



Recall Contribution & Expenses Form NRS 294A

Contribut	ions and Expenses Report		State of Nevada
Name (print)	Office (if applicable)	District (if applicable)
Mailing Add	ress (include city and zip code)		Telephone No.
E-Mail Addre	ess		
	Select Appropriate Box(es)	Recall Committee	Amended
Prior to	o Petition Verification:		
	Covering: From day 1 t	ys after Notice of Intent is Filed to 45 days after filing the Notice of I es a contribution or makes an expen	
	Report #2 — Due 93 da	ys after Notice of Intent is Filed	
		to 90 days after filing the Notice of st receives a contribution or makes	
Petitio	n Sufficient: Call Issued	for Special Election:	
	Covering: From filing	's before Early Voting for the Special the Notice of Intent through 5 days b	
	•	s before the Special Election before the beginning of Early Voting	g by personal appearance, through
		ys after the Special Election	
Ш	•	before the Special Election through	the day of the Special Election
Insuffi	cient Petition Filed Befo	re the Expiration of the Notice of Int	tent: No Special Election:
		ater than 30 Days after the expiration	•
	Covering: From filing N	Notice of Intent through 30 days afte	r the expiration of the Notice of Int
If Cour	rt Hears Challenge to Pe	tition and Orders No Special Election	n:
		ater than 30 days after court determ	•
	Covering: From date N	otice of Intent is filed through date o	of court's order

Contributions Summary	Cumulative Total From Beginning of Report Period #1 through End of This Reporting Period
1. Total Monetary Contributions in Excess of \$100	
2. Total Monetary Contributions in the Form of Loans Guaranteed by a 3 rd Party in Excess of \$100	
3. Total Monetary Contributions in the Form of Loans that were Forgiven in Excess of \$100	
4. Total Amount of Written Commitments for Contributions in Excess of \$100	
5. Total Value of In-Kind Contributions in Excess of \$100	
6. Total Value of Written Commitments for In-Kind Contributions in Excess of \$100	
7. Total Amount of all Contributions of \$100 or Less	
8. Total Amount of All Contributions (Add Lines 1 through 7)	
Expenses Summary	
9. Total Monetary Expenses Paid in Excess of \$100	
10. Total Value of In-Kind Expenses in Excess of \$100	
11. Total Amount of all Expenses of \$100 or Less	
12. Total Amount of All Expenses (Add Lines 9 through 11)	
Ending Fund Balance	
13. Fund balance at the end of the reporting period	
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.	
☐ I have agreed to the following terms and conditions.	
I declare, under penalty of perjury or under an oath to God, that the information I submitted here for the State of Nevada is true and correct, and is not submitted for any improper purpose, and the information, and to the best of my knowledge complies with NRS Chapter 294A. I had understand it is unlawful to submit any illegal, unauthorized, fraudulent, forged, deceptive, or information, as defined by state and federal law, to the Secretary of State, and agree to indeminant other parties entitled thereto, for any damages incurred for any unlawful, unauthorized, defamatory, illicit, or improper information, as defined by the federal and state law, submitted the use of this electronic filing system. I further understand that I may be subject to criminal (NR 225.084) penalties for submitting any unlawful unauthorized, fraudulent, forged, deceptive, or information, as defined by federal and state law. I understand and agree that all information subsected or State and may be monitored for all lawful purposes. I understand that during submitting this report, I intend to identify myself as the authorized person signing this docume of authenticating my signature as such.	that I am authorized to subminate reviewed NRS 225.083. Defamatory, illicit, or improperative the Secretary of State, and fraudulent, forged, deceptive to the Secretary of State by my RS 239.330) and/or civil (NRS defamatory, illicit, or improperative is the property of the ch monitoring, all information or any authorized purpose. By
Signature Date	

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

Monetary Contributions In Excess Of \$100 Or, When Added Together From One Contributor, That Exceed \$100 (Transfer Total Amount of All Monetary Contributions to Lines 1, 2, or 3, As Applicable, of Contributions Summary)

Name and Address of Person, Group or Organization Who Made Contribution	Date of Contribution	Amount of Contribution	Check Here if Loan	Name and Address of 3 rd Party if Loan Guaranteed by 3 rd Party	Name and Address of Person, Group or Organization Who Forgave the Loan, if Different Than Contributor

Written Commitments	Report Period	#
Written Commitments	Report Period	#

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

Written Commitments for Contributions in Excess of \$100 or, When Added Together from One Entity, that Exceed \$100 (Transfer Total Amount of All Written Commitments to Line 4 of Contributions Summary)

Name and Address of Person, Group or Organization Who Made the Commitment	Date of Commitment	Amount of Commitment
	ind or duplicated if additional appear is no	

In-Kind Contributions Report Period

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

In-Kind Contributions in Excess of \$100 or, When Added Together from One Contributor, that Exceed \$100

(Transfer Total Value of All In-Kind Contributions to Line 5 of Contributions Summary)

Name and Address of Person, Group or Organization Who Made In-Kind Contribution	Date of In- Kind Contribution	Description of In-Kind Contribution	Value or Cost of In-Kind Contribution	Check Here if Loan	Name and Address of 3 rd Party if Loan Guaranteed by 3 rd Party	Name and Address of Person, Group or Organization Who Forgave the Loan, if Different than Contributor
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Name (print)	Office (if applicable)	District (if applicable

Written Commitments For In-Kind Contributions In Excess Of \$100 Or, When Added Together From One Entity, That Exceed \$100 (Transfer Total Value of All In-Kind Written Commitments to Line 6 of Contributions Summary)

Name and Address of Person, Group or Organization Who Made the In-Kind Written Commitment	Date of In-Kind Written Commitment	Value of In-Kind Written Commitment

Expense Categories Report Period #

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

Expense Categories (NRS 294A.365)

Categories	Code
Office expenses	Α
Expenses related to volunteers	В
Expenses related to travel	С
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	н
Expenses related to a legal defense fund	I
Goods 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	К
Fees for filing declarations of candidacy or acceptances of candidacy	L
Repayments or forgiveness of loans	М
Disposal of unspent contributions pursuant to NRS 294A.160	N
Other miscellaneous expenses	0

Monetary Expenses Report Period

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

Monetary Expenses In Excess Of \$100 (Transfer Total Amount of All Campaign Expenses to Line 9 of Expenses Summary)

Name and Address of Person, Group or Organization Who Received the Payment for the Expense	Category (NRS 294A.365)	Date of Expense	Amount of Expense

In-Kind Expenses Report Period

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

In-Kind Expenses In Excess Of \$100 (Transfer Total Value of All In-Kind Expenses to Line 10 of Expenses Summary)

Name and Address of Person, Group or Organization Who Received the In- Kind Good or Service	Description of In-Kind Expense	Date of In-Kind Expense	Value or Cost of In-Kind Expense