

CAMPAIGN CONTRIBUTIONS AND EXPENSES REPORT

State of Nevada

Name (print) Coalition to Protect the future of Boulder City Office (if applicable) Boulder City, NV 89006-1638 District (if applicable) 27552
 Mailing Address (include city and zip code) PO Box 61638 Boulder City, NV 89006-1638 Telephone No. 702-293-7077

E-Mail Address

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

- Annual Filing - Due January 15, 2011
Period: January 1, 2010 - December 31, 2010
- Report #1 - Due March 29, 2011*
Period: Jan. 1, 2011 - March 24, 2011
- Report #2 Due - May 31, 2011*
Period: Mar. 25, 2011 - May 26, 2011
- Report #3 Due - July 15, 2011*
Period: May 27, 2011 - June 30, 2011
- Annual Filing - Due January 15, 2012
*Period: July 1, 2011 - December 31, 2011
**Period: Jan. 1, 2011 - December 31, 2011

FILED
 APR - 1 2011
K Rut
 SECRETARY OF STATE
 ELECTIONS DIVISION
 FOR OFFICE USE ONLY

* These Reports are filed by incumbents/candidates running for office in the 2011 election cycle
 ** These Reports are filed by incumbents not running for office this cycle who: (1) raised contributions in excess of \$100; or (2) have money left over from a previous campaign

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 2 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)	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 4) (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)	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)	0	0
8. Total Amount of All Monetary Expenses Paid (Add Lines 8 and 9) (See page 2 of instruction sheet)	0	0
9. 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.

Nancy A. Nolette
 Signature

3/28/11
 Date