

CAMPAIGN CONTRIBUTIONS AND EXPENSES REPORT

State of Nevada

THE HARTFORD ADVOCATES FUND

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 Mailing Address (include city and zip code) HartfordAdvocatesFund.GA@thehartford.com Telephone No. 26648

E-Mail Address _____
 Select Appropriate Box(es) CANDIDATE PAC POL PRY IND EXP NONPROFIT CORP
 LEGAL DEFENSE FUND AMENDED

- 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

FILED
 JAN 18 2011
 SECRETARY OF STATE
 ELECTIONS DIVISION
 FOR OFFICE USE ONLY

* 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)	\$99,102.51	\$476,647.40
2. Total Monetary Contributions in the form of loans guaranteed by a third party (See page 2 of instruction sheet)	\$0.00	\$0.00
3. 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
4. Total Amount of Monetary Contributions Received (Add Lines 1 through 3) (See page 2 of instruction sheet)	\$99,107.51	\$476,647.40
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)	\$0.00	\$0.00
6. Total Value of In Kind Contributions Received in Excess of \$100 (See page 2 of instruction sheet)	\$0.00	\$0.00

EXPENSES SUMMARY

7. Total Monetary Expenses Paid in Excess of \$100 (See page 2 of instruction sheet)	\$40,937.08	\$562,520.66
8. Total Value of In Kind Expenses in Excess of \$100 (See page 3 of instruction sheet)	\$0.00	\$0.00

AFFIRMATION

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

Bill Bombax
 Signature

Date

THE HARTFORD ADVOCATES 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
Kalisiak, Louis 1609 Aspen Creek Rd Reno, NV 89519-0685	10/31/2010	\$5.00			
Kalisiak, Louis 1609 Aspen Creek Rd Reno, NV 89519-0685	11/15/2010	\$5.00			
Kalisiak, Louis 1609 Aspen Creek Rd Reno, NV 89519-0685	11/30/2010	\$5.00			
Kalisiak, Louis 1609 Aspen Creek Rd Reno, NV 89519-0685	12/15/2010	\$5.00			
Kalisiak, Louis 1609 Aspen Creek Rd Reno, NV 89519-0685	12/31/2010	\$5.00			
Non NV Transactions.	12/31/2010	\$99,077.51			

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THE HARTFORD ADVOCATES FUND

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.**

THE HARTFORD ADVOCATES 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

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 EXPENSE
Non NV Transactions	J	12/31/2010	\$40,937.08

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THE HARTFORD ADVOCATES 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**

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 3RD PARTY IF LOAN GUARANTEED BY 3RD PARTY	NAME AND ADDRESS OF PERSON WHO FORGAVE THE LOAN
Non NV Transactions	12/31/2010		\$0.00			

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**IN KIND CAMPAIGN
EXPENSES**

Report Period # 2

THE HARTFORD ADVOCATES FUND

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 8 of Expenses Summary

NAME AND ADDRESS OF PERSON, GROUP OR ORGANIZATION WHO RECEIVED THE IN KIND GOOD(S) OR SERVICES	DESCRIPTION OF EACH IN KIND EXPENSE	DATE OF EACH IN KIND EXPENSE	VALUE OR COST OF EACH IN KIND EXPENSE
Non NV Transactions		12/31/2010	\$0.00

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