

CAMPAIGN CONTRIBUTIONS AND EXPENSES REPORT

State of Nevada

Name (print) Jim Duan Office (if applicable) HERNIMAN CITY COUNCIL District (if applicable)  
273 SINGLE PETAL STREET Telephone No. 702-813-8356  
 Mailing Address (include city and zip code)  
 E-Mail Address Jim Duan@tricorn.com

Select Appropriate Box(es)  CANDIDATE  PAC  POL PRY  IND EXP  NONPROFIT CORP  
 AMENDED  LEGAL DEFENSE FUND

- Annual Filing - Due January 15, 2009  
Period: January 1, 2008 - December 31, 2008
- Report #1 - Due March 31, 2009\*  
Period: Jan. 1, 2009 - March 26, 2009
- Report #2 Due - May 26, 2009\*  
Period: Mar. 27, 2009 - May 21, 2009
- Report #3 Due - July 15, 2009\*  
Period: May 22, 2009 - June 30, 2009
- Annual Filing - Due January 15, 2010  
\*Period: July 1, 2009 - December 31, 2009  
\*\*Period: Jan. 1, 2009 - December 31, 2009

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\* These Reports are filed by incumbents/candidates running for office in the 2009 election cycle  
 \*\* These Reports are filed by incumbents not running for office this cycle who: (1) raised contributions in excess of \$100; or (2) have money left over from a previous campaign

CONTRIBUTIONS SUMMARY

|   | This Period | Cumulative From Beginning of Report Period #1 through End of This Reporting Period |
|---|-------------|--|
| 1. Total Monetary Contributions Received in Excess of \$100<br>(See page 1 of instruction sheet)  | 1223        | 1348   |
| 2. Total Monetary Contributions Received of \$100 or Less<br>(See page 2 of instruction sheet)  | 100         | 100  |
| 3. Total Monetary Contributions in the form of loans guaranteed by a third party. (See page 2 of instruction sheet)   | 0           | 0  |
| 4. Total Monetary Contributions in the form of loans that were forgiven<br>(See page 2 of instruction sheet)  | 0           | 0  |
| 5. Total Amount of Monetary Contributions Received<br>(Add Lines 1 through 4) (See page 2 of instruction sheet)   | 1323        | 1448   |
| 6. Total Amount of Written Commitments for Contributions (When commitment is funded, report as contribution (monetary or in kind))<br>(See page 2 of instruction sheet) | 0           | 0  |
| 7. Total Value of In Kind Contributions Received in Excess of \$100 (See page 2 of instruction sheet)   | 0           | 3300   |

EXPENSES SUMMARY

|   |     |        |
|---|-----|--------|
| 8. Total Monetary Expenses Paid in Excess of \$100<br>(See page 2 of instruction sheet)   | 723 | 917.15 |
| 9. Total Monetary Expenses Paid of \$100 or Less<br>(See page 2 of instruction sheet)   | 0   | 0      |
| 10. Total Amount of All Monetary Expenses Paid<br>(Add Lines 8 and 9) (See page 2 of instruction sheet)   | 723 | 917.15 |
| 11. Total Value of In Kind Expenses in Excess of \$100 (See page 3 of instruction sheet)  | 0   | 0      |
| 12. Disposition of Unspent Contributions<br>(Only reported on Report #3, Annual Report or 15 <sup>th</sup> day of the second month after candidates defeat or incumbent does not run for reelection)<br>(See page 3 of instruction sheet) |     |        |

AFFIRMATION

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

Signature James L. Duan, Jr. Date 5/26/09



Name (print)

Office (if applicable)

District (if applicable)

**Expense Categories**

| CATEGORIES  | CODE |
|---|------|
| Office expenses   | A    |
| Expenses related to volunteers  | B    |
| Expenses related to travel  | C    |
| Expenses related to advertising   | D    |
| Expenses related to paid staff  | E    |
| Expenses related to consultants   | F    |
| Expenses related to polling   | G    |
| Expenses related to special events  | H    |
| ** Goods and services provided in kind for which money would otherwise have been paid | I    |
| Other miscellaneous expenses  | J    |

**\*\* NRS 294A.362 requires "In Kind" contributions and expenses to be reported on a separate form, which is attached.**



## IN KIND CONTRIBUTIONS AND EXPENSES REPORT

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**IN KIND CONTRIBUTION IS DEFINED AS THE VALUE OF SERVICES PROVIDED IN KIND FOR WHICH MONEY WOULD HAVE OTHERWISE BEEN PAID.**

*In kind contributions and expenses include: paid polling and resulting data, paid direct mail, paid solicitation by telephone, any paid paraphernalia that was printed or otherwise produced to promote a campaign and the use of paid personnel to assist in a campaign. An in kind contribution may also include, but is not limited to: goods and services such as billboards, office space, printing, food and beverage and yard signs.*

**The donor of in kind contributions shall furnish to the recipient (candidate or other person), a written statement setting forth the actual cost of those services or the fair market value within 30 days after the time he furnishes those services. (NAC 294A.043)**

**Examples of in kind contributions:** (1) A person contributes billboard space and does not charge the candidate. The candidate would report the fair market value or actual cost of the billboard space as an in kind contribution; (2) A person pays for the printing cost of political signs for a candidate. The candidate would report the actual cost or fair market value of printing the signs as an in kind contribution.

**Example of in kind expenses:** (1) A person contributes the use of a large room to a candidate as an in kind contribution. Once the candidate utilizes the room it becomes an in kind expense to be reported.



**IN KIND  
WRITTEN COMMITMENTS**

**Report Period # 2**

Jim Dunn  
Name (print)

HENDERSON CITY COUNCIL  
Office (if applicable)

District (if applicable)

**In Kind Written Commitments in Excess of \$100 or, When Added Together from One Entity Exceeds \$100  
Transfer Total Amount of All Written Commitments to Line 6 of Contributions Summary**

| NAME AND ADDRESS OF PERSON WHO MADE THE IN KIND COMMITMENT | DATE OF EACH IN KIND COMMITMENT | AMOUNT OF EACH IN KIND COMMITMENT |
|--|---------------------------------|-----------------------------------|
| NONE   |                                 |                                   |
|  |                                 |                                   |
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Jim Dunn  
Name (print)

HENDERSON CITY COUNCIL  
Office (if applicable)

District (if applicable)

Written Commitments in Excess of \$100 or, When Added Together from One Entity Exceeds \$100  
Transfer Total Amount of All Written Commitments to Line 6 of Contributions Summary

| NAME AND ADDRESS OF PERSON WHO MADE THE COMMITMENT | DATE OF EACH COMMITMENT | AMOUNT OF EACH COMMITMENT |
|--|-------------------------|---------------------------|
| NONE   |                         |                           |
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**IN KIND CAMPAIGN EXPENSES**

Report Period # 2

JIM DUNN  
Name (print)

HENDERSON CITY COUNCIL  
Office (if applicable)

District (if applicable)

**IN KIND**

**Expenses in Excess of \$100**

Transfer Total Value of All In-Kind Campaign Expenses to Line 11 of Expenses Summary

| 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 |
|--|-------------------------------------|------------------------------|---------------------------------------|
| NONE   |                                     |                              |                                       |
|  |                                     |                              |                                       |
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Prescribed by Secretary of State  
NRS 294A.120, 294A.125,  
294A.140, 294A.150, 294A.160  
294A.200, 294A.210, 294A.220, 294A.362