

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEC MAIL ROOM

2001 JAN 16 P 3:57

1. NAME OF COMMITTEE (in full) STATION CASTROS, INC. POLITICAL ACTION COMMITTEE		2. FEC IDENTIFICATION NUMBER C00263731
ADDRESS (number and street) 2411 WEST SARARA AVENUE	<input type="checkbox"/> Check if different than previously reported	
CITY, STATE and ZIP CODE LAS VEGAS, NV 89102		
3. <input checked="" type="checkbox"/> This committee has qualified as a multicandidate committee. (see FEC FORM 1M)		

4. TYPE OF REPORT

(a) April 15 Quarterly Report

July 15 Quarterly Report

October 15 Quarterly Report

January 31 Year End Report

July 31 Mid Year Report (Non-election Year Only)

Termination Report

Monthly Report Due On:

February 20

June 20

October 20

March 20

July 20

November 20

April 20

August 20

December 20

May 20

September 20

January 31

12-Day Pre-Election Report for the _____
(Type of Election)

election on _____ in the State of _____

30-Day Post-Election Report following the General Election

on _____ in the State of _____

(b) Is this Report an Amendment? YES NO

SUMMARY		COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. Covering Period <u>11/28/2000</u> through <u>12/31/2000</u>			
8. (a)	Cash on Hand January 1, 20 <u>00</u>		\$ 26768.19
(b)	Cash on Hand at Beginning of Reporting Period	\$ 15300.90	
(c)	Total Receipts (from Line 19)	\$ 2800.19	\$ 23061.18
(d)	Subtotal (add Lines 8(b) and 8(c) for Column A and Lines 8(b) and 8(c) for Column B)	\$ 18101.09	\$ 49829.37
7.	Total Disbursements (from Line 30)	\$ 392.31	\$ 32182.59
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 8(d))	\$ 17708.78	\$ 17646.78
9.	Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	\$ 0.00	For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-694-1100
10.	Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	\$ 0.00	
I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.			
Type or Print Name of Treasurer		Steven S. Lucas, Assistant Treasurer	
Signature of Treasurer		Date 01/10/2001	

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. 437g.

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FEC FORM 3X

(revised 8/93)

**DETAILED SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS
PAGE 2, FEC FORM 3X**

(revised 1/1/91)

NAME OF COMMITTEE STATION CASINOS, INC. POLITICAL ACTION COMMITTEE		REPORT COVERING PERIOD FROM 11/28/2000 TO: 12/31/2000	
		COLUMN A Total This Period	COLUMN B Calendar Year
I. Receipts			
11. Contributions (other than loans) From:			
a. Individual/Persons Other Than Political Committees			
i. Itemized (use Schedule A)		2772.87	22520.56 11(a)(i)
ii. Unitemized		0.00	346.00 11(b)(ii)
iii. Total (add i and ii) >		2772.87	22866.56 11(b)(iii)
b. Political Party Committees		0.00	0.00 11(b)
c. Other Political Committees (such as PACs)		0.00	0.00 11(c)
d. Total Contributions (add a ii, b and c) >		2772.87	22866.56 11(d)
12. Transfers From Affiliated/Other Party Committees		0.00	0.00 12
13. All Loans Received		0.00	0.00 13
14. Loan Repayments Received		0.00	0.00 14
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)		0.00	0.00 15
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees		0.00	0.00 16
17. Other Federal Receipts (Dividends, Interest, etc.)		27.32	194.62 17
18. Transfers from Nonfederal Account for Joint Activity		0.00	0.00 18
19. Total Receipts (add 11d, 12, 13, 14, 16, 17, and 18) >		2800.19	23061.18 19
20. Total Federal Receipts (subtract line 18 from line 19) >		2800.19	23061.18 20
II. Disbursements			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal (from Schedule H4)			
i. Federal Share		0.00	0.00 21(a)(i)
ii. Non-Federal Share		0.00	0.00 21(a)(ii)
b. Other Federal Operating Expenditures		0.00	28.28 21(b)
c. Total Operating Expenditures (add a i, a ii, and b) >		0.00	28.28 21(c)
22. Transfers to Affiliated/Other Party Committees		0.00	0.00 22
23. Contributions to Federal Candidates/Committees and Other Political Committees		0.00	31500.00 23
24. Independent Expenditures (use Schedule E)		0.00	0.00 24
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)		0.00	0.00 25
26. Loan Repayments Made		0.00	0.00 26
27. Loans Made		0.00	0.00 27
28. Refunds of Contributions To:			
a. Individual/Persons Other Than Political Committees		392.31	592.31 28(a)
b. Political Party Committees		0.00	0.00 28(b)
c. Other Political Committees (such as PACs)		0.00	0.00 28(c)
d. Total Contribution Refunds (add a, b and c) >		392.31	592.31 28(d)
29. Other Disbursements		0.00	0.00 29
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >		392.31	32120.59 30
31. Total Federal Disbursements (subtract line 21 a ii from line 30) >		192.31	32120.59 31
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans)(from line 11d)		2772.87	22866.56 32
33. Total Contribution Refunds (from line 28d)		392.31	592.31 33
34. Net Contributions (other than loans)(subtract line 33 from 32)		2380.56	22274.25 34
35. Total Federal Operating Expenditures (add 21 a i and 21 b) >		0.00	28.28 35
36. Offsets to Operating Expenditures (from line 15)		0.00	0.00 36
37. Net Operating Expenditures (subtract line 36 from 35) >		0.00	28.28 37

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (in Full)

STATION CASINOS, INC. POLITICAL ACTION COMMITTEE

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
RODNEY S. ATAMIAN 9241 PITCHING WEDGE DRIVE LAS VEGAS, NV 89134-	STATION CASINOS, INC.	12/04/2000	\$190.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation DIR./FINANCIAL SERVICES Aggregate Year-to-Date \$ 2660.00		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
GLENN C. CHRISTENSEN 2346 VILLANDRY COURT HENDERSON, NV 89014-	STATION CASINOS, INC.	12/04/2000	\$400.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation PRES., CHIEF FINANCIAL OFF. Aggregate Year-to-Date \$ 5000.00		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
JANICE BERYIG 3452 WHITE MISSION DRIVE Las Vegas, NV 89102-	STATION CASINOS INC	12/04/2000	\$38.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation CORPORATE ACCOUNTING MGR. Aggregate Year-to-Date \$ 532.00		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
KEVIN KELGZY 17 VINGAGE COURT Las Vegas, NV 89113-	STATION CASINOS, INC.	12/04/2000	\$370.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation V.P./GENERAL MANAGER Aggregate Year-to-Date \$ 4440.00		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
BODIE M. NIRTSON 6912 EMERALD SPRINGS LAS VEGAS, NV 89113-	STATION CASINOS, INC.	12/04/2000	\$384.62
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation VP/GAMING DEVELOPMENT Aggregate Year-to-Date \$ 5000.00		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
WILLIAM WARNER 8504 ESTRELLITA DRIVE LAS VEGAS, NV 89128	STATION CASINOS, INC.	12/09/2000	\$200.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation DIRECTOR OF FINANCE Aggregate Year-to-Date \$ 2000.00		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
RODNEY S. ATAMIAN 9241 PITCHING WEDGE DRIVE LAS VEGAS, NV 89134-	STATION CASINOS, INC.	12/27/2000	\$190.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation DIR./FINANCIAL SERVICES Aggregate Year-to-Date \$ 2660.00		

SUBTOTAL of Receipts This Page (optional) 1772.62

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)

STATION CASINOS, INC. POLITICAL ACTION COMMITTEE

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
GLENN C. CHRISTENSEN 2346 VILLANDRY COURT HENDERSON, NV 89014-	STATION CASINOS, INC.	12/27/2000	\$200.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation PRES., CORP. FINANCIAL OFF. Aggregate Year-to-Date \$ 5000.00		
B. Full Name, Mailing Address and ZIP Code JANICE HRETIC 3452 WHITE MISSION DRIVE Las Vegas, NV 89102-	STATION CASINOS INC	12/27/2000	\$38.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation CORPORATE ACCOUNTING MGR. Aggregate Year-to-Date \$ 532.00		
C. Full Name, Mailing Address and ZIP Code KEVIN KELLEY 17 VIKINGE COURT Las Vegas, NV 89113-	STATION CASINOS, INC.	12/27/2000	\$370.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation V.P./GENERAL MANAGER Aggregate Year-to-Date \$ 4440.00		
D. Full Name, Mailing Address and ZIP Code SCOTT M. NIELSON 6932 EMERALD SPRINGS LAS VEGAS, NV 89113-	STATION CASINOS, INC.	12/27/2000	\$192.25
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation VP/GAMING DEVELOPMENT Aggregate Year-to-Date \$ 5000.00		
E. Full Name, Mailing Address and ZIP Code WILLIAM WARNER 8504 ESTRELLITA DRIVE LAS VEGAS, NV 89128	STATION CASINOS, INC.	12/27/2000	\$200.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation DIRECTOR OF FINANCE Aggregate Year-to-Date \$ 2800.00		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date \$	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date \$	
SUBTOTAL of Receipts This Page (optional)			1000.25
TOTAL This Period (last page this line number only)			2772.87

SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (in Full)

STATION CASINOS, INC. POLITICAL ACTION COMMITTEE

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
BANK OF MARIN 50 MADERA BOULEVARD CORTE MADERA, CA 94925	INTEREST EARNED	11/30/2000	\$12.58
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date \$ 194.62	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
BANK OF MARIN 50 MADERA BOULEVARD CORTE MADERA, CA 94925	INTEREST EARNED	12/31/2000	\$13.74
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date \$ 194.62	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date \$	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date \$	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date \$	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date \$	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date \$	

SUBTOTAL of Receipts This Page (optional) 27.32

TOTAL This Period (last page this line number only) 27.32

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

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NAME OF COMMITTEE (in Full)

STATION CASINOS, INC. POLITICAL ACTION COMMITTEE

A. Full name, Mailing Address and ZIP code	Purpose of Disbursement AMOUNT OVER \$5,000 CONTRIBUTION LIMIT	Date (month, day, year)	Amount of Each Disbursement This Period
GLENN C. CHRISTENSEN 1346 VILLANDRY COURT HENDERSON, NV 89014	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	12/27/2000	\$200.00
B. Full name, Mailing Address and ZIP code SCOTT W. NIELSON 6932 EMERALD SPRINGS LAS VEGAS, NV 89113	Purpose of Disbursement AMOUNT OVER \$5,000 CONTRIBUTION LIMIT Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	Date (month, day, year) 12/27/2000	Amount of Each Disbursement This Period \$192.31
C. Full name, Mailing Address and ZIP code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
D. Full name, Mailing Address and ZIP code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full name, Mailing Address and ZIP code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full name, Mailing Address and ZIP code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full name, Mailing Address and ZIP code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full name, Mailing Address and ZIP code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full name, Mailing Address and ZIP code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)	392.31
TOTAL This Period (last page this line number only)	392.31

Federal Election Commission

**ENVELOPE REPLACEMENT PAGE
FOR INCOMING DOCUMENTS**

The Commission has added this page to the end of this filing to indicate how it was received.

<input checked="" type="checkbox"/> Hand Delivered	Date of Receipt <i>1-16-01</i>
<input type="checkbox"/> First Class Mail	POSTMARKED
<input type="checkbox"/> Registered/Certified Mail	POSTMARKED (R/C)
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> Received from the House office of Records and Registration	Date of Receipt
<input type="checkbox"/> Received from the Senate Office of Public Records	Date of Receipt
<input type="checkbox"/> Other (Specify):	Postmarked and/or Date of Receipt
<input type="checkbox"/> Electronic Filing	
<i>ds</i>	<i>1-16-01</i>
PREPARER	DATE PREPARED