

CAMPAIGN CONTRIBUTIONS AND EXPENSES REPORT

State of Nevada

Silver State Leadership Fund P.A.C.

Name (print) 6502 S. McCarran Blvd, Ste D, Reno, NV 89509 Office (if applicable) (775) 823-3777 District (if applicable)  
 Mailing Address (include city and zip code) dtturner@turnerloy.com Telephone No.  
 E-Mail Address

- Select Appropriate Box(es)  CANDIDATE  PAC  BAG  POL PRY  IND EXP  NONPROFIT CORP  
 AMENDED  ANNUAL FILING  PETITIONERS WHO INITIATE/CIRCULATE PETITION & RECEIVE OR EXPEND FUNDS IN EXCESS OF 10K

- 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

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**FILE**  
*J. Foreman*  
**AUG 08 2006**  
*Certified*  
**DEAN HELLER**  
**SECRETARY OF STATE**  
 FOR OFFICE USE ONLY

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\* 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)	0.00	0.00
2. Total Monetary Contributions Received of \$100 or Less (See page 2 of instruction sheet)	0.00	0.00
3. Total Monetary Contributions in the form of loans guaranteed by a third party. (See page 2 of instruction sheet)	0.00	0.00
4. Total Monetary Contributions in the form of loans that were forgiven (See page 2 of instruction sheet)	0.00	0.00
5. Total Amount of Monetary Contributions Received (Add Lines 1 through 4) (See page 2 of instruction sheet)	0.00	0.00
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)	0.00	0.00
7. Total Value of In Kind Contributions Received in Excess of \$100 (See page 2 of instruction sheet)	0.00	0.00

EXPENSES SUMMARY

8. Total Monetary Expenses Paid in Excess of \$100 (See page 2 of instruction sheet)	11,489.96	11,489.96
9. Total Monetary Expenses Paid of \$100 or Less (See page 2 of instruction sheet)	373.04	373.04
10. Total Amount of All Monetary Expenses Paid (Add Lines 8 and 9) (See page 2 of instruction sheet)	11,863.00	11,863.00
11. Total Value of In Kind Expenses in Excess of \$100 (See page 3 of instruction sheet)	0.00	0.00
12. Disposition of Unspent Contributions (Only reported on Report #3, Annual Report or 15 <sup>th</sup> 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.

*Jim Gibbons*  
 Signature

8-7-06

Date 10



**WRITTEN COMMITMENTS**

Report Period # **1**

Silver State Leadership Fund P.A.C.  
Name (print) Office (if applicable) District (if applicable)

**Written Commitments in Excess of \$100 or, When Added Together from One Entity Exceeds \$100  
Transfer Total Amount of All Written Commitments to Line 6 of Contributions Summary**

NAME AND ADDRESS OF PERSON WHO MADE THE COMMITMENT	DATE OF EACH COMMITMENT	AMOUNT OF EACH COMMITMENT
NONE		

This page may be copied or duplicated if additional space is needed.

Silver State Leadership Fund P.A.C.  
 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

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

Silver State Leadership Fund

P.A.C.

**Expenses in Excess of \$100**  
**Transfer Total Amount of All Campaign Expenses to Line 8 of Expenses Summary**

<b>Name &amp; Address of Person, Group or Organization who received the payment for the expense(s)</b>	<b>Category</b> (see Previous page)	<b>Date of Each Expense</b>	<b>Amount of Each Expense</b>
UNR College Republicans 505 S Arlington Ave, Ste 106 Reno, NV 89509	J	1/3/2006	500.00
Committee to Elect Valerie Weber 10001 Harpoon Circle Las Vegas, NV 89117	J	1/9/2006	500.00
Citizen Alert P.O. Box 17173 Las Vegas, NV 89114	J	1/11/2006	1,000.00
Turner, Loy & Co., LLC 6502 S. McCarran Blvd., Suite D Reno, NV 89509	J	1/19/2006	239.96
Tom Grady for Assembly 43 Fairway Drive Yerington, NV 89447	J	2/6/2006	1,000.00
Chad Christensen for Assembly 9101 W Sahara, Ste 105 Las Vegas, NV 89117	J	2/6/2006	1,000.00
Citizen Outreach 1817 Alpine Street Carson City, NV 89703	J	2/20/2006	1,000.00
Senate Republican Leadership Conference P.O. Box 281 Reno, NV 89504	J	3/1/2006	500.00
Committee to Re-Elect Pete Goicoechea P.O. Box 97 Eureka, NV 89316	J	3/3/2006	500.00
Republican Assembly Caucus 8625 W Sahara Ave Las Vegas, NV 89117	J	3/6/2006	1,250.00
Committee to Elect Warren Hardy 5070 Arville St Las Vegas, NV 89118	J	3/18/2006	500.00
Committee to Elect Barbara Cegavske 6465 Laredo St Las Vegas, NV 89146	J	4/3/2006	500.00
Committee to Elect Geno Martini 2039 Meritage Drive Sparks, NV 89434	J	4/11/2006	500.00

Silver State Leadership Fund

P.A.C.

**Expenses in Excess of \$100**  
**Transfer Total Amount of All Campaign Expenses to Line 8 of Expenses Summary**

<b>Name &amp; Address of Person, Group or Organization who received the payment for the expense(s)</b>	<b>Category (see Previous page)</b>	<b>Date of Each Expense</b>	<b>Amount of Each Expense</b>
Regent Stavros Anthony 9104 Terrace Ridge Ct Las Vegas, NV 89129	J	4/11/2006	500.00
State Senator Maurice Washington P.O. Box 1166 Sparks, NV 89432	J	4/11/2006	500.00
State Senator Sandra Tiffany 2144 Eaglepath Circle Henderson, NV 89074	J	4/19/2006	500.00
Committee to Re-elect Francis Allen P.O. Box 34718 Las Vegas, NV 89133	J	4/25/2006	1,000.00

## IN KIND CONTRIBUTIONS AND EXPENSES REPORT

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**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.





Silver State Leadership Fund P.A.C.  
 Name (print) Office (if applicable) District (if applicable)

**IN KIND**

**Expenses in Excess of \$100**  
**Transfer Total Value of All In-Kind Campaign Expenses to Line 11 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
NONE			

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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.362