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

NVOS BonePAC

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

P. O. Box 2670, Reno, NV 89505-2670 | 775-326-4370

Mailing Address (include city and zip code) | Telephone No.

nvos@mcdonaldcarano.com

E-Mail Address

25342

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

Office of the Secretary of State
Ross Miller
Elections Division

KRut
10/26/10
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)	$11,350	$11,350
2. Total Monetary Contributions in the form of loans guaranteed by a third party. (See page 2 of instruction sheet)	0	0
3. Total Monetary Contributions in the form of loans that were forgiven (See page 2 of instruction sheet)	0	0
4. **Total Amount of Monetary Contributions Received** (Add Lines 1 through 3) (See page 2 of instruction sheet)	$11,350	$11,350

	This Period	Cumulative From Beginning of Report Period #1 Through End of This Reporting Period
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	0
6. Total Value of In Kind Contributions Received in Excess of $100 (See page 2 of instruction sheet)	0	0

EXPENSES SUMMARY

7. Total Monetary Expenses Paid in Excess of $100 (See page 2 of instruction sheet)	$7,000	$7,000
8. Total Value of In Kind Expenses in Excess of $100 (See page 3 of instruction sheet)	0	0

AFFIRMATION

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

Kathleen A Conaboy
Signature

October 26, 2010
Date

CAMPAIGN CONTRIBUTIONS **Report Period** # 2

NVOS BonePAC

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
James Manning, MD 2680 Crimson Canyon Dr. Las Vegas, NV 89128	7/29/2010	$500			
Richard Wulff, MD 701 S. Tonopah Dr. Las Vegas, NV 89106	7/29/2010	$250			
Colby Young, MD 4530 S. Eastern Ave., Suite 1 Las Vegas, NV 89119	7/29/2010	$250			
David Fadell, DO, PC 4530 S. Eastern Ave., Suite 1 Las Vegas, NV 89119	10/5/2010	$500			
Ronald W. Hillock, MD 2800 E Desert Inn Rd., Ste 100 Las Vegas, NV 89121-3609	10/5/2010	$500			
Fred Redfern, MD 600 Whitney Ranch Dr., Ste. D22 Henderson, NV 89014	10/5/2010	$250			
David Silverberg, M.D., Ltd. P.O. Box 36455 Las Vegas, NV 89133	10/5/2010	$250			
Patrick Brandner, MD 2800 E Desert Inn Rd., Ste 100 Las Vegas, NV 89121-3609	10/6/2010	$500			
Richard Wulff, MD 701 S. Tonopah Dr. Las Vegas, NV 89106	10/6/2010	$500			
Hugh Basssewitz, MD 2800 E Desert Inn Rd., Ste 100 Las Vegas, NV 89121-3609	10/14/2010	$500			
Daniel Lee, MD 2650 N. Tenaya Way, Ste. 301 Las Vegas, NV 89128	10/14/2010	$350			
Todd Swanson, MD 2800 E Desert Inn Rd., Ste 100 Las Vegas, NV 89121-3609	10/14/2010	$500			
Desert Orthopaedic Center P.O. Box 60180 Las Vegas, NV 89160-0180	10/20/2010	$6,750			

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CAMPAIGN EXPENSES **Report Period** # 2

NVOS BonePAC

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 EACH EXPENSE
Benny for Nevada 10620 Southern Highlands Pkwy. Ste.#110-485 Las Vegas, NV, 89141	J	10/6/2010	$1,000
Committee to Elect Barbara Cegavske 6465 Caredo St. Las Vegas, NV 89146	J	10/6/2010	$1,000
Committee to Elect William Horne 2251 N. Rampart Blvd. #357 Las Vegas, NV, 89128	J	10/6/2010	$1,000
Elect Joe Hardy P.O. Box 60306 Boulder City, NV 89006	J	10/6/2010	$1,000
Friends of Ellen Barre Spiegel 1953 Kachina Mountain Drive Henderson, NV 89012	J	10/6/2010	$1,000
Senate Democratic Caucus 2251 North Rampart Blvd, #341 Las Vegas, NV 89128	J	10/6/2010	$1,500
Woodbury for Assembly 9500 W. Flamingo Rd., #203 Las Vegas, NV 89140	J	10/6/2010	$500

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