

CAMPAIGN CONTRIBUTIONS AND EXPENSES REPORT

State of Nevada

Name (print) Bruce L. Gove Office (if applicable) Las Vegas Municipal Court Department 1 District (if applicable) 2
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 E-Mail Address BLG777777@AOL.COM

Select Appropriate Box(es) CANDIDATE PAC POL PRTY IND EXP NONPROFIT CORP AMENDED LEGAL DEFENSE FUND

- Annual Filing - Due January 15, 2009
Period: January 1, 2008 - December 31, 2008
- Report #1 - Due March 31, 2009*
Period: Jan. 1, 2009 - March 26, 2009
- Report #2 Due - May 26, 2009*
Period: Mar. 27, 2009 - May 21, 2009
- Report #3 Due - July 15, 2009*
Period: May 22, 2009 - June 30, 2009
- Annual Filing - Due January 15, 2010
*Period: July 1, 2009 - December 31, 2009
**Period: Jan. 1, 2009 - December 31, 2009

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* These Reports are filed by incumbents/candidates running for office in the 2009 election cycle
 ** These Reports are filed by incumbents not running for office this cycle who: (1) raised contributions in excess of \$100; or (2) have money left over from a previous campaign

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-	-0-
2. Total Monetary Contributions Received of \$100 or Less (See page 2 of instruction sheet)	\$90	\$190
3. Total Monetary Contributions in the form of loans guaranteed by a third party. (See page 2 of instruction sheet)	-0-	-0-
4. Total Monetary Contributions in the form of loans that were forgiven (See page 2 of instruction sheet)	-0-	-0-
5. Total Amount of Monetary Contributions Received (Add Lines 1 through 4) (See page 2 of instruction sheet)	\$90	\$190
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-	-0-
7. Total Value of In Kind Contributions Received in Excess of \$100 (See page 2 of instruction sheet)	-0-	UNREPORTED CONTRIBUTION

EXPENSES SUMMARY

8. Total Monetary Expenses Paid in Excess of \$100 (See page 2 of instruction sheet)	-0-	-0-
9. Total Monetary Expenses Paid of \$100 or Less (See page 2 of instruction sheet)	\$90	\$190
10. Total Amount of All Monetary Expenses Paid (Add Lines 8 and 9) (See page 2 of instruction sheet)	\$90	\$190
11. Total Value of In Kind Expenses in Excess of \$100 (See page 3 of instruction sheet)	-0-	-0-
12. Disposition of Unspent Contributions (Only reported on Report #3, Annual Report or 15 th day of the second month after candidates defeat or incumbent does not run for reelection) (See page 3 of instruction sheet)	N/A	

AFFIRMATION

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

Signature BLG UNREPORTED, JUNE 3, 2009 12:29 P.M. Date

WRITTEN COMMITMENTS

Report Period # 2

Name (print) Bruce L. Galt Office (if applicable) Las Vegas Municipal Court Dist 2 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
N/A	N/A	Handwritten scribble
		2009 JUN - 3 PM 1:04 RECEIVED CITY CLERK

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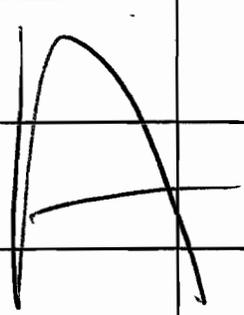
IN KIND CAMPAIGN CONTRIBUTIONS

Report Period # 2

Name (print) Bruce L. Gore Office (if applicable) Las Vegas Municipal Court Dist 2 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 CONTRIBUTION	DESCRIPTION OF EACH IN KIND CONTRIBUTION	VALUE OR COST OF EACH IN KIND CONTRIBUTION/ COMMITMENT	CHECK HERE IF LOAN	NAME AND ADDRESS OF 3 RD PARTY IF LOAN GUARANTEED BY 3 RD PARTY	NAME AND ADDRESS OF PERSON WHO FORGAVE THE LOAN
			-0-			

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IN KIND CAMPAIGN EXPENSES

Report Period # 2

Name (print) Bruce L. Govee Office (if applicable) Los Yegros Municipal Court Dist 2 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
N/A	N/A	N/A	0 N/A
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