

CAMPAIGN CONTRIBUTIONS AND EXPENSES REPORT

State of Nevada

Name (print) Sagebrush State Fund for Growth Office (if applicable) _____ District (if applicable) _____
 Mailing Address (include city and zip code) 116 Kelso Way, Las Vegas, NV 89107 Telephone No. 702-715-3812
 E-Mail Address jpaul1864@gmail.com

Select Appropriate Box(es) CANDIDATE PAC POL PRY 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

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FILED

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

EXPENSES SUMMARY	This Period	Cumulative From Beginning of Report Period #1 through End of This Reporting Period
7. Total Monetary Expenses Paid in Excess of \$100 (See page 2 of instruction sheet)	0	0
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 *[Signature]* Date 1/10/11