

# CAMPAIGN CONTRIBUTIONS AND EXPENSES REPORT

State of Nevada

DOUGLAS COUNTY DEMOCRATIC CENTRAL COMMITTEE

Name (print)

Office (if applicable)

District (if applicable)

PO Box 1016 MINDEN, NV 89423

775 224-1133

Mailing Address (include city and zip code)

Telephone No.

E-Mail Address

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

- Report #1 Due — March 29, 2005**  
Period: Jan. 1, 2005 - Mar. 24, 2005
- Report #2 Due — May 31, 2005**  
Period: Mar. 25, 2005 — May 26, 2005
- Report #3 Due — July 15, 2005**  
Period: May 27, 2005 — June 30, 2005
- Annual Filing — Due January 15, 2006**  
Period: January 1, 2005 – December 31, 2005

For Office Use Only

**RECEIVED**

**JUL 13 2005**

DOUGLAS COUNTY CLERK

## CONTRIBUTIONS SUMMARY

1. Total Monetary Contributions Received in Excess of \$100
2. Total Monetary Contributions Received of \$100 or Less

This Period

Cumulative From Beginning of Report Period #1 through End of This Reporting Period

0      0

0      0

| This Period | Cumulative From Beginning of Report Period #1 Through End of This Reporting Period |
|-------------|--|
| <u>0</u>    |  |

3. **Total Amount of Monetary Contributions Received**  
(Add Lines 1 and 2)
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
6. Total Monetary Expenses Paid of \$100 or Less
7. **Total Amount of All Monetary Expenses Paid**  
(Add Lines 5 and 6)
8. Total Value of In Kind Expenses in Excess of \$100

0      0

0      0

0      0

## AFFIRMATION

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

Signature

Delta Brown Treasurer

**RECEIVED**

AUG 05 2005

# 181 Elections Division  
Secretary of State

7-11-05  
Date

**CAMPAIGN CONTRIBUTIONS**

Report Period # 3

Name (print) Douglas County DEMOCRATIC CENTRAL COMMITTEE  
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 |
|--------------------------------|---------------------------|-----------------------------|--------------------|
| <i>None</i>                    |                           |                             |                    |
|                                |                           |                             |                    |
|                                |                           |                             |                    |
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Revised Dec-04

**CAMPAIGN EXPENSES**

Report Period # 3

Name (print)

DOUGLAS COUNTY DEMOCRATIC CENTRAL COMMITTEE

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.**

**CAMPAIGN EXPENSES**

Report Period # 3

Name (profit) DOUGLAS COUNTY DEMOCRATIC CENTRAL COMMITTEE 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<br>(See Previous Page)<br>NRS 294A.365 | DATE OF EACH EXPENSE | AMOUNT OF EACH EXPENSE |
|---|---|----------------------|------------------------|
| <i>None</i>   |   |                      |                        |
|   |   |                      |                        |
|   |   |                      |                        |
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## IN KIND CONTRIBUTIONS AND EXPENSES REPORT

**IN KIND CONTRIBUTION IS DEFINED AS THE VALUE OF SERVICES PROVIDED IN KIND FOR WHICH MONEY WOULD HAVE OTHERWISE BEEN PAID.**

*In kind contributions and expenses include: paid polling and resulting data, paid direct mail, paid solicitation by telephone, any paid paraphernalia that was printed or otherwise produced to promote a campaign and the use of paid personnel to assist in a campaign. An in kind contribution may also include, but is not limited to: goods and services such as billboards, office space, printing, food and beverage and yard signs.*

**The donor of in kind contributions shall furnish to the recipient (candidate or other person), a written statement setting forth the actual cost of those services or the fair market value within 30 days after the time he furnishes those services. (NAC 294A.043)**

**Examples of in kind contributions:** (1) A person contributes billboard space and does not charge the candidate. The candidate would report the fair market value or actual cost of the billboard space as an in kind contribution; (2) A person pays for the printing cost of political signs for a candidate. The candidate would report the actual cost or fair market value of printing the signs as an in kind contribution.

**Example of in kind expenses:** (1) A person contributes the use of a large room to a candidate as an in kind contribution. Once the candidate utilizes the room it becomes an in kind expense to be reported.

**IN KIND CAMPAIGN CONTRIBUTIONS**

Report Period # 3

DOUGLAS COUNTY DEMOCRATIC CENTRAL COMMITTEE  
 Name (print) Office (if applicable) District (if applicable)

**IN KIND**

Contributions in Excess of \$100 or, When Added Together from One Contributor Exceeds \$100  
 Transfer Total Value of All In-Kind Campaign Contributions to Line 4 of Contributions Summary

| CONTRIBUTOR'S NAME AND ADDRESS | DATE OF EACH IN KIND CONTRIBUTION | DESCRIPTION OF EACH IN KIND CONTRIBUTION | VALUE OR COST OF EACH IN KIND CONTRIBUTION | CHECK HERE IF LOAN |
|--------------------------------|-----------------------------------|--|--|--------------------|
| <i>None</i>                    |                                   |  |  |                    |
|                                |                                   |  |  |                    |
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**IN KIND CAMPAIGN EXPENSES**

Report Period # 3

Name (print)

Office (if applicable)

District (if applicable)

*DOUGLAS COUNTY DEMOCRATIC CENTRAL COMMITTEE*

**IN KIND**

**Expenses in Excess of \$100**

Transfer Total Value of All In-Kind Campaign Expenses to Line 8 of Expenses Summary

| NAME AND ADDRESS OF PERSON, GROUP OR ORGANIZATION WHO RECEIVED THE IN KIND GOOD(S) OR SERVICE(S) | DESCRIPTION OF EACH IN KIND EXPENSE | DATE OF EACH IN KIND EXPENSE | VALUE OR COST OF EACH IN KIND EXPENSE |
|--|-------------------------------------|------------------------------|---------------------------------------|
| <i>None</i>  |                                     |                              |                                       |
|  |                                     |                              |                                       |
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Prescribed by Secretary of State  
 NRS 294A.120, 294A.125,  
 294A.140, 294A.150, 294A.160  
 294A.200, 294A.210, 294A.220, 294A.360, 294A.362, 294A.365