CAMPAIGN CONTRIBUTIONS AND EXPENSES REPORT **State of Nevada**

Name (print): NEVADA PSYCHIATRIC ASSOCIATION POLITICAL ACTION COMMITTEE

Office (if applicable): MARK ARMERDING, MD

District (if applicable): 80 CONTINENTAL DR STE 200 RENO NV 89509

Mailing Address (include city and zip code)

Telephone No. 775-329-4284

E-Mail Address

Select Appropriate Box(es) ☐ CANDIDATE ☒ PAC ☐ BAG ☐ POL PRTY ☐ IND EXP ☐ NONPROFIT CORP

☐ AMENDED ☐ ANNUAL FILING ☐ PETITIONERS WHO INITIATE/CIRCULATE PETITION & RECEIVE OR EXPEND FUNDS IN EXCESS OF 10K

14082

☐ **Annual Filing - Due January 15, 2006**
Period: January 1, 2005 – December 31, 2005

☐ **Report #1 — Due August 8, 2006***
Period: Jan. 1, 2006 — Aug 3, 2006

☒ **Report #2 Due — October 31, 2006***
Period: Aug. 4, 2006 — Oct. 26, 2006

☐ **Report #3 Due — January 15, 2007*/****
Period: Oct. 27, 2006 — Dec. 31, 2006

☐ **Annual Filing – Due January 15, 2007**
Period: January 1, 2006 – December 31, 2006

FILE
OCT 25 2006
certified
DEAN HELLER
SECRETARY OF STATE
FOR OFFICE USE ONLY

*** These Reports are filed by incumbents/candidates running for office in the 2006 election cycle**
**** Third Report suffices for 2007 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 **(See page 1 of instruction sheet)**	800.00	800.00
2. Total Monetary Contributions Received of $100 or Less **(See page 2 of instruction sheet)**		
3. Total Monetary Contributions in the form of loans guaranteed by a third party. **(See page 2 of instruction sheet)**		
4. Total Monetary Contributions in the form of loans that were forgiven **(See page 2 of instruction sheet)**		
5. **Total Amount of Monetary Contributions Received** (Add Lines 1 through 4) **(See page 2 of instruction sheet)**	800.00	800.00
6. Total Amount of Written Commitments for Contributions (When commitment is funded, report as contribution (monetary or in kind)) **(See page 2 of instruction sheet)**		
7. Total Value of In Kind Contributions Received in Excess of $100 **(See page 2 of instruction sheet)**		

EXPENSES SUMMARY

	This Period	Cumulative From Beginning of Report Period #1 Through End of This Reporting Period
8. Total Monetary Expenses Paid in Excess of $100 **(See page 2 of instruction sheet)**	3500.00	3500.00
9. Total Monetary Expenses Paid of $100 or Less **(See page 2 of instruction sheet)**		
10. **Total Amount of All Monetary Expenses Paid** (Add Lines 8 and 9) **(See page 2 of instruction sheet)**	3500.00	3500.00
11. Total Value of In Kind Expenses in Excess of $100 **(See page 3 of instruction sheet)**		
12. Disposition of Unspent Contributions **(Only reported on Report #3, Annual Report or 15th day of the second month after candidates defeat or incumbent does not run for reelection)** **(See page 3 of instruction sheet)**		

AFFIRMATION

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

Signature: [signature] Date: 10/26/06

CAMPAIGN CONTRIBUTIONS **Report Period** # 2

NEVADA PSYCHIATRIC ASSOCIATION POLITICAL ACTION COMMITTEE

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	Name and Address of 3rd Party if Loan Guaranteed by 3rd Party	Name and Address of Person Who Forgave the Loan, if Different Than Contributor
JOHN CHAPPEL UNR SCHOOL OF MED MS 354, RENO, NV	7/28/06	200.00			
CHARLES PRICE 1775 FAIRFIELD RENO NV 89509	10/23/06	300.00			
LESLEY DICKSON 5213 HACKBERRY HILL LAS VEGAS NV 89131	10/21/06	300.00			

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CAMPAIGN EXPENSES **Report Period** # 2

NEVADA PSYCHIATRIC ASSOCIATION POLITICAL ACTION COMMITTEE

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

Expenses in Excess of $100
Transfer Total Amount of All Campaign Expenses to Line 8 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
COMM TO RE-ELECT BARBARA BUCKLEY	J	10/2/06	$1000-
COMM TO RE-ELECT MAURICE WASHINGTON	J	10/2/06	$ 500-
COMM TO RE-ELECT SHEILA LESLIE	J	10/2/06	$250-
COMM TO RE-ELECT MARCUS CONKLIN	J	10/2/06	$ 250-
MAJORITY LEADERS PAC	J	10/2/06	$1000-
COMM TO RE-ELECT GARN MABEY	J	10/25/06	$250-
COMM TO RE-ELECT JOE HARDY	J	10/25/06	$250-

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