

**SUMMARY OF CAMPAIGN CONTRIBUTIONS AND EXPENSES  
1997 PRIMARY AND GENERAL CITY ELECTIONS**

State of Nevada

RON FRAME CITY COUNCIL WARD 3  
 Candidate's Name (print) Office District (if applicable)  
1619 SANTIAGO DR. HENDERSON 89014 454-8460  
 Mailing Address Telephone Number

**REPORT NUMBER 1 - DUE APRIL 21, 1997**

Cash on hand from previous campaign should equal the balance shown on last disposition of unspent contributions report (if any) : \_\_\_\_\_ (Incumbents, complete for report period one only.)

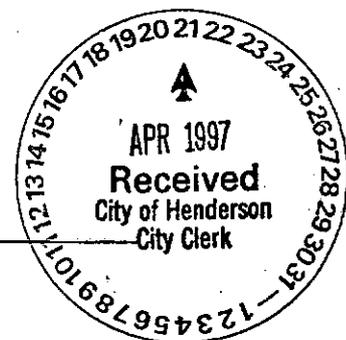
CONTRIBUTIONS AND EXPENSES SUMMARY	This Period
TOTAL AMOUNT OF CONTRIBUTIONS IN EXCESS OF \$500	0
TOTAL AMOUNT OF CONTRIBUTIONS LESS THAN OR EQUAL TO \$500	<del>\$1000.00</del> <sup>890.00</sup>
The actual number of contributions received that were less than or equal to \$500: <u>13</u>	
INTEREST ACCRUED (if any)	
TOTAL AMOUNT OF ALL CONTRIBUTIONS (including those under \$500)	<del>\$1000.00</del> <sup>890.00</sup>
EXPENSE FOR FILING FEE	25.00
TOTAL AMOUNT OF ALL OTHER EXPENSES	\$4568.16

If no contributions or expenditures are listed during "this period," only this page of the report needs to be filed with your filing officer.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on 4/21/97  
Date

Ron Frame  
Signature of Candidate



Approved by Secretary of State  
NRS 294A.360  
city&ce.pri(rev. 2/97)

Total number of pages for this report \_\_\_\_\_  
REPORT PERIOD NO. 1

REPORT OF CAMPAIGN EXPENSES (SUMMARY)

RON FRAME

CITY COUNCIL

WARD 3

Candidate's Name (print)

Office

District (if applicable)

CATEGORIES OF EXPENSES	CODE	AMOUNT OF EXPENSES THIS PERIOD
Office expenses	A	\$197.03
Expenses related to volunteers	B	0
Travel	C	25.00
Television	D	0
Newspaper advertising	E	0
Radio	F	0
Billboards	G	0
Printed signs, poster, fliers, novelty items, T-shirts, buttons, brochures	H	\$4246.13
Direct mail	I	0
Paid staff	J	0
Consultants	K	0
Polling	L	0
Special events	M	0
Estimated value of goods and services provided "in kind" for which money would have been paid	N	0
On-line services	O	\$100.00
Other miscellaneous expenses	P	
<b>TOTAL AMOUNT OF EXPENSES</b>		<b>\$4568.16</b>

RON FRAME

CITY COUNCIL

WARD 3

Candidate's Name (print)

Office

District (if applicable)

Expenses in Excess of \$500

NAME AND ADDRESS OF PERSON, GROUP OR ORGANIZATION WHO RECEIVED THE PAYMENT FOR THE EXPENSES	CATEGORY OF EXPENSES (LIST CODE)	DATE(S) OF EACH PAYMENT	AMOUNT(S) OF EACH PAYMENT
NEW MARK SIGNS 3250 W. RENO LAS VEGAS, NV.	H	4/5/97	\$1722.70
NEW MARK SIGNS 3250 W. RENO LAS VEGAS, NV.	H	3/20/97	\$1391.00
WE CAN DO IT (SAPRIMER) " 1422 LODGEPOLE DR. " HENDERSON, NV. " 89014	H	4/4 4/10 4/13	\$ 180.00 \$ 209.00 \$ 200.00

You may photo copy this page if additional space is needed.

