

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

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FEC MAIL ROOM

2000 JUL 17 A 9 48

1. NAME OF COMMITTEE (in full) STATION CASINOS, INC. POLITICAL ACTION COMMITTEE		2. FEC IDENTIFICATION NUMBER C00263731
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported 2411 WEST SAGARA AVENUE		
CITY, STATE and ZIP CODE LAS VEGAS, NV 89103		
		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	05/01/2000 through 06/30/2000		
6. (a) Cash on Hand January 1, 2000			\$ 26768.19
(b) Cash on Hand at Beginning of Reporting Period		\$ 27477.63	
(c) Total Receipts (from Line 19)		\$ 1563.34	\$ 11499.96
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)		\$ 29039.87	\$ 38268.15
7. Total Disbursements (from Line 30)		\$ 0.00	\$ 9328.28
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))		\$ 29039.87	\$ 29039.87
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)		\$ 0.00	
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	
		07/10/2000	

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 9/93)

**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 06/01/2000	TO: 06/30/2000	
		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)	1543.77	11049.83	11(a)(i)
	II. Unitemized	0.00	346.00	11(a)(ii)
	Total (add I and II) >	1543.77	11395.83	11(a)(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) >	1543.77	11395.83	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.)	18.47	104.13	17
18.	Transfers from Nonfederal Account for Joint Activity	0.00	0.00	18
19.	Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >	1562.24	11499.96	19
20.	Total Federal Receipts (subtract line 18 from line 19) >	1562.24	11499.96	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	0.00	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. Individuals/Persons Other Than Political Committees	0.00	200.00	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)
	Total Contribution Refunds (add a, b and c) >	0.00	200.00	28(d)
29.	Other Disbursements	0.00	0.00	29
30.	Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	0.00	228.28	30
31.	Total Federal Disbursements (subtract line 21 a & b from line 30) >	0.00	28.28	31
III. Net Contributions/Operating Expenditures				
32.	Total Contributions (other than loans)(from line 11d)	1543.77	11395.83	32
33.	Total Contribution Refunds (from line 28d)	0.00	200.00	33
34.	Net Contributions (other than loans)(subtract line 33 from 32)	1543.77	11195.83	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

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. ATAMIYAN 9243 MITCHELL WEDDER DRIVE LAS VEGAS, NV 89134-	STATION CASINOS, INC.	06/12/2000	\$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 \$ 1235.00		
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.	06/12/2000	\$400.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation PRES., CH. FINANCIAL OFF. Aggregate Year-to-Date \$ 2400.00		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
CHARLES L. EVANS 2411 W. SAHARA AVENUE Las Vegas, NV 89102-	STATION CASINOS, INC.	06/12/2000	\$50.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation DIRECTOR OF PURCHASING Aggregate Year-to-Date \$ 325.00		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
JANICE HERTIG 3452 WHITE MISSISSIPPI DRIVE Las Vegas, NV 89102-	STATION CASINOS INC	06/12/2000	\$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 \$ 247.00		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
JAMES HUGHES 7425 SILVER PALM AVENUE LAS VEGAS, NV 89117	SUNSET STATION	06/12/2000	\$96.15
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 \$ 2153.80		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
KEVIN KELLEY 17 VINGAGE COURT Las Vegas, NV 89113-	STATION CASINOS, INC.	06/12/2000	\$185.00
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 \$ 2035.00		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
SCOTT M. NIELSON 6932 EMERALD SPRINGS LAS VEGAS, NV 89113-	STATION CASINOS, INC.	06/12/2000	\$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 \$ 2500.03		
SUBTOTAL of Receipts This Page (optional)			1343.77
TOTAL This Period (last page this line number only)			

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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
WILLIAM WARNER 8504 EBRELEITA DRIVE LAS VEGAS, NV 89128	STATION CASINOS, INC.	06/12/2000	\$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 \$ 1300.00	
B. 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 \$	
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)			200.00
TOTAL This Period (last page this line number only)			1343.77

