

LAW OFFICES OF  
**NIELSEN, MERKSAMER,  
PARRINELLO, MUELLER & NAYLOR**

A PARTNERSHIP INCLUDING A PROFESSIONAL CORPORATION

591 REDWOOD HIGHWAY, #4000

MILL VALLEY, CALIFORNIA 94941

TELEPHONE (415) 389-6800

U.S. DEPT. OF JUSTICE  
FEDERAL ELECTION  
COMMISSION  
MAIL ROOM

Dec 9 9 28 AM '93  
SAN FRANCISCO

650 CALIFORNIA STREET, SUITE 2650  
SAN FRANCISCO, CALIFORNIA 94108  
TELEPHONE (415) 389-6500

**SACRAMENTO**

700 L STREET, SUITE 600  
SACRAMENTO, CALIFORNIA 95834  
TELEPHONE (916) 446-6732

December 6, 1993

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Dear Filing Officer:

Enclosed herewith please find the original signed copy of the following for:

Station Casinos, Inc. Political Action Committee

for the period \_\_\_\_\_ through \_\_\_\_\_.

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6
- Form 1
  - Form 3X
  - Amendment to above
  - Other: \_\_\_\_\_
  - Report to the Federal Election Commission sent by Certified Mail, Return Receipt Requested
  - Report(s) to state filing official(s) sent with Certificate of Mailing

Please endorse this transmittal letter as acknowledgment of receipt of the enclosed report and return it in the stamped envelope provided.

cc: Nevada

# STATEMENT OF ORGANIZATION

(See reverse side for instructions)

1 (a) NAME OF COMMITTEE IN FULL (Check if name is changed) Station Casinos, Inc. <u>Political Action Committee</u>	2 DATE 11/16/93
(b) Number and Street Address (Check if address is changed) 2412 West Sahara Avenue	3 FEC IDENTIFICATION NUMBER C00263731
(c) City, State and ZIP Code Las Vegas, NV 89102	4 IS THIS STATEMENT AN AMENDMENT <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO

5 TYPE OF COMMITTEE (Check one)

(a) This committee is a principal campaign committee. (Complete the candidate information below.)

(b) This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)

Name of Candidate	Candidate Party Affiliation	Office Sought	State/District

(c) This committee supports/opposes only one candidate \_\_\_\_\_ (name of candidate) and is NOT an authorized committee.

(d) This committee is a \_\_\_\_\_ (National, State or subordinate) committee of the \_\_\_\_\_ (Democratic, Republican, etc.) Party

(e) This committee is a separate segregated fund.

(f) This committee supports/opposes more than one Federal candidate and is NOT a separate segregated fund or a party committee.

Name of Any Connected Organization or Affiliated Committee	Mailing Address and ZIP Code	Relationship
No change		

Type of Connected Organization

Corporation  Corporation w/o Capital Stock  Labor Organization  Membership Organization  Trade Association  Cooperative

7. Custodian of Records: Identify by name, address (phone number -- optional) and position of the person in possession of committee books and records.

Full Name	Mailing Address	Title or Position
No change		

8. Treasurer: List the name and address (phone number -- optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

Full Name	Mailing Address	Title or Position
No change		

9. Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.	Mailing Address and ZIP Code
Bank of Marin	50 Madera Boulevard Corte Madera, CA 94925

I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.

TYPE OR PRINT NAME OF TREASURER Glenn C. Christenson	SIGNATURE OF TREASURER <i>Glenn C. Christenson</i>	DATE 12/1 /93
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NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.

7303953357

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.

Hand Delivered

DATE OF RECEIPT

First Class Mail

POSTMARKED

12/16/93

Registered/Certified Mail

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No Postmark

Postmark Illegible

Received from the House Office of Records  
and Registration

DATE OF RECEIPT

Received from the Senate Office of Public  
Records

DATE OF RECEIPT

Other (Specify):

POSTMARKED

and/or DATE OF RECEIPT

*E.S.*  
PREPARER

12/9/93  
DATE PREPARED

23033853358