

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee  
(Summary Page)

RECEIVED  
FEDERAL ELECTION  
COMMISSION MAIL ROOM

2000 APR 21 A 9:25

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 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
5. Covering Period	03/01/2000 through 03/31/2000		
6. (a) Cash on Hand January 1, 2000			\$ 26768.18
(b) Cash on Hand at Beginning of Reporting Period		\$ 28921.30	
(c) Total Receipts (from Line 19)		\$ 17.23	\$ 5875.34
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)		\$ 28938.53	\$ 32643.52
7. Total Disbursements (from Line 30)		\$ 5028.28	\$ 6128.28
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))		\$ 23910.25	\$ 23910.25
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 4/18/00

For further information contact:  
Federal Election Commission  
999 E Street, NW  
Washington, DC 20463  
Toll Free 800-424-8630  
Local 202-694-1100

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 9/98)

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

(revised 1/1/91)

NAME OF COMMITTEE		REPORT COVERING PERIOD	
STATION CASINOS, INC. POLITICAL ACTION COMMITTEE		FROM 03/01/2000	TO: 03/31/2000
I Receipts		COLUMN A Total This Period	COLUMN B Calendar Year
11. Contributions (other than loans) From:			
a. Individual/Persons Other Than Political Committees			
i. Itemized (use Schedule A) .....	0.00	5516.92	11(a)(i)
ii. Unitemized .....	0.00	308.00	11(a)(ii)
iii. Total .....	0.00	5824.92	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 .....	0.00	5824.92	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, Retaxes, 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.) .....	17.83	52.02	17
18. Transfers from Nonfederal Account for Joint Activity .....	0.00	0.00	18
19. Total Receipts .....	17.83	5876.94	19
20. Total Federal Receipts .....	17.83	5876.94	20
<b>II. Disbursements</b>			
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 .....	28.28	28.28	21(b)
c. Total Operating Expenditures .....	28.28	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 .....	5000.00	8500.00	23
24. Independent Expenditures (use Schedule E) .....	0.00	0.00	24
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441e(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 .....	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)
d. Total Contribution Refunds .....	0.00	200.00	28(d)
29. Other Disbursements .....	0.00	0.00	29
30. Total Disbursements .....	5028.28	9728.28	30
31. Total Federal Disbursements .....	5028.28	8728.28	31
<b>III. Net Contributions/Operating Expenditures</b>			
32. Total Contributions (other than loans)(from line 11d) .....	0.00	5824.92	32
33. Total Contribution Refunds (from line 28d) .....	0.00	200.00	33
34. Net Contributions (other than loans)(subtract line 33 from line 32) .....	0.00	5624.92	34
35. Total Federal Operating Expenditures .....	28.28	28.28	35
36. Offsets to Operating Expenditures (from line 15) .....	0.00	0.00	36
37. Net Operating Expenditures .....	28.28	28.28	37

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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 CASINGS, INC. POLITICAL ACTION COMMITTEE

A. Full name, Mailing Address and ZIP code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
FRIENDS OF JON PORTER, INC. 631 N. STEPHANIE STREET #143 HENDERSON, NV 89014	JON PORTER MEMBER OF CONGRESS; STATE: NV; DIST. 1 Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	03/08/2000	\$3,000.00
B. Full name, Mailing Address and ZIP code	JON PORTER MEMBER OF CONGRESS; STATE: NV; DIST. 1 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	03/08/2000	\$2,000.00
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) ..... 5000.00

**TOTAL** This Period (last page this line number only) ..... 5000.00

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 checked="" type="checkbox"/> Hand Delivered	Date of Receipt 4-21-00
<input type="checkbox"/> First Class Mail	POSTMARKED
<input type="checkbox"/> Registered/Certified Mail	POSTMARKED
<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 _____ end/or Date of Receipt
<input type="checkbox"/> Electronic Filing	
 PREPARER	4-21-00 DATE PREPARED