

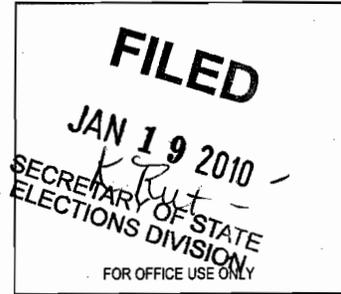
CAMPAIGN CONTRIBUTIONS AND EXPENSES REPORT

State of Nevada

Name (print) MAURICE WASHINGTON Office (if applicable) _____ District (if applicable) _____
 Mailing Address (include city and zip code) P.O. Box 1166 Sparks, NV 89432 Telephone No. 775-381-8826
 E-Mail Address MAURICEWASHINGTON@SEN.STATE.NV.US 22759

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

- Annual Filing - Due January 15, 2010**
Period: January 1, 2009 – December 31, 2009
- Report #1 — Due June 1, 2010***
Period: Jan. 1, 2010 — May 27, 2010
- Report #2 Due — October 26, 2010***
Period: May 28, 2010 — Oct. 21, 2010
- Report #3 Due — January 15, 2011****
Period: Oct. 22, 2010 — Dec. 31, 2010
- Annual Filing – Due January 15, 2011**
Period: January 1, 2010 – December 31, 2010



* These Reports are filed by incumbents/candidates in the 2010 election cycle
 ** Third Report suffices for 2011 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)	N/A	
2. Total Monetary Contributions in the form of loans guaranteed by a third party. (See page 2 of instruction sheet)	N/A	
3. Total Monetary Contributions in the form of loans that were forgiven (See page 2 of instruction sheet)	N/A	
	This Period	Cumulative From Beginning of Report Period #1 Through End of This Reporting Period
4. Total Amount of Monetary Contributions Received (Add Lines 1 through 3) (See page 2 of instruction sheet)	N/A	
5. Total Amount of Written Commitments for Contributions (When commitment is funded, report as contribution (monetary or in kind)) (See page 2 of instruction sheet)	N/A	
6. Total Value of In Kind Contributions Received in Excess of \$100 (See page 2 of instruction sheet)	N/A	

EXPENSES SUMMARY

7. Total Monetary Expenses Paid in Excess of \$100 (See page 2 of instruction sheet)	17,000
8. Total Value of In Kind Expenses in Excess of \$100 (See page 3 of instruction sheet)	

AFFIRMATION

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

Signature Maurice Washington Date 1/14/10

CAMPAIGN EXPENSES

Report Period #

MAURICE WASHINGTON
Name (print) Office (if applicable)

WASHOE II
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 #

Name (print) MAURICE WASHBURN Office (if applicable)

WASHBURN II District (if applicable)

Expenses in Excess of \$100
Transfer Total Amount of All Campaign Expenses to Line 7 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
RENO PRINT STORE	O	10/09 11/09	1,500
VERIZON	A	11/09 12/09	3,200
NORTHERN NEVADA Fellowship	J	6/17/09	1,000
Dells Computer	A	7/09	2,500
SAN ANTONIO	C	9/09	1,500
RALEIGH	C	8/09	1,700
LAS VEGAS	C	10/11/09 9/10/09	7,000 ⁰⁰
AT&T	A	11/09 12/09	1,800
DISTRICT OFFICE RENT	A	11/09 12/09	1,800
OFFICE DEPOT	A	11/09 12/09	300
R.S. O.V.A.	H	11/22/09	1,000

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