CAMPAIGN CONTRIBUTIONS AND EXPENSES REPORT — State of Nevada

James R. Coffin — Name (print)
SENATE — Office (if applicable)
10 — District (if applicable)
1139 5TH PLACE LAS VEGAS NV — Mailing Address (include city and zip code)
7023861096 — Telephone No.
JCOFFIN@SCN.STATE.NV.US — E-Mail Address

Select Appropriate Box(es): ☐ CANDIDATE ☐ PAC ☐ BAC ☐ POL PRTY ☐ INC EXP ☐ AMENDED ☒ ANNUAL FILING

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

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☐ **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***
Period: Oct. 22, 2004 — Dec. 31, 2004
BAGs only: 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**

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		6000
2. Total Monetary Contributions Received of $100 or Less		—

	This Period	Cumulative From Beginning of Report Period #1 Through End of This Reporting Period
3. **Total Amount of Monetary Contributions Received** (Add Lines 1 and 2)		6000
4. Total Value of In Kind Contributions Received in Excess of $100	Ø	

EXPENSES SUMMARY

5. Total Monetary Expenses Paid in Excess of $100		6635
6. Total Monetary Expenses Paid of $100 or Less		
7. **Total Amount of All Monetary Expenses Paid** (Add Lines 5 and 6)		6635
8. Total Value of In Kind Expenses in Excess of $100	Ø	

AFFIRMATION

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

James R Coffin — Signature
1/15/05 — Date

CAMPAIGN CONTRIBUTIONS — Report Period # 4

JAMES R. COFFIN — SENATE — 10

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 POWER CO LAS VEGAS NV	4/6/04	500	
KOSTER FINANCIAL 4170 So. DECATUR LAS VEGAS	10/26/04	1000	
NEV. FINANCIAL SVC. 3325 W. SAHARA LAS VEGAS	10/26/04	1000	
CHECK CITY 2474 UNIVERSITY PROVO UT	10/26/04	1000	
PLACER DOME MINING DENVER CO	11/4/04	500	
LAS VEGAS CHAMBER OF COMMERCE LAS VEGAS NV	11/4/04	1000	
BARRICK MINING	11/4/04	500	
NV. MINING ASSOC.	11/4/04	500	
		6000-	

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CAMPAIGN EXPENSES — Report Period: #

JAMES R. COFFIN — SENATE — 10

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

Expenses in Excess of $100
Transfer Total Amount of All Campaign Expenses to Line 5 of Expenses Summary

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 PCS LAS VEGAS NV	A	1/04-12/04	1610.00 ~~1609.78~~
LAS VEGAS SUN LAS VEGAS NV	A	1/04-12/04	715.
Dept. of Motor Veh CARSON City NV	A	12/04	46.
Hispanics in Politics LAS VEGAS NV	K	6/04	30.
WOMENS DEMOCRATIC CLUB LAS VEGAS	K	6/04	30.
CHRIS GUINCHILIAN 706 BRACKEN LAS VEGAS NV	K	7/04	50.
LATIN CHAMBER OF COMMERCE LAS VEGAS NV	A	6/04	255.
HELP of SONEV LAS VEGAS NV	K	3/04	300.
JUNIOR LEAGUE of LAS VEGAS LAS VEGAS, NV	K	4/04	250.
JAMMERS SOCCER LAS VEGAS NV	D	4/04	200
Bishop GORMAN H.S. LAS VEGAS NV	K	3/04 12/04	100 100
U.S. YOUTH SPORTS SOCCER OF NV LAS VEGAS NV	D	12/04	150
LABOR DAY CLASSIC LAS VEGAS NV	D	5/04	475

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CAMPAIGN EXPENSES — Report Period: #

JAMES R. COFFIN — SENATE — 10

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

Expenses in Excess of $100
Transfer Total Amount of All Campaign Expenses to Line 5 of Expenses Summary

NAME AND ADDRESS OF PERSON, GROUP OR ORGANIZATION WHO RECEIVED THE PAYMENT FOR THE EXPENSE(S)	CATEGORY (SEE REVERSE SIDE) NRS 294A.365	DATE OF EACH EXPENSE	AMOUNT OF EACH EXPENSE
SILVER STATE GIRLS SOCCER LEAGUE LAS VEGAS NV	D	11/04	650
PLANNED PARENTHOOD OF SNEV LAS VEGAS NV	K	5/04	300
SONY PUYALLUP, WA	K	12/04	1624.
SPRING FLING SOCCER LAS VEGAS NV	D	5/04	70.
ABBOTT TROPHY LAS VEGAS NV	D	9/04	186
SPORTS ONE LAS VEGAS NV	D	9/04	100.
			2924
			3711
			6635

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