

2003 CAMPAIGN CONTRIBUTIONS AND EXPENSES

City of North Las Vegas

Name (print) BILL DOLAN Office (if applicable) CITY COUNCIL - NLV Ward (if applicable) 4

Mailing Address (Include city and zip code) PO Box 335939 NLV, NV 89033 Telephone No. 702-283-3784

E-Mail Address BD4NLV@AOL.COM

Select Appropriate Box(es)  CANDIDATE  PAC  BAG  POL-PRTY  IND-EXP  AMENDED

Report #3 — Due August 18, 2003  
Period: May 23, 2003 - July 3, 2003

FOR OFFICE USE ONLY  
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CITY CLERK'S OFFICE  
NORTH LAS VEGAS  
2003 AUG 14 4 00 PM

**BEGINNING CASH ON HAND**

1. Cash on Hand at Beginning of This Reporting Period

0

**CONTRIBUTIONS SUMMARY**

- 2. Total Monetary Contributions Received This Period in Excess of \$100
- 3. Total Monetary Contributions Received This Period of \$100 or Less
- 4. Actual Number of Monetary Contributions This Period of \$100 or Less
- 5. Interest and Income Earned This Period on Contributions
- 6. Total Amount of Monetary Contributions Received (Add Lines 2, 3 and 5)
- 7. SUBTOTAL (Add Lines 1 and 6)
- 8. Total Value of In Kind Contributions Received This Period

200.00

0

0

0

200.00

200.00

**EXPENSES SUMMARY**

- 9. Total Monetary Expenses Paid This Period in Excess of \$100
- 10. Total Expenses Contracted for This Period, But Not Paid, in Excess of \$100
- 11. Total Monetary Expenses Paid This Period of \$100 or Less
- 12. Total Expenses Contracted for This Period, But Not Paid, of \$100 or Less
- 13. Expense for Filing Fee Paid This Period (Do not include in Line 9 or 11 Above)
- 14. Total Amount of All Monetary Expenses Paid (Add Lines 9, 11, and 13)
- 15. Total Value of In Kind Expenses This Period

200.00

0

0

0

0

200.00

0

**ENDING CASH ON HAND**

16. Cash on Hand at Close of This Reporting Period (Subtract Line 14 from Line 7)

0

**AFFIRMATION**

I Declare Under Penalty of Perjury That the Foregoing is True and Correct.

*[Signature]*

8-14-3

Signature

Date

CAMPAIGN CONTRIBUTIONS

Report Period # 3

Bill Douth  
Name (print)

City Council - NW  
Office (if applicable)

4  
Ward (if applicable)

Contributions in Excess of \$100 or, When Added Together from One Contributor Exceeds \$100

CONTRIBUTOR'S NAME AND ADDRESS	DATE OF EACH CONTRIBUTION	AMOUNT OF EACH CONTRIBUTION	CHECK HERE IF LOAN
WMD, LLC 1306 W. CRAIG RD NW, NV 89032	6/30/3	200.00	

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**CAMPAIGN EXPENSES**

Report Period # 3

Bill DOLAN  
Name (print)

City Council - NLV  
Office (if applicable)

4  
Ward (if applicable)

**Expenses in Excess of \$100**

NAME AND ADDRESS OF PERSON, GROUP OR ORGANIZATION WHO RECEIVED THE PAYMENT FOR THE EXPENSE(S)	CATEGORY (See Previous Page) NRS 294A.365	DATE OF EACH EXPENSE	AMOUNT OF EACH EXPENSE
Phyllis D. DOLAN 4249 N. Commerce 1055 NLV, NV 89032	J	6/30/3	200.00

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**IN KIND CAMPAIGN  
EXPENSES**

Report Period # 3

Bu Down  
Name (print)

City Council - NW  
Office (if applicable)

4  
Ward (if applicable)

**IN KIND**

**Expenses in Excess of \$100**

NAME AND ADDRESS OF PERSON, GROUP OR ORGANIZATION WHO RECEIVED THE IN KIND GOOD(S) OR SERVICE(S)	DESCRIPTION OF EACH IN KIND EXPENSE	DATE OF EACH IN KIND EXPENSE	VALUE OR COST OF EACH IN KIND EXPENSE

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