8 Dist Ct Fam N

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

MATHEW HARTER — Name (print)
FAMILY COURT N — Office (if applicable)
District (if applicable)

5715 W ALEXANDER ROAD #130 LAS VEGAS, NV 89130 — Mailing Address (include city and zip code)
642-7837 — Telephone No.

MHARTER@EMBARQMAIL.COM — E-Mail Address

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

☐ LEGAL DEFENSE FUND ☐ AMENDED

19116

FILED
AUG 05 2008
Certified
SECRETARY OF STATE
ELECTIONS DIVISION
FOR OFFICE USE ONLY

☐ **Annual Filing - Due January 15, 2008**
Period: January 1, 2007 – December 31, 2007

☒ **Report #1 — Due August 5, 2008***
Period: Jan. 1, 2008 — July 31, 2008

☐ **Report #2 Due — October 28, 2008***
Period: Aug. 1, 2008 — Oct. 23, 2008

☐ **Report #3 Due — January 15, 2009*/****
Period: Oct. 24, 2008 — Dec. 31, 2008

☐ **Annual Filing – Due January 15, 2009**
Period: January 1, 2008 – December 31, 2008

*** These Reports are filed by incumbents/candidates running for office in the 2008 election cycle**
**** Third Report suffices for 2009 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)**	$7,446	
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)**		

	This Period	Cumulative From Beginning of Report Period #1 Through End of This Reporting Period
5. Total Amount of Monetary Contributions Received (Add Lines 1 through 4) **(See page 2 of instruction sheet)**	$7,446	
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

8. Total Monetary Expenses Paid in Excess of $100 **(See page 2 of instruction sheet)**	$7,446	
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)**	$7,446	
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 — Date: 8/4/08

CAMPAIGN CONTRIBUTIONS **Report Period** #

MATHEW HARTER FAMILY COURT N

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
MATHEW HARTER 5715 W ALEXANDER #130 LAS VEGAS NV 89130	7/17/08	$7,446	X		

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IN KIND
WRITTEN COMMITMENTS

Report Period #

MATHEW HARTER — FAMILY COURT N

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

In Kind 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 IN KIND COMMIITMENT	DATE OF EACH IN KIND COMMITMENT	AMOUNT OF EACH IN KIND COMMITMENT

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IN KIND CAMPAIGN CONTRIBUTIONS

Report Period #

MATHEW HARTER — Name (print)

FAMILY COURT N — 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 7 of Contributions Summary

CONTRIBUTOR'S NAME AND ADDRESS	DATE OF EACH IN KIND CONTRI-BUTION	DESCRIPTION OF EACH IN KIND CONTRIBUTION	VALUE OR COST OF EACH IN KIND CONTRIBUTION/ COMMITMENT	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

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CAMPAIGN EXPENSES **Report Period** #

MATHEW HARTER FAMILY COURT N

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.***

CAMPAIGN EXPENSES **Report Period** #

MATHEW HARTER — Name (print)
FAMILY COURT N — 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
REVIEW JOURNAL 1111 W BONANZA ROAD LAS VEGAS, NV 89125	D	7/17/08	$5,980
MOAPA VALLEY PROGRESS 145 S. MOAPA VALLY BLVD #1 OVERTON, NV 89040	D	7/25/08	$480
DESERT VALLEY TIMES 355 W MESQUITE BLVD #C10 MESQUITE, NV 89027	D	7/28/08	$790
MICHAEL CANNON 1441 PALM ST. HENDERSON, NV 89015	J	7/28/08	$196

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IN KIND CAMPAIGN EXPENSES

Report Period #

MATHEW HARTER — FAMILY COURT N

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

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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