

CONTRIBUTIONS AND EXPENSES REPORT

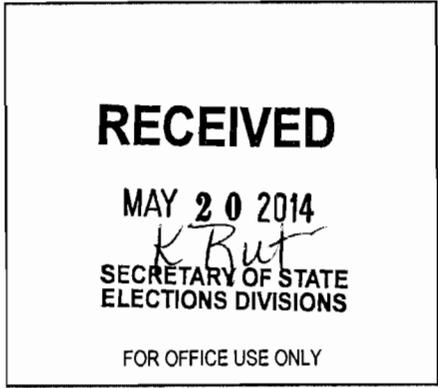
withdrew

State of Nevada

Name (print) SALLY ZAMORA Office (if applicable) Assemblymen District (if applicable) 26
 Mailing Address (include city and zip code) 141 Ashley Way Reno NV 89511 Telephone No. 775-851-5078
 E-Mail Address _____

Select Appropriate Box(es) CANDIDATE LEGAL DEFENSE FUND AMENDED

- Report #1 — Due May 20, 2014**
Period: Jan. 1, 2014 — May 16, 2014
- Report #2 — Due June 6, 2014**
Period: May 17, 2014 — June 5, 2014
- Report #3 — Due Oct. 14, 2014**
Period: June 6, 2014 — Oct. 10, 2014
- Report #4 — Due Oct. 31, 2014**
Period: Oct. 11, 2014 — Oct. 30, 2014
- Report #5 — Due January 15, 2015***
Period: Oct. 31, 2014 — Dec. 31, 2014
- Annual Filing — Due January 15, 2015**
Period: Jan. 1, 2014 — Dec. 31, 2014



46270

* Report #5 suffices for the 2015 Annual Filing only if Report #'s 1, 2, 3, and 4 are previously filed

CONTRIBUTIONS SUMMARY

	This Period	Cumulative Total From Beginning of Report Period #1 through End of This Reporting Period
1. Total Monetary Contributions in Excess of \$100 <i>(See page 1 of instructions)</i>	0	0
2. Total Monetary Contributions in the Form of Loans Guaranteed by a 3 rd -Party in Excess of \$100 <i>(See page 1 of instructions)</i>	0	0
3. Total Monetary Contributions in the Form of Loans that were Forgiven in Excess of \$100 <i>(See page 2 of instructions)</i>	0	0
4. Total Amount of Written Commitments for Contributions in Excess of \$100 <i>(See page 2 of instructions)</i>	0	0
5. Total Value of In Kind Contributions in Excess of \$100 <i>(See page 2 of instructions)</i>	0	0
6. Total Value of Written Commitments for In Kind Contributions in Excess of \$100 <i>(See page 2 of instructions)</i>	0	0
7. Total Amount of all Contributions of \$100 or Less <i>(See page 2 of instructions)</i>	0	0
8. Total Amount of All Contributions (Add Lines 1 through 7) <i>(See page 2 of instructions)</i>	0	0

EXPENSES SUMMARY

9. Total Monetary Expenses Paid in Excess of \$100 <i>(See page 2 of instructions)</i>	0	0
10. Total Value of In Kind Expenses in Excess of \$100 <i>(See page 2 of instructions)</i>	0	0
11. Total Amount of all Expenses of \$100 or Less <i>(See page 2 of instructions)</i>	136.00	136.00
12. Total Amount of All Expenses (Add Lines 9 through 11) <i>(See page 2 for instructions)</i>	136.00	136.00

AFFIRMATION

MUST SELECT AT LEAST ONE:

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

I Declare Under an Oath to God that the Foregoing is True and Correct.*
 *A declaration under an oath to God is subject to the same penalties as declaration under penalty of perjury.

Signature *Sally Zamora* Date 5-14-14

Name (print)

Office (if applicable)

District (if applicable)

EXPENSE CATEGORIES (NRS 294A.365)

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
Expenses related to a legal defense fund	I
Good and services provided in kind for which money would otherwise have been paid ¹	J
Contributions made to: (i) another candidate; (ii) a nonprofit corporation that is registered or required to be registered pursuant to NRS 294A.225; (iii) a PAC that is registered or required to be registered pursuant to NRS 294A.230; or (iv) a Recall Committee that is registered or required to be registered pursuant to NRS 294A.250	K
Fees for filing declarations of candidacy or acceptances of candidacy	L ✓
Repayments or forgiveness of loans	M
Disposal of unspent contributions pursuant to NRS 294A.160	N
Other miscellaneous expenses <i>maps</i>	O ←

¹ NRS 294A.362 requires "In Kind" contributions and expenses to be reported on a separate form, which is attached hereto.

