

CAMPAIGN CONTRIBUTIONS AND EXPENSES REPORT

State of Nevada

Name (print) KARL J. SCHWETZ Office (if applicable) Justice of the Peace District (if applicable) _____
 Mailing Address (include city and zip code) P.O. Box 8155 Incline Village, NV 89452 Telephone No. 775-331-2900
 E-Mail Address Kj.schwetz@abcglobal.net

Select Appropriate Box(es) CANDIDATE PAC BAG POL PRTY IND EXP NONPROFIT CORP
 AMENDED ANNUAL FILING PETITIONERS WHO INITIATE/CIRCULATE PETITION & RECEIVE OR EXPEND FUNDS IN EXCESS OF 10K

- Annual Filing - Due January 15, 2006
Period: January 1, 2005 - December 31, 2005
- Report #1 - Due August 8, 2006*
Period: Jan. 1, 2006 - Aug 3, 2006
- Report #2 Due - October 31, 2006*
Period: Aug. 4, 2006 - Oct. 26, 2006
- Report #3 Due - January 15, 2007**
Period: Oct. 27, 2006 - Dec. 31, 2006
- Annual Filing - Due January 15, 2007
Period: January 1, 2006 - December 31, 2006

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FOR OFFICE USE ONLY

* These Reports are filed by incumbents/candidates running for office in the 2006 election cycle
 ** Third Report suffices for 2007 Annual Filing if candidate also filed Report Nos. 1 and 2

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 (See page 1 of instruction sheet) | 4250. | |
| 2. Total Monetary Contributions Received of \$100 or Less (See page 2 of instruction sheet) | 94. | |
| 3. Total Monetary Contributions in the form of loans guaranteed by a third party. (See page 2 of instruction sheet) | - 0 - | |
| 4. Total Monetary Contributions in the form of loans that were forgiven (See page 2 of instruction sheet) | - 0 - | |
| | This Period | Cumulative From Beginning of Report Period #1 Through End of This Reporting Period |
| 5. Total Amount of Monetary Contributions Received (Add Lines 1 through 4) (See page 2 of instruction sheet) | 4344. ⁰⁰ / ₁₀₀ | |
| 6. Total Amount of Written Commitments for Contributions (When commitment is funded, report as contribution (monetary or in kind)) (See page 2 of instruction sheet) | - 0 - | |
| 7. Total Value of In Kind Contributions Received in Excess of \$100 (See page 2 of instruction sheet) | 2500. ⁰⁰ / ₁₀₀ | |

EXPENSES SUMMARY

| | |
|---|--------------------------------------|
| 8. Total Monetary Expenses Paid in Excess of \$100 (See page 2 of instruction sheet) | 4412. ⁰⁴ / ₁₀₀ |
| 9. Total Monetary Expenses Paid of \$100 or Less (See page 2 of instruction sheet) | 87. ⁵⁰ / ₁₀₀ |
| 10. Total Amount of All Monetary Expenses Paid (Add Lines 8 and 9) (See page 2 of instruction sheet) | 4499. ⁵⁰ / ₁₀₀ |
| 11. Total Value of In Kind Expenses in Excess of \$100 (See page 3 of instruction sheet) | 2500 |
| 12. Disposition of Unspent Contributions (Only reported on Report #3, Annual Report or 15 th day of the second month after candidates defeat or incumbent does not run for reelection) (See page 3 of instruction sheet) | |

AFFIRMATION

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

Signature Karl Schwetz Date 8-2-06

CAMPAIGN CONTRIBUTIONS

Report Period # 1

Name (print) KARL J. SCHWETZ Office (if applicable) I-O-P District (if applicable)

Contributions in Excess of \$100 or, When Added Together from One Contributor Exceeds \$100
 Transfer Total Amount of All Campaign Contributions to Line 1 of Contributions Summary

| CONTRIBUTOR'S NAME AND ADDRESS | DATE OF EACH CONTRIBUTION | AMOUNT OF EACH CONTRIBUTION | CHECK HERE IF LOAN | NAME AND ADDRESS OF 3 RD PARTY IF LOAN GUARANTEED BY 3 RD PARTY | NAME AND ADDRESS OF PERSON WHO FORGAVE THE LOAN, IF DIFFERENT THAN CONTRIBUTOR |
|--|---------------------------|---------------------------------------|--------------------|---|--|
| John FLIEDER 23329 ISABELLA Columbia, Caly 95310 | 7-10-06 | \$ 250. ⁰⁰ / ₁₄ | | | |
| KARL SCHWETZ PO Box 8155 Inching Village, NV 89452 | 7-19-06 | 2,000 | | | |
| KARL SCHWETZ PO Box 8155 IU, NV 89452 | 7-24-06 | 2,000 | | | |
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CAMPAIGN EXPENSES

Report Period # 1

Name (print) KARL T. SCHWETZ Office (if applicable) I.O.P.

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.**

