

# SWARTS & SWARTS

5851 West Charleston Blvd.  
Las Vegas, NV 89146

RECEIVED  
FEDERAL ELECTION  
COMMISSION MAIL ROOM  
2000 APR 15 AM 11:17

## MEMO

TO: Federal Election Commission  
FROM: Patty Webb  
Date: 4/14/00  
RE: FEC Report

---

The FEC report for Friends of Jon Porter will be sent via both Federal Express and Certified Mail. Two copies will be sent to ensure that the report will be received before the deadline.

For An Authorized Committee  
(Summary Page)

RECEIVED  
FEDERAL ELECTION  
COMMISSION MAIL ROOM

Friends of Jon Porter Committee

631 N. Stephanie Street!

STATE/DISTRICT

Henderson, NV 89014

NV

2. FEC IDENTIFICATION NUMBER

C00350454

3. IS THIS REPORT AN AMENDMENT?

☐ YES☒ NO

#### 4. TYPE OF REPORT

April 15 Quarterly Report

☐ Twelfth day report preceding

(Type of Election)

[\*\*] July 15 Quarterly Report

election on \_\_\_\_\_ in the State of \_\_\_\_\_

☐ October 15 Quarterly Report

Thirtieth day report following the General Election on

☐ January 31 Year End Report

in the State of

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

This report contains  
activity for

☒ Primary Election☐ General Election☐ Special Election☐ Runoff Election

## SUMMARY

| 5. Covering Period <u>01/01/2000</u> through <u>03/31/2000</u> |                                                                                              | COLUMN A<br>This Period | COLUMN B<br>Calendar Year-to-date                                                                                                                   |
|----------------------------------------------------------------|----------------------------------------------------------------------------------------------|-------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------|
| 6.                                                             | Net Contributions (other than loans)                                                         |                         |                                                                                                                                                     |
|                                                                | (a) Total Contributions (other than loans) (from Line 11(e))                                 | 253,163.19              | 453,956.44                                                                                                                                          |
|                                                                | (b) Total Contribution Refunds (From Line 20(d))                                             | 3,080.00                | 3,080.00                                                                                                                                            |
|                                                                | (c) Net Contributions (other than loans) (subtract Line 6(b) from 6(a))                      | 250,083.19              | 450,876.44                                                                                                                                          |
| 7.                                                             | Net Operating Expenditures                                                                   |                         |                                                                                                                                                     |
|                                                                | (a) Total Operating Expenditures (from Line 17)                                              | 138,720.97              | 169,199.84                                                                                                                                          |
|                                                                | (b) Total Offsets to Operating Expenditures (from Line 14)                                   |                         |                                                                                                                                                     |
|                                                                | (c) Net Operating Expenditures (Subtract Line 7(b) from 7(a))                                | 138,720.97              | 169,199.84                                                                                                                                          |
| 8.                                                             | Cash on hand at Close of Reporting Period (from Line 27)                                     | 300,059.60              | For further information:<br>Federal Election Commission<br>999 E Street, NW<br>Washington, DC 20463<br>Toll Free 800-424-9530<br>Local 202-219-3420 |
| 9.                                                             | Debts and Obligations Owed TO the Committee<br>(Itemize all on Schedule C and/or Schedule D) |                         |                                                                                                                                                     |
| 10.                                                            | Debts and Obligations Owed BY the Committee<br>(Itemize all on Schedule C and/or Schedule D) | 17,301.77               |                                                                                                                                                     |

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 |
|---------------|-------------------|
|---------------|-------------------|

GEORGE C. SWARTS

Signature of Treasurer

Date \_\_\_\_\_

4/14/02

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to penalties of 2 U.S.C. 5437g.

FEC FORM 3

(Revised 4/87)

**Detailed Summary Page**  
of Receipts and Disbursements  
(Page 2, FEC FORM 3)

|                                                                               |                                             |                                                                |  |
|-------------------------------------------------------------------------------|---------------------------------------------|----------------------------------------------------------------|--|
| Name of Committee (in full)<br>Friends of Jan Porter Committee                |                                             | Report Covering the Period:<br>From: 01/01/2000 To: 03/31/2000 |  |
| <b>I. RECEIPTS</b>                                                            | <b>Column A</b><br><b>Total This Period</b> | <b>Column B</b><br><b>Calendar Year-To-Date</b>                |  |
| 11. CONTRIBUTIONS (other than loans) FROM:                                    |                                             |                                                                |  |
| (a) Individuals/Persons Other Than Political Committees                       |                                             |                                                                |  |
| (i) Itemized (Use Schedule A)                                                 | 149,888.08                                  |                                                                |  |
| (ii) Unitemized                                                               | 18,775.11                                   |                                                                |  |
| (iii) Total of contributions from individual                                  | 168,663.19                                  | 301,858.44                                                     |  |
| (b) Political Party Committees                                                |                                             | 4,098.00                                                       |  |
| (c) Other Political Committees (such as PACs)                                 | 83,500.00                                   | 148,000.00                                                     |  |
| (d) The Candidate                                                             |                                             |                                                                |  |
| (a) TOTAL CONTRIBUTIONS (other than loans) (add 11(a)(iii), (b), (c) and (d)) | 253,163.19                                  | 453,956.44                                                     |  |
| 12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES                                |                                             |                                                                |  |
| 13. LOANS:                                                                    |                                             |                                                                |  |
| (a) Made or Guaranteed by the Candidate                                       | 17,301.17                                   | 17,301.17                                                      |  |
| (b) All Other Loans                                                           |                                             |                                                                |  |
| (c) TOTAL LOANS (add 13(a) and (b))                                           | 17,301.17                                   | 17,301.17                                                      |  |
| 14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)                |                                             |                                                                |  |
| 15. OTHER RECEIPTS (Dividends, Interest, etc.)                                | 940.35                                      | 1,081.83                                                       |  |
| 16. TOTAL RECEIPTS (add 11(a), 12, 13(c), 14 and 15)                          | 271,404.71                                  | 472,339.44                                                     |  |
| <b>II. DISBURSEMENTS</b>                                                      |                                             |                                                                |  |
| 17. OPERATING EXPENDITURES                                                    | 138,720.97                                  | 169,199.84                                                     |  |
| 18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES                                  |                                             |                                                                |  |
| 19. LOAN REPAYMENTS:                                                          |                                             |                                                                |  |
| (a) Of Loans Made or Guaranteed by the Candidate                              |                                             |                                                                |  |
| (b) Of All Other Loans                                                        |                                             |                                                                |  |
| (c) TOTAL LOAN REPAYMENTS (add 19(a) and (b))                                 |                                             |                                                                |  |
| 20. REFUNDS OF CONTRIBUTIONS TO:                                              |                                             |                                                                |  |
| (a) Individuals/Persons Other Than Political Committees                       | 80.00                                       | 80.00                                                          |  |
| (b) Political Party Committees                                                | 3,000.00                                    | 3,000.00                                                       |  |
| (c) Other Political Committees (such as PACs)                                 |                                             |                                                                |  |
| (d) TOTAL CONTRIBUTION REFUNDS (add 20(a), (b) and (c))                       | 3,080.00                                    | 3,080.00                                                       |  |
| 21. OTHER DISBURSEMENTS                                                       |                                             |                                                                |  |
| 22. TOTAL DISBURSEMENTS (add 17, 18, 19(c), 20(d) and 21)                     | 141,800.97                                  | 172,279.84                                                     |  |
| <b>III. CASH SUMMARY</b>                                                      |                                             |                                                                |  |
| 23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD                             |                                             | 170,455.86                                                     |  |
| 24. TOTAL RECEIPTS THIS PERIOD (from Line 16)                                 |                                             | 271,404.71                                                     |  |
| 25. SUBTOTAL (add Line 23 and Line 24)                                        |                                             | 441,860.57                                                     |  |
| 26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 16)                            |                                             | 141,800.97                                                     |  |
| 27. CASH ON HAND AT CLOSE OF THE REPORTING PERIOD (subtract Line 26 from 25)  |                                             | 300,059.60                                                     |  |

## SCHEDULE A

## ITEMIZED RECEIPTS

Use separate schedule:  
for each category of the  
Detailed Summary Page

PAGE 1 OF 33

FOR LINE NUMBER  
11(a)(i)

Any information reported from such Reports and Statements may not be 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)

Friends of Jon Porter Committee

|                                                                                                                                                                                                                                                                                       |                                                                                                                              |                                              |                                                                  |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------|------------------------------------------------------------------|
| <b>A. Full Name, Mailing Address and Zip Code</b><br>H. Gary Ackerman<br>280 N. Gibson Road<br>Henderson, NV 89014-<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)                          | <b>Name of Employer</b><br>Gaudin Ford<br><b>Occupation</b><br>Owner<br><b>Aggregate Year-to-Date -&gt;</b> 1,000.00         | <b>Date (month, day, year)</b><br>03/24/2000 | <b>Amount of Each Receipt this Period</b><br>1,000.00            |
| <b>B. Full Name, Mailing Address and Zip Code</b><br>Hugh J. Anderson<br>1896 Hillsboro Drive<br>Henderson, NV 89014-0925<br>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify)                    | <b>Name of Employer</b><br>Best effort<br><b>Occupation</b><br>Best effort<br><b>Aggregate Year-to-Date -&gt;</b> 1,000.00   | <b>Date (month, day, year)</b><br>03/10/2000 | <b>Amount of Each Receipt this Period</b><br>1,000.00            |
| <b>C. Full Name, Mailing Address and Zip Code</b><br>Hugh J. Anderson<br>1896 Hillsboro Drive<br>Henderson, NV 89014-0925<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)                    | <b>Name of Employer</b><br>Best effort<br><b>Occupation</b><br>Best effort<br><b>Aggregate Year-to-Date -&gt;</b> 2,000.00   | <b>Date (month, day, year)</b><br>03/10/2000 | <b>Amount of Each Receipt this Period</b><br>1,000.00            |
| <b>D. Full Name, Mailing Address and Zip Code</b><br>Shona Ariotti<br>1315 Highland Ct<br>Boulder City, NV 89005-<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)                            | <b>Name of Employer</b><br>Self employed<br><b>Occupation</b><br>Nurse<br><b>Aggregate Year-to-Date -&gt;</b> 1,000.00       | <b>Date (month, day, year)</b><br>02/10/2000 | <b>Amount of Each Receipt this Period</b><br>1,000.00            |
| <b>E. Full Name, Mailing Address and Zip Code</b><br>Dick Arney<br>The Dick Arney Campaign Committee<br>P.O. Box 85<br>Lewisville, TX 75067-<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | <b>Name of Employer</b><br>US Government<br><b>Occupation</b><br>Congressman<br><b>Aggregate Year-to-Date -&gt;</b> 1,000.00 | <b>Date (month, day, year)</b><br>03/13/2000 | <b>Amount of Each Receipt this Period</b><br>1,000.00<br>IN-KIND |
| <b>F. Full Name, Mailing Address and Zip Code</b><br>Ray Bacon<br>780 Pawnee Street<br>Carson City, NV 89705-6938<br>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify)                            | <b>Name of Employer</b><br>Ray Bacon & Assoc<br><b>Occupation</b><br>Lobbyist<br><b>Aggregate Year-to-Date -&gt;</b> 500.00  | <b>Date (month, day, year)</b><br>03/24/2000 | <b>Amount of Each Receipt this Period</b><br>500.00              |
| <b>G. Full Name, Mailing Address and Zip Code</b><br>Baker For Congress<br>P.O. , Box 1634<br>Baton Rouge, LA 70821-1694<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)                     | <b>Name of Employer</b><br>US Government<br><b>Occupation</b><br>Congressman<br><b>Aggregate Year-to-Date -&gt;</b> 1,000.00 | <b>Date (month, day, year)</b><br>03/31/2000 | <b>Amount of Each Receipt this Period</b><br>1,000.00            |

SUBTOTAL of Receipts This Page (optional)

6,500.00

TOTAL This Period (last page this line number only)

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE OF  
2 32

FOR LINE NUMBER  
11(a) 11

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)**

Friends of Jon Porter Committee

|                                                                                                                                                                                                                                                                    |                                                                                                                             |                                                                                                       |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------|
| <b>A. Full Name, Mailing Address and Zip Code</b><br>George Balaban<br>90 W. Oakley<br>Las Vegas, NV 89102-<br>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify)               | <b>Name of Employer</b><br>Desert Cab<br><b>Occupation</b><br>Owner<br><b>Aggregate Year-to-Date -&gt;</b> 1,000.00         | <b>Date (month, day, year)</b><br>03/29/2000<br><b>Amount of Each Receipt this Period</b><br>1,000.00 |
| <b>B. Full Name, Mailing Address and Zip Code</b><br>George Balaban<br>90 W. Oakley<br>Las Vegas, NV 89102-<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)               | <b>Name of Employer</b><br>Desert Cab<br><b>Occupation</b><br>Owner<br><b>Aggregate Year-to-Date -&gt;</b> 2,000.00         | <b>Date (month, day, year)</b><br>03/29/2000<br><b>Amount of Each Receipt this Period</b><br>1,000.00 |
| <b>C. Full Name, Mailing Address and Zip Code</b><br>Robert R. Barango<br>457 Court Street<br>Reno, NV 89501-<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)             | <b>Name of Employer</b><br>Self employed<br><b>Occupation</b><br>Attorney<br><b>Aggregate Year-to-Date -&gt;</b> 1,000.00   | <b>Date (month, day, year)</b><br>03/30/2000<br><b>Amount of Each Receipt this Period</b><br>1,000.00 |
| <b>D. Full Name, Mailing Address and Zip Code</b><br>Jed Bacon<br>3753 Howard Hughes Pkwy #200<br>Las Vegas, NV 89135-<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)    | <b>Name of Employer</b><br>JAG Productions<br><b>Occupation</b><br>Owner<br><b>Aggregate Year-to-Date -&gt;</b> 1,000.00    | <b>Date (month, day, year)</b><br>03/27/2000<br><b>Amount of Each Receipt this Period</b><br>1,000.00 |
| <b>E. Full Name, Mailing Address and Zip Code</b><br>James J. Baumberger<br>1542 Duran Drive<br>Las Vegas, NV 89123-<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)      | <b>Name of Employer</b><br>First Republic Bank<br><b>Occupation</b><br>Banker<br><b>Aggregate Year-to-Date -&gt;</b> 250.00 | <b>Date (month, day, year)</b><br>03/08/2000<br><b>Amount of Each Receipt this Period</b><br>250.00   |
| <b>F. Full Name, Mailing Address and Zip Code</b><br>Betty W. Becker<br>8848 Rainbow Ridge Dr.<br>Las Vegas, NV 89117-<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)    | <b>Name of Employer</b><br>No Employer<br><b>Occupation</b><br>HOMEMAKER<br><b>Aggregate Year-to-Date -&gt;</b> 250.00      | <b>Date (month, day, year)</b><br>03/27/2000<br><b>Amount of Each Receipt this Period</b><br>250.00   |
| <b>G. Full Name, Mailing Address and Zip Code</b><br>Goldie M. Begley<br>1606 Broadmoor Circle<br>Boulder City, NV 89005-<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | <b>Name of Employer</b><br>Boulder City News<br><b>Occupation</b><br>Ad Sales<br><b>Aggregate Year-to-Date -&gt;</b> 200.00 | <b>Date (month, day, year)</b><br>01/13/2000<br><b>Amount of Each Receipt this Period</b><br>200.00   |

**SUBTOTAL** of Receipts This Page (optional)

4,700.00

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

**SCHEDULE A**

**ITEMIZED RECEIPTS**

use separate schedule  
for each category of the  
Detailed Summary Page

PAGE 3 OF 33  
FOR LINE NUMBER  
11(a)(i)

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 electoral purposes, other than using the name and address of any political committee to solicit contributions from such committee.

**NAME OF COMMITTEE (In Full)**  
Friends of Jon Porter Committee

|                                                                                                                                                                                                                                                                                               |                                                                                                                                          |                                              |                                                       |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------|-------------------------------------------------------|
| <b>A. Full Name, Mailing Address and Zip Code</b><br>Gaille M. Begley<br>1606 Broadmoor Circle<br>Boulder City, NV 89005-<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                           | <b>Name of Employer</b><br>Boulder City News<br><b>Occupation</b><br>Ad Sales<br><b>Aggregate Year-to-Date -&gt;</b> 400.00              | <b>Date (month, day, year)</b><br>02/10/2000 | <b>Amount of Each Receipt this Period</b><br>200.00   |
| <b>B. Full Name, Mailing Address and Zip Code</b><br>David Bernick<br>4510 Parkview Dr.<br>Mesquite, NV 89027-<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                                      | <b>Name of Employer</b><br>Virgin Valley Credit Union<br><b>Occupation</b><br>Loan Officer<br><b>Aggregate Year-to-Date -&gt;</b> 250.00 | <b>Date (month, day, year)</b><br>03/31/2000 | <b>Amount of Each Receipt this Period</b><br>250.00   |
| <b>C. Full Name, Mailing Address and Zip Code</b><br>John Hielinski<br>37 Country Club Lane<br>Las Vegas, NV 89109-<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                                 | <b>Name of Employer</b><br>Ad America<br><b>Occupation</b><br>President<br><b>Aggregate Year-to-Date -&gt;</b> 1,000.00                  | <b>Date (month, day, year)</b><br>02/22/2000 | <b>Amount of Each Receipt this Period</b><br>1,000.00 |
| <b>D. Full Name, Mailing Address and Zip Code</b><br>John Hielinski<br>37 Country Club Lane<br>Las Vegas, NV 89109-<br>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                                 | <b>Name of Employer</b><br>Ad America<br><b>Occupation</b><br>President<br><b>Aggregate Year-to-Date -&gt;</b> 2,000.00                  | <b>Date (month, day, year)</b><br>03/31/2000 | <b>Amount of Each Receipt this Period</b><br>1,000.00 |
| <b>E. Full Name, Mailing Address and Zip Code</b><br>Henry Bonilla<br>Texans for Henry Bonilla<br>3905 Tattnell<br>Schertz, TX 78154-<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):               | <b>Name of Employer</b><br>US Government<br><b>Occupation</b><br>Congressman<br><b>Aggregate Year-to-Date -&gt;</b> 1,000.00             | <b>Date (month, day, year)</b><br>03/24/2000 | <b>Amount of Each Receipt this Period</b><br>1,000.00 |
| <b>F. Full Name, Mailing Address and Zip Code</b><br>Diana E. Bossard<br>Bossard Developer Services<br>804 Robinson Lane<br>Boulder City, NV 89005-<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Name of Employer</b><br>Bossard Developer Services<br><b>Occupation</b><br>President<br><b>Aggregate Year-to-Date -&gt;</b> 200.00    | <b>Date (month, day, year)</b><br>02/10/2000 | <b>Amount of Each Receipt this Period</b><br>200.00   |
| <b>G. Full Name, Mailing Address and Zip Code</b><br>Diana E. Bossard<br>Bossard Developer Services<br>804 Robinson Lane<br>Boulder City, NV 89005-<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Name of Employer</b><br>Bossard Developer Services<br><b>Occupation</b><br>President<br><b>Aggregate Year-to-Date -&gt;</b> 300.00    | <b>Date (month, day, year)</b><br>03/22/2000 | <b>Amount of Each Receipt this Period</b><br>100.00   |

**SUBTOTAL** of Receipts This Page (optional)

3,750.00

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

## SCHEDULE A

## ITEMIZED RECEIPTS

 Use separate schedule(s)  
for each category of Line  
Unfiled Summary Page

 PAGE 07  
4 33

 FOR LINE NUMBER  
11(a)(1)

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of collecting 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)  
Friends of Jon Porter Committee

|                                                                                                                                                                                                                                                                       |                                                                                                                                 |                                                                                                       |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------|
| <b>A. Full Name, Mailing Address and Zip Code</b><br>Brady For Congress<br>P.O. Box 8277<br>Spring, TX 77387-<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)                | <b>Name of Employer</b><br>US Government<br><b>Occupation</b><br>Congressman<br><b>Aggregate Year-to-Date -&gt;</b> 1,000.00    | <b>Date (month, day, year)</b><br>03/24/2000<br><b>Amount of Each Receipt this Period</b><br>1,000.00 |
| <b>B. Full Name, Mailing Address and Zip Code</b><br>Robert Broadbent<br>650 Grand Drive<br>Boulder City, NV 89005-<br>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify)          | <b>Name of Employer</b><br>Self employed<br><b>Occupation</b><br>Engineer<br><b>Aggregate Year-to-Date -&gt;</b> 1,000.00       | <b>Date (month, day, year)</b><br>03/30/2000<br><b>Amount of Each Receipt this Period</b><br>1,000.00 |
| <b>C. Full Name, Mailing Address and Zip Code</b><br>Darin L. Brookner<br>814 Balboa Ct<br>Las Vegas, NV 89109-<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)              | <b>Name of Employer</b><br>Best effort<br><b>Occupation</b><br>Best effort<br><b>Aggregate Year-to-Date -&gt;</b> 1,000.00      | <b>Date (month, day, year)</b><br>03/20/2000<br><b>Amount of Each Receipt this Period</b><br>1,000.00 |
| <b>D. Full Name, Mailing Address and Zip Code</b><br>Joseph Brown<br>3772 Howard Hughes Pkwy 3-S<br>Las Vegas, NV 89109-<br>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify)     | <b>Name of Employer</b><br>Jones Vargas<br><b>Occupation</b><br>Attorney<br><b>Aggregate Year-to-Date -&gt;</b> 50.00           | <b>Date (month, day, year)</b><br>01/10/2000<br><b>Amount of Each Receipt this Period</b><br>50.00    |
| <b>E. Full Name, Mailing Address and Zip Code</b><br>Joseph Brown<br>3772 Howard Hughes Pkwy 3-S<br>Las Vegas, NV 89109-<br>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify)     | <b>Name of Employer</b><br>Jones Vargas<br><b>Occupation</b><br>Attorney<br><b>Aggregate Year-to-Date -&gt;</b> 1,350.00        | <b>Date (month, day, year)</b><br>02/15/2000<br><b>Amount of Each Receipt this Period</b><br>1,300.00 |
| <b>F. Full Name, Mailing Address and Zip Code</b><br>Kevin M. Buckley<br>8275 S. Eastern Ave Ste 105<br>Las Vegas, NV 89123-<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | <b>Name of Employer</b><br>Best effort<br><b>Occupation</b><br>Best effort<br><b>Aggregate Year-to-Date -&gt;</b> 1,500.00      | <b>Date (month, day, year)</b><br>03/31/2000<br><b>Amount of Each Receipt this Period</b><br>1,000.00 |
| <b>G. Full Name, Mailing Address and Zip Code</b><br>R.W. Bunker<br>7870 Castle Pines Ave<br>Las Vegas, NV 89113-<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)            | <b>Name of Employer</b><br>Nevada Resorts Assoc<br><b>Occupation</b><br>President<br><b>Aggregate Year-to-Date -&gt;</b> 500.00 | <b>Date (month, day, year)</b><br>03/29/2000<br><b>Amount of Each Receipt this Period</b><br>500.00   |

SUBTOTAL of Receipts This Page (optional)

5,550.00

TOTAL This Period (last page this line number only)

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE 5 OF 33

FOR LINE NUMBER 11(a)(1)

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)**

Friends of Jon Porter Committee

|                                                                                                                                                                                                                                                                |                                                                                                                                     |                                              |                                                       |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------|-------------------------------------------------------|
| <b>A. Full Name, Mailing Address and Zip Code</b><br>Jeffrey L. Burr<br>4455 S. Pecos Road<br>Las Vegas, NV 89121-<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)    | <b>Name of Employer</b><br>Jeffrey L. Burr & Assoc<br><b>Occupation</b><br>Attorney<br><b>Aggregate Year-to-Date -&gt;</b> 1,000.00 | <b>Date (month, day, year)</b><br>02/08/2000 | <b>Amount of Each Receipt this Period</b><br>1,000.00 |
| <b>B. Full Name, Mailing Address and Zip Code</b><br>Jerry Bussell<br>2620 Lakeridge Shores, W.<br>Reno, NV 89509-<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)    | <b>Name of Employer</b><br>Bussell Bell Inc<br><b>Occupation</b><br>Investor<br><b>Aggregate Year-to-Date -&gt;</b> 125.00          | <b>Date (month, day, year)</b><br>02/11/2000 | <b>Amount of Each Receipt this Period</b><br>125.00   |
| <b>C. Full Name, Mailing Address and Zip Code</b><br>Jerry Bussell<br>2620 Lakeridge Shores, W.<br>Reno, NV 89509-<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)    | <b>Name of Employer</b><br>Bussell Bell Inc<br><b>Occupation</b><br>Investor<br><b>Aggregate Year-to-Date -&gt;</b> 1,000.00        | <b>Date (month, day, year)</b><br>02/22/2000 | <b>Amount of Each Receipt this Period</b><br>875.00   |
| <b>D. Full Name, Mailing Address and Zip Code</b><br>Jerry Bussell<br>2620 Lakeridge Shores, W.<br>Reno, NV 89509-<br>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify)    | <b>Name of Employer</b><br>Bussell Bell Inc<br><b>Occupation</b><br>Investor<br><b>Aggregate Year-to-Date -&gt;</b> 1,125.00        | <b>Date (month, day, year)</b><br>02/22/2000 | <b>Amount of Each Receipt this Period</b><br>125.00   |
| <b>E. Full Name, Mailing Address and Zip Code</b><br>Jerry Bussell<br>2620 Lakeridge Shores, W.<br>Reno, NV 89509-<br>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify)    | <b>Name of Employer</b><br>Bussell Bell Inc<br><b>Occupation</b><br>Investor<br><b>Aggregate Year-to-Date -&gt;</b> 2,000.00        | <b>Date (month, day, year)</b><br>03/28/2000 | <b>Amount of Each Receipt this Period</b><br>875.00   |
| <b>F. Full Name, Mailing Address and Zip Code</b><br>Augustine C. Bustos<br>2535 S. Bronco St<br>Las Vegas, NV 89102-<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | <b>Name of Employer</b><br>Best effort<br><b>Occupation</b><br>Best effort<br><b>Aggregate Year-to-Date -&gt;</b> 1,300.00          | <b>Date (month, day, year)</b><br>03/20/2000 | <b>Amount of Each Receipt this Period</b><br>1,000.00 |
| <b>G. Full Name, Mailing Address and Zip Code</b><br>Patricia C. Coffey<br>205 Urban Road<br>Reno, NV 89509-<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)          | <b>Name of Employer</b><br>Self employed<br><b>Occupation</b><br>Attorney<br><b>Aggregate Year-to-Date -&gt;</b> 70.00              | <b>Date (month, day, year)</b><br>02/11/2000 | <b>Amount of Each Receipt this Period</b><br>70.00    |

**SUBTOTAL** of Receipts This Page (optional)

4,070.00

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



**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE OF  
6 33  
FOR LINE NUMBER  
11(a)(i)

The 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)**

Friends of Jon Porter Committee

|                                                                                                                                                                                                                                                                                       |                                                                                                                                        |                                              |                                                       |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------|-------------------------------------------------------|
| <b>A. Full Name, Mailing Address and Zip Code</b><br>Patricia D. Catterata<br>205 Urban Road<br>Reno, NV 89509-<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)                              | <b>Name of Employer</b><br>Self employed<br><b>Occupation</b><br>Attorney<br><b>Aggregate Year-to-Date -&gt;</b> 170.00                | <b>Date (month, day, year)</b><br>03/29/2000 | <b>Amount of Each Receipt this Period</b><br>100.00   |
| <b>B. Full Name, Mailing Address and Zip Code</b><br>Cannon for Congress<br>310 South Main street<br>Suite 1420<br>Salt Lake City, UT 84101-<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | <b>Name of Employer</b><br>US Government<br><b>Occupation</b><br>Congressman<br><b>Aggregate Year-to-Date -&gt;</b> 1,000.00           | <b>Date (month, day, year)</b><br>03/31/2000 | <b>Amount of Each Receipt this Period</b><br>1,000.00 |
| <b>C. Full Name, Mailing Address and Zip Code</b><br>C.C. Carter<br>2812 Mason Ave<br>Las Vegas, NV 89102-<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)                                   | <b>Name of Employer</b><br>Best effort<br><b>Occupation</b><br>Best effort<br><b>Aggregate Year-to-Date -&gt;</b> 500.00               | <b>Date (month, day, year)</b><br>03/27/2000 | <b>Amount of Each Receipt this Period</b><br>500.00   |
| <b>D. Full Name, Mailing Address and Zip Code</b><br>Elaine Chenoweth<br>2211 N. Rampart St., Ste 190<br>Las Vegas, NV 89128-<br>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify)                | <b>Name of Employer</b><br>No Employer<br><b>Occupation</b><br>Retired<br><b>Aggregate Year-to-Date -&gt;</b> 1,000.00                 | <b>Date (month, day, year)</b><br>02/22/2000 | <b>Amount of Each Receipt this Period</b><br>1,000.00 |
| <b>E. Full Name, Mailing Address and Zip Code</b><br>Elaine Chenoweth<br>2211 N. Rampart St., Ste 190<br>Las Vegas, NV 89128-<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)                | <b>Name of Employer</b><br>No Employer<br><b>Occupation</b><br>Retired<br><b>Aggregate Year-to-Date -&gt;</b> 2,000.00                 | <b>Date (month, day, year)</b><br>02/22/2000 | <b>Amount of Each Receipt this Period</b><br>1,000.00 |
| <b>F. Full Name, Mailing Address and Zip Code</b><br>Jim Christensen, M.D.<br>1882 Brentwood Drive<br>Henderson, NV 89014-<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)                   | <b>Name of Employer</b><br>Allergy Associates<br><b>Occupation</b><br>Physician<br><b>Aggregate Year-to-Date -&gt;</b> 250.00          | <b>Date (month, day, year)</b><br>03/22/2000 | <b>Amount of Each Receipt this Period</b><br>250.00   |
| <b>G. Full Name, Mailing Address and Zip Code</b><br>David W. Clark<br>P.O. Box 10375<br>Reno, NV 89510-<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)                                     | <b>Name of Employer</b><br>Clark Sullivan<br>Contractors<br><b>Occupation</b><br>Owner<br><b>Aggregate Year-to-Date -&gt;</b> 1,000.00 | <b>Date (month, day, year)</b><br>02/25/2000 | <b>Amount of Each Receipt this Period</b><br>1,000.00 |

**SUBTOTAL** of Receipts This Page (optional)

4,850.00

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

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE 7 OF 33  
FOR LINE NUMBER 11(a)(1)

Any information received from such Reports and Statements may not be used or cited 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)**  
Friends of Jon Porter Committee

|                                                                                                                                                                                                                                                                                                |                                                                                                                                              |                                                                    |                                                       |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------|-------------------------------------------------------|
| <b>A. Full Name, Mailing Address and Zip Code</b><br>James F. Clark<br>P.O. Box 5586<br>Incline Village, NV 89450-<br><b>Receipt For:</b> <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify)                             | <b>Name of Employer</b><br>Sierra Bouquest, Inc.<br><br><b>Occupation</b><br>Developer<br><br><b>Aggregate Year-to-Date -&gt;</b> 704.50     | <b>Date (month, day, year)</b><br>02/10/2000<br><br><b>IN-KIND</b> | <b>Amount of Each Receipt this Period</b><br>704.50   |
| <b>B. Full Name, Mailing Address and Zip Code</b><br>Lois A. Collins<br>7705 Spanish Bay<br>Las Vegas, NV 89113-<br><b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)                               | <b>Name of Employer</b><br>No Employer<br><br><b>Occupation</b><br>Retired<br><br><b>Aggregate Year-to-Date -&gt;</b> 1,000.00               | <b>Date (month, day, year)</b><br>03/10/2000                       | <b>Amount of Each Receipt this Period</b><br>1,000.00 |
| <b>C. Full Name, Mailing Address and Zip Code</b><br>Combest<br>P.O. Box 10667<br>Lubbock, TX 79408-<br><b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)                                           | <b>Name of Employer</b><br>US Government<br><br><b>Occupation</b><br>Congressman<br><br><b>Aggregate Year-to-Date -&gt;</b> 1,000.00         | <b>Date (month, day, year)</b><br>03/08/2000                       | <b>Amount of Each Receipt this Period</b><br>1,000.00 |
| <b>D. Full Name, Mailing Address and Zip Code</b><br>Steve Comer<br>3015 S. Monte Cristo Way<br>Las Vegas, NV 89117-<br><b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)                           | <b>Name of Employer</b><br>Arthur Anderson<br><br><b>Occupation</b><br>CPA<br><br><b>Aggregate Year-to-Date -&gt;</b> 400.00                 | <b>Date (month, day, year)</b><br>03/22/2000                       | <b>Amount of Each Receipt this Period</b><br>400.00   |
| <b>E. Full Name, Mailing Address and Zip Code</b><br>William R. Copper<br>6233 W. Alexander Road<br>Las Vegas, NV 89108-<br><b>Receipt For:</b> <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify)                       | <b>Name of Employer</b><br>RED MOUNTAIN REALTY<br><br><b>Occupation</b><br>Self Employed<br><br><b>Aggregate Year-to-Date -&gt;</b> 1,000.00 | <b>Date (month, day, year)</b><br>03/31/2000                       | <b>Amount of Each Receipt this Period</b><br>1,000.00 |
| <b>F. Full Name, Mailing Address and Zip Code</b><br>J. Patrick Coward<br>3740 Spinnaker Dr<br>Reno, NV 89503-<br><b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)                                 | <b>Name of Employer</b><br>Carrera Nevada<br><br><b>Occupation</b><br>Owner<br><br><b>Aggregate Year-to-Date -&gt;</b> 250.00                | <b>Date (month, day, year)</b><br>03/29/2000                       | <b>Amount of Each Receipt this Period</b><br>250.00   |
| <b>G. Full Name, Mailing Address and Zip Code</b><br>Christopher Cox<br>Congressional Committee<br>P.O. Box 8088 C<br>Newport Beach, CA 92658-<br><b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | <b>Name of Employer</b><br>US Government<br><br><b>Occupation</b><br>Congressman<br><br><b>Aggregate Year-to-Date -&gt;</b> 1,000.00         | <b>Date (month, day, year)</b><br>03/22/2000                       | <b>Amount of Each Receipt this Period</b><br>1,000.00 |

**SUBTOTAL** of Receipts This Page (optional)

5,354.50

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

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE 8 OF 33  
FOR LINE NUMBER 11(a)(i)

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)**

Friends of Jon Porter Committee

|                                                                                                                                                                                                                                                                                         |                                                                                                                                   |                                              |                                                       |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------|-------------------------------------------------------|
| <b>A. Full Name, Mailing Address and Zip Code</b><br>Christopher Cox<br>Congressional Committee<br>P.O. Box 8088 C<br>Newport Beach, CA 92658-<br>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | <b>Name of Employer</b><br>US Government<br><b>Occupation</b><br>Congressman<br><b>Aggregate Year-to-Date -&gt;</b> 2,000.00      | <b>Date (month, day, year)</b><br>03/22/2000 | <b>Amount of Each Receipt this Period</b><br>1,000.00 |
| <b>B. Full Name, Mailing Address and Zip Code</b><br>Grant H. Cox<br>9275 S. Jones<br>Las Vegas, NV 89139-<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)                                     | <b>Name of Employer</b><br>Chris Krane Construction<br><b>Occupation</b><br>Owner<br><b>Aggregate Year-to-Date -&gt;</b> 1,000.00 | <b>Date (month, day, year)</b><br>03/31/2000 | <b>Amount of Each Receipt this Period</b><br>1,000.00 |
| <b>C. Full Name, Mailing Address and Zip Code</b><br>John F. Cox<br>5226 Greenberry Drive<br>Sacramento, CA 95841-4029<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)                         | <b>Name of Employer</b><br>Self employed<br><b>Occupation</b><br>Insurance Broker<br><b>Aggregate Year-to-Date -&gt;</b> 250.00   | <b>Date (month, day, year)</b><br>02/15/2000 | <b>Amount of Each Receipt this Period</b><br>250.00   |
| <b>D. Full Name, Mailing Address and Zip Code</b><br>Theda Cox<br>375 Ave I<br>Boulder City, NV 89005-<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)                                         | <b>Name of Employer</b><br>No Employer<br><b>Occupation</b><br>HOMEMAKER<br><b>Aggregate Year-to-Date -&gt;</b> 500.00            | <b>Date (month, day, year)</b><br>02/10/2000 | <b>Amount of Each Receipt this Period</b><br>500.00   |
| <b>E. Full Name, Mailing Address and Zip Code</b><br>Crane<br>Crane for Congress Committee<br>P.O. Box 8534<br>Rolling Meadows, IL 60008-<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)      | <b>Name of Employer</b><br>US Government<br><b>Occupation</b><br>Congressman<br><b>Aggregate Year-to-Date -&gt;</b> 1,000.00      | <b>Date (month, day, year)</b><br>03/31/2000 | <b>Amount of Each Receipt this Period</b><br>1,000.00 |
| <b>F. Full Name, Mailing Address and Zip Code</b><br>Susan A. Crowell<br>4 E. Sunset Way<br>Carson City, NV 89703-<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)                             | <b>Name of Employer</b><br>Self employed<br><b>Occupation</b><br>Lobbyist<br><b>Aggregate Year-to-Date -&gt;</b> 1,000.00         | <b>Date (month, day, year)</b><br>03/10/2000 | <b>Amount of Each Receipt this Period</b><br>1,000.00 |
| <b>G. Full Name, Mailing Address and Zip Code</b><br>Amanda M. Cyphers<br>1660 Bridle Dr<br>Henderson, NV 89015-3432<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)                           | <b>Name of Employer</b><br>US Government<br><b>Occupation</b><br>Councilwoman<br><b>Aggregate Year-to-Date -&gt;</b> 250.00       | <b>Date (month, day, year)</b><br>03/28/2000 | <b>Amount of Each Receipt this Period</b><br>250.00   |

**SUBTOTAL** of Receipts This Page (optional)

5,000.00

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

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE 9 OF 33

FOR LINE NUMBER 11(a)(i)

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)**

Friends of Jon Porter Committee

|                                                                                                                                                                                                                                                                                                         |                                                                                                                                 |                                                                                                       |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------|
| <b>A. Full Name, Mailing Address and Zip Code</b><br>Tom Davis<br>Tom Davis for Congress<br>5429 Downing Ct<br>Annandale, VA 22003-<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)                            | <b>Name of Employer</b><br>US Government<br><b>Occupation</b><br>Congressman<br><b>Aggregate Year-to-Date -&gt;</b> 1,000.00    | <b>Date (month, day, year)</b><br>03/31/2000<br><b>Amount of Each Receipt this Period</b><br>1,000.00 |
| <b>B. Full Name, Mailing Address and Zip Code</b><br>Ruth W. Dawson<br>614 E. Fairway Road<br>Henderson, NV 89015-<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)                                             | <b>Name of Employer</b><br>Best effort<br><b>Occupation</b><br>Best effort<br><b>Aggregate Year-to-Date -&gt;</b> 1,000.00      | <b>Date (month, day, year)</b><br>03/31/2000<br><b>Amount of Each Receipt this Period</b><br>1,000.00 |
| <b>C. Full Name, Mailing Address and Zip Code</b><br>Theodore J. Day<br>Walker Investment Company<br>165 W. Liberty St. Ste 100<br>Reno, NV 89501<br>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify)              | <b>Name of Employer</b><br>Self employed<br><b>Occupation</b><br>Realtor<br><b>Aggregate Year-to-Date -&gt;</b> 500.00          | <b>Date (month, day, year)</b><br>03/20/2000<br><b>Amount of Each Receipt this Period</b><br>500.00   |
| <b>D. Full Name, Mailing Address and Zip Code</b><br>Theodore J. Day<br>Walker Investment Company<br>165 W. Liberty St. Ste 100<br>Reno, NV 89501-<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)             | <b>Name of Employer</b><br>Self employed<br><b>Occupation</b><br>Realtor<br><b>Aggregate Year-to-Date -&gt;</b> 1,500.00        | <b>Date (month, day, year)</b><br>03/26/2000<br><b>Amount of Each Receipt this Period</b><br>1,000.00 |
| <b>E. Full Name, Mailing Address and Zip Code</b><br>John T. Doelittle<br>John T. Doelittle for Congress<br>400 Capitol Mall Ste 1560<br>Sacramento, CA 95814-<br>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | <b>Name of Employer</b><br>US Government<br><b>Occupation</b><br>Congressman<br><b>Aggregate Year-to-Date -&gt;</b> 1,000.00    | <b>Date (month, day, year)</b><br>03/31/2000<br><b>Amount of Each Receipt this Period</b><br>1,000.00 |
| <b>F. Full Name, Mailing Address and Zip Code</b><br>John T. Doelittle<br>John T. Doelittle for Congress<br>400 Capitol Mall Ste 1560<br>Sacramento, CA 95814-<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | <b>Name of Employer</b><br>US Government<br><b>Occupation</b><br>Congressman<br><b>Aggregate Year-to-Date -&gt;</b> 2,000.00    | <b>Date (month, day, year)</b><br>03/31/2000<br><b>Amount of Each Receipt this Period</b><br>1,000.00 |
| <b>G. Full Name, Mailing Address and Zip Code</b><br>Robert P. Ellis<br>1239 Boulder City Hwy Ste 900<br>Henderson, NV 89015-<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)                                  | <b>Name of Employer</b><br>B & B Auto Auction<br><b>Occupation</b><br>President<br><b>Aggregate Year-to-Date -&gt;</b> 1,000.00 | <b>Date (month, day, year)</b><br>03/24/2000<br><b>Amount of Each Receipt this Period</b><br>1,000.00 |

**SUBTOTAL** of Receipts This Page (optional)

6,500.00

**TOTAL** This Period (Last page this line number only)

## SCHEDULE A

## ITEMIZED RECEIPTS

Use separate schedule (a)  
for each category of the  
detailed summary pagePAGE 07  
10 33  
FOR LINE NUMBER  
11(a) (i)

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)  
Friends of Jon Porter Committee

|                                                                                                                                                                                                                                                                            |                                                                                                                              |                                                                                                       |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------|
| <b>A. Full Name, Mailing Address and Zip Code</b><br>Rex C. Ewing<br>1200 North A Street<br>Las Vegas, NV 89101-<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)                  | <b>Name of Employer</b><br>Ewing Investments<br><b>Occupation</b><br>Partner<br><b>Aggregate Year-to-Date -&gt;</b> 1,000.00 | <b>Date (month, day, year)</b><br>03/31/2000<br><b>Amount of Each Receipt this Period</b><br>1,000.00 |
| <b>B. Full Name, Mailing Address and Zip Code</b><br>R.W. Fair<br>P.O. Box 62495<br>Boulder City, NV 89006-2495<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)                   | <b>Name of Employer</b><br>Lake Mead Cruises<br><b>Occupation</b><br>Owner<br><b>Aggregate Year-to-Date -&gt;</b> 1,000.00   | <b>Date (month, day, year)</b><br>02/10/2000<br><b>Amount of Each Receipt this Period</b><br>1,000.00 |
| <b>C. Full Name, Mailing Address and Zip Code</b><br>Michael R. Falvo<br>1646 Riviera Ct<br>Boulder City, NV 89005-<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)               | <b>Name of Employer</b><br>Self employed<br><b>Occupation</b><br>Physician<br><b>Aggregate Year-to-Date -&gt;</b> 500.00     | <b>Date (month, day, year)</b><br>03/31/2000<br><b>Amount of Each Receipt this Period</b><br>500.00   |
| <b>D. Full Name, Mailing Address and Zip Code</b><br>John Farahi<br>3800 S. Virginia Street<br>Reno, NV 89507-<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)                    | <b>Name of Employer</b><br>Atlantis Casino<br><b>Occupation</b><br>Officer<br><b>Aggregate Year-to-Date -&gt;</b> 500.00     | <b>Date (month, day, year)</b><br>02/18/2000<br><b>Amount of Each Receipt this Period</b><br>500.00   |
| <b>E. Full Name, Mailing Address and Zip Code</b><br>Sylvia S. Passic<br>P.O. Box 269<br>Carlsbad, NV 89412-<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)                      | <b>Name of Employer</b><br>Self employed<br><b>Occupation</b><br>Rancher<br><b>Aggregate Year-to-Date -&gt;</b> 500.00       | <b>Date (month, day, year)</b><br>02/22/2000<br><b>Amount of Each Receipt this Period</b><br>500.00   |
| <b>F. Full Name, Mailing Address and Zip Code</b><br>Carlee Ferrari<br>325 West Liberty Street<br>Reno, NV 89501-<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)                 | <b>Name of Employer</b><br>Dickson Realty<br><b>Occupation</b><br>Realtor<br><b>Aggregate Year-to-Date -&gt;</b> 250.00      | <b>Date (month, day, year)</b><br>03/31/2000<br><b>Amount of Each Receipt this Period</b><br>250.00   |
| <b>G. Full Name, Mailing Address and Zip Code</b><br>Victoria K. Ferlitta<br>2960 W. Sahara Ave Suite 200<br>Las Vegas, NV 89102-<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | <b>Name of Employer</b><br>No Employer<br><b>Occupation</b><br>HOMEMAKER<br><b>Aggregate Year-to-Date -&gt;</b> 1,000.00     | <b>Date (month, day, year)</b><br>03/31/2000<br><b>Amount of Each Receipt this Period</b><br>1,000.00 |

SUBTOTAL of Receipts This Page (optional)

4,750.00

TOTAL This Period (last page this line number only)

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE 11 OF 33  
FOR LINE NUMBER 11(a)(i)

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)**  
Friends of Jon Porter Committee

|                                                                                                                                                                                                                                                                              |                                                                                                                                            |                                              |                                                       |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------|-------------------------------------------------------|
| <b>A. Full Name, Mailing Address and Zip Code</b><br>Victoria K. Fentitta<br>2960 W. Sahara Ave Suite 200<br>Las Vegas, NV 89102-<br>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify)   | <b>Name of Employer</b><br>No Employer<br><b>Occupation</b><br>HOMEMAKER<br><b>Aggregate Year-to-Date -&gt;</b> 2,000.00                   | <b>Date (month, day, year)</b><br>03/31/2003 | <b>Amount of Each Receipt this Period</b><br>1,000.00 |
| <b>B. Full Name, Mailing Address and Zip Code</b><br>Frank J. Bertitta, Jr.<br>2960 W. Sahara Ave Suite 200<br>Las Vegas, NV 89102-<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | <b>Name of Employer</b><br>Station Casino<br><b>Occupation</b><br>Owner<br><b>Aggregate Year-to-Date -&gt;</b> 1,000.00                    | <b>Date (month, day, year)</b><br>03/24/2000 | <b>Amount of Each Receipt this Period</b><br>1,000.00 |
| <b>C. Full Name, Mailing Address and Zip Code</b><br>Frank J. Bertitta, Jr.<br>2960 W. Sahara Ave Suite 200<br>Las Vegas, NV 89102-<br>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | <b>Name of Employer</b><br>Station Casino<br><b>Occupation</b><br>Owner<br><b>Aggregate Year-to-Date -&gt;</b> 2,000.00                    | <b>Date (month, day, year)</b><br>03/31/2000 | <b>Amount of Each Receipt this Period</b><br>1,000.00 |
| <b>D. Full Name, Mailing Address and Zip Code</b><br>Mark Fiorentino<br>1820 Glory Creek<br>Las Vegas, NV 89128-<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)                    | <b>Name of Employer</b><br>Self employed<br><b>Occupation</b><br>Attorney<br><b>Aggregate Year-to-Date -&gt;</b> 500.00                    | <b>Date (month, day, year)</b><br>03/27/2000 | <b>Amount of Each Receipt this Period</b><br>500.00   |
| <b>E. Full Name, Mailing Address and Zip Code</b><br>Magdalena Fisher<br>1708 Kaszabian Ave<br>Las Vegas, NV 89104-<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)                 | <b>Name of Employer</b><br>Kummer Kampfer Bonner<br><b>Occupation</b><br>Legislative Affairs<br><b>Aggregate Year-to-Date -&gt;</b> 500.00 | <b>Date (month, day, year)</b><br>03/27/2000 | <b>Amount of Each Receipt this Period</b><br>500.00   |
| <b>F. Full Name, Mailing Address and Zip Code</b><br>Helen A. Foley<br>2955 Pinhurst Drive<br>Las Vegas, NV 89109-<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)                  | <b>Name of Employer</b><br>Self employed<br><b>Occupation</b><br>Lobbyist<br><b>Aggregate Year-to-Date -&gt;</b> 30.00                     | <b>Date (month, day, year)</b><br>01/30/2000 | <b>Amount of Each Receipt this Period</b><br>30.00    |
| <b>G. Full Name, Mailing Address and Zip Code</b><br>Helen A. Foley<br>2955 Pinhurst Drive<br>Las Vegas, NV 89109-<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)                  | <b>Name of Employer</b><br>Self employed<br><b>Occupation</b><br>Lobbyist<br><b>Aggregate Year-to-Date -&gt;</b> 530.00                    | <b>Date (month, day, year)</b><br>03/30/2000 | <b>Amount of Each Receipt this Period</b><br>500.00   |

**SUBTOTAL** of Receipts This Page (optional)

4,530.00

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

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE 08  
12 33  
FOR LINE NUMBER  
11(a)(i)

Any information copied from such Reports and Statements may not be valid 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)  
Friends of Jon Porter Committee

|                                                                                                                                                                                                                                                                      |                                                                                                                                 |                                              |                                                       |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------|-------------------------------------------------------|
| <b>A. Full Name, Mailing Address and Zip Code</b><br>James Foster<br>1975 Troon Drive<br>Henderson, NV 89014-<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)               | <b>Name of Employer</b><br>Foster & Associates<br><b>Occupation</b><br>President<br><b>Aggregate Year-to-Date -&gt;</b> 500.00  | <b>Date (month, day, year)</b><br>02/10/2000 | <b>Amount of Each Receipt this Period</b><br>500.00   |
| <b>B. Full Name, Mailing Address and Zip Code</b><br>Kim Fotheringham<br>653 Del Prado<br>Boulder City, NV 89005-<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)           | <b>Name of Employer</b><br>Progressive Homes<br><b>Occupation</b><br>Owner<br><b>Aggregate Year-to-Date -&gt;</b> 300.00        | <b>Date (month, day, year)</b><br>02/26/2003 | <b>Amount of Each Receipt this Period</b><br>300.00   |
| <b>C. Full Name, Mailing Address and Zip Code</b><br>Garth Frehner<br>124 W. Brooks Ave<br>North Las Vegas, NV 89030-<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)       | <b>Name of Employer</b><br>Frehner Construction<br><b>Occupation</b><br>Owner<br><b>Aggregate Year-to-Date -&gt;</b> 500.00     | <b>Date (month, day, year)</b><br>03/31/2000 | <b>Amount of Each Receipt this Period</b><br>500.00   |
| <b>D. Full Name, Mailing Address and Zip Code</b><br>Mrs. Charles Frias<br>5010 S. Valley View Blvd<br>Las Vegas, NV 89118-<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | <b>Name of Employer</b><br><b>Occupation</b><br>HOMEMAKER<br><b>Aggregate Year-to-Date -&gt;</b> 1,000.00                       | <b>Date (month, day, year)</b><br>01/10/2000 | <b>Amount of Each Receipt this Period</b><br>1,000.00 |
| <b>E. Full Name, Mailing Address and Zip Code</b><br>Harold W. Furman II<br>1634 Spanish Bay drive<br>Las Vegas, NV 89113-<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)  | <b>Name of Employer</b><br>The Furman Group<br><b>Occupation</b><br>Lobbyist<br><b>Aggregate Year-to-Date -&gt;</b> 1,000.00    | <b>Date (month, day, year)</b><br>03/24/2000 | <b>Amount of Each Receipt this Period</b><br>1,000.00 |
| <b>F. Full Name, Mailing Address and Zip Code</b><br>Arthur S. Gallenson<br>Box 60035<br>Boulder City, NV 89006-0035<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)        | <b>Name of Employer</b><br>Lake Mead Air<br><b>Occupation</b><br>Proprietor<br><b>Aggregate Year-to-Date -&gt;</b> 300.00       | <b>Date (month, day, year)</b><br>03/30/2000 | <b>Amount of Each Receipt this Period</b><br>300.00   |
| <b>G. Full Name, Mailing Address and Zip Code</b><br>Henry M. Gandy<br>6212 Park Road<br>Mc Lean, VA 22101-<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)                 | <b>Name of Employer</b><br>Duberstein Group, Inc<br><b>Occupation</b><br>Lobbyist<br><b>Aggregate Year-to-Date -&gt;</b> 500.00 | <b>Date (month, day, year)</b><br>03/24/2000 | <b>Amount of Each Receipt this Period</b><br>500.00   |

**SUBTOTAL** of Receipts This Page (optional)

4,100.00

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

## SCHEDULE A

## ITEMIZED RECEIPTS

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

 PAGE 13 OF 33  
 FOR LINE NUMBER  
 11(a)(1)

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, either directly using the name and address of any political committee to solicit contributions from such committee.

## NAME OF COMMITTEE (In Full)

Friends of Jon Porter Committee

|                                                                                                                                                                                                                                                                                    |                                                                                                                              |                                              |                                                       |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------|-------------------------------------------------------|
| <b>A. Full Name, Mailing Address and Zip Code</b><br>Douglas C. Gardner, LTD.<br>550 E. Charleston Blvd No E<br>Las Vegas, NV 89104-<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)      | <b>Name of Employer</b><br>Best effort<br><b>Occupation</b><br>Best effort<br><b>Aggregate Year-to-Date -&gt;</b> 250.00     | <b>Date (month, day, year)</b><br>03/28/2000 | <b>Amount of Each Receipt this Period</b><br>250.00   |
| <b>B. Full Name, Mailing Address and Zip Code</b><br>Jim Gibbons<br>Gibbons For Congress<br>542 1/2 Plumas St<br>Reno, NV 89509-<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)          | <b>Name of Employer</b><br>US Government<br><b>Occupation</b><br>Congressman<br><b>Aggregate Year-to-Date -&gt;</b> 1,000.00 | <b>Date (month, day, year)</b><br>02/04/2000 | <b>Amount of Each Receipt this Period</b><br>1,000.00 |
| <b>C. Full Name, Mailing Address and Zip Code</b><br>Jim Gibbons<br>Gibbons For Congress<br>542 1/2 Plumas St<br>Reno, NV 89509-<br>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify)          | <b>Name of Employer</b><br>US Government<br><b>Occupation</b><br>Congressman<br><b>Aggregate Year-to-Date -&gt;</b> 2,000.00 | <b>Date (month, day, year)</b><br>03/31/2000 | <b>Amount of Each Receipt this Period</b><br>1,000.00 |
| <b>D. Full Name, Mailing Address and Zip Code</b><br>Benjamin Ginsberg<br>2836 Alendale Place, NW<br>Washington, DC 20008-<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)                | <b>Name of Employer</b><br>Self employed<br><b>Occupation</b><br>Lobbyist<br><b>Aggregate Year-to-Date -&gt;</b> 250.00      | <b>Date (month, day, year)</b><br>03/31/2000 | <b>Amount of Each Receipt this Period</b><br>250.00   |
| <b>E. Full Name, Mailing Address and Zip Code</b><br>Michael J. Giroux<br>370 Claremont St<br>Boulder City, NV 89005-<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)                     | <b>Name of Employer</b><br>RED MOUNTAIN REALTY<br><b>Occupation</b><br>Owner<br><b>Aggregate Year-to-Date -&gt;</b> 1,000.00 | <b>Date (month, day, year)</b><br>03/27/2000 | <b>Amount of Each Receipt this Period</b><br>1,000.00 |
| <b>F. Full Name, Mailing Address and Zip Code</b><br>Patricia J. Giroux<br>808-7th Street<br>Boulder City, NV 89005-<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)                      | <b>Name of Employer</b><br>No Employer<br><b>Occupation</b><br>HOMEMAKER<br><b>Aggregate Year-to-Date -&gt;</b> 500.00       | <b>Date (month, day, year)</b><br>03/27/2000 | <b>Amount of Each Receipt this Period</b><br>500.00   |
| <b>G. Full Name, Mailing Address and Zip Code</b><br>Porter Goss<br>Porter Goss Re-Election Team<br>P.O. Box 517<br>Fort Myers, FL 33902-<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | <b>Name of Employer</b><br>US Government<br><b>Occupation</b><br>Congressman<br><b>Aggregate Year-to-Date -&gt;</b> 250.00   | <b>Date (month, day, year)</b><br>03/22/2000 | <b>Amount of Each Receipt this Period</b><br>250.00   |

SUBTOTAL of Receipts This Page (optional)

4,250.00

TOTAL This Period (last page this line number only)



**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE OF  
14 33

FOR LINE NUMBER  
11(a)(i)

Any information copied from such Reports and Statements may not be used 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)**

Friends of Jon Porter Committee

|                                                                                                                                                                                                                                                                |                                                                                                                                    |                                              |                                                       |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------|-------------------------------------------------------|
| <b>A. Full Name, Mailing Address and Zip Code</b><br>Terry K. Graves<br>2205 Plaza Del Puerto<br>Las Vegas, NV 89102-<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | <b>Name of Employer</b><br>Graves Communications<br><b>Occupation</b><br>President<br><b>Aggregate Year-to-Date -&gt;</b> 50.00    | <b>Date (month, day, year)</b><br>01/10/2000 | <b>Amount of Each Receipt this Period</b><br>50.00    |
| <b>B. Full Name, Mailing Address and Zip Code</b><br>Terry K. Graves<br>2205 Plaza Del Puerto<br>Las Vegas, NV 89102-<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | <b>Name of Employer</b><br>Graves Communications<br><b>Occupation</b><br>President<br><b>Aggregate Year-to-Date -&gt;</b> 110.00   | <b>Date (month, day, year)</b><br>01/30/2000 | <b>Amount of Each Receipt this Period</b><br>60.00    |
| <b>C. Full Name, Mailing Address and Zip Code</b><br>Terry K. Graves<br>2205 Plaza Del Puerto<br>Las Vegas, NV 89102-<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | <b>Name of Employer</b><br>Graves Communications<br><b>Occupation</b><br>President<br><b>Aggregate Year-to-Date -&gt;</b> 130.00   | <b>Date (month, day, year)</b><br>02/04/2000 | <b>Amount of Each Receipt this Period</b><br>20.00    |
| <b>D. Full Name, Mailing Address and Zip Code</b><br>Terry K. Graves<br>2205 Plaza Del Puerto<br>Las Vegas, NV 89102-<br>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | <b>Name of Employer</b><br>Graves Communications<br><b>Occupation</b><br>President<br><b>Aggregate Year-to-Date -&gt;</b> 1,130.00 | <b>Date (month, day, year)</b><br>02/22/2000 | <b>Amount of Each Receipt this Period</b><br>1,000.00 |
| <b>E. Full Name, Mailing Address and Zip Code</b><br>Jeanne G. Greenawalt<br>12 Vintage Court<br>Las Vegas, NV 89113-<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | <b>Name of Employer</b><br>No Employer<br><b>Occupation</b><br>HOMEMAKER<br><b>Aggregate Year-to-Date -&gt;</b> 500.00             | <b>Date (month, day, year)</b><br>03/27/2000 | <b>Amount of Each Receipt this Period</b><br>500.00   |
| <b>F. Full Name, Mailing Address and Zip Code</b><br>Jeanne G. Greenawalt<br>12 Vintage Court<br>Las Vegas, NV 89113-<br>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | <b>Name of Employer</b><br>No Employer<br><b>Occupation</b><br>HOMEMAKER<br><b>Aggregate Year-to-Date -&gt;</b> 1,500.00           | <b>Date (month, day, year)</b><br>03/31/2000 | <b>Amount of Each Receipt this Period</b><br>1,000.00 |
| <b>G. Full Name, Mailing Address and Zip Code</b><br>Jeanne G. Greenawalt<br>12 Vintage Court<br>Las Vegas, NV 89113-<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | <b>Name of Employer</b><br>No Employer<br><b>Occupation</b><br>HOMEMAKER<br><b>Aggregate Year-to-Date -&gt;</b> 2,000.00           | <b>Date (month, day, year)</b><br>03/31/2000 | <b>Amount of Each Receipt this Period</b><br>500.00   |

**SUBTOTAL** of Receipts This Page (optional)

3,130.00

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

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE 15 OF 33  
FOR LINE NUMBER 11(a)(i)

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)**  
Friends of Jon Porter Committee

|                                                                                                                                                                                                                                                               |                                                                                                                                             |                                              |                                                       |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------|-------------------------------------------------------|
| <b>A. Full Name, Mailing Address and Zip Code</b><br>Monte H. Greenawalt<br>12 Vintage Court<br>Las Vegas, NV 89113-<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | <b>Name of Employer</b><br>Self employed<br><br><b>Occupation</b><br>Podiatrist<br><br><b>Aggregate Year-to-Date -&gt;</b> 500.00           | <b>Date (month, day, year)</b><br>03/21/2000 | <b>Amount of Each Receipt this Period</b><br>500.00   |
| <b>B. Full Name, Mailing Address and Zip Code</b><br>Monte H. Greenawalt<br>12 Vintage Court<br>Las Vegas, NV 89113-<br>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | <b>Name of Employer</b><br>Self employed<br><br><b>Occupation</b><br>Podiatrist<br><br><b>Aggregate Year-to-Date -&gt;</b> 1,500.00         | <b>Date (month, day, year)</b><br>03/31/2000 | <b>Amount of Each Receipt this Period</b><br>1,000.00 |
| <b>C. Full Name, Mailing Address and Zip Code</b><br>Monte H. Greenawalt<br>12 Vintage Court<br>Las Vegas, NV 89113-<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | <b>Name of Employer</b><br>Self employed<br><br><b>Occupation</b><br>Podiatrist<br><br><b>Aggregate Year-to-Date -&gt;</b> 2,000.00         | <b>Date (month, day, year)</b><br>03/31/2000 | <b>Amount of Each Receipt this Period</b><br>500.00   |
| <b>D. Full Name, Mailing Address and Zip Code</b><br>Margi A. Grein<br>1815 Canyon Run Drive<br>Sparks, NV 89436-<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)    | <b>Name of Employer</b><br>Nevada Contractors Board<br><br><b>Occupation</b><br>President<br><br><b>Aggregate Year-to-Date -&gt;</b> 250.00 | <b>Date (month, day, year)</b><br>01/25/2000 | <b>Amount of Each Receipt this Period</b><br>250.00   |
| <b>E. Full Name, Mailing Address and Zip Code</b><br>Philip D. Griffith<br>P.O. Box 7600<br>Las Vegas, NV 89123-<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)     | <b>Name of Employer</b><br>Fitzgerald's Casino<br><br><b>Occupation</b><br>Owner<br><br><b>Aggregate Year-to-Date -&gt;</b> 1,000.00        | <b>Date (month, day, year)</b><br>03/22/2000 | <b>Amount of Each Receipt this Period</b><br>1,000.00 |
| <b>F. Full Name, Mailing Address and Zip Code</b><br>Susan Pease<br>2849 Queens Courtyard Dr<br>Las Vegas, NV 89109-<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | <b>Name of Employer</b><br>Self employed<br><br><b>Occupation</b><br>Lobbyist<br><br><b>Aggregate Year-to-Date -&gt;</b> 750.00             | <b>Date (month, day, year)</b><br>03/30/2000 | <b>Amount of Each Receipt this Period</b><br>750.00   |
| <b>G. Full Name, Mailing Address and Zip Code</b><br>Andy Kafar<br>280 Fairway<br>Henderson, NV 89015-<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)               | <b>Name of Employer</b><br>Metropolitan Police<br><br><b>Occupation</b><br>Police Officer<br><br><b>Aggregate Year-to-Date -&gt;</b> 250.00 | <b>Date (month, day, year)</b><br>02/18/2000 | <b>Amount of Each Receipt this Period</b><br>250.00   |

**SUBTOTAL** of Receipts This Page (optional)

4,250.00

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

**SCHEDULE A**

**ITEMIZED RECEIPTS**

Use separate schedules;  
for each category of the  
Detailed Summary Page

PAGE 16 OF 33  
FOR LINE NUMBER 11(a)(i)

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

**NAME OF COMMITTEE (In Full)**

Friends of Jon Porter Committee

|                                                                                                                                                                                                                                                                            |                                                                                                                                           |                                              |                                                                         |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------|-------------------------------------------------------------------------|
| <b>A. Full Name, Mailing Address and Zip Code</b><br>Dennis R. Haney<br>8273 Granite Mountain Lane<br>Las Vegas, NV 89129-<br><b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | <b>Name of Employer</b><br>Best effort<br><b>Occupation</b><br>Best effort<br><b>Aggregate Year-to-Date -&gt;</b> 250.00                  | <b>Date (month, day, year)</b><br>01/25/2000 | <b>Amount of Each Receipt this Period</b><br>250.00                     |
| <b>B. Full Name, Mailing Address and Zip Code</b><br>Nancy J. Hara-Iss<br>367 Caves Way<br>Henderson, NV 89014-<br><b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)            | <b>Name of Employer</b><br>Clark County Aviation<br><b>Occupation</b><br>Graphic Designer<br><b>Aggregate Year-to-Date -&gt;</b> 60.00    | <b>Date (month, day, year)</b><br>01/30/2000 | <b>Amount of Each Receipt this Period</b><br>60.00                      |
| <b>C. Full Name, Mailing Address and Zip Code</b><br>Nancy J. Hara-Iss<br>367 Caves Way<br>Henderson, NV 89014-<br><b>Receipt For:</b> <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify)            | <b>Name of Employer</b><br>Clark County Aviation<br><b>Occupation</b><br>Graphic Designer<br><b>Aggregate Year-to-Date -&gt;</b> 1,060.00 | <b>Date (month, day, year)</b><br>03/31/2000 | <b>Amount of Each Receipt this Period</b><br>1,000.00<br><b>IN-KIND</b> |
| <b>D. Full Name, Mailing Address and Zip Code</b><br>Thomas Y. Hartley<br>4380 E. Oquendo Road<br>Las Vegas, NV 89120-<br><b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)     | <b>Name of Employer</b><br>Marsh & McClellan<br><b>Occupation</b><br>Insurance Broker<br><b>Aggregate Year-to-Date -&gt;</b> 1,000.00     | <b>Date (month, day, year)</b><br>03/20/2000 | <b>Amount of Each Receipt this Period</b><br>1,000.00                   |
| <b>E. Full Name, Mailing Address and Zip Code</b><br>Clair Haycock<br>P.O. Box 310<br>Las Vegas, NV 89125-0340<br><b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)             | <b>Name of Employer</b><br>Haycock Petroleum<br><b>Occupation</b><br>Owner<br><b>Aggregate Year-to-Date -&gt;</b> 500.00                  | <b>Date (month, day, year)</b><br>03/31/2000 | <b>Amount of Each Receipt this Period</b><br>500.00                     |
| <b>F. Full Name, Mailing Address and Zip Code</b><br>Kirk A. Hendrix<br>1948 Barranca Drive<br>Henderson, NV 89014<br><b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)         | <b>Name of Employer</b><br>Las Vegas Events<br><b>Occupation</b><br>Director<br><b>Aggregate Year-to-Date -&gt;</b> 1,000.00              | <b>Date (month, day, year)</b><br>03/31/2000 | <b>Amount of Each Receipt this Period</b><br>1,000.00                   |
| <b>G. Full Name, Mailing Address and Zip Code</b><br>Greg Hess<br>P.O. Box 60366<br>Boulder City, NV 89006-<br><b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)                | <b>Name of Employer</b><br>Hess Construction<br><b>Occupation</b><br>Owner<br><b>Aggregate Year-to-Date -&gt;</b> 500.00                  | <b>Date (month, day, year)</b><br>03/30/2000 | <b>Amount of Each Receipt this Period</b><br>500.00                     |

**SUBTOTAL** of Receipts This Page (optional)

4,310.00

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

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE 17 OF 33

FOR LINE NUMBER 11(a)(i)

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 campaign purposes, other than using the name and address of any political committee to solicit contributions from such committee.

**NAME OF COMMITTEE (In Full)**

Friends of Jon Porter Committee

|                                                                                                                                                                                                                                                                   |                                                                                                                                                |                                                                                                       |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------|
| <b>A. Full Name, Mailing Address and Zip Code</b><br>Paul L. Hesselgesser<br>4647 Tee Pee Lane<br>Las Vegas, NV 89129-<br>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify)   | <b>Name of Employer</b><br>Paul Hesselgesser Ins.<br><b>Occupation</b><br>Owner<br><b>Aggregate Year-to-Date -&gt;</b> 500.00                  | <b>Date (month, day, year)</b><br>03/31/2000<br><b>Amount of Each Receipt this Period</b><br>300.00   |
| <b>B. Full Name, Mailing Address and Zip Code</b><br>Paul L. Hesselgesser<br>4647 Tee Pee Lane<br>Las Vegas, NV 89129-<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)   | <b>Name of Employer</b><br>Paul Hesselgesser Ins.<br><b>Occupation</b><br>Owner<br><b>Aggregate Year-to-Date -&gt;</b> 1,500.00                | <b>Date (month, day, year)</b><br>03/31/2000<br><b>Amount of Each Receipt this Period</b><br>1,000.00 |
| <b>C. Full Name, Mailing Address and Zip Code</b><br>Shauna Hesselgesser<br>4647 Tee Pee Lane<br>Las Vegas, NV 89129-<br>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify)    | <b>Name of Employer</b><br>Paul Hesselgesser Ins.<br><b>Occupation</b><br>Office manager<br><b>Aggregate Year-to-Date -&gt;</b> 500.00         | <b>Date (month, day, year)</b><br>03/31/2000<br><b>Amount of Each Receipt this Period</b><br>500.00   |
| <b>D. Full Name, Mailing Address and Zip Code</b><br>Shauna Hesselgesser<br>4647 Tee Pee Lane<br>Las Vegas, NV 89129-<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)    | <b>Name of Employer</b><br>Paul Hesselgesser Ins.<br><b>Occupation</b><br>Office manager<br><b>Aggregate Year-to-Date -&gt;</b> 1,500.00       | <b>Date (month, day, year)</b><br>03/31/2000<br><b>Amount of Each Receipt this Period</b><br>1,000.00 |
| <b>E. Full Name, Mailing Address and Zip Code</b><br>Steven D. Hill<br>1520 Castle Wall Street<br>Las Vegas, NV 89117-<br>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify)   | <b>Name of Employer</b><br>Silver State Materials<br><b>Occupation</b><br>President<br><b>Aggregate Year-to-Date -&gt;</b> 200.00              | <b>Date (month, day, year)</b><br>02/15/2000<br><b>Amount of Each Receipt this Period</b><br>200.00   |
| <b>F. Full Name, Mailing Address and Zip Code</b><br>Steven D. Hill<br>1520 Castle Wall Street<br>Las Vegas, NV 89117-<br>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify)   | <b>Name of Employer</b><br>Silver State Materials<br><b>Occupation</b><br>President<br><b>Aggregate Year-to-Date -&gt;</b> 500.00              | <b>Date (month, day, year)</b><br>03/29/2000<br><b>Amount of Each Receipt this Period</b><br>300.00   |
| <b>G. Full Name, Mailing Address and Zip Code</b><br>Steve G. Holloway<br>4759 Dream Catcher Ave<br>Las Vegas, NV 89129-<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | <b>Name of Employer</b><br>Ass'd Gen'l Contractor<br><b>Occupation</b><br>Executive Vice Pres.<br><b>Aggregate Year-to-Date -&gt;</b> 1,000.00 | <b>Date (month, day, year)</b><br>03/31/2000<br><b>Amount of Each Receipt this Period</b><br>1,000.00 |

**SUBTOTAL** of Receipts This Page (optional)

4,500.00

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

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE 18 OF 33  
FOR LINE NUMBER 11(a) (1)

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)**  
Friends of Jon Porter Committee

|                                                                                                                                                                                                                                                                |                                                                                                                             |                                              |                                                       |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------|----------------------------------------------|-------------------------------------------------------|
| <b>A. Full Name, Mailing Address and Zip Code</b><br>Jeannu Rand<br>2318 Timberline Way<br>Las Vegas, NV 89117-<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)       | <b>Name of Employer</b><br>No Employer<br><b>Occupation</b><br>Retired<br><b>Aggregate Year-to-Date -&gt;</b> 1,000.00      | <b>Date (month, day, year)</b><br>03/29/2000 | <b>Amount of Each Receipt this Period</b><br>1,000.00 |
| <b>B. Full Name, Mailing Address and Zip Code</b><br>J. K. Houssels<br>2550 Sacral Street<br>Las Vegas, NV 89146-<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)     | <b>Name of Employer</b><br>SHCO., Ltd.<br><b>Occupation</b><br>Manager<br><b>Aggregate Year-to-Date -&gt;</b> 1,000.00      | <b>Date (month, day, year)</b><br>03/31/2000 | <b>Amount of Each Receipt this Period</b><br>1,000.00 |
| <b>C. Full Name, Mailing Address and Zip Code</b><br>BRUCE R. JAMES<br>P.O. Box 9167<br>Incline Village, NV 89452-<br>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify)    | <b>Name of Employer</b><br>Self employed<br><b>Occupation</b><br>Investor<br><b>Aggregate Year-to-Date -&gt;</b> 1,000.00   | <b>Date (month, day, year)</b><br>03/24/2000 | <b>Amount of Each Receipt this Period</b><br>1,000.00 |
| <b>D. Full Name, Mailing Address and Zip Code</b><br>Nora James<br>P.O. Box 9167<br>Incline Village, NV 89452-<br>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify)        | <b>Name of Employer</b><br>No Employer<br><b>Occupation</b><br>HOMEMAKER<br><b>Aggregate Year-to-Date -&gt;</b> 1,000.00    | <b>Date (month, day, year)</b><br>03/24/2000 | <b>Amount of Each Receipt this Period</b><br>1,000.00 |
| <b>E. Full Name, Mailing Address and Zip Code</b><br>Correy Jenkins<br>2417 Plaza Del Grande<br>Las Vegas, NV 89102-<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)  | <b>Name of Employer</b><br>The Sporting House<br><b>Occupation</b><br>Owner<br><b>Aggregate Year-to-Date -&gt;</b> 1,000.00 | <b>Date (month, day, year)</b><br>03/27/2000 | <b>Amount of Each Receipt this Period</b><br>1,000.00 |
| <b>F. Full Name, Mailing Address and Zip Code</b><br>Dorothy J. Kidd<br>8222 Crow Valley Lane<br>Las Vegas, NV 89113-<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | <b>Name of Employer</b><br>Kidd Realty<br><b>Occupation</b><br>Owner<br><b>Aggregate Year-to-Date -&gt;</b> 30.00           | <b>Date (month, day, year)</b><br>01/30/2000 | <b>Amount of Each Receipt this Period</b><br>30.00    |
| <b>G. Full Name, Mailing Address and Zip Code</b><br>Dorothy J. Kidd<br>8222 Crow Valley Lane<br>Las Vegas, NV 89113-<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | <b>Name of Employer</b><br>Kidd Realty<br><b>Occupation</b><br>Owner<br><b>Aggregate Year-to-Date -&gt;</b> 250.00          | <b>Date (month, day, year)</b><br>03/27/2000 | <b>Amount of Each Receipt this Period</b><br>250.00   |

**SUBTOTAL** of Receipts This Page (optional)

5,280.00

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

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE 19 OF 33  
FOR LINE NUMBER 11(a)(1)

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)**

Friends of Jon Porter Committee

|                                                                                                                                                                                                                                                                           |                                                                                       |                                              |                                                                                                       |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------|----------------------------------------------|-------------------------------------------------------------------------------------------------------|
| <b>A. Full Name, Mailing Address and Zip Code</b><br>Steven D. Kirk<br>1835 Ranconado Terrace<br>Henderson, NV 89014-<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)            | <b>Name of Employer</b><br>City of Henderson<br><b>Occupation</b><br>Councilman       | <b>Date (month, day, year)</b><br>03/28/2000 | <b>Amount of Each Receipt this Period</b><br>250.00<br><b>Aggregate Year-to-Date -&gt;</b> 250.00     |
| <b>B. Full Name, Mailing Address and Zip Code</b><br>K. Krueger<br>2505 Rancho Bel Air<br>Las Vegas, NV 89107-<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)                   | <b>Name of Employer</b><br>Elast Co<br><b>Occupation</b><br>CEO                       | <b>Date (month, day, year)</b><br>03/22/2000 | <b>Amount of Each Receipt this Period</b><br>500.00<br><b>Aggregate Year-to-Date -&gt;</b> 500.00     |
| <b>C. Full Name, Mailing Address and Zip Code</b><br>Peter D. Krueger<br>2205 S Arlington Ave No 3<br>Reno, NV 89509-<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)            | <b>Name of Employer</b><br>Self employed<br><b>Occupation</b><br>Lobbyist             | <b>Date (month, day, year)</b><br>03/30/2000 | <b>Amount of Each Receipt this Period</b><br>500.00<br><b>Aggregate Year-to-Date -&gt;</b> 500.00     |
| <b>D. Full Name, Mailing Address and Zip Code</b><br>John T. Larue<br>311 Lingerling Lane<br>Henderson, NV 89012-<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)                | <b>Name of Employer</b><br>Farmers Insurance<br><b>Occupation</b><br>District Manager | <b>Date (month, day, year)</b><br>03/27/2000 | <b>Amount of Each Receipt this Period</b><br>300.00<br><b>Aggregate Year-to-Date -&gt;</b> 300.00     |
| <b>E. Full Name, Mailing Address and Zip Code</b><br>William Laub, Sr.<br>2810 W. Charleston Blvd. No.53<br>Las Vegas, NV 89102-<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | <b>Name of Employer</b><br>No Employer<br><b>Occupation</b><br>Retired                | <b>Date (month, day, year)</b><br>01/10/2000 | <b>Amount of Each Receipt this Period</b><br>50.00<br><b>Aggregate year-to-Date -&gt;</b> 50.00       |
| <b>F. Full Name, Mailing Address and Zip Code</b><br>William Laub, Sr.<br>2810 W. Charleston Blvd. No.53<br>Las Vegas, NV 89102-<br>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | <b>Name of Employer</b><br>No Employer<br><b>Occupation</b><br>Retired                | <b>Date (month, day, year)</b><br>03/20/2000 | <b>Amount of Each Receipt this Period</b><br>1,000.00<br><b>Aggregate Year-to-Date -&gt;</b> 1,050.00 |
| <b>G. Full Name, Mailing Address and Zip Code</b><br>Kathleen Luxolt<br>935 Grandview Ave<br>Reno, NV 89503-<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)                     | <b>Name of Employer</b><br>K. Neena Luxolt<br><b>Occupation</b><br>Owner              | <b>Date (month, day, year)</b><br>03/27/2000 | <b>Amount of Each Receipt this Period</b><br>250.00<br><b>Aggregate Year-to-Date -&gt;</b> 250.00     |

**SUBTOTAL** of Receipts This Page (optional)

2,850.00

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

## SCHEDULE A

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary PagePAGE OF  
20 33  
FOR LINE NUMBER  
11(a)(i)

Any information required 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)

Friends of Jon Porter Committee

|                                                                                                                                                                                                                                                                                   |                                                                                                                                |                                              |                                                       |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------|-------------------------------------------------------|
| <b>A. Full Name, Mailing Address and Zip Code</b><br>Robin Lee<br>1018 Legacy Drive<br>Boulder City, NV 89005-<br><b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)                    | <b>Name of Employer</b><br>No Employer<br><b>Occupation</b><br>HOME MAKER<br><b>Aggregate Year-to-Date -&gt;</b> 250.00        | <b>Date (month, day, year)</b><br>02/26/2000 | <b>Amount of Each Receipt this Period</b><br>250.00   |
| <b>B. Full Name, Mailing Address and Zip Code</b><br>Peter K. Leonard<br>643 Blair Island Rd No 202<br>Redwood City, CA 94063-<br><b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)    | <b>Name of Employer</b><br>Farmers Insurance<br><b>Occupation</b><br>Manager<br><b>Aggregate Year-to-Date -&gt;</b> 250.00     | <b>Date (month, day, year)</b><br>02/15/2000 | <b>Amount of Each Receipt this Period</b><br>250.00   |
| <b>C. Full Name, Mailing Address and Zip Code</b><br>Lewis<br>Lewis for Congress Committee<br>P.O. Box 247<br>Redlands, CA 92373-<br><b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | <b>Name of Employer</b><br>U.S. Government<br><b>Occupation</b><br>Congressman<br><b>Aggregate Year-to-Date -&gt;</b> 1,000.00 | <b>Date (month, day, year)</b><br>01/13/2000 | <b>Amount of Each Receipt this Period</b><br>1,000.00 |
| <b>D. Full Name, Mailing Address and Zip Code</b><br>Robert E. Lewis<br>P.O. Box 19237<br>Las Vegas, NV 89132-0237<br><b>Receipt For:</b> <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify)                | <b>Name of Employer</b><br>Kaufman & Broad<br><b>Occupation</b><br>President<br><b>Aggregate Year-to-Date -&gt;</b> 1,000.00   | <b>Date (month, day, year)</b><br>03/31/2000 | <b>Amount of Each Receipt this Period</b><br>1,000.00 |
| <b>E. Full Name, Mailing Address and Zip Code</b><br>Robert East<br>1904 Red Robin Ct<br>Las Vegas, NV 89134-<br><b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)                     | <b>Name of Employer</b><br>The List Company<br><b>Occupation</b><br>President<br><b>Aggregate Year-to-Date -&gt;</b> 1,000.00  | <b>Date (month, day, year)</b><br>03/22/2000 | <b>Amount of Each Receipt this Period</b><br>1,000.00 |
| <b>F. Full Name, Mailing Address and Zip Code</b><br>Loblondo<br>Loblondo for Congress<br>P.O. Box 550<br>Vineland, NJ 08362-0550<br><b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | <b>Name of Employer</b><br>US Government<br><b>Occupation</b><br>Congressman<br><b>Aggregate Year-to-Date -&gt;</b> 1,000.00   | <b>Date (month, day, year)</b><br>03/31/2000 | <b>Amount of Each Receipt this Period</b><br>1,000.00 |
| <b>G. Full Name, Mailing Address and Zip Code</b><br>John Lonetti, Jr.<br>2200 Red Oak Ave<br>Las Vegas, NV 89109-<br><b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)                | <b>Name of Employer</b><br>Best effort<br><b>Occupation</b><br>Best effort<br><b>Aggregate Year-to-Date -&gt;</b> 1,000.00     | <b>Date (month, day, year)</b><br>02/17/2000 | <b>Amount of Each Receipt this Period</b><br>1,000.00 |

SUBTOTAL of Receipts This Page (optional)

5,500.00

TOTAL This Period (last page this line number only)

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE 21 OF 33  
FOR LINE NUMBER 11(a) (i)

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

**NAME OF COMMITTEE (In Full)**

Friends of Jon Porter Committee

|                                                                                                                                                                                                                                                                          |                                                                                                                                 |                                              |                                                       |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------|-------------------------------------------------------|
| <b>A. Full Name, Mailing Address and Zip Code</b><br>Virginia Longley<br>60 Sawgrass Ct<br>Las Vegas, NV 89113-1325<br>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify)             | <b>Name of Employer</b><br>No Employer<br><b>Occupation</b><br>HOMEMAKER<br><b>Aggregate Year-to-Date -&gt;</b> 30.00           | <b>Date (month, day, year)</b><br>02/04/2000 | <b>Amount of Each Receipt this Period</b><br>30.00    |
| <b>B. Full Name, Mailing Address and Zip Code</b><br>Scott M. Loughridge<br>6767 E West Charleston Blvd<br>Las Vegas, NV 89102-<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | <b>Name of Employer</b><br>Best effort<br><b>Occupation</b><br>Best effort<br><b>Aggregate Year-to-Date -&gt;</b> 500.00        | <b>Date (month, day, year)</b><br>03/29/2000 | <b>Amount of Each Receipt this Period</b><br>500.00   |
| <b>C. Full Name, Mailing Address and Zip Code</b><br>Edward Lubbers<br>5070 Tara Ave #119<br>Las Vegas, NV 89146-5465<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)           | <b>Name of Employer</b><br>Self employed<br><b>Occupation</b><br>Attorney<br><b>Aggregate Year-to-Date -&gt;</b> 1,000.00       | <b>Date (month, day, year)</b><br>03/28/2000 | <b>Amount of Each Receipt this Period</b><br>1,000.00 |
| <b>D. Full Name, Mailing Address and Zip Code</b><br>Pat Lundvall<br>2020 Lakeridge Shores, W.<br>Reno, NV 89509-<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)               | <b>Name of Employer</b><br>McDonald Cararo<br><b>Occupation</b><br>Attorney<br><b>Aggregate Year-to-Date -&gt;</b> 1,000.00     | <b>Date (month, day, year)</b><br>02/22/2000 | <b>Amount of Each Receipt this Period</b><br>1,000.00 |
| <b>E. Full Name, Mailing Address and Zip Code</b><br>Susan Mardian<br>4132 S. Rainbow Blvd., #324<br>Las Vegas, NV 89103-<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)       | <b>Name of Employer</b><br>Atlantic Development<br><b>Occupation</b><br>Developer<br><b>Aggregate Year-to-Date -&gt;</b> 120.00 | <b>Date (month, day, year)</b><br>01/30/2000 | <b>Amount of Each Receipt this Period</b><br>120.00   |
| <b>F. Full Name, Mailing Address and Zip Code</b><br>Ardith Marguleas<br>930 Tahoe Blvd<br>Incline Village, NV 89451-<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)           | <b>Name of Employer</b><br>No Employer<br><b>Occupation</b><br>HOMEMAKER<br><b>Aggregate Year-to-Date -&gt;</b> 250.00          | <b>Date (month, day, year)</b><br>02/11/2000 | <b>Amount of Each Receipt this Period</b><br>250.00   |
| <b>G. Full Name, Mailing Address and Zip Code</b><br>Bonnie Martin<br>1900 Western Ave<br>Las Vegas, NV 89102-<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)                  | <b>Name of Employer</b><br>No Employer<br><b>Occupation</b><br>HOMEMAKER<br><b>Aggregate Year-to-Date -&gt;</b> 500.00          | <b>Date (month, day, year)</b><br>03/24/2000 | <b>Amount of Each Receipt this Period</b><br>500.00   |

**SUBTOTAL** of Receipts This Page (optional)

3,400.00

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



**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE 22 OF 33  
FOR LINE NUMBER 11(a)(1)

For 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)**

Friends of Jon Porter Committee

|                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                               |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>A. Full Name, Mailing Address and Zip Code</b><br>Frank Martin<br>1900 Western Ave<br>Las Vegas, NV 89102-<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)              | <b>Name of Employer</b><br>Martin-Harris<br>Construction<br><b>Occupation</b><br>Partner<br><b>Date (month, day, year)</b><br>03/24/2000<br><b>Amount of Each Receipt this Period</b><br>750.00<br><b>Aggregate Year-to-Date -&gt;</b> 750.00 |
| <b>B. Full Name, Mailing Address and Zip Code</b><br>Carol A. Maxey<br>2001 Plaza De Santa Fe<br>Las Vegas, NV 89102-3910<br>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify)  | <b>Name of Employer</b><br>No Employer<br><b>Occupation</b><br>HOMEMAKER<br><b>Date (month, day, year)</b><br>03/16/2000<br><b>Amount of Each Receipt this Period</b><br>1,000.00<br><b>Aggregate Year-to-Date -&gt;</b> 1,000.00             |
| <b>C. Full Name, Mailing Address and Zip Code</b><br>Carol A. Maxey<br>2001 Plaza De Santa Fe<br>Las Vegas, NV 89102-3910<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)  | <b>Name of Employer</b><br>No Employer<br><b>Occupation</b><br>HOMEMAKER<br><b>Date (month, day, year)</b><br>03/06/2000<br><b>Amount of Each Receipt this Period</b><br>1,000.00<br><b>Aggregate Year-to-Date -&gt;</b> 2,000.00             |
| <b>D. Full Name, Mailing Address and Zip Code</b><br>Robert R. Maxey<br>2001 Plaza De Santa Fe<br>Las Vegas, NV 89102-3910<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | <b>Name of Employer</b><br>Self employed<br><b>Occupation</b><br>Investor<br><b>Date (month, day, year)</b><br>01/10/2000<br><b>Amount of Each Receipt this Period</b><br>500.00<br><b>Aggregate Year-to-Date -&gt;</b> 500.00                |
| <b>E. Full Name, Mailing Address and Zip Code</b><br>Robert R. Maxey<br>2001 Plaza De Santa Fe<br>Las Vegas, NV 89102-3910<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | <b>Name of Employer</b><br>Self employed<br><b>Occupation</b><br>Investor<br><b>Date (month, day, year)</b><br>03/06/2000<br><b>Amount of Each Receipt this Period</b><br>500.00<br><b>Aggregate Year-to-Date -&gt;</b> 1,000.00              |
| <b>F. Full Name, Mailing Address and Zip Code</b><br>Robert R. Maxey<br>2001 Plaza De Santa Fe<br>Las Vegas, NV 89102-3910<br>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | <b>Name of Employer</b><br>Self employed<br><b>Occupation</b><br>Investor<br><b>Date (month, day, year)</b><br>03/06/2000<br><b>Amount of Each Receipt this Period</b><br>1,000.00<br><b>Aggregate Year-to-Date -&gt;</b> 2,000.00            |
| <b>G. Full Name, Mailing Address and Zip Code</b><br>Lynette McDonald<br>6728 Scarborough Ave<br>Las Vegas, NV 89107-<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)      | <b>Name of Employer</b><br>City of Las Vegas<br><b>Occupation</b><br>Councilwoman<br><b>Date (month, day, year)</b><br>01/07/2000<br><b>Amount of Each Receipt this Period</b><br>500.00<br><b>Aggregate Year-to-Date -&gt;</b> 500.00        |

**SUBTOTAL** of Receipts This Page (optional)

5,250.00

**TOTAL** This Period (Last page this line number only)

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE OF  
23 33  
FOR LINE NUMBER  
11(a) (i)

Any information required 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)**

Friends of Jon Porter Committee

|                                                                                                                                                                                                                                                                                                      |                                                                                                                                                   |                                              |                                                       |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------|-------------------------------------------------------|
| <b>A. Full Name, Mailing Address and Zip Code</b><br>Buck McKeon<br>"Buck" McKeon for Congress<br>P.O. Box 2071<br>Tarzana, CA 91356-<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)                       | <b>Name of Employer</b><br>US Government<br><b>Occupation</b><br>Congressman<br><b>Aggregate Year-to-Date -&gt;</b> 1,000.00                      | <b>Date (month, day, year)</b><br>03/31/2000 | <b>Amount of Each Receipt this Period</b><br>1,000.00 |
| <b>B. Full Name, Mailing Address and Zip Code</b><br>Buck McKeon<br>"Buck" McKeon for Congress<br>P.O. Box 2071<br>Tarzana, CA 91356-<br>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify)                       | <b>Name of Employer</b><br>US Government<br><b>Occupation</b><br>Congressman<br><b>Aggregate Year-to-Date -&gt;</b> 2,000.00                      | <b>Date (month, day, year)</b><br>03/31/2000 | <b>Amount of Each Receipt this Period</b><br>1,000.00 |
| <b>C. Full Name, Mailing Address and Zip Code</b><br>Dan Miller<br>1111 Third Ave. West<br>Suite No 200<br>Bradenton, FL 34205-<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)                             | <b>Name of Employer</b><br>Self employed<br><b>Occupation</b><br>Congressional Candidate<br><b>Aggregate Year-to-Date -&gt;</b> 500.00            | <b>Date (month, day, year)</b><br>03/31/2000 | <b>Amount of Each Receipt this Period</b><br>500.00   |
| <b>D. Full Name, Mailing Address and Zip Code</b><br>Susan Miller<br>176 Tierra Bonita Ct.<br>Henderson, NV 89014-<br>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify)                                          | <b>Name of Employer</b><br>Nevada Building Services<br><b>Occupation</b><br>Chairman of the Board<br><b>Aggregate Year-to-Date -&gt;</b> 1,000.00 | <b>Date (month, day, year)</b><br>03/29/2000 | <b>Amount of Each Receipt this Period</b><br>1,000.00 |
| <b>E. Full Name, Mailing Address and Zip Code</b><br>Michael W. Morrissey<br>32 Congressional Court<br>Las Vegas, NV 89113-<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)                                 | <b>Name of Employer</b><br>Morrissey Insurance<br><b>Occupation</b><br>Insurance Broker<br><b>Aggregate Year-to-Date -&gt;</b> 1,000.00           | <b>Date (month, day, year)</b><br>03/10/2000 | <b>Amount of Each Receipt this Period</b><br>1,000.00 |
| <b>F. Full Name, Mailing Address and Zip Code</b><br>William G. Munnell<br>Munnell Community Property Trust<br>2635 Lakeridge Shores, W.<br>Reno, NV 89509-<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | <b>Name of Employer</b><br>No Employer<br><b>Occupation</b><br>Retired<br><b>Aggregate Year-to-Date -&gt;</b> 1,000.00                            | <b>Date (month, day, year)</b><br>03/28/2000 | <b>Amount of Each Receipt this Period</b><br>1,000.00 |
| <b>G. Full Name, Mailing Address and Zip Code</b><br>Bryan Nix<br>1538 Mancha Drive<br>Boulder City, NV 89005-<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)                                              | <b>Name of Employer</b><br>State of Nevada<br><b>Occupation</b><br>Deputy AG<br><b>Aggregate Year-to-Date -&gt;</b> 250.00                        | <b>Date (month, day, year)</b><br>03/20/2000 | <b>Amount of Each Receipt this Period</b><br>250.00   |

**SUBTOTAL** of Receipts This Page (optional)

5,750.00

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

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE 24 OF 33

FOR LINE NUMBER  
11(a)(i)

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)**

Friends of Jon Porter Committee

|                                                                                                                                                                                                                                                                |                                                                                                                              |                                              |                                                       |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------|-------------------------------------------------------|
| <b>A. Full Name, Mailing Address and Zip Code</b><br>Sylvia P. Noonan<br>10824 Elm Ridge Ave<br>Las Vegas, NV 89144-<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)  | <b>Name of Employer</b><br>No Employer<br><b>Occupation</b><br>HOMEMAKER<br><b>Aggregate Year-to-Date -&gt;</b> 250.00       | <b>Date (month, day, year)</b><br>02/22/2000 | <b>Amount of Each Receipt this Period</b><br>250.00   |
| <b>B. Full Name, Mailing Address and Zip Code</b><br>Sylvia P. Noonan<br>10824 Elm Ridge Ave<br>Las Vegas, NV 89144-<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)  | <b>Name of Employer</b><br>No Employer<br><b>Occupation</b><br>HOMEMAKER<br><b>Aggregate Year-to-Date -&gt;</b> 500.00       | <b>Date (month, day, year)</b><br>03/22/2000 | <b>Amount of Each Receipt this Period</b><br>250.00   |
| <b>C. Full Name, Mailing Address and Zip Code</b><br>Robert A. Ostrovsky<br>2328 Delina Dr<br>Las Vegas, NV 89134-<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)    | <b>Name of Employer</b><br>Self employed<br><b>Occupation</b><br>Lobbyist<br><b>Aggregate Year-to-Date -&gt;</b> 1,000.00    | <b>Date (month, day, year)</b><br>03/30/2000 | <b>Amount of Each Receipt this Period</b><br>1,000.00 |
| <b>D. Full Name, Mailing Address and Zip Code</b><br>Oxlley Fox Congress<br>P.O. Box 2300<br>Findlay, OH 45839-<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)       | <b>Name of Employer</b><br>US Government<br><b>Occupation</b><br>Congressman<br><b>Aggregate Year-to-Date -&gt;</b> 1,000.00 | <b>Date (month, day, year)</b><br>03/24/2000 | <b>Amount of Each Receipt this Period</b><br>1,000.00 |
| <b>E. Full Name, Mailing Address and Zip Code</b><br>Pease for Congress<br>P.O. Box 511<br>Seelyville, IN 47878-<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)      | <b>Name of Employer</b><br>US Government<br><b>Occupation</b><br>Congressman<br><b>Aggregate Year-to-Date -&gt;</b> 1,000.00 | <b>Date (month, day, year)</b><br>03/13/2000 | <b>Amount of Each Receipt this Period</b><br>1,000.00 |
| <b>F. Full Name, Mailing Address and Zip Code</b><br>Wanda Lamb Pecolle<br>2937 Coast Line Ct<br>Las Vegas, NV 89117-<br>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | <b>Name of Employer</b><br>Pecolle Ranch<br><b>Occupation</b><br>Owner<br><b>Aggregate Year-to-Date -&gt;</b> 1,000.00       | <b>Date (month, day, year)</b><br>03/20/2000 | <b>Amount of Each Receipt this Period</b><br>1,000.00 |
| <b>G. Full Name, Mailing Address and Zip Code</b><br>Wanda Lamb Pecolle<br>2937 Coast Line Ct<br>Las Vegas, NV 89117-<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | <b>Name of Employer</b><br>Pecolle Ranch<br><b>Occupation</b><br>Owner<br><b>Aggregate Year-to-Date -&gt;</b> 2,000.00       | <b>Date (month, day, year)</b><br>03/20/2000 | <b>Amount of Each Receipt this Period</b><br>1,000.00 |

**SUBTOTAL** of Receipts This Page (optional)

5,500.00

**TOTAL** This Period (Last page this line number only)

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE 25 OF 33  
FOR LINE NUMBER 11(a) (1)

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)  
Friends of Jon Porter Committee

|                                                                                                                                                                                                                                                                           |                                                                                                                                                    |                                                                                                       |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------|
| <b>A. Full Name, Mailing Address and Zip Code</b><br>Crystal L. Pfeiffer<br>1260 Tamarisk Lane<br>Boulder City, NV 89005-<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)        | <b>Name of Employer</b><br>No Employer<br><b>Occupation</b><br>HOMEMAKER<br><b>Aggregate Year-to-Date -&gt;</b> 1,000.00                           | <b>Date (month, day, year)</b><br>03/29/2000<br><b>Amount of Each Receipt this Period</b><br>1,000.00 |
| <b>B. Full Name, Mailing Address and Zip Code</b><br>John W. Pfeiffer<br>1260 Tamarisk Lane<br>Boulder City, NV 89005-<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)           | <b>Name of Employer</b><br>Self effort<br><b>Occupation</b><br>Owner<br><b>Aggregate Year-to-Date -&gt;</b> 1,000.00                               | <b>Date (month, day, year)</b><br>03/29/2000<br><b>Amount of Each Receipt this Period</b><br>1,000.00 |
| <b>C. Full Name, Mailing Address and Zip Code</b><br>Isabel Perera Pfeiffer<br>3167 E. Painted Hills Ave<br>Las Vegas, NV 89120-<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | <b>Name of Employer</b><br>United Nations<br><b>Occupation</b><br>Retired<br><b>Aggregate Year-to-Date -&gt;</b> 1,000.00                          | <b>Date (month, day, year)</b><br>03/22/2000<br><b>Amount of Each Receipt this Period</b><br>1,000.00 |
| <b>D. Full Name, Mailing Address and Zip Code</b><br>Joe Pitts<br>Friends of Joe Pitts<br>P.O. Box 775<br>Unionville, PA 19375-<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)  | <b>Name of Employer</b><br>US Government<br><b>Occupation</b><br>Congressman<br><b>Aggregate Year-to-Date -&gt;</b> 1,000.00                       | <b>Date (month, day, year)</b><br>03/31/2000<br><b>Amount of Each Receipt this Period</b><br>1,000.00 |
| <b>E. Full Name, Mailing Address and Zip Code</b><br>Potosi LTD.<br>2835 S. Bronco Street<br>Las Vegas, NV 89146-<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)                | <b>Name of Employer</b><br>Partnership Attribution<br>Listed Individually<br><b>Occupation</b><br><br><b>Aggregate Year-to-Date -&gt;</b> 1,000.00 | <b>Date (month, day, year)</b><br>02/22/2000<br><b>Amount of Each Receipt this Period</b><br>1,000.00 |
| <b>F. Full Name, Mailing Address and Zip Code</b><br>John I Pretto<br>1436 San Felipe<br>Boulder City, NV 89005-<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)                 | <b>Name of Employer</b><br>No Employer<br><b>Occupation</b><br>Retired<br><b>Aggregate Year-to-Date -&gt;</b> 250.00                               | <b>Date (month, day, year)</b><br>03/31/2000<br><b>Amount of Each Receipt this Period</b><br>250.00   |
| <b>G. Full Name, Mailing Address and Zip Code</b><br>Quartzite, L.L.C.<br>393 Catspaw Drive<br>Boulder City, NV 89005-<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)           | <b>Name of Employer</b><br>Partnership Attribution<br>Listed Individually<br><b>Occupation</b><br><br><b>Aggregate Year-to-Date -&gt;</b> 500.00   | <b>Date (month, day, year)</b><br>02/10/2000<br><b>Amount of Each Receipt this Period</b><br>500.00   |

**SUBTOTAL** of Receipts This Page (optional)

5,750.00

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

## SCHEDULE A

## ITEMIZED RECEIPTS

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

|                 |    |
|-----------------|----|
| PAGE            | OF |
| 26              | 33 |
| FOR LINE NUMBER |    |
| 11(a) (i)       |    |

All information copied from each Receipt and Statement 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)

Friends of Jon Porter Committee

|                                                                                                                                                                                                                                                                     |                                                                                                                               |                                                                                                     |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------|
| <b>A. Full Name, Mailing Address and Zip Code</b><br>John J. Quinn<br>1311 Alpine Drive<br>Boulder City, NV 89005-<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)         | <b>Name of Employer</b><br>No Employer<br><b>Occupation</b><br>Retired<br><b>Aggregate Year-to-Date -&gt;</b> 300.00          | <b>Date (month, day, year)</b><br>02/10/2000<br><b>Amount of Each Receipt this Period</b><br>300.00 |
| <b>B. Full Name, Mailing Address and Zip Code</b><br>William J. Raggio<br>P.O. Box 281<br>Reno, NV 89504-<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)                  | <b>Name of Employer</b><br>Jones Vargas<br><b>Occupation</b><br>Attorney<br><b>Aggregate Year-to-Date -&gt;</b> 30.00         | <b>Date (month, day, year)</b><br>02/08/2000<br><b>Amount of Each Receipt this Period</b><br>30.00  |
| <b>C. Full Name, Mailing Address and Zip Code</b><br>Elizabeth A. Amese<br>8104 Pebbleshire<br>Las Vegas, NV 89117-1370<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)    | <b>Name of Employer</b><br>No Employer<br><b>Occupation</b><br>HOMEMAKER<br><b>Aggregate Year-to-Date -&gt;</b> 500.00        | <b>Date (month, day, year)</b><br>03/31/2000<br><b>Amount of Each Receipt this Period</b><br>500.00 |
| <b>D. Full Name, Mailing Address and Zip Code</b><br>Joseph M. Riggs<br>3800 N. Correy Pines<br>Las Vegas, NV 89108-<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)       | <b>Name of Employer</b><br>Riggs Construction<br><b>Occupation</b><br>President<br><b>Aggregate Year-to-Date -&gt;</b> 500.00 | <b>Date (month, day, year)</b><br>03/31/2000<br><b>Amount of Each Receipt this Period</b><br>500.00 |
| <b>E. Full Name, Mailing Address and Zip Code</b><br>Kimberly Becker Riggs<br>3800 N. Correy Pines<br>Las Vegas, NV 89108-<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | <b>Name of Employer</b><br>No Employer<br><b>Occupation</b><br>HOMEMAKER<br><b>Aggregate Year-to-Date -&gt;</b> 500.00        | <b>Date (month, day, year)</b><br>03/31/2000<br><b>Amount of Each Receipt this Period</b><br>500.00 |
| <b>F. Full Name, Mailing Address and Zip Code</b><br>Gregg M. Ripplinger<br>1003 Legacy Drive<br>Boulder City, NV 89005-<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)   | <b>Name of Employer</b><br>Desert Womens Care<br><b>Occupation</b><br>Physician<br><b>Aggregate Year-to-Date -&gt;</b> 300.00 | <b>Date (month, day, year)</b><br>02/25/2000<br><b>Amount of Each Receipt this Period</b><br>300.00 |
| <b>G. Full Name, Mailing Address and Zip Code</b><br>Randall C. Robinson<br>P.O. Box 3433<br>Mesquite, NV 89024-<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)           | <b>Name of Employer</b><br>Self employed<br><b>Occupation</b><br>Lobbyist<br><b>Aggregate Year-to-Date -&gt;</b> 250.00       | <b>Date (month, day, year)</b><br>03/31/2000<br><b>Amount of Each Receipt this Period</b><br>250.00 |

SUBTOTAL of Receipts This Page (optional)

2,300.00

TOTAL This Period (Last page this line number only)

## SCHEDULE A

## ITEMIZED RECEIPTS

See separate schedule(s)  
for each category of the  
Detailed Summary PagePAGE 27 OF 33  
FOR LINE NUMBER  
11(a)(i)

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 individual contributor to solicit contributions from such contributor.

## NAME OF COMMITTEE (in Full)

Friends of Jon Porter Committee

|                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                         |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>A. Full Name, Mailing Address and Zip Code</b><br>Sig Rogich<br>3980 Howard Hughes Parkway<br>Suite 550<br>Las Vegas, NV 89109-<br>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | <b>Name of Employer</b><br>Rogich Communications<br><b>Occupation</b><br>Owner<br><b>Date (month, day, year)</b><br>03/31/2000<br><b>Amount of Each Receipt this Period</b><br>1,000.00<br><b>Aggregate Year-to-Date -&gt;</b> 1,000.00 |
| <b>B. Full Name, Mailing Address and Zip Code</b><br>Zigmund J. Rudnicki<br>5300 E. Twain #258<br>Las Vegas, NV 89122-<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)             | <b>Name of Employer</b><br>Tool & Dice Associates<br><b>Occupation</b><br>Retired<br><b>Date (month, day, year)</b><br>01/30/2000<br><b>Amount of Each Receipt this Period</b><br>300.00<br><b>Aggregate Year-to-Date -&gt;</b> 300.00  |
| <b>C. Full Name, Mailing Address and Zip Code</b><br>Paul Russitano<br>1281 High Forest Svc<br>Las Vegas, NV 89123-<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)                | <b>Name of Employer</b><br>Mark Alden CPA<br><b>Occupation</b><br>CPA<br><b>Date (month, day, year)</b><br>03/22/2000<br><b>Amount of Each Receipt this Period</b><br>1,000.00<br><b>Aggregate Year-to-Date -&gt;</b> 1,000.00          |
| <b>D. Full Name, Mailing Address and Zip Code</b><br>Paul Russitano<br>1281 High Forest Svc<br>Las Vegas, NV 89123-<br>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify)                | <b>Name of Employer</b><br>Mark Alden CPA<br><b>Occupation</b><br>CPA<br><b>Date (month, day, year)</b><br>03/22/2000<br><b>Amount of Each Receipt this Period</b><br>1,000.00<br><b>Aggregate Year-to-Date -&gt;</b> 2,000.00          |
| <b>E. Full Name, Mailing Address and Zip Code</b><br>S.F. Russo M.D.<br>2054 E. Desert Inn Rd Ste A<br>Las Vegas, NV 89109-<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)        | <b>Name of Employer</b><br>Self employed<br><b>Occupation</b><br>Physician<br><b>Date (month, day, year)</b><br>03/27/2000<br><b>Amount of Each Receipt this Period</b><br>1,000.00<br><b>Aggregate Year-to-Date -&gt;</b> 1,000.00     |
| <b>F. Full Name, Mailing Address and Zip Code</b><br>John P. Sande III<br>4125 Badger Circle<br>Reno, NV 89505-<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)                    | <b>Name of Employer</b><br>Jonas Vargaa<br><b>Occupation</b><br>Attorney<br><b>Date (month, day, year)</b><br>03/31/2000<br><b>Amount of Each Receipt this Period</b><br>500.00<br><b>Aggregate Year-to-Date -&gt;</b> 500.00           |
| <b>G. Full Name, Mailing Address and Zip Code</b><br>Lee V. Sanders<br>410 Patti Ann Woods Drive<br>Henderson, NV 89015-<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)           | <b>Name of Employer</b><br>Sandex Inc.<br><b>Occupation</b><br>President<br><b>Date (month, day, year)</b><br>02/25/2000<br><b>Amount of Each Receipt this Period</b><br>500.00<br><b>Aggregate Year-to-Date -&gt;</b> 500.00           |

SUBTOTAL of Receipts This Page (optional)

5,300.00

TOTAL This Period (last page this line number only)

**SCHEDULE A**

**ITEMIZED RECEIPTS**

Use separate schedule (a) for each category of the detailed summary Page

PAGE 07  
25 33  
FOR LINE NUMBER  
11(a) 11

Any information copied from such reports and statements may not be used by any person for the purpose of soliciting contributions or for campaign purposes, other than using the name and address of any political committee to solicit contributions from such committee.

**NAME OF COMMITTEE (In Full)**

Friends of Jon Porter Committee

|                                                                                                                                                                                                                                                                              |                                                                                                                                              |                                              |                                                       |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------|-------------------------------------------------------|
| <b>A. Full Name, Mailing Address and Zip Code</b><br>Brian D. Schiese<br>6761 Xena Way<br>Carlsbad, CA 92009-<br><b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)                | <b>Name of Employer</b><br>Farmers Insurance<br><b>Occupation</b><br>Manager<br><b>Aggregate Year-to-Date -&gt;</b> 300.00                   | <b>Date (month, day, year)</b><br>02/15/2000 | <b>Amount of Each Receipt this Period</b><br>300.00   |
| <b>B. Full Name, Mailing Address and Zip Code</b><br>Milton T. Schwartz<br>1324 Goldring Ave<br>Las Vegas, NV 89106-<br><b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)         | <b>Name of Employer</b><br>Yellow Taxi<br><b>Occupation</b><br>Executive<br><b>Aggregate Year-to-Date -&gt;</b> 200.00                       | <b>Date (month, day, year)</b><br>03/31/2000 | <b>Amount of Each Receipt this Period</b><br>200.00   |
| <b>C. Full Name, Mailing Address and Zip Code</b><br>L.E. Seger<br>172-R Avenida Majorca<br>Laguna Hills, CA 92653-<br><b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)          | <b>Name of Employer</b><br>No Employer<br><b>Occupation</b><br>Retired<br><b>Aggregate Year-to-Date -&gt;</b> 1,000.00                       | <b>Date (month, day, year)</b><br>02/25/2000 | <b>Amount of Each Receipt this Period</b><br>1,000.00 |
| <b>D. Full Name, Mailing Address and Zip Code</b><br>John E. Shelk<br>4845 Yorktown Boulevard<br>Arlington, VA 22207-<br><b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)        | <b>Name of Employer</b><br>American Gaming Assn.<br><b>Occupation</b><br>Attorney<br><b>Aggregate Year-to-Date -&gt;</b> 500.00              | <b>Date (month, day, year)</b><br>03/08/2000 | <b>Amount of Each Receipt this Period</b><br>500.00   |
| <b>E. Full Name, Mailing Address and Zip Code</b><br>Rod Smallwood<br>P.O. Box 8806<br>Incline Village, NV 89450-<br><b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)            | <b>Name of Employer</b><br>No Employer<br><b>Occupation</b><br>Retired<br><b>Aggregate Year-to-Date -&gt;</b> 250.00                         | <b>Date (month, day, year)</b><br>02/11/2000 | <b>Amount of Each Receipt this Period</b><br>250.00   |
| <b>F. Full Name, Mailing Address and Zip Code</b><br>Bill Smith<br>P.O. Box 61530<br>530 Avenue G<br>Boulder City, NV 89006-<br><b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | <b>Name of Employer</b><br>Best effort<br><b>Occupation</b><br>Best effort<br><b>Aggregate Year-to-Date -&gt;</b> 444.00                     | <b>Date (month, day, year)</b><br>02/22/2000 | <b>Amount of Each Receipt this Period</b><br>444.00   |
| <b>G. Full Name, Mailing Address and Zip Code</b><br>Edward D. Smith<br>5032 Players Club Dr.<br>Las Vegas, NV 89134-<br><b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)        | <b>Name of Employer</b><br>Smith Christensen Enterprises<br><b>Occupation</b><br>Businessman<br><b>Aggregate Year-to-Date -&gt;</b> 1,000.00 | <b>Date (month, day, year)</b><br>02/22/2000 | <b>Amount of Each Receipt this Period</b><br>1,000.00 |

**SUBTOTAL** of Receipts This Page (optional)

3,694.00

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

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE 29 OF 33  
FOR LINE NUMBER 11(a) (i)

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

**NAME OF COMMITTEE (In Full)**

Friends of Jon Porter Committee

|                                                                                                                                                                                                                                                                           |                                                                                                                                          |                                              |                                                       |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------|-------------------------------------------------------|
| <b>A. Full Name, Mailing Address and Zip Code</b><br>Warren L. Smith<br>885 Adams Blvd<br>Boulder City, NV 89005-<br><b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)         | <b>Name of Employer</b><br>Self employed<br><b>Occupation</b><br>Physician<br><b>Aggregate Year-to-Date -&gt;</b> 1,000.00               | <b>Date (month, day, year)</b><br>03/29/2000 | <b>Amount of Each Receipt this Period</b><br>1,000.00 |
| <b>B. Full Name, Mailing Address and Zip Code</b><br>Jerry Solomon<br>Friends of Jerry Solomon<br><b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)                            | <b>Name of Employer</b><br>No Employer<br><b>Occupation</b><br>Retired<br><b>Aggregate Year-to-Date -&gt;</b> 500.00                     | <b>Date (month, day, year)</b><br>03/24/2000 | <b>Amount of Each Receipt this Period</b><br>500.00   |
| <b>C. Full Name, Mailing Address and Zip Code</b><br>Carolyn M. Sparks<br>2750 Darby Wallis Drive<br>Las Vegas, NV 89134-<br><b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | <b>Name of Employer</b><br>International Insurance<br><b>Occupation</b><br>Insurance Sales<br><b>Aggregate Year-to-Date -&gt;</b> 500.00 | <b>Date (month, day, year)</b><br>03/27/2000 | <b>Amount of Each Receipt this Period</b><br>500.00   |
| <b>D. Full Name, Mailing Address and Zip Code</b><br>Gary J. Spinkelink<br>1117 Avenue K<br>Boulder City, NV 89005-<br><b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)       | <b>Name of Employer</b><br>Pentacore<br><b>Occupation</b><br>President<br><b>Aggregate Year-to-Date -&gt;</b> 100.00                     | <b>Date (month, day, year)</b><br>02/17/2000 | <b>Amount of Each Receipt this Period</b><br>100.00   |
| <b>E. Full Name, Mailing Address and Zip Code</b><br>Gary J. Spinkelink<br>1117 Avenue K<br>Boulder City, NV 89005-<br><b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)       | <b>Name of Employer</b><br>Pentacore<br><b>Occupation</b><br>President<br><b>Aggregate Year-to-Date -&gt;</b> 600.00                     | <b>Date (month, day, year)</b><br>03/28/2000 | <b>Amount of Each Receipt this Period</b><br>500.00   |
| <b>F. Full Name, Mailing Address and Zip Code</b><br>Gary L. Stewart<br>1000 Legacy Drive<br>Boulder City, NV 89005-<br><b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)      | <b>Name of Employer</b><br>No Employer<br><b>Occupation</b><br>Retired<br><b>Aggregate Year-to-Date -&gt;</b> 1,000.00                   | <b>Date (month, day, year)</b><br>03/30/2000 | <b>Amount of Each Receipt this Period</b><br>1,000.00 |
| <b>G. Full Name, Mailing Address and Zip Code</b><br>Alan Stromberg A.I.A.<br>705 D Yucca St<br>Boulder City, NV 89005-<br><b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)   | <b>Name of Employer</b><br>A.I.A. Architects, Inc.<br><b>Occupation</b><br>Architect<br><b>Aggregate Year-to-Date -&gt;</b> 250.00       | <b>Date (month, day, year)</b><br>03/22/2000 | <b>Amount of Each Receipt this Period</b><br>250.00   |

**SUBTOTAL** of Receipts This Page (optional)

3,850.00

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



## SCHEDULE A

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary PagePAGE 30 OF 33  
FOR LINE NUMBER  
11(a)(1)

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)

Friends of Jon Porter Committee

|                                                                                                                                                                                                                                                                      |                                                                                                                                    |                                              |                                                                |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------|----------------------------------------------------------------|
| <b>A. Full Name, Mailing Address and Zip Code</b><br>K. Michael Sullivan<br>3666 Dutch Valley Dr<br>Las Vegas, NV 89147-<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)    | <b>Name of Employer</b><br>Paladin, Inc<br><b>Occupation</b><br>Representative<br><b>Aggregate Year-to-Date -&gt;</b> 500.00       | <b>Date (month, day, year)</b><br>03/30/2003 | <b>Amount of Each Receipt this Period</b><br>500.00            |
| <b>B. Full Name, Mailing Address and Zip Code</b><br>George Swartz<br>5851 W. Charleston<br>Las Vegas, NV 89146-<br>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify)            | <b>Name of Employer</b><br>Swartz & Swartz CPA<br><b>Occupation</b><br>Accountant<br><b>Aggregate Year-to-Date -&gt;</b> 629.50    | <b>Date (month, day, year)</b><br>03/31/2000 | <b>Amount of Each Receipt this Period</b><br>629.50<br>IN-KIND |
| <b>C. Full Name, Mailing Address and Zip Code</b><br>George Swartz<br>5851 W. Charleston<br>Las Vegas, NV 89146-<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)            | <b>Name of Employer</b><br>Swartz & Swartz CPA<br><b>Occupation</b><br>Accountant<br><b>Aggregate Year-to-Date -&gt;</b> 1,329.50  | <b>Date (month, day, year)</b><br>03/31/2000 | <b>Amount of Each Receipt this Period</b><br>700.00<br>IN-KIND |
| <b>D. Full Name, Mailing Address and Zip Code</b><br>Stephen Swisher<br>7520 W. Tropic Blvd<br>Las Vegas, NV 89131-<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)         | <b>Name of Employer</b><br>Swisher & Hall Ltd.<br><b>Occupation</b><br>Architect<br><b>Aggregate Year-to-Date -&gt;</b> 1,000.00   | <b>Date (month, day, year)</b><br>01/07/2000 | <b>Amount of Each Receipt this Period</b><br>1,000.00          |
| <b>E. Full Name, Mailing Address and Zip Code</b><br>E. Perry Thomas<br>2300 W. Sahara Ave, Box One<br>Las Vegas, NV 89102-<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | <b>Name of Employer</b><br>Thomas & Mack<br><b>Occupation</b><br>Consultant<br><b>Aggregate Year-to-Date -&gt;</b> 1,000.00        | <b>Date (month, day, year)</b><br>02/08/2000 | <b>Amount of Each Receipt this Period</b><br>1,000.00          |
| <b>F. Full Name, Mailing Address and Zip Code</b><br>Robert M. Thorniley<br>3210 Palm Desert Way<br>Las Vegas, NV 89120-<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)    | <b>Name of Employer</b><br>Image Construction Co<br><b>Occupation</b><br>President<br><b>Aggregate Year-to-Date -&gt;</b> 1,000.00 | <b>Date (month, day, year)</b><br>01/20/2000 | <b>Amount of Each Receipt this Period</b><br>1,000.00          |
| <b>G. Full Name, Mailing Address and Zip Code</b><br>James Vernon<br>115 S. Water Street<br>Henderson, NV 89015-<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)            | <b>Name of Employer</b><br>Self employed<br><b>Occupation</b><br>Computer specialist<br><b>Aggregate Year-to-Date -&gt;</b> 60.00  | <b>Date (month, day, year)</b><br>02/04/2000 | <b>Amount of Each Receipt this Period</b><br>60.00             |

SUBTOTAL of Receipts This Page (optional)

4,889.50

TOTAL This Period (last page this line number only)

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE 31 OF 33  
FOR LINE NUMBER  
11(a)(i)

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)**  
Friends of Jon Porter Committee

|                                                                                                                                                                                                                                                                          |                                                                                                                                              |                                                                            |                                                       |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------|-------------------------------------------------------|
| <b>A. Full Name, Mailing Address and Zip Code</b><br>James Vernon<br>115 S. Water Street<br>Henderson, NV 89015-<br><b>Receipt For:</b> <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify)         | <b>Name of Employer</b><br>Self employed<br><br><b>Occupation</b><br>Computer specialist<br><br><b>Aggregate Year-to-Date -&gt;</b> 1,060.00 | <b>Date (month, day, year)</b><br>03/31/2000<br><br><br><br><b>IN-KIND</b> | <b>Amount of Each Receipt this Period</b><br>1,000.00 |
| <b>B. Full Name, Mailing Address and Zip Code</b><br>Barbara E. Vucanovich<br>3555 Tamarisk Drive<br>Reno, NV 89502-<br><b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)     | <b>Name of Employer</b><br>No Employer<br><br><b>Occupation</b><br>Retired<br><br><b>Aggregate Year-to-Date -&gt;</b> 500.00                 | <b>Date (month, day, year)</b><br>03/27/2000<br><br><br><br>               | <b>Amount of Each Receipt this Period</b><br>500.00   |
| <b>C. Full Name, Mailing Address and Zip Code</b><br>James L. Wadhams<br>221 Rosemary Lane<br>Las Vegas, NV 89107-<br><b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)       | <b>Name of Employer</b><br>Self employed<br><br><b>Occupation</b><br>Lobbyist<br><br><b>Aggregate Year-to-Date -&gt;</b> 1,000.00            | <b>Date (month, day, year)</b><br>03/30/2000<br><br><br><br>               | <b>Amount of Each Receipt this Period</b><br>1,000.00 |
| <b>D. Full Name, Mailing Address and Zip Code</b><br>Bill Wells<br>2021 Redbird Drive<br>Las Vegas, NV 89134-<br><b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)            | <b>Name of Employer</b><br>McGladry & Pullen<br><br><b>Occupation</b><br>Associate<br><br><b>Aggregate Year-to-Date -&gt;</b> 1,000.00       | <b>Date (month, day, year)</b><br>03/10/2000<br><br><br><br>               | <b>Amount of Each Receipt this Period</b><br>1,000.00 |
| <b>E. Full Name, Mailing Address and Zip Code</b><br>Clark C. Whitney<br>220 W. Fairway Road<br>Henderson, NV 89015-7725<br><b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | <b>Name of Employer</b><br>Best effort<br><br><b>Occupation</b><br>Best effort<br><br><b>Aggregate Year-to-Date -&gt;</b> 500.00             | <b>Date (month, day, year)</b><br>03/31/2000<br><br><br><br>               | <b>Amount of Each Receipt this Period</b><br>500.00   |
| <b>F. Full Name, Mailing Address and Zip Code</b><br>Lynn Wiesner<br>3216 Ashby<br>Las Vegas, NV 89102-<br><b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)                  | <b>Name of Employer</b><br>No Employer<br><br><b>Occupation</b><br>HOMEMAKER<br><br><b>Aggregate Year-to-Date -&gt;</b> 1,000.00             | <b>Date (month, day, year)</b><br>03/20/2000<br><br><br><br>               | <b>Amount of Each Receipt this Period</b><br>1,000.00 |
| <b>G. Full Name, Mailing Address and Zip Code</b><br>Tom Wiesner<br>3025 Sheridan<br>Las Vegas, NV 89102-<br><b>Receipt For:</b> <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify)                | <b>Name of Employer</b><br>Big Dog's<br><br><b>Occupation</b><br>President<br><br><b>Aggregate Year-to-Date -&gt;</b> 500.00                 | <b>Date (month, day, year)</b><br>01/07/2000<br><br><br><br>               | <b>Amount of Each Receipt this Period</b><br>500.00   |

**SUBTOTAL** of Receipts This Page (optional)

5,500.00

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

## SCHEDULE A

## ITEMIZED RECEIPTS

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

 PAGE 32 OF 33  
FOR LINE NUMBER  
11 | a | (i)

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)

Friends of Jon Porter Committee

|                                                                                                                                                                                                                                                                    |                                                                                                                                         |                                                                                                       |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------|
| <b>A. Full Name, Mailing Address and Zip Code</b><br>Tom Wiesner<br>3025 Sheridan<br>Las Vegas, NV 89102-<br>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify)                 | <b>Name of Employer</b><br>Big Dog's<br><b>Occupation</b><br>President<br><b>Aggregate Year-to-Date -&gt;</b> 830.00                    | <b>Date (month, day, year)</b><br>03/31/2000<br><b>Amount of Each Receipt this Period</b><br>150.00   |
| <b>B. Full Name, Mailing Address and Zip Code</b><br>Wayne Wilson<br>416 Via El Chico<br>Redondo Beach, CA 90277-<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)         | <b>Name of Employer</b><br>Farmers Insurance<br><b>Occupation</b><br>Vice President<br><b>Aggregate Year-to-Date -&gt;</b> 500.00       | <b>Date (month, day, year)</b><br>03/08/2000<br><b>Amount of Each Receipt this Period</b><br>500.00   |
| <b>C. Full Name, Mailing Address and Zip Code</b><br>Bruce L. Woodbury<br>3800 Howard Hughes Pkwy<br>Las Vegas, NV 89109-<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | <b>Name of Employer</b><br>Self employed<br><b>Occupation</b><br>Attorney<br><b>Aggregate Year-to-Date -&gt;</b> 200.00                 | <b>Date (month, day, year)</b><br>02/08/2000<br><b>Amount of Each Receipt this Period</b><br>200.00   |
| <b>D. Full Name, Mailing Address and Zip Code</b><br>Bruce L. Woodbury<br>3800 Howard Hughes Pkwy<br>Las Vegas, NV 89109-<br>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | <b>Name of Employer</b><br>Self employed<br><b>Occupation</b><br>Attorney<br><b>Aggregate Year-to-Date -&gt;</b> 1,200.00               | <b>Date (month, day, year)</b><br>03/31/2000<br><b>Amount of Each Receipt this Period</b><br>1,000.00 |
| <b>E. Full Name, Mailing Address and Zip Code</b><br>Bruce L. Woodbury<br>3800 Howard Hughes Pkwy<br>Las Vegas, NV 89109-<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | <b>Name of Employer</b><br>Self employed<br><b>Occupation</b><br>Attorney<br><b>Aggregate Year-to-Date -&gt;</b> 2,000.00               | <b>Date (month, day, year)</b><br>03/31/2000<br><b>Amount of Each Receipt this Period</b><br>800.00   |
| <b>F. Full Name, Mailing Address and Zip Code</b><br>Stephen A. Wynn<br>P.O. Box 7777<br>Las Vegas, NV 89177-<br>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify)             | <b>Name of Employer</b><br>Mirage Resorts<br><b>Occupation</b><br>Chairman of the Board<br><b>Aggregate Year-to-Date -&gt;</b> 1,000.00 | <b>Date (month, day, year)</b><br>03/31/2000<br><b>Amount of Each Receipt this Period</b><br>1,000.00 |
| <b>G. Full Name, Mailing Address and Zip Code</b><br>Stephen A. Wynn<br>P.O. Box 7777<br>Las Vegas, NV 89177-<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)             | <b>Name of Employer</b><br>Mirage Resorts<br><b>Occupation</b><br>Chairman of the Board<br><b>Aggregate Year-to-Date -&gt;</b> 2,000.00 | <b>Date (month, day, year)</b><br>03/31/2000<br><b>Amount of Each Receipt this Period</b><br>1,000.00 |

SUBTOTAL of Receipts This Page (optional)

4,850.00

TOTAL This Period (last page this line number only)

## SCHEDULE A

## ITEMIZED RECEIPTS

See separate schedule(s)  
for each category of the  
Detailed Summary PagePAGE 33 OF 33  
FOR LINE NUMBER  
11(a) 11

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)

Friends of Jon Porter Committee

|                                                                                                                                                                                                                                                   |                                                                                                         |                                       |                                              |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------|---------------------------------------|----------------------------------------------|
| A. Full Name, Mailing Address and Zip Code<br>Paul Zahler<br>P.O. Box 7582<br>Incline Village, NV 89452-<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Name of Employer<br>Zahler Enterprises, Inc.<br>Occupation<br>Owner<br>Aggregate Year-to-Date -> 250.00 | Date (month, day, year)<br>02/26/2000 | Amount of Each Receipt this Period<br>250.00 |
| B. Full Name, Mailing Address and Zip Code<br>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)                                                                          | Name of Employer<br>Occupation<br>Aggregate Year-to-Date ->                                             | Date (month, day, year)<br>/ /        | Amount of Each Receipt this Period           |
| C. Full Name, Mailing Address and Zip Code<br>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)                                                                          | Name of Employer<br>Occupation<br>Aggregate Year-to-Date ->                                             | Date (month, day, year)<br>/ /        | Amount of Each Receipt this Period           |
| D. Full Name, Mailing Address and Zip Code<br>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)                                                                          | Name of Employer<br>Occupation<br>Aggregate Year-to-Date ->                                             | Date (month, day, year)<br>/ /        | Amount of Each Receipt this Period           |
| E. Full Name, Mailing Address and Zip Code<br>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)                                                                          | Name of Employer<br>Occupation<br>Aggregate Year-to-Date ->                                             | Date (month, day, year)<br>/ /        | Amount of Each Receipt this Period           |
| F. Full Name, Mailing Address and Zip Code<br>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)                                                                          | Name of Employer<br>Occupation<br>Aggregate Year-to-Date ->                                             | Date (month, day, year)<br>/ /        | Amount of Each Receipt this Period           |
| G. Full Name, Mailing Address and Zip Code<br>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)                                                                          | Name of Employer<br>Occupation<br>Aggregate Year-to-Date ->                                             | Date (month, day, year)<br>/ /        | Amount of Each Receipt this Period           |

SUBTOTAL of Receipts This Page (optional)

250.00

TOTAL This Period (last page this line number only)

149,898.00

## SCHEDULE A

## ITEMIZED RECEIPTS

Use separate schedule  
for each category of the  
Detailed Summary PagePAGE 07  
1 7  
FOR LINE NUMBER  
11 (c)

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)

Friends of Jon Porter Committee

|                                                                                                                                                                                                                                                                                                                          |                                                                                             |                                                                                         |                                                                                                  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------|
| <b>A. Full Name, Mailing Address and Zip Code</b><br>American Hotel & Motel Association PAC<br>1201 New York Avenue, NW Suite 600<br>Washington, DC 20005-3931<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)                  | <b>Name of Employer</b><br><br><b>Occupation</b><br><br><b>Aggregate Year-to-Date -&gt;</b> | <b>Date (month, day, year)</b><br>03/31/2000<br><br><b>Aggregate Year-to-Date -&gt;</b> | <b>Amount of Each Receipt this Period</b><br>1,000.00<br><br><b>Aggregate Year-to-Date -&gt;</b> |
| <b>B. Full Name, Mailing Address and Zip Code</b><br>American Prosperity PAC<br>1155 21st Street N.W. Suite 300<br>Washington, DC 20036-<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)                                        | <b>Name of Employer</b><br><br><b>Occupation</b><br><br><b>Aggregate Year-to-Date -&gt;</b> | <b>Date (month, day, year)</b><br>03/24/2000<br><br><b>Aggregate Year-to-Date -&gt;</b> | <b>Amount of Each Receipt this Period</b><br>1,000.00<br><br><b>Aggregate Year-to-Date -&gt;</b> |
| <b>C. Full Name, Mailing Address and Zip Code</b><br>American Renewal PAC-FED<br>A Multi Candidate Cmt<br>P.O. Box 20210<br>Alexandria, VA 22320-<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)                               | <b>Name of Employer</b><br><br><b>Occupation</b><br><br><b>Aggregate Year-to-Date -&gt;</b> | <b>Date (month, day, year)</b><br>03/28/2000<br><br><b>Aggregate Year-to-Date -&gt;</b> | <b>Amount of Each Receipt this Period</b><br>1,000.00<br><br><b>Aggregate Year-to-Date -&gt;</b> |
| <b>D. Full Name, Mailing Address and Zip Code</b><br>American Success Political Action<br>Committee<br>1155 21st Street N.W., Ste 300<br>Washington, DC 20036-<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)                  | <b>Name of Employer</b><br><br><b>Occupation</b><br><br><b>Aggregate Year-to-Date -&gt;</b> | <b>Date (month, day, year)</b><br>03/24/2000<br><br><b>Aggregate Year-to-Date -&gt;</b> | <b>Amount of Each Receipt this Period</b><br>5,000.00<br><br><b>Aggregate Year-to-Date -&gt;</b> |
| <b>E. Full Name, Mailing Address and Zip Code</b><br>Americans for a Republican Majority<br>Multicandidate Committee<br>1155-21st Street, NW Suite 300<br>Washington, DC 20036-<br>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | <b>Name of Employer</b><br><br><b>Occupation</b><br><br><b>Aggregate Year-to-Date -&gt;</b> | <b>Date (month, day, year)</b><br>03/27/2000<br><br><b>Aggregate Year-to-Date -&gt;</b> | <b>Amount of Each Receipt this Period</b><br>5,000.00<br><br><b>Aggregate Year-to-Date -&gt;</b> |
| <b>F. Full Name, Mailing Address and Zip Code</b><br>Bayou Leader PAC<br>521 Ft Williams Parkway<br>Alexandria, VA 22304-<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)                                                       | <b>Name of Employer</b><br><br><b>Occupation</b><br><br><b>Aggregate Year-to-Date -&gt;</b> | <b>Date (month, day, year)</b><br>03/24/2000<br><br><b>Aggregate Year-to-Date -&gt;</b> | <b>Amount of Each Receipt this Period</b><br>2,000.00<br><br><b>Aggregate Year-to-Date -&gt;</b> |
| <b>G. Full Name, Mailing Address and Zip Code</b><br>Committee For A Republican Team<br>AKA Curt PAC<br>P.O. box 32284<br>Washington, DC 20007-<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)                                 | <b>Name of Employer</b><br><br><b>Occupation</b><br><br><b>Aggregate Year-to-Date -&gt;</b> | <b>Date (month, day, year)</b><br>03/24/2000<br><br><b>Aggregate Year-to-Date -&gt;</b> | <b>Amount of Each Receipt this Period</b><br>1,000.00<br><br><b>Aggregate Year-to-Date -&gt;</b> |

SUBTOTAL of Receipts This Page (optional)

16,000.00

TOTAL This Period (last page this line number only)

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE 07  
2 7  
FOR LINE NUMBER  
11 (c)

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)**

Friends of Jon Porter Committee

|                                                                                                                                                                                                                                                                                                                      |                                                                                             |                                                              |                                                       |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------|--------------------------------------------------------------|-------------------------------------------------------|
| <b>A. Full Name, Mailing Address and Zip Code</b><br>Congressional Majority Committee<br>3 W. Lenox Street<br>Chevy Chase, MD 20815-<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)                                        | <b>Name of Employer</b><br><br><b>Occupation</b><br><br><b>Aggregate Year-to-Date -&gt;</b> | <b>Date (month, day, year)</b><br>03/24/2000<br><br>2,000.00 | <b>Amount of Each Receipt this Period</b><br>2,000.00 |
| <b>B. Full Name, Mailing Address and Zip Code</b><br>Fireman's Fund Insurance Company<br>Employees Committee For Responsible Government (Fundpac)<br>Will Valley, CA 94541-<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | <b>Name of Employer</b><br><br><b>Occupation</b><br><br><b>Aggregate Year-to-Date -&gt;</b> | <b>Date (month, day, year)</b><br>03/28/2000<br><br>500.00   | <b>Amount of Each Receipt this Period</b><br>500.00   |
| <b>C. Full Name, Mailing Address and Zip Code</b><br>Fund for a Responsible Future<br>A Multi Candidate Committee<br>P.O. Box 529<br>Washington, DC 20044-0529<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)              | <b>Name of Employer</b><br><br><b>Occupation</b><br><br><b>Aggregate Year-to-Date -&gt;</b> | <b>Date (month, day, year)</b><br>03/10/2000<br><br>1,000.00 | <b>Amount of Each Receipt this Period</b><br>1,000.00 |
| <b>D. Full Name, Mailing Address and Zip Code</b><br>Goodyear Good Government Fund<br>1144 E. Market St<br>Akron, OH 44316-0001<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)                                             | <b>Name of Employer</b><br><br><b>Occupation</b><br><br><b>Aggregate Year-to-Date -&gt;</b> | <b>Date (month, day, year)</b><br>03/31/2000<br><br>1,000.00 | <b>Amount of Each Receipt this Period</b><br>1,000.00 |
| <b>E. Full Name, Mailing Address and Zip Code</b><br>Coosier PAC<br>P.O. Box 77089<br>Washington, DC 20013-<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)                                                                 | <b>Name of Employer</b><br><br><b>Occupation</b><br><br><b>Aggregate Year-to-Date -&gt;</b> | <b>Date (month, day, year)</b><br>03/24/2000<br><br>1,000.00 | <b>Amount of Each Receipt this Period</b><br>1,000.00 |
| <b>F. Full Name, Mailing Address and Zip Code</b><br>KPMG PAC<br>P.O. Box 13254<br>Washington, DC 20036-9998<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)                                                                | <b>Name of Employer</b><br><br><b>Occupation</b><br><br><b>Aggregate Year-to-Date -&gt;</b> | <b>Date (month, day, year)</b><br>03/24/2000<br><br>1,000.00 | <b>Amount of Each Receipt this Period</b><br>1,000.00 |
| <b>G. Full Name, Mailing Address and Zip Code</b><br>Keep Our Majority PAC<br>P.O. Box 18277<br>Washington, DC 20036-8277<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)                                                   | <b>Name of Employer</b><br><br><b>Occupation</b><br><br><b>Aggregate Year-to-Date -&gt;</b> | <b>Date (month, day, year)</b><br>01/14/2000<br><br>5,000.00 | <b>Amount of Each Receipt this Period</b><br>5,000.00 |

**SUBTOTAL** of Receipts This Page (optional)

11,500.00

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

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE 3 OF 7  
FOR LINE NUMBER  
11 (c)

Any information copied from these 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 individual, committee to solicit contributions from such committee.

**NAME OF COMMITTEE (In Full)**  
Friends of Jon Porter Committee

|                                                                                                                                                                                                                                                                                  |                                                                                             |                                                              |                                                       |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------|--------------------------------------------------------------|-------------------------------------------------------|
| <b>A. Full Name, Mailing Address and Zip Code</b><br>Key-PAC<br>3540 W. Sahara Ave., Suite 185<br>Las Vegas, NV 89102-<br>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify)                  | <b>Name of Employer</b><br><br><b>Occupation</b><br><br><b>Aggregate Year-to-Date -&gt;</b> | <b>Date (month, day, year)</b><br>03/31/2000<br><br>2,000.00 | <b>Amount of Each Receipt this Period</b><br>2,000.00 |
| <b>B. Full Name, Mailing Address and Zip Code</b><br>Key-PAC<br>3540 W. Sahara Ave., Suite 185<br>Las Vegas, NV 89102-<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)                  | <b>Name of Employer</b><br><br><b>Occupation</b><br><br><b>Aggregate Year-to-Date -&gt;</b> | <b>Date (month, day, year)</b><br>03/31/2000<br><br>6,000.00 | <b>Amount of Each Receipt this Period</b><br>4,000.00 |
| <b>C. Full Name, Mailing Address and Zip Code</b><br>Leadership PAC 2000<br>515 King Street, Ste. 420<br>Alexandria, VA 22314-<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)          | <b>Name of Employer</b><br><br><b>Occupation</b><br><br><b>Aggregate Year-to-Date -&gt;</b> | <b>Date (month, day, year)</b><br>03/24/2000<br><br>1,000.00 | <b>Amount of Each Receipt this Period</b><br>1,000.00 |
| <b>D. Full Name, Mailing Address and Zip Code</b><br>Lionel Sawyer & Collins PAC<br>300 S. 4th Street Ste. 1700<br>Las Vegas, NV 89101-<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | <b>Name of Employer</b><br><br><b>Occupation</b><br><br><b>Aggregate Year-to-Date -&gt;</b> | <b>Date (month, day, year)</b><br>03/20/2000<br><br>500.00   | <b>Amount of Each Receipt this Period</b><br>500.00   |
| <b>E. Full Name, Mailing Address and Zip Code</b><br>MGM Grand, Inc. Pac<br>777 S. Figueroa St<br>Suite 3700<br>Los Angeles, CA 90017-<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)  | <b>Name of Employer</b><br><br><b>Occupation</b><br><br><b>Aggregate Year-to-Date -&gt;</b> | <b>Date (month, day, year)</b><br>03/22/2000<br><br>1,000.00 | <b>Amount of Each Receipt this Period</b><br>1,000.00 |
| <b>F. Full Name, Mailing Address and Zip Code</b><br>Majority Leaders Fund<br>P.O. Box 995<br>Louisville, TN 37067-<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)                     | <b>Name of Employer</b><br><br><b>Occupation</b><br><br><b>Aggregate Year-to-Date -&gt;</b> | <b>Date (month, day, year)</b><br>03/24/2000<br><br>5,000.00 | <b>Amount of Each Receipt this Period</b><br>5,000.00 |
| <b>G. Full Name, Mailing Address and Zip Code</b><br>Midnight Sun PAC<br>203 Maryland Ave., N.E.<br>Washington, DC 20002-<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)               | <b>Name of Employer</b><br><br><b>Occupation</b><br><br><b>Aggregate Year-to-Date -&gt;</b> | <b>Date (month, day, year)</b><br>03/24/2000<br><br>1,000.00 | <b>Amount of Each Receipt this Period</b><br>1,000.00 |

**SUBTOTAL** of Receipts This Page (optional)

14,500.00

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

## SCHEDULE A

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary PagePAGE OF  
4 7  
FOR LINE NUMBER  
11101

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

## NAME OF COMMITTEE (In Full)

Friends of Jon Porter Committee

|                                                                                                                                                                                                                                                                                                      |                                                                                             |                                                                                         |                                                                                                  |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------|
| <b>A. Full Name, Mailing Address and Zip Code</b><br>NPA Political Victory Fund<br>11250 Waples Mill Road<br>Fairfax, VA 22030-7400<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)                         | <b>Name of Employer</b><br><br><b>Occupation</b><br><br><b>Aggregate Year-to-Date -&gt;</b> | <b>Date (month, day, year)</b><br>03/10/2000<br><br><b>Aggregate Year-to-Date -&gt;</b> | <b>Amount of Each Receipt this Period</b><br>2,500.00<br><br><b>Aggregate Year-to-Date -&gt;</b> |
| <b>B. Full Name, Mailing Address and Zip Code</b><br>National Venture Capital Assn PAC<br>1655 North Fort Myer Dr Suite 850<br>Arlington, VA 22209-<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)         | <b>Name of Employer</b><br><br><b>Occupation</b><br><br><b>Aggregate Year-to-Date -&gt;</b> | <b>Date (month, day, year)</b><br>03/24/2000<br><br><b>Aggregate Year-to-Date -&gt;</b> | <b>Amount of Each Receipt this Period</b><br>2,000.00<br><br><b>Aggregate Year-to-Date -&gt;</b> |
| <b>C. Full Name, Mailing Address and Zip Code</b><br>National Association of Convenience Stores (NACS PAC)<br>1605 King Street<br>Alexandria, VA 22314-2792<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | <b>Name of Employer</b><br><br><b>Occupation</b><br><br><b>Aggregate Year-to-Date -&gt;</b> | <b>Date (month, day, year)</b><br>03/24/2000<br><br><b>Aggregate Year-to-Date -&gt;</b> | <b>Amount of Each Receipt this Period</b><br>2,500.00<br><br><b>Aggregate Year-to-Date -&gt;</b> |
| <b>D. Full Name, Mailing Address and Zip Code</b><br>National Association of Convenience Stores (NACS PAC)<br>1605 King Street<br>Alexandria, VA 22314-2792<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | <b>Name of Employer</b><br><br><b>Occupation</b><br><br><b>Aggregate Year-to-Date -&gt;</b> | <b>Date (month, day, year)</b><br>03/31/2000<br><br><b>Aggregate Year-to-Date -&gt;</b> | <b>Amount of Each Receipt this Period</b><br>1,000.00<br><br><b>Aggregate Year-to-Date -&gt;</b> |
| <b>E. Full Name, Mailing Address and Zip Code</b><br>National Cattlemen's Beef Association PAC<br>5420 S. Quebec St.<br>Englewood, CO 80155-<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)                | <b>Name of Employer</b><br><br><b>Occupation</b><br><br><b>Aggregate Year-to-Date -&gt;</b> | <b>Date (month, day, year)</b><br>03/31/2000<br><br><b>Aggregate Year-to-Date -&gt;</b> | <b>Amount of Each Receipt this Period</b><br>1,000.00<br><br><b>Aggregate Year-to-Date -&gt;</b> |
| <b>F. Full Name, Mailing Address and Zip Code</b><br>National Restaurant Association PAC<br>1200 Seventeenth Street NW<br>Washington, DC 20036-3097<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)         | <b>Name of Employer</b><br><br><b>Occupation</b><br><br><b>Aggregate Year-to-Date -&gt;</b> | <b>Date (month, day, year)</b><br>03/31/2000<br><br><b>Aggregate Year-to-Date -&gt;</b> | <b>Amount of Each Receipt this Period</b><br>1,000.00<br><br><b>Aggregate Year-to-Date -&gt;</b> |
| <b>G. Full Name, Mailing Address and Zip Code</b><br>New American Century PAC<br>1155 21st St., N.W. Suite 300<br>Washington, DC 20036-<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)                     | <b>Name of Employer</b><br><br><b>Occupation</b><br><br><b>Aggregate Year-to-Date -&gt;</b> | <b>Date (month, day, year)</b><br>03/24/2000<br><br><b>Aggregate Year-to-Date -&gt;</b> | <b>Amount of Each Receipt this Period</b><br>1,000.00<br><br><b>Aggregate Year-to-Date -&gt;</b> |

SUBTOTAL of Receipts This Page (optional)

11,000.00

TOTAL This Period (Last page this line number only)



**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE 5 OF 7  
FOR LINE NUMBER 11(c)

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)**  
Friends of Jon Porter Committee

|                                                                                                                                                                                                                                                                                                 |                                                                                             |                                                              |                                                       |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------|--------------------------------------------------------------|-------------------------------------------------------|
| <b>A. Full Name, Mailing Address and Zip Code</b><br>Pin Pac<br>400 N. Washington Street<br>Alexandria, VA 22314-<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)                                      | <b>Name of Employer</b><br><br><b>Occupation</b><br><br><b>Aggregate Year-to-Date -&gt;</b> | <b>Date (month, day, year)</b><br>02/18/2000<br><br>1,000.00 | <b>Amount of Each Receipt this Period</b><br>1,000.00 |
| <b>B. Full Name, Mailing Address and Zip Code</b><br>Reform PAC<br>P.O. Box 15283<br>Washington, DC 20003-<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)                                             | <b>Name of Employer</b><br><br><b>Occupation</b><br><br><b>Aggregate Year-to-Date -&gt;</b> | <b>Date (month, day, year)</b><br>03/24/2000<br><br>500.00   | <b>Amount of Each Receipt this Period</b><br>500.00   |
| <b>C. Full Name, Mailing Address and Zip Code</b><br>Rely On Your Beliefs Fund<br>P.O. Box 5412<br>Arlington, VA 22205-<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)                                | <b>Name of Employer</b><br><br><b>Occupation</b><br><br><b>Aggregate Year-to-Date -&gt;</b> | <b>Date (month, day, year)</b><br>03/24/2000<br><br>1,000.00 | <b>Amount of Each Receipt this Period</b><br>1,000.00 |
| <b>D. Full Name, Mailing Address and Zip Code</b><br>Republicans For A Republican Majority<br>1155-21st Street N.W. Suite 300<br>Washington, DC 20036-<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | <b>Name of Employer</b><br><br><b>Occupation</b><br><br><b>Aggregate Year-to-Date -&gt;</b> | <b>Date (month, day, year)</b><br>03/24/2000<br><br>3,000.00 | <b>Amount of Each Receipt this Period</b><br>1,000.00 |
| <b>E. Full Name, Mailing Address and Zip Code</b><br>Republicans On The Go<br>3209 Grey Dolphin Dr<br>Las Vegas, NV 89117-<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)                             | <b>Name of Employer</b><br><br><b>Occupation</b><br><br><b>Aggregate Year-to-Date -&gt;</b> | <b>Date (month, day, year)</b><br>03/20/2000<br><br>1,000.00 | <b>Amount of Each Receipt this Period</b><br>1,000.00 |
| <b>F. Full Name, Mailing Address and Zip Code</b><br>Rough Rider PAC<br>P.O. Box 50282<br>Washington, DC 20091-<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)                                        | <b>Name of Employer</b><br><br><b>Occupation</b><br><br><b>Aggregate Year-to-Date -&gt;</b> | <b>Date (month, day, year)</b><br>03/31/2000<br><br>1,000.00 | <b>Amount of Each Receipt this Period</b><br>1,000.00 |
| <b>G. Full Name, Mailing Address and Zip Code</b><br>Safari Club International PAC<br>P.O. Box 159<br>Wapato, WA 98951-<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)                                | <b>Name of Employer</b><br><br><b>Occupation</b><br><br><b>Aggregate Year-to-Date -&gt;</b> | <b>Date (month, day, year)</b><br>03/31/2000<br><br>1,000.00 | <b>Amount of Each Receipt this Period</b><br>1,000.00 |

**SUBTOTAL** of Receipts This Page (optional)

8,500.00

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

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE 6 OF 7  
FOR LINE NUMBER 11(c)

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 any other purpose, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
Friends of Jon Porter Committee

|                                                                                                                                                                                                                                                                                                   |                                                                                   |                                                                 |                                                        |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------|-----------------------------------------------------------------|--------------------------------------------------------|
| <p>A. Full Name, Mailing Address and Zip Code<br/>SafePAC<br/>5918 Stoneridge Mall Road<br/>Pleasanton, CA 94588-3229</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br/><input type="checkbox"/> Other (specify)</p>                           | <p>Name of Employer<br/><br/>Occupation<br/><br/>Aggregate Year-to-Date -&gt;</p> | <p>Date (month, day, year)<br/>01/25/2000<br/><br/>2,000.00</p> | <p>Amount of Each Receipt this Period<br/>2,000.00</p> |
| <p>B. Full Name, Mailing Address and Zip Code<br/>Sierra Health Services PAC<br/>P.O. Box 15645<br/>Las Vegas, NV 89110-5645</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br/><input type="checkbox"/> Other (specify)</p>                    | <p>Name of Employer<br/><br/>Occupation<br/><br/>Aggregate Year-to-Date -&gt;</p> | <p>Date (month, day, year)<br/>03/30/2000<br/><br/>3,000.00</p> | <p>Amount of Each Receipt this Period<br/>3,000.00</p> |
| <p>C. Full Name, Mailing Address and Zip Code<br/>Sierra Pacific Employees PAC<br/>P.O. Box 7724<br/>Reno, NV 89510-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br/><input type="checkbox"/> Other (specify)</p>                            | <p>Name of Employer<br/><br/>Occupation<br/><br/>Aggregate Year-to-Date -&gt;</p> | <p>Date (month, day, year)<br/>03/27/2000<br/><br/>1,000.00</p> | <p>Amount of Each Receipt this Period<br/>1,000.00</p> |
| <p>D. Full Name, Mailing Address and Zip Code<br/>Station Casinos Inc. PAC<br/>ID #000263731<br/>2411 W. Sahara Avenue<br/>Las Vegas, NV 89102-</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br/><input type="checkbox"/> Other (specify)</p> | <p>Name of Employer<br/><br/>Occupation<br/><br/>Aggregate Year-to-Date -&gt;</p> | <p>Date (month, day, year)<br/>03/22/2000<br/><br/>2,000.00</p> | <p>Amount of Each Receipt this Period<br/>2,000.00</p> |
| <p>E. Full Name, Mailing Address and Zip Code<br/>Station Casinos Inc. PAC<br/>ID #000263731<br/>2411 W. Sahara Avenue<br/>Las Vegas, NV 89102-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br/><input type="checkbox"/> Other (specify)</p> | <p>Name of Employer<br/><br/>Occupation<br/><br/>Aggregate Year-to-Date -&gt;</p> | <p>Date (month, day, year)<br/>03/22/2000<br/><br/>5,000.00</p> | <p>Amount of Each Receipt this Period<br/>3,000.00</p> |
| <p>F. Full Name, Mailing Address and Zip Code<br/>Sunbelt Good Government Committee<br/>Box B<br/>Jacksonville, FL 32203-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br/><input type="checkbox"/> Other (specify)</p>                       | <p>Name of Employer<br/><br/>Occupation<br/><br/>Aggregate Year-to-Date -&gt;</p> | <p>Date (month, day, year)<br/>03/24/2000<br/><br/>2,000.00</p> | <p>Amount of Each Receipt this Period<br/>2,000.00</p> |
| <p>G. Full Name, Mailing Address and Zip Code<br/>D.E.A.M. Pac<br/>P.O. Box 14163<br/>Scottsdale, AZ 85267-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br/><input type="checkbox"/> Other (specify)</p>                                     | <p>Name of Employer<br/><br/>Occupation<br/><br/>Aggregate Year-to-Date -&gt;</p> | <p>Date (month, day, year)<br/>03/24/2000<br/><br/>1,000.00</p> | <p>Amount of Each Receipt this Period<br/>1,000.00</p> |

SUBTOTAL of Receipts This Page (optional)

14,000.00

TOTAL This Period (last page this line number only)

## SCHEDULE A

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of line  
itemized Summary PagePAGE 7 OF 7  
FOR LINE NUMBER  
11(c)

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

## NAME OF COMMITTEE (In Full)

Friends of Jon Porter Committee

|                                                                                                                                                                                                                                                                                              |                                                                                             |                                                              |                                                       |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------|--------------------------------------------------------------|-------------------------------------------------------|
| <b>A. Full Name, Mailing Address and Zip Code</b><br>The Committee For The Preservation<br>Of Capitalism<br>P.O. Box 22614<br>Alexandria, VA 22304-<br>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | <b>Name of Employer</b><br><br><b>Occupation</b><br><br><b>Aggregate Year-to-Date -&gt;</b> | <b>Date (month, day, year)</b><br>03/24/2003<br><br>1,000.00 | <b>Amount of Each Receipt this Period</b><br>1,000.00 |
| <b>B. Full Name, Mailing Address and Zip Code</b><br>The Committee For The Preservation<br>Of Capitalism<br>P.O. Box 22614<br>Alexandria, VA 22304-<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | <b>Name of Employer</b><br><br><b>Occupation</b><br><br><b>Aggregate Year-to-Date -&gt;</b> | <b>Date (month, day, year)</b><br>03/24/2000<br><br>1,000.00 | <b>Amount of Each Receipt this Period</b><br>1,000.00 |
| <b>C. Full Name, Mailing Address and Zip Code</b><br>The Freedom Project<br>111 G. Street, SE<br>Washington, DC 20003-<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)                              | <b>Name of Employer</b><br><br><b>Occupation</b><br><br><b>Aggregate Year-to-Date -&gt;</b> | <b>Date (month, day, year)</b><br>03/31/2000<br><br>5,000.00 | <b>Amount of Each Receipt this Period</b><br>5,000.00 |
| <b>D. Full Name, Mailing Address and Zip Code</b><br>Tupperware Corporation PAC<br>14901 S. Orange Blossom Trail<br>Orlando, FL 32837-<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)              | <b>Name of Employer</b><br><br><b>Occupation</b><br><br><b>Aggregate Year-to-Date -&gt;</b> | <b>Date (month, day, year)</b><br>02/02/2000<br><br>1,000.00 | <b>Amount of Each Receipt this Period</b><br>1,000.00 |
| <b>E. Full Name, Mailing Address and Zip Code</b><br><br><br>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)                                                                                                      | <b>Name of Employer</b><br><br><b>Occupation</b><br><br><b>Aggregate Year-to-Date -&gt;</b> | <b>Date (month, day, year)</b><br>/ /<br><br>/ /             | <b>Amount of Each Receipt this Period</b><br>/ /      |
| <b>F. Full Name, Mailing Address and Zip Code</b><br><br><br>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)                                                                                                      | <b>Name of Employer</b><br><br><b>Occupation</b><br><br><b>Aggregate Year-to-Date -&gt;</b> | <b>Date (month, day, year)</b><br>/ /<br><br>/ /             | <b>Amount of Each Receipt this Period</b><br>/ /      |
| <b>G. Full Name, Mailing Address and Zip Code</b><br><br><br>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)                                                                                                      | <b>Name of Employer</b><br><br><b>Occupation</b><br><br><b>Aggregate Year-to-Date -&gt;</b> | <b>Date (month, day, year)</b><br>/ /<br><br>/ /             | <b>Amount of Each Receipt this Period</b><br>/ /      |

SUBTOTAL of Receipts This Page (optional)

0,000.00

TOTAL This Period (last page this line number only)

83,500.00

## SCHEDULE A

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary PagePAGE 1 OF 2  
FOR LINE NUMBER  
13a

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)

Friends of Jon Porter Committee

|                                                                                                                                                                                                                                                          |                                                                                                                       |                                                                                     |                                                        |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------|--------------------------------------------------------|
| <b>A. Full Name, Mailing Address and Zip Code</b><br>Jon C. Porter<br>1786 Lilypond Cir<br>Henderson, NV 89012-<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | <b>Name of Employer</b><br>Jon C. Porter Insurance<br><b>Occupation</b><br>CEO<br><b>Aggregate Year-to-Date -&gt;</b> | <b>Date (month, day, year)</b><br>03/31/2000<br><b>Aggregate Year-to-Date -&gt;</b> | <b>Amount of Each Receipt this Period</b><br>17,301.17 |
| <b>B. Full Name, Mailing Address and Zip Code</b><br><br>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)                                                                      | <b>Name of Employer</b><br><br><b>Occupation</b><br><br><b>Aggregate Year-to-Date -&gt;</b>                           | <b>Date (month, day, year)</b><br>/ /                                               | <b>Amount of Each Receipt this Period</b>              |
| <b>C. Full Name, Mailing Address and Zip Code</b><br><br>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)                                                                      | <b>Name of Employer</b><br><br><b>Occupation</b><br><br><b>Aggregate Year-to-Date -&gt;</b>                           | <b>Date (month, day, year)</b><br>/ /                                               | <b>Amount of Each Receipt this Period</b>              |
| <b>D. Full Name, Mailing Address and Zip Code</b><br><br>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)                                                                      | <b>Name of Employer</b><br><br><b>Occupation</b><br><br><b>Aggregate Year-to-Date -&gt;</b>                           | <b>Date (month, day, year)</b><br>/ /                                               | <b>Amount of Each Receipt this Period</b>              |
| <b>E. Full Name, Mailing Address and Zip Code</b><br><br>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)                                                                      | <b>Name of Employer</b><br><br><b>Occupation</b><br><br><b>Aggregate Year-to-Date -&gt;</b>                           | <b>Date (month, day, year)</b><br>/ /                                               | <b>Amount of Each Receipt this Period</b>              |
| <b>F. Full Name, Mailing Address and Zip Code</b><br><br>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)                                                                      | <b>Name of Employer</b><br><br><b>Occupation</b><br><br><b>Aggregate Year-to-Date -&gt;</b>                           | <b>Date (month, day, year)</b><br>/ /                                               | <b>Amount of Each Receipt this Period</b>              |
| <b>G. Full Name, Mailing Address and Zip Code</b><br><br>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)                                                                      | <b>Name of Employer</b><br><br><b>Occupation</b><br><br><b>Aggregate Year-to-Date -&gt;</b>                           | <b>Date (month, day, year)</b><br>/ /                                               | <b>Amount of Each Receipt this Period</b>              |

SUBTOTAL of Receipts This Page (optional)

17,301.17

TOTAL This Period (last page this line number only)

17,301.17

**SCHEDULE A**

**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the detailed summary page

PAGE 1 OF 1  
FOR LINE NUMBER 15

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 financial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

**NAME OF COMMITTEE (In Full)**  
Friends of Jon Porter Committee

|                                                                                                                                                                                                                                                              |                                                                                                            |                                                            |                                                         |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------|------------------------------------------------------------|---------------------------------------------------------|
| <b>A. Full Name, Mailing Address and Zip Code</b><br>Nevada State Bank<br>P.O. Box 990<br>Las Vegas, NV 89125-0990<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)  | <b>Name of Employer</b><br><br><b>Occupation</b><br><br><b>Aggregate Year-to-Date -&gt;</b>                | <b>Date (month, day, year)</b><br>03/31/2000<br><br>267.47 | <b>Amount of Each Receipt this Period</b><br><br>267.47 |
| <b>B. Full Name, Mailing Address and Zip Code</b><br>Valley Bank<br>370 N. Stephanie Street<br>Henderson, NV 89014-<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | <b>Name of Employer</b><br>INTEREST EARNED<br><b>Occupation</b><br><br><b>Aggregate Year-to-Date -&gt;</b> | <b>Date (month, day, year)</b><br>01/31/2000<br><br>461.92 | <b>Amount of Each Receipt this Period</b><br><br>461.92 |
| <b>C. Full Name, Mailing Address and Zip Code</b><br>Valley Bank<br>370 N. Stephanie Street<br>Henderson, NV 89014-<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | <b>Name of Employer</b><br>INTEREST EARNED<br><b>Occupation</b><br><br><b>Aggregate Year-to-Date -&gt;</b> | <b>Date (month, day, year)</b><br>02/28/2000<br><br>581.31 | <b>Amount of Each Receipt this Period</b><br><br>119.13 |
| <b>D. Full Name, Mailing Address and Zip Code</b><br>Valley Bank<br>370 N. Stephanie Street<br>Henderson, NV 89014-<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | <b>Name of Employer</b><br>INTEREST EARNED<br><b>Occupation</b><br><br><b>Aggregate Year-to-Date -&gt;</b> | <b>Date (month, day, year)</b><br>03/30/2000<br><br>672.88 | <b>Amount of Each Receipt this Period</b><br><br>91.57  |
| <b>E. Full Name, Mailing Address and Zip Code</b><br><br><br>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)                                                                      | <b>Name of Employer</b><br><br><b>Occupation</b><br><br><b>Aggregate Year-to-Date -&gt;</b>                | <b>Date (month, day, year)</b><br>/ /                      | <b>Amount of Each Receipt this Period</b><br><br>       |
| <b>F. Full Name, Mailing Address and Zip Code</b><br><br><br>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)                                                                      | <b>Name of Employer</b><br><br><b>Occupation</b><br><br><b>Aggregate Year-to-Date -&gt;</b>                | <b>Date (month, day, year)</b><br>/ /                      | <b>Amount of Each Receipt this Period</b><br><br>       |
| <b>G. Full Name, Mailing Address and Zip Code</b><br><br><br>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)                                                                      | <b>Name of Employer</b><br><br><b>Occupation</b><br><br><b>Aggregate Year-to-Date -&gt;</b>                | <b>Date (month, day, year)</b><br>/ /                      | <b>Amount of Each Receipt this Period</b><br><br>       |

**SUBTOTAL** of Receipts This Page (optional)

940.35

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

940.35

**SCHEDULE B**
**ITEMIZED DISBURSEMENTS**

Use separate schedules for each category of the detailed summary page

 PAGE 5 OF 23  
 FOR LINE NUMBER 17

Any information obtained 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)**

Friends of Jon Porter Committee

|                                                                                                                            |                                                                                                                                                                                  |                                              |                                                            |
|----------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------|------------------------------------------------------------|
| <b>Full Name, Mailing Address and Zip Code</b><br>Joe Demma<br>1786 Lily Pond Circle<br>Henderson, NV 89012-               | <b>Purpose of Disbursement</b><br>Payroll<br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):    | <b>Date (month, day, year)</b><br>03/03/2000 | <b>Amount of Each Disbursement This Period</b><br>456.99   |
| <b>Full Name, Mailing Address and Zip Code</b><br>Joe Demma<br>1786 Lily Pond Circle<br>Henderson, NV 89012-               | <b>Purpose of Disbursement</b><br>Payroll<br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):    | <b>Date (month, day, year)</b><br>02/19/2000 | <b>Amount of Each Disbursement This Period</b><br>456.99   |
| <b>Full Name, Mailing Address and Zip Code</b><br>Joe Demma<br>1786 Lily Pond Circle<br>Henderson, NV 89012-               | <b>Purpose of Disbursement</b><br>Payroll<br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):    | <b>Date (month, day, year)</b><br>03/31/2000 | <b>Amount of Each Disbursement This Period</b><br>456.99   |
| <b>Full Name, Mailing Address and Zip Code</b><br>Joe Demma<br>1786 Lily Pond Circle<br>Henderson, NV 89012-               | <b>Purpose of Disbursement</b><br>Payroll<br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):    | <b>Date (month, day, year)</b><br>01/21/2000 | <b>Amount of Each Disbursement This Period</b><br>425.83   |
| <b>Full Name, Mailing Address and Zip Code</b><br>Joe Demma<br>1786 Lily Pond Circle<br>Henderson, NV 89012-               | <b>Purpose of Disbursement</b><br>Payroll<br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):    | <b>Date (month, day, year)</b><br>03/17/2000 | <b>Amount of Each Disbursement This Period</b><br>456.99   |
| <b>Full Name, Mailing Address and Zip Code</b><br>Desert Willow Golf<br>2025 W. Horizon Ridge Pkwy<br>Henderson, NV 89012- | <b>Purpose of Disbursement</b><br>Fundraiser<br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Date (month, day, year)</b><br>03/20/2000 | <b>Amount of Each Disbursement This Period</b><br>1,003.00 |
| <b>Full Name, Mailing Address and Zip Code</b><br>Encore Productions<br>3570 S. Las Vegas Blvd<br>Las Vegas, NV 89109-     | <b>Purpose of Disbursement</b><br>Fundraiser<br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Date (month, day, year)</b><br>03/08/2000 | <b>Amount of Each Disbursement This Period</b><br>857.83   |

**SUBTOTAL** of Disbursements This Page (optional)

4,111.84

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

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

Use separate schedules for each category of the Detailed Summary Page

PAGE 6 OF 23  
FOR LINE NUMBER 17

Any information reported 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)**

Friends of Jon Porter Committee

|                                                                                                                                 |                                                                                                                                                                                                |                                       |                                                     |
|---------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------|-----------------------------------------------------|
| Full Name, Mailing Address and Zip Code<br>Fisher Space Pen Co.<br><br>711 Yucca Street<br><br>Boulder City, NV 89005-1935      | Purpose of Disbursement<br>Novelties-pens<br><br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):              | Date (month, day, year)<br>03/20/2000 | Amount of Each Disbursement This Period<br>267.50   |
| Full Name, Mailing Address and Zip Code<br>Fox Graphic<br><br>5605 Kossman Ave<br><br>Las Vegas, NV 89108-                      | Purpose of Disbursement<br>Printing (label stickers)<br><br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):   | Date (month, day, year)<br>03/29/2000 | Amount of Each Disbursement This Period<br>450.00   |
| Full Name, Mailing Address and Zip Code<br>Greenspun Media<br><br>2290 Corporate Circle Dr<br>Suite 250<br>Henderson, NV 89014- | Purpose of Disbursement<br>Subscription-Ralston Report<br><br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | Date (month, day, year)<br>01/21/2000 | Amount of Each Disbursement This Period<br>500.00   |
| Full Name, Mailing Address and Zip Code<br>Josh Griffin<br><br>322 Lingering Lane<br><br>Henderson, NV 89012-                   | Purpose of Disbursement<br>Airline tickets<br><br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):             | Date (month, day, year)<br>02/01/2000 | Amount of Each Disbursement This Period<br>1,063.25 |
| Full Name, Mailing Address and Zip Code<br>Josh Griffin<br><br>322 Lingering Lane<br><br>Henderson, NV 89012-                   | Purpose of Disbursement<br>Consultant<br><br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                  | Date (month, day, year)<br>03/07/2000 | Amount of Each Disbursement This Period<br>8,000.00 |
| Full Name, Mailing Address and Zip Code<br>Josh Griffin<br><br>322 Lingering Lane<br><br>Henderson, NV 89012-                   | Purpose of Disbursement<br>Sierra Moving Systems<br><br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):       | Date (month, day, year)<br>02/01/2000 | Amount of Each Disbursement This Period<br>4,000.00 |
| Full Name, Mailing Address and Zip Code<br>Josh Griffin<br><br>322 Lingering Lane<br><br>Henderson, NV 89012-                   | Purpose of Disbursement<br>Consulting fees<br><br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):             | Date (month, day, year)<br>02/03/2000 | Amount of Each Disbursement This Period<br>8,000.00 |

**SUBTOTAL** of Disbursements This Page (optional)

22,280.75

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

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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

PAGE 7 OF 23  
FOR LINE NUMBER 17

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 sources.

**NAME OF COMMITTEE (In Full)**

Friends of Jon Porter Committee

|                                                                                                        |                                                                                                                                                                                      |                                       |                                                     |
|--------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------|-----------------------------------------------------|
| Full Name, Mailing Address and Zip Code<br>Josh Griffin<br>322 Lingerling Lane<br>Henderson, NV 89012- | Purpose of Disbursement<br>Office - copies<br><br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):   | Date (month, day, year)<br>03/03/2003 | Amount of Each Disbursement This Period<br>161.41   |
| Full Name, Mailing Address and Zip Code<br>Josh Griffin<br>322 Lingerling Lane<br>Henderson, NV 89012- | Purpose of Disbursement<br>Airlines<br><br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):          | Date (month, day, year)<br>02/18/2000 | Amount of Each Disbursement This Period<br>1,195.90 |
| Full Name, Mailing Address and Zip Code<br>Josh Griffin<br>322 Lingerling Lane<br>Henderson, NV 89012- | Purpose of Disbursement<br>Hotel<br><br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):             | Date (month, day, year)<br>02/01/2000 | Amount of Each Disbursement This Period<br>118.81   |
| Full Name, Mailing Address and Zip Code<br>Josh Griffin<br>322 Lingerling Lane<br>Henderson, NV 89012- | Purpose of Disbursement<br>Travel - cab fare<br><br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | Date (month, day, year)<br>02/18/2000 | Amount of Each Disbursement This Period<br>217.00   |
| Full Name, Mailing Address and Zip Code<br>Josh Griffin<br>322 Lingerling Lane<br>Henderson, NV 89012- | Purpose of Disbursement<br>Travel meals<br><br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):      | Date (month, day, year)<br>02/18/2000 | Amount of Each Disbursement This Period<br>54.88    |
| Full Name, Mailing Address and Zip Code<br>Josh Griffin<br>322 Lingerling Lane<br>Henderson, NV 89012- | Purpose of Disbursement<br>Hotels<br><br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):            | Date (month, day, year)<br>02/18/2000 | Amount of Each Disbursement This Period<br>366.00   |
| Full Name, Mailing Address and Zip Code<br>Josh Griffin<br>322 Lingerling Lane<br>Henderson, NV 89012- | Purpose of Disbursement<br>Office supplies<br><br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):   | Date (month, day, year)<br>02/18/2000 | Amount of Each Disbursement This Period<br>359.39   |

**SUBTOTAL** of Disbursements This Page (optional)

2,473.39

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



## SCHEDULE B

## ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary PagePAGE 8 OF 23  
FOR LINE NUMBER 17

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 other candidates.

## NAME OF COMMITTEE (In Full)

Friends of Jon Porter Committee

|                                                                                                               |                                                                                                                                                                                    |                                       |                                                                    |
|---------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------|--------------------------------------------------------------------|
| Full Name, Mailing Address and Zip Code<br>Tara Griffin<br>322 Fingering Lane<br>Henderson, NV 89012-         | Purpose of Disbursement<br>Rental car<br><br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):      | Date (month, day, year)<br>12/01/2000 | Amount of Each Disbursement This Period<br>289.88                  |
| Full Name, Mailing Address and Zip Code<br>Maig's Quality<br>6360 Sunset Corporate Dr<br>Las Vegas, NV 89120- | Purpose of Disbursement<br>Printing<br><br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):        | Date (month, day, year)<br>03/01/2000 | Amount of Each Disbursement This Period<br>2,216.36                |
| Full Name, Mailing Address and Zip Code<br>Nancy J. Hara-Isa<br>367 Caves Way<br>Henderson, NV 89014-         | Purpose of Disbursement<br>Artwork<br><br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):         | Date (month, day, year)<br>03/31/2000 | Amount of Each Disbursement This Period<br>1,000.00<br><br>IN KIND |
| Full Name, Mailing Address and Zip Code<br>Hesselgesser<br>3375-C E. Russel Road<br>Las Vegas, NV 89120-      | Purpose of Disbursement<br>Insurance<br><br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):       | Date (month, day, year)<br>02/20/2000 | Amount of Each Disbursement This Period<br>615.00                  |
| Full Name, Mailing Address and Zip Code<br>Stephanie R. Hughes<br>4358 Hobbs Drive<br>Las Vegas, NV 89120-    | Purpose of Disbursement<br>Office supplies<br><br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | Date (month, day, year)<br>02/28/2000 | Amount of Each Disbursement This Period<br>298.45                  |
| Full Name, Mailing Address and Zip Code<br>Stephanie R. Hughes<br>4358 Hobbs Drive<br>Las Vegas, NV 89120-    | Purpose of Disbursement<br>Telephone<br><br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):       | Date (month, day, year)<br>02/28/2000 | Amount of Each Disbursement This Period<br>597.61                  |
| Full Name, Mailing Address and Zip Code<br>Stephanie R. Hughes<br>4358 Hobbs Drive<br>Las Vegas, NV 89120-    | Purpose of Disbursement<br>Consulting<br><br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):      | Date (month, day, year)<br>03/03/2000 | Amount of Each Disbursement This Period<br>3,000.00                |

SUBTOTAL of Disbursements This Page (optional)

8,017.30

TOTAL This Period (last page this line number only)

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the detailed summary page

PAGE 9 OF 23  
FOR LINE NUMBER 17

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)**

Friends of Jon Porter Committee

|                                                                                                            |                                                                                                                                                                                       |                                       |                                                     |
|------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------|-----------------------------------------------------|
| Full Name, Mailing Address and Zip Code<br>Stephanie R. Hughes<br>4359 Hobbs Drive<br>Las Vegas, NV 89120- | Purpose of Disbursement<br>Fundraiser<br><br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)          | Date (month, day, year)<br>02/22/2000 | Amount of Each Disbursement This Period<br>1,100.25 |
| Full Name, Mailing Address and Zip Code<br>Stephanie R. Hughes<br>4359 Hobbs Drive<br>Las Vegas, NV 89120- | Purpose of Disbursement<br>Consultant expenses<br><br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Date (month, day, year)<br>03/20/2000 | Amount of Each Disbursement This Period<br>244.50   |
| Full Name, Mailing Address and Zip Code<br>Stephanie R. Hughes<br>4359 Hobbs Drive<br>Las Vegas, NV 89120- | Purpose of Disbursement<br>Consulting expenses<br><br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Date (month, day, year)<br>02/16/2000 | Amount of Each Disbursement This Period<br>1,218.58 |
| Full Name, Mailing Address and Zip Code<br>Stephanie R. Hughes<br>4359 Hobbs Drive<br>Las Vegas, NV 89120- | Purpose of Disbursement<br>Consulting<br><br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)          | Date (month, day, year)<br>02/01/2000 | Amount of Each Disbursement This Period<br>3,000.00 |
| Full Name, Mailing Address and Zip Code<br>Stephanie R. Hughes<br>4359 Hobbs Drive<br>Las Vegas, NV 89120  | Purpose of Disbursement<br>Consulting<br><br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)          | Date (month, day, year)<br>01/07/2000 | Amount of Each Disbursement This Period<br>3,000.00 |
| Full Name, Mailing Address and Zip Code<br>L V Tech Com<br>115 S. Water Street<br>Henderson, NV 89015-     | Purpose of Disbursement<br>Consulting<br><br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)          | Date (month, day, year)<br>01/14/2000 | Amount of Each Disbursement This Period<br>1,953.58 |
| Full Name, Mailing Address and Zip Code<br>LV Webs<br>115 S. Water Street<br>Henderson, NV 89015-          | Purpose of Disbursement<br>Website<br><br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)             | Date (month, day, year)<br>03/07/2000 | Amount of Each Disbursement This Period<br>40.39    |

**SUBTOTAL** of Disbursements This Page (optional)

10,557.30

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

## SCHEDULE B

## ITEMIZED DISBURSEMENTS

 Use separate schedules  
for each category of the  
Detailed Summary Page

 PAGE 10 OF 23  
FOR LINE NUMBER 17

Any information supplied from such Reports and Statements may not be sold or given 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)

Friends of Jon Porter Committee

|                                                                                                                                   |                                                                                                                                                                              |                                       |                                                     |
|-----------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------|-----------------------------------------------------|
| Full Name, Mailing Address and Zip Code<br>LV Webs<br>115 S. Water Street<br>Henderson, NV 89015-                                 | Purpose of Disbursement<br>Website<br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):       | Date (month, day, year)<br>02/01/2000 | Amount of Each Disbursement This Period<br>454.08   |
| Full Name, Mailing Address and Zip Code<br>LV Webs<br>115 S. Water Street<br>Henderson, NV 89015-                                 | Purpose of Disbursement<br>Website<br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):       | Date (month, day, year)<br>02/16/2000 | Amount of Each Disbursement This Period<br>1,643.46 |
| Full Name, Mailing Address and Zip Code<br>LV Webs<br>115 S. Water Street<br>Henderson, NV 89015-                                 | Purpose of Disbursement<br>Website<br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):       | Date (month, day, year)<br>03/13/2000 | Amount of Each Disbursement This Period<br>496.64   |
| Full Name, Mailing Address and Zip Code<br>Laser World<br>1517 West Oakey Blvd<br>Las Vegas, NV 89102-                            | Purpose of Disbursement<br>Copier rental<br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | Date (month, day, year)<br>03/03/2000 | Amount of Each Disbursement This Period<br>300.00   |
| Full Name, Mailing Address and Zip Code<br>M C I World Com<br>P.O. Box 4644<br>Iowa City, IA 52244-4644                           | Purpose of Disbursement<br>Telephone<br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):     | Date (month, day, year)<br>03/03/2000 | Amount of Each Disbursement This Period<br>623.42   |
| Full Name, Mailing Address and Zip Code<br>M C I World Com<br>P.O. Box 4644<br>Iowa City, IA 52244-4644                           | Purpose of Disbursement<br>Telephone<br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):     | Date (month, day, year)<br>03/03/2000 | Amount of Each Disbursement This Period<br>5.34     |
| Full Name, Mailing Address and Zip Code<br>Mandalay Bay<br>Attn: Catering Dept.<br>3950 Las Vegas Blvd So<br>Las Vegas, NV 89119- | Purpose of Disbursement<br>Fundraiser<br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):    | Date (month, day, year)<br>02/01/2000 | Amount of Each Disbursement This Period<br>2,793.49 |

SUBTOTAL of Disbursements This Page (optional)

6,313.41

TOTAL This Period (last page this line number only)

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

Use separate schedule for each category of the Detailed Summary Page

PAGE 11 OF 24  
FOR LINE NUMBER 17

Any information copied from such records 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)**

Friends of Jon Porter Committee

|                                                                                                                              |                                                                                                                                                                                    |                                       |                                                     |
|------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------|-----------------------------------------------------|
| Full Name, Mailing Address and Zip Code<br>Nancy Maxwell<br><br>4610 Franconia Road<br><br>Alexandria, VA 22310-             | Purpose of Disbursement<br>Consulting fees<br><br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | Date (month, day, year)<br>01/11/2000 | Amount of Each Disbursement This Period<br>1,300.00 |
| Full Name, Mailing Address and Zip Code<br>Rebecca McClish<br><br>5015 Spyglass Hill Drive #1005<br><br>Las Vegas, NV 89122- | Purpose of Disbursement<br>Payroll<br><br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):         | Date (month, day, year)<br>03/17/2000 | Amount of Each Disbursement This Period<br>463.33   |
| Full Name, Mailing Address and Zip Code<br>Rebecca McClish<br><br>5015 Spyglass Hill Drive #1005<br><br>Las Vegas, NV 89122- | Purpose of Disbursement<br>payroll<br><br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):         | Date (month, day, year)<br>01/21/2000 | Amount of Each Disbursement This Period<br>242.50   |
| Full Name, Mailing Address and Zip Code<br>Rebecca McClish<br><br>5015 Spyglass Hill Drive #1005<br><br>Las Vegas, NV 89122- | Purpose of Disbursement<br>Payroll<br><br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):         | Date (month, day, year)<br>03/31/2000 | Amount of Each Disbursement This Period<br>245.10   |
| Full Name, Mailing Address and Zip Code<br>Rebecca McClish<br><br>5015 Spyglass Hill Drive #1005<br><br>Las Vegas, NV 89122- | Purpose of Disbursement<br>Payroll<br><br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):         | Date (month, day, year)<br>02/04/2000 | Amount of Each Disbursement This Period<br>447.76   |
| Full Name, Mailing Address and Zip Code<br>Rebecca McClish<br><br>5015 Spyglass Hill Drive #1005<br><br>Las Vegas, NV 89122- | Purpose of Disbursement<br>Postage<br><br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):         | Date (month, day, year)<br>02/16/2000 | Amount of Each Disbursement This Period<br>2.90     |
| Full Name, Mailing Address and Zip Code<br>Rebecca McClish<br><br>5015 Spyglass Hill Drive #1005<br><br>Las Vegas, NV 89122- | Purpose of Disbursement<br>Office supplies<br><br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | Date (month, day, year)<br>02/18/2000 | Amount of Each Disbursement This Period<br>35.79    |

**SUBTOTAL** of Disbursements This Page (optional)

2,437.46

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

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

Use separate schedule for each category of the detailed summary page

PAGE 12 OF 23  
FOR LINE NUMBER 17

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)**

Friends of Jon Porter Committee

|                                                                                                                             |                                                                                                                                                                               |                                       |                                                     |
|-----------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------|-----------------------------------------------------|
| Full Name, Mailing Address and Zip Code<br>Rebecca McClish<br>5015 Spyglass Hill Drive #1005<br>Las Vegas, NV 89122-        | Purpose of Disbursement<br>Payroll<br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)         | Date (month, day, year)<br>02/18/2000 | Amount of Each Disbursement This Period<br>463.33   |
| Full Name, Mailing Address and Zip Code<br>Rebecca McClish<br>5015 Spyglass Hill Drive #1005<br>Las Vegas, NV 89122-        | Purpose of Disbursement<br>Payroll<br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)         | Date (month, day, year)<br>03/03/2000 | Amount of Each Disbursement This Period<br>463.33   |
| Full Name, Mailing Address and Zip Code<br>Patrick Mervine<br>2009 Smokefree Village Circle<br>Henderson, NV 89012-         | Purpose of Disbursement<br>Sign (monitor)<br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)  | Date (month, day, year)<br>02/16/2000 | Amount of Each Disbursement This Period<br>1,300.00 |
| Full Name, Mailing Address and Zip Code<br>William L. Meyer<br>Attorney at Law PLLC<br>P.O. Box 99585<br>Seattle, WA 98199- | Purpose of Disbursement<br>Legal<br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)           | Date (month, day, year)<br>02/20/2000 | Amount of Each Disbursement This Period<br>540.00   |
| Full Name, Mailing Address and Zip Code<br>Christine Milburn<br>812 Robinson<br>Boulder City, NV 89005-                     | Purpose of Disbursement<br>Office supplies<br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Date (month, day, year)<br>03/03/2000 | Amount of Each Disbursement This Period<br>245.39   |
| Full Name, Mailing Address and Zip Code<br>Christine Milburn<br>812 Robinson<br>Boulder City, NV 89005-                     | Purpose of Disbursement<br>Payroll<br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)         | Date (month, day, year)<br>01/21/2000 | Amount of Each Disbursement This Period<br>394.23   |
| Full Name, Mailing Address and Zip Code<br>Christine Milburn<br>812 Robinson<br>Boulder City, NV 89005-                     | Purpose of Disbursement<br>Payroll<br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)         | Date (month, day, year)<br>02/04/2000 | Amount of Each Disbursement This Period<br>751.22   |

**SUBTOTAL** of Disbursements This Page (optional)

3,857.50

**TOTAL** This Period (Last page this line number only)

**SCHEDULE B**
**ITEMIZED DISBURSEMENTS**

Itemize schedule (a) for each category of the detailed Summary Page

 PAGE 13 OF 23  
 FOR LINE NUMBER 17

Any information copied from each report and statements may not be 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 each contributor.

**NAME OF COMMITTEE (In Full)**

Friends of Jon Porter Committee

|                                                                                                                |                                                                                                                                                                                       |                                              |                                                            |
|----------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------|------------------------------------------------------------|
| <b>Full Name, Mailing Address and Zip Code</b><br>Christine Milburn<br>812 Robinson<br>Boulder City, NV 89005- | <b>Purpose of Disbursement</b><br>Postage<br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):         | <b>Date (month, day, year)</b><br>03/03/2000 | <b>Amount of Each Disbursement This Period</b><br>48.58    |
| <b>Full Name, Mailing Address and Zip Code</b><br>Christine Milburn<br>812 Robinson<br>Boulder City, NV 89005- | <b>Purpose of Disbursement</b><br>Office supplies<br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Date (month, day, year)</b><br>03/03/2000 | <b>Amount of Each Disbursement This Period</b><br>299.23   |
| <b>Full Name, Mailing Address and Zip Code</b><br>Christine Milburn<br>812 Robinson<br>Boulder City, NV 89005- | <b>Purpose of Disbursement</b><br>Payroll<br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):         | <b>Date (month, day, year)</b><br>02/18/2000 | <b>Amount of Each Disbursement This Period</b><br>1,040.75 |
| <b>Full Name, Mailing Address and Zip Code</b><br>Christine Milburn<br>812 Robinson<br>Boulder City, NV 89005- | <b>Purpose of Disbursement</b><br>Payroll<br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):         | <b>Date (month, day, year)</b><br>03/03/2000 | <b>Amount of Each Disbursement This Period</b><br>1,040.75 |
| <b>Full Name, Mailing Address and Zip Code</b><br>Christine Milburn<br>812 Robinson<br>Boulder City, NV 89005- | <b>Purpose of Disbursement</b><br>Fundraiser<br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):      | <b>Date (month, day, year)</b><br>03/03/2000 | <b>Amount of Each Disbursement This Period</b><br>90.00    |
| <b>Full Name, Mailing Address and Zip Code</b><br>Christine Milburn<br>812 Robinson<br>Boulder City, NV 89005- | <b>Purpose of Disbursement</b><br>Maps<br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):            | <b>Date (month, day, year)</b><br>03/03/2000 | <b>Amount of Each Disbursement This Period</b><br>30.00    |
| <b>Full Name, Mailing Address and Zip Code</b><br>Christine Milburn<br>812 Robinson<br>Boulder City, NV 89005- | <b>Purpose of Disbursement</b><br>Telephone<br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):       | <b>Date (month, day, year)</b><br>03/03/2000 | <b>Amount of Each Disbursement This Period</b><br>267.29   |

**SUBTOTAL** of Disbursements This Page (optional)

7,836.66

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

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the detailed summary page

PAGE 14 OF 23  
FOR LINE NUMBER 17

Any information copied from such reports and statements may not be relied on 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)**

Friends of Jon Porter Committee

|                                                                                                         |                                                                                                                                                                                         |                                       |                                                     |
|---------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------|-----------------------------------------------------|
| Full Name, Mailing Address and Zip Code<br>Christine Milburn<br>812 Robinson<br>Boulder City, NV 89005- | Purpose of Disbursement<br>Meals<br><br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                | Date (month, day, year)<br>03/20/2000 | Amount of Each Disbursement This Period<br>175.00   |
| Full Name, Mailing Address and Zip Code<br>Christine Milburn<br>812 Robinson<br>Boulder City, NV 89005- | Purpose of Disbursement<br>Postage<br><br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):              | Date (month, day, year)<br>02/01/2000 | Amount of Each Disbursement This Period<br>132.00   |
| Full Name, Mailing Address and Zip Code<br>Christine Milburn<br>812 Robinson<br>Boulder City, NV 89005- | Purpose of Disbursement<br>Postage<br><br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):              | Date (month, day, year)<br>03/20/2000 | Amount of Each Disbursement This Period<br>11.75    |
| Full Name, Mailing Address and Zip Code<br>Christine Milburn<br>812 Robinson<br>Boulder City, NV 89005- | Purpose of Disbursement<br>Office supplies<br><br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):      | Date (month, day, year)<br>03/20/2000 | Amount of Each Disbursement This Period<br>47.15    |
| Full Name, Mailing Address and Zip Code<br>Christine Milburn<br>812 Robinson<br>Boulder City, NV 89005- | Purpose of Disbursement<br>Office supplies<br><br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):      | Date (month, day, year)<br>02/01/2000 | Amount of Each Disbursement This Period<br>204.33   |
| Full Name, Mailing Address and Zip Code<br>Christine Milburn<br>812 Robinson<br>Boulder City, NV 89005- | Purpose of Disbursement<br>Novelties - t-shirts<br><br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | Date (month, day, year)<br>03/20/2000 | Amount of Each Disbursement This Period<br>149.61   |
| Full Name, Mailing Address and Zip Code<br>Christine Milburn<br>812 Robinson<br>Boulder City, NV 89005- | Purpose of Disbursement<br>Payroll<br><br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):              | Date (month, day, year)<br>03/31/2000 | Amount of Each Disbursement This Period<br>1,040.78 |

**SUBTOTAL** of Disbursements This Page (optional)

1,780.62

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

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

|                                                                      |      |    |
|----------------------------------------------------------------------|------|----|
| Use separate schedule for each category of the Detailed Summary Page | PAGE | OF |
|                                                                      | 15   | 23 |
| FOR LINE NUMBER                                                      |      |    |
| 17                                                                   |      |    |

Any information copied from such reports and schedules 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)**

Friends of Jon Porter Committee

|                                                                                                         |                                                                                                                                                                                     |                                       |                                                     |
|---------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------|-----------------------------------------------------|
| Full Name, Mailing Address and Zip Code<br>Christine Milburn<br>812 Robinson<br>Boulder City, NV 89005- | Purpose of Disbursement<br>Payroll<br><br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)           | Date (month, day, year)<br>03/17/2000 | Amount of Each Disbursement This Period<br>1,040.79 |
| Full Name, Mailing Address and Zip Code<br>Christine Milburn<br>812 Robinson<br>Boulder City, NV 89005- | Purpose of Disbursement<br>Office petty cash<br><br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Date (month, day, year)<br>02/10/2000 | Amount of Each Disbursement This Period<br>300.00   |
| Full Name, Mailing Address and Zip Code<br>Christine Milburn<br>812 Robinson<br>Boulder City, NV 89005- | Purpose of Disbursement<br>Office supplies<br><br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)   | Date (month, day, year)<br>02/16/2000 | Amount of Each Disbursement This Period<br>501.63   |
| Full Name, Mailing Address and Zip Code<br>Christine Milburn<br>812 Robinson<br>Boulder City, NV 89005- | Purpose of Disbursement<br>Office petty cash<br><br>Disbursement for: <input type="checkbox"/> Salary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)  | Date (month, day, year)<br>03/13/2000 | Amount of Each Disbursement This Period<br>1,500.00 |
| Full Name, Mailing Address and Zip Code<br>Christine Milburn<br>812 Robinson<br>Boulder City, NV 89005- | Purpose of Disbursement<br>Automobile fuel<br><br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)   | Date (month, day, year)<br>02/01/2000 | Amount of Each Disbursement This Period<br>5.00     |
| Full Name, Mailing Address and Zip Code<br>Christine Milburn<br>812 Robinson<br>Boulder City, NV 89005- | Purpose of Disbursement<br>Telephone<br><br>Disbursement for: <input type="checkbox"/> Salary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)          | Date (month, day, year)<br>02/01/2000 | Amount of Each Disbursement This Period<br>178.83   |
| Full Name, Mailing Address and Zip Code<br>Christine Milburn<br>812 Robinson<br>Boulder City, NV 89005- | Purpose of Disbursement<br>Office supplies<br><br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)   | Date (month, day, year)<br>02/16/2000 | Amount of Each Disbursement This Period<br>128.09   |

**SUBTOTAL** of Disbursements This Page (optional)

3,654.32

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



**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

Use separate schedule for each category of the detailed Summary Page

PAGE 16 OF 23  
FOR LINE NUMBER 17

Any information copied from news reports and statements may not be sold or used by any person for the purpose of obtaining contributions or for commercial purposes, other than using the name and address of any political committee to recruit contributions from such committee.

**NAME OF COMMITTEE (In Full)**

Friends of Jon Porter Committee

|                                                                                                               |                                                                                                                                                                                    |                                       |                                                   |
|---------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------|---------------------------------------------------|
| Full Name, Mailing Address and Zip Code<br>Christine Milburn<br>Rt 2 Robinson<br>Boulder City, NV 89005-      | Purpose of Disbursement<br>Meetings (meals)<br><br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Date (month, day, year)<br>02/31/2000 | Amount of Each Disbursement This Period<br>39.25  |
| Full Name, Mailing Address and Zip Code<br>Nevada Power Company<br>P.O. Box 98855<br>Las Vegas, NV 89193-8855 | Purpose of Disbursement<br>Utilities<br><br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)        | Date (month, day, year)<br>01/25/2000 | Amount of Each Disbursement This Period<br>90.00  |
| Full Name, Mailing Address and Zip Code<br>Nevada Power Company<br>P.O. Box 98855<br>Las Vegas, NV 89193-8855 | Purpose of Disbursement<br>Utilities<br><br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)        | Date (month, day, year)<br>02/20/2000 | Amount of Each Disbursement This Period<br>222.37 |
| Full Name, Mailing Address and Zip Code<br>Nevada Power Company<br>P.O. Box 98855<br>Las Vegas, NV 89193-8855 | Purpose of Disbursement<br>Utilities<br><br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)        | Date (month, day, year)<br>03/20/2000 | Amount of Each Disbursement This Period<br>184.72 |
| Full Name, Mailing Address and Zip Code<br>Nevada State Bank<br>P.O. Box 990<br>Las Vegas, NV 89125-0990      | Purpose of Disbursement<br>1120 POL Tax<br><br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)     | Date (month, day, year)<br>03/13/2000 | Amount of Each Disbursement This Period<br>14.00  |
| Full Name, Mailing Address and Zip Code<br>Nevada State Bank<br>P.O. Box 990<br>Las Vegas, NV 89125-0990      | Purpose of Disbursement<br>Payroll taxes<br><br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)    | Date (month, day, year)<br>02/18/2000 | Amount of Each Disbursement This Period<br>672.21 |
| Full Name, Mailing Address and Zip Code<br>Nevada State Bank<br>P.O. Box 990<br>Las Vegas, NV 89125-0990      | Purpose of Disbursement<br>Payroll taxes<br><br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)    | Date (month, day, year)<br>02/04/2000 | Amount of Each Disbursement This Period<br>511.61 |

**SUBTOTAL** of Disbursements This Page (optional)

1,734.16

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

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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

PAGE 03  
17 23  
FOR LINE NUMBER  
17

Any information copied from such reports and statements may not be used as 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)**

Friends of Jon Porter Committee

|                                                                                                                      |                                                                                                                                                                                        |                                       |                                                     |
|----------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------|-----------------------------------------------------|
| Full Name, Mailing Address and Zip Code<br>Nevada State Bank<br><br>P.O. Box 330<br><br>Las Vegas, NV 89125-0990     | Purpose of Disbursement<br>Bank charges<br><br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):        | Date (month, day, year)<br>02/28/2000 | Amount of Each Disbursement This Period<br>13.38    |
| Full Name, Mailing Address and Zip Code<br>Nevada State Bank<br><br>P.O. Box 330<br><br>Las Vegas, NV 89125-0990     | Purpose of Disbursement<br>Payroll taxes<br><br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):       | Date (month, day, year)<br>03/03/2000 | Amount of Each Disbursement This Period<br>864.63   |
| Full Name, Mailing Address and Zip Code<br>Nevada State Bank<br><br>P.O. Box 330<br><br>Las Vegas, NV 89125-0990     | Purpose of Disbursement<br>Payroll taxes<br><br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):       | Date (month, day, year)<br>01/21/2000 | Amount of Each Disbursement This Period<br>291.39   |
| Full Name, Mailing Address and Zip Code<br>Nevada State Bank<br><br>P.O. Box 330<br><br>Las Vegas, NV 89125-0990     | Purpose of Disbursement<br>Payroll taxes<br><br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):       | Date (month, day, year)<br>03/17/2000 | Amount of Each Disbursement This Period<br>815.21   |
| Full Name, Mailing Address and Zip Code<br>Nevada State Bank<br><br>P.O. Box 330<br><br>Las Vegas, NV 89125-0990     | Purpose of Disbursement<br>Payroll taxes<br><br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):       | Date (month, day, year)<br>03/31/2000 | Amount of Each Disbursement This Period<br>815.21   |
| Full Name, Mailing Address and Zip Code<br>Steve Patterson<br><br>2841 Misty Grove Drive<br><br>Henderson, NV 89014- | Purpose of Disbursement<br>Security<br><br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):            | Date (month, day, year)<br>03/29/2000 | Amount of Each Disbursement This Period<br>250.00   |
| Full Name, Mailing Address and Zip Code<br>Tony Dayton<br><br>2638 South Lynn Street<br><br>Arlington, VA 22202-     | Purpose of Disbursement<br>Consultant expenses<br><br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | Date (month, day, year)<br>02/04/2000 | Amount of Each Disbursement This Period<br>2,081.19 |

**SUBTOTAL** of Disbursements This Page (optional)

5,131.01

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

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

Use separate schedule (a) for each category of the detailed summary page

PAGE 18 OF 23  
FOR LINE NUMBER 17

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 campaign purposes, other than using the name and address of any political committee to solicit contributions from such committee.

**NAME OF COMMITTEE (In Full)**

Friends of Jon Porter Committee

|                                                                                                            |                                                                                                                                                                                    |                                       |                                                     |
|------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------|-----------------------------------------------------|
| Full Name, Mailing Address and Zip Code<br>Tony Payton<br>2639 South Lynn Street<br>Arlington, VA 22202-   | Purpose of Disbursement<br>Consulting<br>Disbursement for: <input type="checkbox"/> Salary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):           | Date (month, day, year)<br>02/04/2000 | Amount of Each Disbursement This Period<br>7,500.00 |
| Full Name, Mailing Address and Zip Code<br>John Chris Porter<br>1309 Darlene #D<br>Boulder City, NV 89005- | Purpose of Disbursement<br>Automobile fuel<br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):     | Date (month, day, year)<br>03/13/2000 | Amount of Each Disbursement This Period<br>145.10   |
| Full Name, Mailing Address and Zip Code<br>John Chris Porter<br>1309 Darlene #D<br>Boulder City, NV 89005- | Purpose of Disbursement<br>Meals<br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):               | Date (month, day, year)<br>03/03/2000 | Amount of Each Disbursement This Period<br>20.94    |
| Full Name, Mailing Address and Zip Code<br>John Chris Porter<br>1309 Darlene #D<br>Boulder City, NV 89005- | Purpose of Disbursement<br>Office supplies<br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):     | Date (month, day, year)<br>02/16/2000 | Amount of Each Disbursement This Period<br>310.05   |
| Full Name, Mailing Address and Zip Code<br>John Chris Porter<br>1309 Darlene #D<br>Boulder City, NV 89005- | Purpose of Disbursement<br>Fundraiser expenses<br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | Date (month, day, year)<br>02/04/2000 | Amount of Each Disbursement This Period<br>108.68   |
| Full Name, Mailing Address and Zip Code<br>John Chris Porter<br>1309 Darlene #D<br>Boulder City, NV 89005- | Purpose of Disbursement<br>Telephone<br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):           | Date (month, day, year)<br>03/14/2000 | Amount of Each Disbursement This Period<br>67.62    |
| Full Name, Mailing Address and Zip Code<br>John Chris Porter<br>1309 Darlene #D<br>Boulder City, NV 89005- | Purpose of Disbursement<br>Telephone<br>Disbursement for: <input type="checkbox"/> Salary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):            | Date (month, day, year)<br>02/16/2000 | Amount of Each Disbursement This Period<br>151.40   |

**SUBTOTAL** of Disbursements This Page (optional)

8,303.79

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

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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

PAGE 19 OF 23  
FOR LINE NUMBER 17

Any information derived 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)**

Friends of Jon Porter Committee

|                                                                                                                    |                                                                                                                                                                                          |                                       |                                                     |
|--------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------|-----------------------------------------------------|
| Full Name, Mailing Address and Zip Code<br>John Chris Porter<br><br>1309 Carlene RD<br><br>Boulder City, NV 89005- | Purpose of Disbursement<br>Maps<br><br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)                   | Date (month, day, year)<br>02/16/2000 | Amount of Each Disbursement This Period<br>60.00    |
| Full Name, Mailing Address and Zip Code<br>Jon C. Porter<br><br>1786 Lilypond Cir<br><br>Henderson, NV 89012-      | Purpose of Disbursement<br>Airline travel/Hotels<br><br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)  | Date (month, day, year)<br>02/01/2000 | Amount of Each Disbursement This Period<br>1,836.54 |
| Full Name, Mailing Address and Zip Code<br>Jon C. Porter<br><br>1786 Lilypond Cir<br><br>Henderson, NV 89012-      | Purpose of Disbursement<br>Office expenses<br><br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)        | Date (month, day, year)<br>01/22/2000 | Amount of Each Disbursement This Period<br>309.54   |
| Full Name, Mailing Address and Zip Code<br>R & S Printing<br><br>4625 W. Flamingo Road<br><br>Las Vegas, NV 89103- | Purpose of Disbursement<br>Printing - office<br><br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)      | Date (month, day, year)<br>03/23/2000 | Amount of Each Disbursement This Period<br>1,916.01 |
| Full Name, Mailing Address and Zip Code<br>Review Journal<br><br>P.O. Box 730<br><br>Las Vegas, NV 89125-0730      | Purpose of Disbursement<br>Newspaper subscription<br><br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Date (month, day, year)<br>02/20/2000 | Amount of Each Disbursement This Period<br>91.00    |
| Full Name, Mailing Address and Zip Code<br>Review Journal<br><br>P.O. Box 730<br><br>Las Vegas, NV 89125-0730      | Purpose of Disbursement<br>Newspaper subscription<br><br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Date (month, day, year)<br>02/20/2000 | Amount of Each Disbursement This Period<br>91.00    |
| Full Name, Mailing Address and Zip Code<br>Review Journal<br><br>P.O. Box 730<br><br>Las Vegas, NV 89125-0730      | Purpose of Disbursement<br>Newspaper subscription<br><br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Date (month, day, year)<br>02/20/2000 | Amount of Each Disbursement This Period<br>91.00    |

**SUBTOTAL** of Disbursements This Page (optional)

4,395.09

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

**SCHEDULE B**
**ITEMIZED DISBURSEMENTS**

Use separate schedules for each category of law Detailed Summary Page

 PAGE 20 OF 23  
 FOR LINE NUMBER 17

Any information appearing on this Report and Statement may not be said or used by any person for the purpose of soliciting contributions or for campaign purposes, other than using the name and address of any political committee to solicit contributions from such committee.

**NAME OF COMMITTEE (In Full)**

Friends of Jon Porter Committee

|                                                                                                                                   |                                                                                                                                                                                                 |                                              |                                                            |
|-----------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------|------------------------------------------------------------|
| <b>Full Name, Mailing Address and Zip Code</b><br>Research By Design<br><br>4790 Caughlin Parkway #431<br><br>Reno, NV 89509-0907 | <b>Purpose of Disbursement</b><br>Research<br><br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):              | <b>Date (month, day, year)</b><br>01/12/2000 | <b>Amount of Each Disbursement This Period</b><br>2,000.00 |
| <b>Full Name, Mailing Address and Zip Code</b><br>Roll Call<br><br>50 F. Street NW<br>7th Floor<br>Washington, DC 20001-          | <b>Purpose of Disbursement</b><br>Subscription<br><br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):          | <b>Date (month, day, year)</b><br>01/12/2000 | <b>Amount of Each Disbursement This Period</b><br>240.00   |
| <b>Full Name, Mailing Address and Zip Code</b><br>Robert Sears<br><br>1202 Arapahoe Way<br><br>Boulder City, NV 89005-3041        | <b>Purpose of Disbursement</b><br>Consultant<br><br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):            | <b>Date (month, day, year)</b><br>03/06/2000 | <b>Amount of Each Disbursement This Period</b><br>909.01   |
| <b>Full Name, Mailing Address and Zip Code</b><br>Sprint<br><br>P.O. Box 52243<br><br>Phoenix, AZ 85072-2243                      | <b>Purpose of Disbursement</b><br>Telephone<br><br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):             | <b>Date (month, day, year)</b><br>03/03/2000 | <b>Amount of Each Disbursement This Period</b><br>373.03   |
| <b>Full Name, Mailing Address and Zip Code</b><br>Sprint<br><br>P.O. Box 52243<br><br>Phoenix, AZ 85072-2243                      | <b>Purpose of Disbursement</b><br>Telephone<br><br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):             | <b>Date (month, day, year)</b><br>02/01/2000 | <b>Amount of Each Disbursement This Period</b><br>293.42   |
| <b>Full Name, Mailing Address and Zip Code</b><br>Sprint<br><br>P.O. Box 52243<br><br>Phoenix, AZ 85072-2243                      | <b>Purpose of Disbursement</b><br>Telephone<br><br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):             | <b>Date (month, day, year)</b><br>01/13/2000 | <b>Amount of Each Disbursement This Period</b><br>62.70    |
| <b>Full Name, Mailing Address and Zip Code</b><br>Sprint<br><br>P.O. Box 52243<br><br>Phoenix, AZ 85072-2243                      | <b>Purpose of Disbursement</b><br>refund telephone bill<br><br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Date (month, day, year)</b><br>03/08/2000 | <b>Amount of Each Disbursement This Period</b><br>-25.08   |

**SUBTOTAL** of Disbursements This Page (optional):

4,053.08

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

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

Use separate schedule for each category of line itemized disbursements

PAGE 21 OF 23  
FOR LINE NUMBER 17

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 individuals.

**NAME OF COMMITTEE (In Full)**

Friends of Jon Porter Committee

|                                                                                                                                                              |                                                                                                                                                                                 |                                       |                                                                  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------|------------------------------------------------------------------|
| Full Name, Mailing Address and Zip Code<br>Sullivan & Mitchell, P.L.L.C.<br><br>Attorneys at Law<br>1100 Connecticut Ave, Northwest<br>Washington, DC 20036- | Purpose of Disbursement<br>Attorney fees<br><br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Date (month, day, year)<br>03/13/2000 | Amount of Each Disbursement This Period<br>193.64                |
| Full Name, Mailing Address and Zip Code<br>Sullivan & Mitchell, P.L.L.C.<br><br>Attorneys at Law<br>1100 Connecticut Ave, Northwest<br>Washington, DC 20036- | Purpose of Disbursement<br>Attorney fees<br><br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Date (month, day, year)<br>02/01/2000 | Amount of Each Disbursement This Period<br>2,801.85              |
| Full Name, Mailing Address and Zip Code<br>George Swartz<br><br>6851 W. Charleston<br><br>Las Vegas, NV 89146-                                               | Purpose of Disbursement<br>Accounting<br><br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)    | Date (month, day, year)<br>03/31/2000 | Amount of Each Disbursement This Period<br>629.00<br><br>IN KIND |
| Full Name, Mailing Address and Zip Code<br>George Swartz<br><br>5851 W. Charleston<br><br>Las Vegas, NV 89146-                                               | Purpose of Disbursement<br>Accounting<br><br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)    | Date (month, day, year)<br>03/31/2000 | Amount of Each Disbursement This Period<br>700.00<br><br>IN KIND |
| Full Name, Mailing Address and Zip Code<br>Swartz & Associates<br><br>5851 W. Charleston<br><br>Las Vegas, NV 89146-                                         | Purpose of Disbursement<br>Insurance<br><br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)     | Date (month, day, year)<br>01/28/2000 | Amount of Each Disbursement This Period<br>480.00                |
| Full Name, Mailing Address and Zip Code<br>U.S. Postmaster<br><br>2722 N. Green Valley Parkway<br><br>Henderson, NV 89014-                                   | Purpose of Disbursement<br>Postage<br><br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)       | Date (month, day, year)<br>03/31/2000 | Amount of Each Disbursement This Period<br>56.43                 |
| Full Name, Mailing Address and Zip Code<br>U.S. Postmaster<br><br>2722 N. Green Valley Parkway<br><br>Henderson, NV 89014-                                   | Purpose of Disbursement<br>Postage<br><br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)       | Date (month, day, year)<br>02/16/2000 | Amount of Each Disbursement This Period<br>200.00                |

**SUBTOTAL** of Disbursements This Page (optional)

5,141.42

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

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

See separate schedule(s) for each category of the detailed summary page

PAGE 22 OF 23  
FOR LINE NUMBER 17

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)**

Friends of Jon Porter Committee

|                                                                                                                            |                                                                                                                                                                                        |                                       |                                                                    |
|----------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------|--------------------------------------------------------------------|
| Full Name, Mailing Address and Zip Code<br>U.S. Postmaster<br><br>2722 N. Green Valley Parkway<br><br>Henderson, NV 89014- | Purpose of Disbursement<br>Postage<br><br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):             | Date (month, day, year)<br>03/01/2000 | Amount of Each Disbursement This Period<br>1,000.00                |
| Full Name, Mailing Address and Zip Code<br>U.S. Postmaster<br><br>2722 N. Green Valley Parkway<br><br>Henderson, NV 89014- | Purpose of Disbursement<br>Postage<br><br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):             | Date (month, day, year)<br>02/22/2000 | Amount of Each Disbursement This Period<br>1,000.00                |
| Full Name, Mailing Address and Zip Code<br>James Vernon<br><br>115 S. Water Street<br><br>Henderson, NV 89015-             | Purpose of Disbursement<br>Computer specialist<br><br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | Date (month, day, year)<br>03/31/2000 | Amount of Each Disbursement This Period<br>1,000.00<br><br>IN KIND |
| Full Name, Mailing Address and Zip Code<br>Julie L. Walburn<br><br>1936 Parma Ave<br><br>Las Vegas, NV 89123-              | Purpose of Disbursement<br>Payroll<br><br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):             | Date (month, day, year)<br>03/03/2000 | Amount of Each Disbursement This Period<br>552.59                  |
| Full Name, Mailing Address and Zip Code<br>Julie L. Walburn<br><br>1936 Parma Ave<br><br>Las Vegas, NV 89123-              | Purpose of Disbursement<br>Payroll<br><br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):             | Date (month, day, year)<br>03/17/2000 | Amount of Each Disbursement This Period<br>552.59                  |
| Full Name, Mailing Address and Zip Code<br>Julie L. Walburn<br><br>1936 Parma Ave<br><br>Las Vegas, NV 89123-              | Purpose of Disbursement<br>Payroll<br><br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):             | Date (month, day, year)<br>03/31/2000 | Amount of Each Disbursement This Period<br>552.59                  |
| Full Name, Mailing Address and Zip Code<br>Julie L. Walburn<br><br>1936 Parma Ave<br><br>Las Vegas, NV 89123-              | Purpose of Disbursement<br>Telephone<br><br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):           | Date (month, day, year)<br>03/14/2000 | Amount of Each Disbursement This Period<br>26.70                   |

**SUBTOTAL** of Disbursements This Page (optional)

4,664.07

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

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

Use separate schedule for each category of the Detailed Summary Page

PAGE 23 OF 23

FOR LINE NUMBER 17

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)**

Friends of Jon Porter Committee

|                                                                                                                          |                                                                                                                                                                                      |                                       |                                                     |
|--------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------|-----------------------------------------------------|
| Full Name, Mailing Address and Zip Code<br>Julio L. Walburn<br><br>1936 Parma Ave<br><br>Las Vegas, NV 89123-            | Purpose of Disbursement<br>Payroll<br><br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):           | Date (month, day, year)<br>02/18/2000 | Amount of Each Disbursement This Period<br>298.37   |
| Full Name, Mailing Address and Zip Code<br>Washington<br><br>2800 Clarendon Blvd<br>Suite 401<br>Arlington, VA 22201-    | Purpose of Disbursement<br>Professional fees<br><br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | Date (month, day, year)<br>03/20/2000 | Amount of Each Disbursement This Period<br>2,000.00 |
| Full Name, Mailing Address and Zip Code<br>Wolfgang Puck<br><br>3500 Las Vegas Blvd So., #G1<br><br>Las Vegas, NV 89109- | Purpose of Disbursement<br>Fundraiser<br><br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):        | Date (month, day, year)<br>03/06/2000 | Amount of Each Disbursement This Period<br>2,500.00 |
| Full Name, Mailing Address and Zip Code                                                                                  | Purpose of Disbursement<br><br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                      | Date (month, day, year)<br>/ /        | Amount of Each Disbursement This Period             |
| Full Name, Mailing Address and Zip Code                                                                                  | Purpose of Disbursement<br><br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                      | Date (month, day, year)<br>/ /        | Amount of Each Disbursement This Period             |
| Full Name, Mailing Address and Zip Code                                                                                  | Purpose of Disbursement<br><br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                      | Date (month, day, year)<br>/ /        | Amount of Each Disbursement This Period             |
| Full Name, Mailing Address and Zip Code                                                                                  | Purpose of Disbursement<br><br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                      | Date (month, day, year)<br>/ /        | Amount of Each Disbursement This Period             |

**SUBTOTAL** of Disbursements This Page (optional)

4,798.37

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

137,229.87



## SCHEDULE B

## ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category at the  
Detailed Summary PagePAGE 1 OF 1  
FOR LINE NUMBER  
20a

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 corporate purposes, other than using the name and address of any political committee to solicit contributions from such committee.

## NAME OF COMMITTEE (In Full)

Friends of Jon Porter Committee

| Full Name, Mailing Address and Zip Code                                     | Purpose of Disbursement                                                                                                                                                      | Date (month, day, year) | Amount of Each Disbursement This Period |
|-----------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------|-----------------------------------------|
| William Laub, Sr.<br>2810 W. Charleston Blvd. No.53<br>Las Vegas, NV 89102- | Refund over limit contribution<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | 03/29/2000              | 50.00                                   |
| Stanley Washington<br>4299 Lucas Ave<br>Las Vegas, NV 89120-                | check was returned by bank<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)     | 02/11/2000              | 30.00                                   |
|                                                                             |                                                                                                                                                                              | / /                     |                                         |
|                                                                             |                                                                                                                                                                              | / /                     |                                         |
|                                                                             |                                                                                                                                                                              | / /                     |                                         |
|                                                                             |                                                                                                                                                                              | / /                     |                                         |
|                                                                             |                                                                                                                                                                              | / /                     |                                         |
|                                                                             |                                                                                                                                                                              | / /                     |                                         |
|                                                                             |                                                                                                                                                                              | / /                     |                                         |

SUBTOTAL of Disbursements This Page (optional)

80.00

TOTAL This Period (last page this line number only)

80.00

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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

PAGE 1 OF 1  
FOR LINE NUMBER 205

Any information copied from these 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)**

Friends of Jon Porter Committee

| Full Name, Mailing Address and Zip Code                                                                | Purpose of Disbursement                                                                                                                    | Date (month, day, year) | Amount of Each Disbursement This Period |
|--------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------|-------------------------|-----------------------------------------|
| Committee to Elect Mark James<br><br>3773 Howard Hughes Parkway<br>Suite 290 N<br>Las Vegas, NV 89109- | Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | 02/01/2000              | 2,000.00                                |
| Committee to Elect Mark A. James<br><br>P.O. Box 80464<br>Las Vegas, NV 89180-                         | Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | 02/01/2000              | 1,000.00                                |
|                                                                                                        | Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)            | / /                     |                                         |
|                                                                                                        | Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)            | / /                     |                                         |
|                                                                                                        | Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)            | / /                     |                                         |
|                                                                                                        | Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)            | / /                     |                                         |
|                                                                                                        | Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)            | / /                     |                                         |
|                                                                                                        | Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)            | / /                     |                                         |

**SUBTOTAL** of Disbursements This Page (optional)

3,000.00

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

3,000.00

## SCHEDULE C

## LOANS

Page 1 of     for  
LINE NUMBER 10

|                                                                                                                                 |                                             |                               |                                                                 |
|---------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------|-------------------------------|-----------------------------------------------------------------|
| NAME OF COMMITTEE (In Full)<br>Friends of Jon Porter Committee                                                                  |                                             |                               |                                                                 |
| A. Full Name, Mailing Address and ZIP Code of Loan Source<br>Jon C. Porter<br>1786 Lilypond Cir<br>Henderson, NV 89012-         | original Amount<br>of loan<br><br>17,301.17 | Cumulative Payment<br>To Date | Balance Outstanding<br>at close of this Period<br><br>17,301.17 |
| Election: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) |                                             |                               |                                                                 |
| Term: Date Incurred 03/31/2000 Date Due: Interest Rate: % (apc) Secured NO                                                      |                                             |                               |                                                                 |
| List All Endorsements or Guarantors (if any) to Item A                                                                          |                                             |                               |                                                                 |
| Full Name, Mailing Address and Zip Code                                                                                         | Name of Employer                            |                               |                                                                 |
|                                                                                                                                 | Occupation                                  |                               |                                                                 |
|                                                                                                                                 | Amount Guaranteed Outstanding               |                               |                                                                 |

|                                                            |           |
|------------------------------------------------------------|-----------|
| <b>SUBTOTAL</b> This Period This Page (optional)           | 17,301.17 |
| <b>TOTAL</b> This Period (last page this line number only) | 17,301.17 |

**SCHEDULE D**  
(Revised 3/80)

**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

Page 1 of 1 for

LINE NUMBER 10

(Use separate schedules  
for each numbered line)

| NAME OF COMMITTEE (In Full)                                                                                                                                    | Outstanding<br>Balance Beginning<br>this Period | Amount<br>Incurred<br>this Period | Payment<br>this<br>Period | Outstanding<br>Balance at Close<br>of this Period |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------|-----------------------------------|---------------------------|---------------------------------------------------|
| Friends of Jon Porter<br>Committee                                                                                                                             |                                                 |                                   |                           |                                                   |
| * Full Name, Mailing Address and Zip Code<br>Jon C. Porter<br>1786 Lilypond Cir<br>Henderson, NV 89012                                                         | 1,836.54                                        |                                   | 1,836.54                  |                                                   |
| Nature of Debt (Purpose)<br>Office expenses                                                                                                                    |                                                 |                                   |                           |                                                   |
| * Full Name, Mailing Address and Zip Code<br>Mandalay Bay<br>Attn: Catering Dept<br>3950 Las Vegas Blvd So<br>Las Vegas, NV 89119-                             | 2,790.49                                        |                                   | 2,790.49                  |                                                   |
| Nature of Debt (Purpose)                                                                                                                                       |                                                 |                                   |                           |                                                   |
| * Full Name, Mailing Address and Zip Code<br>Sullivan & Mitchell, P.C., L.L.C.<br>Attorneys at Law<br>1100 Connecticut Ave, Northwest<br>Washington, DC 20036- | 2,881.85                                        |                                   | 2,881.85                  |                                                   |
| Nature of Debt (Purpose)<br>Attorney fees                                                                                                                      |                                                 |                                   |                           |                                                   |

|                                                                                        |           |
|----------------------------------------------------------------------------------------|-----------|
| 1) SUBTOTAL this period this page (optional)                                           |           |
| 2) TOTAL this period (last page this line number only)                                 |           |
| 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)                            | 17,301.17 |
| 4) ADD (and should carry forward to appropriate line of Summary Page (last page only)) | 17,301.17 |

## 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

4-15-00



First Class Mail

POSTMARKED



Registered/Certified Mail

POSTMARKED



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



Electronic Filing

*SL*

PREPARER

4-15-00

DATE PREPARED