess of \$100 or, When Added Together from One Contributor Exceeds \$100
Transfer Total Amount of All Campaign Contributions to Line 1 of Contributions Summary

CONTRIBUTOR'S NAME AND ADDRESS	DATE OF EACH CONTRIBUTION	AMOUNT OF EACH CONTRIBUTION	CHECK HERE IF LOAN
NEVADA STATE MEDICAL ASSOC., 3660 BAKER LN. #101, RENO NV.	4/30/04	8000.00	
NEVADA GENERAL INS. CO. 5685 W. SPRING MTN. RD. LAS VEGAS, NV. 89146	5/15/04	2000.00	
STATE FARM INS. Co. ONE STATE FARM PLAZA BLOOMINGTON, ILL. 61710	6/02/04	2000.00	
FARMERS GROUP, INC. 4680 WILSHIRE BLVD. LOS ANGELES, CA. 90010	6/02/04	2000.00	
RETAILERS ASSN. OF NEVADA 1007 NO. NEVADA ST. CARSON CITY, NV. 89703	6/02/04	1000.00	
UNITED SERVICES AUTOMOBILE ASSN., 9800 FREDERICKSBURG RD, SAN ANTONIO, TX	7/01/04	1000.00	
ALLSTATE INS. Co. 2775 SANDERS RD. NORTH BROOK, IL. 60062	7/26/04	2000.00	

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CAMPAIGN EXPENSES

Report Period # /

ALRUS CONSULTING

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
Expenses related to NRS 294A.160 (Disposition of Unspent Contributions)	K

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

