

LAW OFFICES OF
**NIELSEN, MERKSAMER,
PARRINELLO, MUELLER & NAYLOR, LLP**
A PARTNERSHIP INCLUDING A PROFESSIONAL CORPORATION

SACRAMENTO
770 L STREET, SUITE 800
SACRAMENTO, CALIFORNIA 95814
TELEPHONE (916) 446-6752
FAX (916) 446-6800

591 REDWOOD HIGHWAY, #4000
MILL VALLEY, CALIFORNIA 94541
TELEPHONE (415) 389-6800
FAX (415) 388-6874

SAN FRANCISCO
120 MONTGOMERY STREET, SUITE 1055
SAN FRANCISCO, CALIFORNIA 94104
TELEPHONE (415) 389-6800
FAX (415) 388-6874

August 20, 1998

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 07/01/98 through 07/31/98.

- Form 1
- Form 3X
- Other: Letter Requesting Monthly Filing Status
- Amendment to Above
- Report to the Federal Election Commission sent by Certified of Mail
- Report sent to the Federal Election Commission and State Filing Official(s) 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: New York
Nevada

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other than An Authorized Committee
(Summary Page)

REC'D
FEDERAL ELECTION
COMMISSION

AUG 24 2 17 PM '98

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 SAHARA AVENUE	3. <input checked="" type="checkbox"/> This committee qualified as a multicandidate committee. (see FEC FORM 1M)	
CITY, STATE and ZIP CODE LAS VEGAS, NV 89102		

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

- Twelfth day report preceding _____ (Type of Election)
election on _____ in the State of _____
 Thirtieth day 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
5. Covering Period	07/01/98 through 07/31/98		
6. (a) Cash on Hand January 1, 19 98			\$31875.55
(b) Cash on Hand at Beginning of Reporting Period		\$23149.82	
(c) Total Receipts (from Line 1B)		\$2467.96	\$13784.39
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)		\$25617.78	\$45659.94
7. Total Disbursements (from Line 3C)		\$2000.00	\$22042.16
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))		\$23617.78	\$23617.78
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	

For further information contact
Federal Election Commission
990 E Street, NW
Washington, DC 20463
Toll Free 800-424-9530
Local 202-218-3420

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
08/17/98

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

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 07/01/98 TO: 07/31/98	
I. RECEIPTS	COLUMN A Total This Period	COLUMN B Calendar Year
11. Contributions (other than loans) From:		
a. Individuals/Persons Other Than Political Committees		
i. Itemized (Use Schedule A)	\$2446.61	\$12811.60
ii. Unitemized	\$0.00	\$891.22
iii. Total	\$2446.61	\$13802.82
b. Political Party Committees	\$0.00	\$0.00
c. Other Political Committees (such as PACs)	\$0.00	\$0.00
d. Total Contributions	\$2446.61	\$13802.82
12. Transfers From Affiliated/Other Party Committees	\$0.00	\$0.00
13. All Loans Received	\$0.00	\$0.00
14. Loan Repayments Received	\$0.00	\$0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)	\$0.00	\$0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees	\$0.00	\$0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	\$21.35	\$181.57
18. Transfers from Nonfederal Account for Joint Activity	\$0.00	\$0.00
19. Total Receipts	\$2467.96	\$13784.39
20. Total Federal Receipts	\$2467.96	\$13784.39
II. DISBURSEMENTS		
21. Operating Expenditures:		
a. Shared Federal/Non Federal Activity (from Schedule H4)		
i. Federal Share	\$0.00	\$0.00
ii. Non-Federal Share	\$0.00	\$94.04
b. Other Federal Operating Expenditures	\$0.00	\$94.04
c. Total Operating Expenditures	\$0.00	\$0.00
22. Transfers to Affiliated/Other Party Committees	\$0.00	\$0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees	\$2000.00	\$21500.60
24. Independent Expenditures (use Schedule E)	\$0.00	\$0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d))(use Schedule F)	\$0.00	\$0.00
26. Loan Repayments Made	\$0.00	\$0.00
27. Loans Made	\$0.00	\$0.00
28. Refunds of Contributions To:		
a. Individuals/Persons Other Than Political Committees	\$0.00	\$873.12
b. Political Party Committees	\$0.00	\$0.00
c. Other Political Committees (such as PACs)	\$0.00	\$0.00
d. Total Contribution Refunds	\$0.00	\$873.12
29. Other Disbursements	\$0.00	\$-225.00
30. Total Disbursements	\$2000.00	\$22042.16
31. Total Federal Disbursements	\$2000.00	\$22042.16
III. Net Contributions/Operating Expenditures		
32. Total Contributions (other than loans)(from line 11d)	\$2446.61	\$13802.82
33. Total Contribution Refunds (from line 28d)	\$0.00	\$873.12
34. Net Contributions (other than loans)(subtract line 33 from 32)	\$2446.61	\$12829.70
35. Total Federal Operating Expenditures	\$0.00	\$94.04
36. Offsets to Operating Expenditures (from line 15)	\$0.00	\$0.00
37. Net Operating Expenditures	\$0.00	\$94.04

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Total and 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

Full Name, Mailing Address and Zip Code WESLEY ALLISON 2304 SAPPHIRE VALLEY STREET Las Vegas, NV 89128- Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) OTHER	Name of Employer STATION CASINOS, INC. Occupation DIRECTOR OF FINANCE	Date (month, day, year) 07/31/98 Aggregate Year-to-Date -> \$615.36	Amount of Each Receipt this Period \$113.38
Full Name, Mailing Address and Zip Code ROD ATAMIAN 9241 PITCHING WEDGE DRIVE LAS VEGAS, NV 89134- Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) OTHER	Name of Employer STATION CASINOS, INC. Occupation DIR/FINANCIAL SERVICES	Date (month, day, year) 07/31/98 Aggregate Year-to-Date -> \$1520.00	Amount of Each Receipt this Period \$283.00
Full Name, Mailing Address and Zip Code GLENN C. CHRISTENSON 2346 VILLANDRY COURT HENDERSON, NV 89014- Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) OTHER	Name of Employer STATION CASINOS, INC. Occupation PRES., CHF. FINANCIAL OFF.	Date (month, day, year) 07/31/98 Aggregate Year-to-Date -> \$1400.00	Amount of Each Receipt this Period \$600.00
Full Name, Mailing Address and Zip Code LEE EVANS 2411 W. SAHARA AVENUE Las Vegas, NV 89102- Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) OTHER	Name of Employer STATION CASINOS, INC. Occupation DIRECTOR OF PURCHASING	Date (month, day, year) 07/31/98 Aggregate Year-to-Date -> \$400.00	Amount of Each Receipt this Period \$75.00
Full Name, Mailing Address and Zip Code JANICE HERZIG 2432 WHITE MISSION DRIVE Las Vegas, NV 89102- Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) OTHER	Name of Employer STATION CASINOS INC Occupation CORPORATE ACCOUNTING MGR.	Date (month, day, year) 07/31/98 Aggregate Year-to-Date -> \$394.00	Amount of Each Receipt this Period \$57.00
Full Name, Mailing Address and Zip Code JAMES HUGHES 7423 SILVER PALM AVENUE LAS VEGAS, NV 89117 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) OTHER	Name of Employer SUNSET STATION Occupation V.P. GENERAL MANAGER	Date (month, day, year) 07/31/98 Aggregate Year-to-Date -> \$961.46	Amount of Each Receipt this Period \$192.30
Full Name, Mailing Address and Zip Code KEVIN KELLEY 17 YOUNGSE COURT Las Vegas, NV 89113- Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) OTHER	Name of Employer STATION CASINOS, INC. Occupation V.P./GENERAL MANAGER	Date (month, day, year) 07/31/98 Aggregate Year-to-Date -> \$2035.00	Amount of Each Receipt this Period \$185.00

SUBTOTAL of Receipts This Page (optional):

\$1509.68

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

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s) and attach necessary of the Detailed Summary Page

Any information appearing from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for substantial 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

Full Name, Mailing Address and Zip Code SCOTT NELSON 6932 EMERALD SPRINGS LAS VEGAS, NV 89113-	Name of Employer STATION CASINOS, INC. Occupation VP/GAMING DEVELOPMENT	Date (month, day, year) 07/31/98	Amount of Each Receipt this Period \$576.93
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) OTHER	Aggregate Year-to-Date -> \$3076.96		
Full Name, Mailing Address and Zip Code WILLIAM WARNER 8504 ESTRELITA DRIVE LAS VEGAS, NV 89128	Name of Employer STATION CASINOS, INC. Occupation DIRECTOR OF FINANCE	Date (month, day, year) 07/31/98	Amount of Each Receipt this Period \$300.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) OTHER	Aggregate Year-to-Date -> \$1600.00		
Full Name, Mailing Address and Zip Code CLARK A. WOOD 8504 ESTRELITA Las Vegas, NV 89128-	Name of Employer STATION CASINOS, INC. Occupation V.P. FINANCE	Date (month, day, year) 07/31/98	Amount of Each Receipt this Period \$60.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) OTHER	Aggregate Year-to-Date -> \$320.00		
Full Name, Mailing Address and Zip Code , ,	Name of Employer Occupation	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)	Aggregate Year-to-Date ->		
Full Name, Mailing Address and Zip Code , ,	Name of Employer Occupation	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)	Aggregate Year-to-Date ->		
Full Name, Mailing Address and Zip Code , ,	Name of Employer Occupation	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)	Aggregate Year-to-Date ->		
Full Name, Mailing Address and Zip Code , ,	Name of Employer Occupation	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)	Aggregate Year-to-Date ->		

SUBTOTAL of Receipts This Page (optional)	\$936.93
TOTAL This Period (Last page this line number only)	\$2446.61

SCHEDULE B

ITEMIZED DISBURSEMENTS

Any information contained 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 request contributions from such committee.

NAME OF COMMITTEE (In Full)
STATION CASINOS, INC. POLITICAL ACTION COMMITTEE

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
RANGEL FOR THE 106TH CONGRESS 314 9TH STREET SE Washington, DC 20003-	CHARLIE RANGEL, US CONGRESS; STATE; NY; DIST. 15 Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	07/10/98	\$2000.00
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):	/ /	Amount of Each Disbursement This Period
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):	/ /	Amount of Each Disbursement This Period
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):	/ /	Amount of Each Disbursement This Period
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):	/ /	Amount of Each Disbursement This Period
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):	/ /	Amount of Each Disbursement This Period
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):	/ /	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)	\$2000.00
TOTAL This Period (last page this line number only)	\$2000.00

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 type="checkbox"/>	Hand Delivered	Date of Receipt
<input type="checkbox"/>	First Class Mail	POSTMARKED
<input checked="" type="checkbox"/>	Registered/Certified Mail	POSTMARKED 8-20-98
<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	

Jm12

PREPARER

8-24-98

DATE PREPARED