

CAMPAIGN CONTRIBUTIONS AND EXPENSES REPORT

State of Nevada

Sunrise Healthcare Good Government Fund

Name (print) Office (if applicable) District (if applicable)
3186 S Maryland Pkwy, Las Vegas, NV, 89109 7027318012
Mailing Address (include city and zip code) Telephone No.
jeena.john@hcahealthcare.com
E-Mail Address

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

21968

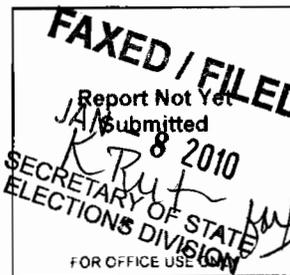
Annual Filing - Due January 15, 2010
Period: Jan 01, 2009 - Dec 31, 2009

Report #1 - Due June 01, 2010\*
Period: Jan 01, 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: Jan 01, 2010 - Dec 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

Table with 2 columns: Description, This Period, Cumulative From Beginning of Report Period #1 through End of This Reporting Period. Rows include Total Monetary Contributions Received in Excess of \$100, Total Monetary Contributions in the form of loans guaranteed by a third party, Total Monetary Contributions in the form of loans that were forgiven, Total Amount of Monetary Contributions Received, Total Amount of Written Commitments for Contributions, Total Value of In Kind Contributions Received in Excess of \$100.

EXPENSES SUMMARY

Table with 2 columns: Description, This Period, Cumulative From Beginning of Report Period #1 through End of This Reporting Period. Rows include Total Monetary Expenses Paid in Excess of \$100, Total Value of In Kind Expenses in Excess of \$100.

AFFIRMATION

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

Signature

Handwritten signature

Date

1/5/10

CAMPAIGN CONTRIBUTIONS

Report Period # An.

Handwritten checkmark

**Campaign Contributions and Expenses Report - Secretary of State of Nevada**

**Sunrise Healthcare Good Government Fund**

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
Sunrise Hospital and Medical Center 3186 S. Maryland Parkway Las Vegas, NV 89109	08/23/2009	\$96,000.00			
MountainView Hospital 3100 N Tenaya Way Las Vegas , NV 89128	08/23/2009	\$39,000.00			
Southern Hills Hospital 9300 W. Sunset Road Las Vegas, NV 89148	08/23/2009	\$15,000.00			

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**WRITTEN COMMITMENTS**

Report Period # An.

**Sunrise Healthcare Good Government Fund**

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 5 of Contributions Summary**

NAME AND ADDRESS OF PERSON WHO MADE THE COMMITMENT	DATE OF EACH COMMITMENT	AMOUNT OF EACH COMMITMENT

Campaign Contributions and Expenses Report - Secretary of State of Nevada


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**CAMPAIGN EXPENSES**

Report Period # An.

**Sunrise Healthcare Good Government Fund**

Name (print)

Office (if applicable)

District (if applicable)

**Expense Categories**

CATEGORIES	CODE
Office expenses	A
Expenses related to volunteers	B

## Campaign Contributions and Expenses Report - Secretary of State of Nevada

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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 # An.

## Sunrise Healthcare Good Government Fund

Name (print)

Office (if applicable)

District (if applicable)

## Expenses in Excess of \$100

Transfer Total Amount of All Campaign Expenses to Line 7 of Expenses Summary

THE PAYMENT FOR THE EXPENSE(S)	NRS 294A.365		

## Campaign Contributions and Expenses Report - Secretary of State of Nevada

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WILLIAM HORNE			
2251 N.RAMPART BLVD 357 Las Vegas, NV 89128	J	08/25/2009	\$2,000.00
MARILYN KIRKPATRICK 4747 SHOWDOWN DRIVE Las Vegas, NV 89031	J	08/25/2009	\$1,500.00
KELVIN ATKINSON 5631 INDIAN SPRINGS STREET NORTH LAS VEGAS, NV 89031	J	08/25/2009	\$1,500.00
Barbara Cegavske 6465 Laredo Street Las Vegas, NV 89146	J	08/25/2009	\$4,000.00
	J	10/22/2009	\$500.00
	J	10/22/2009	\$500.00
ASSEMBLY DEMOCRATIC COUNCIL 2251 N.RAMPART STREET 341 LAS VEGAS, NV 89128	J	08/25/2009	\$5,000.00
RORY REID 4600 E.SUNSET ROAD 213 HENDERSON, NV 89014	J	08/25/2009	\$500.00
NHA HEALTH PAC 5250 NEIL RD 302 RENO, NV 89502	J	08/27/2009	\$8,000.00
Marcus Conklin 1600 Palmæ Las Vegas, NV 89128	J	09/24/2009	\$2,500.00
Peggy Pierce 5304 Gipsy Avenue Las Vegas, NV 89107	J	09/24/2009	\$1,000.00
Ellen Barre Spiegel 1953 Kachina Mountain Dr. Henderson, NV 89012	J	09/24/2009	\$1,000.00
Senate Republican Leadership Conference PO Box 281 Reno, NV 89504-0281	J	09/24/2009	\$4,000.00
NEVADA SENATE DEMOCRATS 1210 SOUTH VALLEY VIEW 114 Las Vegas, NV 89044	J	09/24/2009	\$3,000.00
MO DENIS 3204 OSAGE AVENUE Las Vegas, NV 89101	J	09/24/2009	\$2,000.00
John Ocegüera 7655 Chaumont St Las Vegas, NV 89123	J	09/24/2009	\$2,500.00
	J	09/24/2009	\$2,500.00
Kathy McClain 2457 Swan Ln. Las Vegas, NV 89121	J	09/24/2009	\$1,000.00 ✓
	J	12/10/2009	\$500.00
	J	12/14/2009	\$500.00
JOE HARDY P.O.BOX 60306 Boulder City, NV 89006	J	09/24/2009	\$3,000.00
A BETTER NEVADA 6100 ELTON AVENUE Las Vegas, NV 89107	J	09/24/2009	\$3,000.00
Allison Copening 1821 Montvale Court Las Vegas, NV 89134	J	09/29/2009	\$1,000.00
TOM COLLINS P.O BOX 335868 N Las Vegas, NV 89033	J	10/20/2009	\$1,000.00
DENNIS NOLAN P.O.BOX 82249 Las Vegas, NV 89180	J	10/28/2009	\$2,000.00
RORY REID 6100 ELTON AVE 1000 Las Vegas, NV 89107	J	10/28/2009	\$4,500.00
JIM GIBBONS C/O TURNER, LOY & CO, LLC, 6502 S. MCCARRAN BLVD D Reno, NV 89509	J	10/28/2009	\$5,000.00

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CHRIS GIUNCHIGLIANI 1717 S.15TH STREET LAS VEGAS, NV 89104	J	10/28/2009	\$1,000.00
Lynn Stewart 2720 Cool Lilac Avenue Henderson, NV 89052	J	10/30/2009	\$1,000.00
JOHN HAMBRICK 1930 VILLIAGE CIRCLE,SUITE 3-419 Las Vegas, NV 89134	J	10/30/2009	\$1,000.00
JAMES SETTELMEYER 2388 HIGHWAY 395 MINDEN, NV 89423	J	10/30/2009	\$1,000.00
REPUBLICAN ASSEMBLY CANGUS P.O BOX 401508 LAS VEGAS, NV 89140	J	11/19/2009	\$2,500.00
Richard McArthur 4640 Panoramic Court Las Vegas, NV 89129	J	12/10/2009	\$1,000.00
MELISSA WOODBURY 9500 W.FLAMINGO RD 203 LAS VEGAS, NV 89147	J	12/10/2009	\$1,000.00
MAGGIE CARLTON 5540 E.CARTWRIGHT AVENUE Las Vegas, NV 89110	J	12/10/2009	\$500.00
David Bobzien 1605 Wesley Dr Reno, NV 89503	J	12/10/2009	\$500.00
KATE MARSHALL P.O BOX 40944 Reno, NV 89504	J	12/10/2009	\$500.00
Debbie Smith 3270 Wilma Drive Sparks, NV 89431	J	12/10/2009	\$2,000.00
HEIDI GANSERT 316 CALIFORNIA AVENUE 302 Reno, NV 89509	J	12/10/2009	\$2,000.00
JOYCE WOODHOUSE 246 GARFIELD DRIVE HENDERSON, NV 89074	J	12/10/2009	\$2,000.00
CATHERINE CORTEZ MASTO 6100 Elton Ave Suite 100 Las Vegas, NV 89107	J	12/10/2009	\$2,500.00
David Parks PO Box 71887 Las Vegas, NV 89170	J	12/10/2009	\$500.00
Tom Grady 43 Fairway Drive Yerington, NV 89447	J	12/22/2009	\$1,000.00

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## 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.

**IN KIND CAMPAIGN CONTRIBUTIONS**

Report Period # An.

**Sunrise Healthcare Good Government Fund**

Name (print)

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 6 of Contributions Summary

NAME AND ADDRESS	IN KIND CONTRIBUTION	IN KIND CONTRIBUTION	IN KIND CONTRIBUTION/ COMMITMENT	IF LOAN	PARTY IF LOAN GUARANTEED BY 3rd PARTY	PERSON WHO FORGAVE THE LOAN


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**IN KIND  
WRITTEN COMMITMENTS**

Report Period # An.

**Sunrise Healthcare Good Government Fund**

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 5 of Contributions Summary**

NAME AND ADDRESS OF PERSON WHO MADE THE IN KIND COMMITMENT	DATE OF EACH IN KIND COMMITMENT	AMOUNT OF EACH IN KIND COMMITMENT



