

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **TYPE OR PRINT** ▼ Example: If typing, type over the lines.

12FE4M5

Amodei for Nevada

ADDRESS (number and street) ▼

503 N Division St

Check if different than previously reported. (ACC)

Carson City

NV

89703

2. **FEC IDENTIFICATION NUMBER** ▼

C C00496760

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT NEW (N) **OR** AMENDED (A)

NV

02

4. **TYPE OF REPORT** (Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)

Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:

- Primary (12P) General (12G) Runoff (12R)
- Convention (12C) Special (12S)

Election on 06 / 14 / 2016 in the State of NV

(c) 30-Day **POST**-Election Report for the:

- General (30G) Runoff (30R) Special (30S)

Election on / / in the State of

5. Covering Period

04 / 01 / 2016 through 05 / 25 / 2016

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 Nicola Neilon

Signature of Treasurer Nicola Neilon

[Electronically Filed]

Date

08 / 15 / 2016

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office Use Only								
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SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
Amodei for Nevada

Report Covering the Period: From: / / To: / /

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	64700.00	550357.02
(b) Total Contribution Refunds (from Line 20(d))	1557.94	16159.37
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	63142.06	534197.65
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	65943.73	444607.32
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	8993.28
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	65943.73	435614.04
8. Cash on Hand at Close of Reporting Period (from Line 27).....	283132.73	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	9000.00	

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

Amodei for Nevada

Report Covering the Period: From: / / To: / /

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	22250.00	294807.94
(ii) Unitemized.....	950.00	13700.00
(iii) TOTAL of contributions from individuals ▶	23200.00	308507.94
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	41500.00	241849.08
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	64700.00	550357.02
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	8993.28
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	64700.00	559350.30

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	65943.73	444607.32
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	92050.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	1557.94	15507.94
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	651.43
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	1557.94	16159.37
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	67501.67	552816.69

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	285934.40
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	64700.00
25. SUBTOTAL (add Line 23 and Line 24).....	350634.40
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	67501.67
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	283132.73

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 OF 56
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

A. Full Name (Last, First, Middle Initial)
Charles Abele Jr.

Mailing Address 290 North Federal Hwy

City Hollywood	State FL	Zip Code 33020
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FEC ID number of contributing federal political committee. **C**

Name of Employer GCFRC	Occupation Real Estate Development
---------------------------	---------------------------------------

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 20 / 2016

Transaction ID : SA11AI.14002

Amount of Each Receipt this Period
1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Joanne Ballardini

Mailing Address PO Box 1984

City Carson City	State NV	Zip Code 89701
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FEC ID number of contributing federal political committee. **C**

Name of Employer None	Occupation Retired
--------------------------	-----------------------

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1800.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 11 / 2016

Transaction ID : SA11AI.14043

Amount of Each Receipt this Period
300.00

Memo Item contribution

C. Full Name (Last, First, Middle Initial)
Joanne Ballardini

Mailing Address PO Box 1984

City Carson City	State NV	Zip Code 89701
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FEC ID number of contributing federal political committee. **C**

Name of Employer None	Occupation Retired
--------------------------	-----------------------

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2100.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 11 / 2016

Transaction ID : SA11AI.14044

Amount of Each Receipt this Period
300.00

Memo Item contribution

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

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

1600.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 56
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

A. Margaret Benz
Full Name (Last, First, Middle Initial)
Mailing Address 1265 Old Foothill Rd,
City State Zip Code
Gardnerville NV 89460
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
None Retired
Receipt For: 2016
 Primary General
 Other (specify)
Election Cycle-to-Date
350.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 25 / 2016
Transaction ID : SA11AI.14096
Amount of Each Receipt this Period
200.00
 Memo Item

B. Richard Biegel
Full Name (Last, First, Middle Initial)
Mailing Address 2831 St. Rose Pkwy Suite 300
City State Zip Code
Las Vegas NV 89012
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Immigration Capital CEO
Receipt For: 2016
 Primary General
 Other (specify)
Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
04 / 06 / 2016
Transaction ID : SA11AI.13990
Amount of Each Receipt this Period
250.00
 Memo Item

C. Jeff Campion
Full Name (Last, First, Middle Initial)
Mailing Address 1835 Main Street #101
City State Zip Code
Weston FL 33326
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
self Attorney
Receipt For: 2016
 Primary General
 Other (specify)
Election Cycle-to-Date
2000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
04 / 16 / 2016
Transaction ID : SA11AI.13997
Amount of Each Receipt this Period
2000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....
TOTAL This Period (last page this line number only).....

2450.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 7 OF 56
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

A. Full Name (Last, First, Middle Initial)
Jeffrey Carr

Mailing Address **Box 1506**

City **Williston** State **VT** Zip Code **05495**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Economic & Policy Resources In** Occupation **Economist**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 21 / 2016

Transaction ID : SA11AI.14004

Amount of Each Receipt this Period
250.00

Memo Item

B. Full Name (Last, First, Middle Initial)
J Michael Carroll

Mailing Address **14951 N 103rd Way**

City **Scottsdale** State **AZ** Zip Code **85255-8501**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Green Card Fund** Occupation **COO**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 15 / 2016

Transaction ID : SA11AI.14008

Amount of Each Receipt this Period
250.00

Memo Item
campaign 2016

C. Full Name (Last, First, Middle Initial)
Caleb Froehlich

Mailing Address **616 E Street NW #1155**

City **Washington** State **DC** Zip Code **20004**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Interpublic Group of Companies** Occupation **Attorney/Consultant**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 11 / 2016

Transaction ID : SA11AI.14031

Amount of Each Receipt this Period
500.00

Memo Item

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

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

1000.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 8 OF 56
(check only one)
 11a 12
 11b 13a
 11c 13b
 11d 14
 15

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

A. Full Name (Last, First, Middle Initial)
Harry Glenn

Mailing Address 1540 Gulf Blvd #404

City Clearwater State FL Zip Code 33767

FEC ID number of contributing federal political committee. **C**

Name of Employer Van Scoyoc Associates Occupation Vice President

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 16 / 2016

Transaction ID : SA11AI.14053

Amount of Each Receipt this Period
500.00

Memo Item
2016 Primary

B. Full Name (Last, First, Middle Initial)
REW GOODENOW

Mailing Address 50 W Liberty St Ste 750

City Reno State NV Zip Code 89501

FEC ID number of contributing federal political committee. **C**

Name of Employer Parsons Behle & Latimer Occupation Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 06 / 2016

Transaction ID : SA11AI.13993

Amount of Each Receipt this Period
1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Michael P Halloran

Mailing Address 18940 Ojia Drive

City Los Gatos State CA Zip Code 95030

FEC ID number of contributing federal political committee. **C**

Name of Employer NES Financial Occupation Chairman/CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 15 / 2016

Transaction ID : SA11AI.14016

Amount of Each Receipt this Period
1250.00

Memo Item

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

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

2750.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 56
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

A. Full Name (Last, First, Middle Initial)
Anna Holder

Mailing Address 900 Schellbourne St

City Reno State NV Zip Code 89511

FEC ID number of contributing federal political committee. **C**

Name of Employer The Holders Group Occupation Owner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 25 / 2016

Transaction ID : SA11AI.14089

Amount of Each Receipt this Period
250.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Alan Humphrey

Mailing Address 1595 Meadow Wood Lane

City Reno State NV Zip Code 89502

FEC ID number of contributing federal political committee. **C**

Name of Employer International Test Solutions Occupation President

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5457.94

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 04 / 2016

Transaction ID : SA11AI.13992

Amount of Each Receipt this Period
2500.00

Memo Item donation

C. Full Name (Last, First, Middle Initial)
Alan Humphrey

Mailing Address 1595 Meadow Wood Lane

City Reno State NV Zip Code 89502

FEC ID number of contributing federal political committee. **C**

Name of Employer International Test Solutions Occupation President

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 04 / 2016

Transaction ID : SA11AI.14077

Amount of Each Receipt this Period
-2442.06

Memo Item Redesignate: donation

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

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

2750.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 56
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

A. Full Name (Last, First, Middle Initial)
Alan Humphrey

Mailing Address 1595 Meadow Wood Lane

City Reno	State NV	Zip Code 89502
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FEC ID number of contributing federal political committee. **C**

Name of Employer International Test Solutions	Occupation President
--	-------------------------

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 04 / 2016

Transaction ID : SA11AI.14078

Amount of Each Receipt this Period
 2442.06

Memo Item
 Redesignate: to General

B. Full Name (Last, First, Middle Initial)
Jun Li

Mailing Address 2426 Leonardo Street

City Davis	State CA	Zip Code 95618
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FEC ID number of contributing federal political committee. **C**

Name of Employer CTC Investment Hongkong Ltd	Occupation CEO
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Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 15 / 2016

Transaction ID : SA11AI.14014

Amount of Each Receipt this Period
 250.00

Memo Item
 contribution

C. Full Name (Last, First, Middle Initial)
Thomas A Maibenco

Mailing Address 10640 North McCarran Blvd F-347

City Reno	State NV	Zip Code 89502
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FEC ID number of contributing federal political committee. **C**

Name of Employer Self	Occupation Physician
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Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 3600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 18 / 2016

Transaction ID : SA11AI.14001

Amount of Each Receipt this Period
 1000.00

Memo Item

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

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

1250.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 11 OF 56
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

A. Full Name (Last, First, Middle Initial)
Thomas A Maibenco

Mailing Address 10640 North McCarran Blvd F-347

City State Zip Code
Reno NV 89502

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Physician

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 18 / 2016

Transaction ID : SA11AI.14080

Amount of Each Receipt this Period
 -900.00

Memo Item
 Redesignate:

B. Full Name (Last, First, Middle Initial)
Thomas A Maibenco

Mailing Address 10640 North McCarran Blvd F-347

City State Zip Code
Reno NV 89502

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Physician

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 18 / 2016

Transaction ID : SA11AI.14081

Amount of Each Receipt this Period
 900.00

Memo Item
 Redesignate: to general

C. Full Name (Last, First, Middle Initial)
Thomas A Maibenco

Mailing Address 10640 North McCarran Blvd F-347

City State Zip Code
Reno NV 89502

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Physician

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 4300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 22 / 2016

Transaction ID : SA11AI.14061

Amount of Each Receipt this Period
 700.00

Memo Item

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

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

700.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 12 OF 56
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

A. Full Name (Last, First, Middle Initial)
Thomas A Maibenco

Mailing Address 10640 North McCarran Blvd F-347

City Reno State NV Zip Code 89502

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Physician

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 22 / 2016

Transaction ID : SA11AI.14083

Amount of Each Receipt this Period
 _____ -700.00

Memo Item
 Redesignate:

B. Full Name (Last, First, Middle Initial)
Thomas A Maibenco

Mailing Address 10640 North McCarran Blvd F-347

City Reno State NV Zip Code 89502

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Physician

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 22 / 2016

Transaction ID : SA11AI.14084

Amount of Each Receipt this Period
 _____ 700.00

Memo Item
 Redesignate: to General

C. Full Name (Last, First, Middle Initial)
JERRY MATSUMURA

Mailing Address 1394 Amado Ct

City Reno State NV Zip Code 89511

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Physician

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 850.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 25 / 2016

Transaction ID : SA11AI.14071

Amount of Each Receipt this Period
 _____ 500.00

Memo Item

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

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

_____ 500.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 13 OF 56
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

A. Full Name (Last, First, Middle Initial)
Korliss Miller

Mailing Address 1088 Wisteria Dr.

City Minden State NV Zip Code 89423

FEC ID number of contributing federal political committee. **C**

Name of Employer Winco Mfg Co., Inc Occupation Owner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2150.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 25 / 2016

Transaction ID : SA11AI.14095

Amount of Each Receipt this Period
500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
John O'Rourke

Mailing Address 11028 Stanmore Drive

City Potomac State MD Zip Code 20854

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Employed Occupation Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 11 / 2016

Transaction ID : SA11AI.14238

Amount of Each Receipt this Period
1000.00

Memo Item
In-kind - fundraising event expenses

C. Full Name (Last, First, Middle Initial)
Carol Pitts

Mailing Address 8 Marlette Drive

City Carson City State NV Zip Code 89703

FEC ID number of contributing federal political committee. **C**

Name of Employer retired Occupation retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 13 / 2016

Transaction ID : SA11AI.14038

Amount of Each Receipt this Period
100.00

Memo Item
Contribution

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

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

1600.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 56
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

A. Full Name (Last, First, Middle Initial)
Genevieve Roman

Mailing Address 9911 Shelbyville Road

City Louisville State KY Zip Code 40223

FEC ID number of contributing federal political committee. **C**

Name of Employer Extell Development Company Occupation Real Estate

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 16 / 2016

Transaction ID : SA11AI.13995

Amount of Each Receipt this Period
 250.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Kathryn E Ruffalo

Mailing Address 20423 Rosemallow Ct

City Potomac Falls State VA Zip Code 20165

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Consultant

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 16 / 2016

Transaction ID : SA11AI.14052

Amount of Each Receipt this Period
 500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Oswaldo Torres

Mailing Address 888 SE 3rd Avenue

City Ft Lauderdale State FL Zip Code 33316

FEC ID number of contributing federal political committee. **C**

Name of Employer Torres Law PA Occupation Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 16 / 2016

Transaction ID : SA11AI.13999

Amount of Each Receipt this Period
 250.00

Memo Item

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

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

1000.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 56
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

A. Full Name (Last, First, Middle Initial)
Greg Wing

Mailing Address 5493 S. Acacia Creek Drive

City Green Valley	State AZ	Zip Code 85622-8098
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Education Fund of America	Occupation President
---	-------------------------

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 15 / 2016

Transaction ID : SA11AI.14012

Amount of Each Receipt this Period
1000.00

Memo Item donation

B. Full Name (Last, First, Middle Initial)
Andrea Wynn

Mailing Address 3131 Las Vegas, BLVD S

City Las Vegas	State NV	Zip Code 89109
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer self	Occupation homemaker
--------------------------	-------------------------

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 13 / 2016

Transaction ID : SA11AI.14087

Amount of Each Receipt this Period
2700.00

Memo Item
Reattribute: from Stephen to Andrea Wynn

C. Full Name (Last, First, Middle Initial)
Stephen Wynn

Mailing Address 3131 Las Vegas, BLVD S

City Las Vegas	State NV	Zip Code 89109
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Wynn Resorts	Occupation Chairman
----------------------------------	------------------------

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 13 / 2016

Transaction ID : SA11AI.14039

Amount of Each Receipt this Period
2700.00

Memo Item contribution

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

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

6400.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 16 OF 56
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

A. Full Name (Last, First, Middle Initial)
Stephen Wynn

Mailing Address 3131 Las Vegas, BLVD S

City Las Vegas State NV Zip Code 89109

FEC ID number of contributing federal political committee. **C**

Name of Employer Wynn Resorts Occupation Chairman

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 13 / 2016

Transaction ID : SA11AI.14040

Amount of Each Receipt this Period
2700.00

Memo Item Contribution

B. Full Name (Last, First, Middle Initial)
Stephen Wynn

Mailing Address 3131 Las Vegas, BLVD S

City Las Vegas State NV Zip Code 89109

FEC ID number of contributing federal political committee. **C**

Name of Employer Wynn Resorts Occupation Chairman

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 13 / 2016

Transaction ID : SA11AI.14086

Amount of Each Receipt this Period
-2700.00

Memo Item Reattribute: Contribution

C. Full Name (Last, First, Middle Initial)
Hong Yu

Mailing Address 653 Sweet Orange Ter

City St. Augustine State FL Zip Code 32092-2807

FEC ID number of contributing federal political committee. **C**

Name of Employer Waylink Inc Occupation Managing Partner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 15 / 2016

Transaction ID : SA11AI.14006

Amount of Each Receipt this Period
250.00

Memo Item contribution

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

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

250.00

22250.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 17 OF 56
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

A. Full Name (Last, First, Middle Initial)
AKERMAN LLP PAC

Mailing Address **495 NORTH KELLER ROAD**
SUITE 300

City **MAITLAND** State **FL** Zip Code **32751**

FEC ID number of contributing federal political committee. **C C00280008**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 23 / 2016

Transaction ID : SA11C.14069

Amount of Each Receipt this Period
2500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
ALBEMARLE CORPORATION POLITICAL ACTION COMMITTEE

Mailing Address **451 FLORIDA STREET**

City **BATON ROUGE** State **LA** Zip Code **70801**

FEC ID number of contributing federal political committee. **C C00377333**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 13 / 2016

Transaction ID : SA11C.14047

Amount of Each Receipt this Period
2500.00

Memo Item
2016 General

C. Full Name (Last, First, Middle Initial)
AMERICAN ACADEMY OF OPHTHALMOLOGY INC POLITICAL COMMITTEE (OPHTHPAC)

Mailing Address **655 BEACH STREET**

City **SAN FRANCISCO** State **CA** Zip Code **94109**

FEC ID number of contributing federal political committee. **C C00196246**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 13 / 2016

Transaction ID : SA11C.14041

Amount of Each Receipt this Period
1000.00

Memo Item
2016 Primary

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

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

6000.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)	PAGE 18 OF 56
<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a
<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

Full Name (Last, First, Middle Initial)
AMERICAN INSTITUTE OF CERTIFIED PUBLIC ACCOUNTANTS POLITICAL ACTION COMMITTEE

A. Mailing Address **PALLADIAN 1**
220 LEIGH FARM RD

City DURHAM	State NC	Zip Code 27707
-----------------------	--------------------	--------------------------

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 15 / 2016

Transaction ID : SA11C.14020

FEC ID number of contributing federal political committee. **C C00077321**

Amount of Each Receipt this Period

2500.00

Name of Employer	Occupation
------------------	------------

Memo Item
2016 Primary Election

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

5000.00

Full Name (Last, First, Middle Initial)
AMERICAN SOCIETY OF ANESTHESIOLOGISTS

B. Mailing Address **520 N NORTHWEST HIGHWAY**

City PARK RIDGE	State IL	Zip Code 60068-2538
---------------------------	--------------------	-------------------------------

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 25 / 2016

Transaction ID : SA11C.14070

FEC ID number of contributing federal political committee. **C C70004684**

Amount of Each Receipt this Period

1000.00

Name of Employer	Occupation
------------------	------------

Memo Item

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

5000.00

Full Name (Last, First, Middle Initial)
BEST BUY CO., INC EMPLOYEE POLITICAL FORUM

C. Mailing Address **7601 PENN AVENUE SOUTH**

City RICHFIELD	State MN	Zip Code 55423
--------------------------	--------------------	--------------------------

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 24 / 2016

Transaction ID : SA11C.14229

FEC ID number of contributing federal political committee. **C C00405076**

Amount of Each Receipt this Period

1000.00

Name of Employer	Occupation
------------------	------------

Memo Item
2016 Primary

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

1000.00

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

4500.00

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

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**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 56
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

A. Full Name (Last, First, Middle Initial)
CHARTER COMMUNICATIONS INC. POLITICAL ACTION COMMITTEE

Mailing Address 1919 PENNSYLVANIA AVE. N.W.
STE. 750

City State Zip Code
WASHINGTON DC 20006

FEC ID number of contributing federal political committee. **C C00426775**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date
 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 15 / 2016

Transaction ID : SA11C.14019

Amount of Each Receipt this Period
 2500.00

Memo Item
2016 Primary

B. Full Name (Last, First, Middle Initial)
EMPLOYEES OF NORTHROP GRUMMAN CORPORATION PAC

Mailing Address 2980 FAIRVIEW PARK DRIVE

City State Zip Code
FALLS CHURCH VA 22042

FEC ID number of contributing federal political committee. **C C00088591**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date
 8500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 06 / 2016

Transaction ID : SA11C.14027

Amount of Each Receipt this Period
 2500.00

Memo Item
2016 General

C. Full Name (Last, First, Middle Initial)
GREENBERG TRAUIG, P.A. PAC

Mailing Address 54 STATE STREET
6TH FLOOR

City State Zip Code
ALBANY NY 12207

FEC ID number of contributing federal political committee. **C C00266585**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date
 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 15 / 2016

Transaction ID : SA11C.14011

Amount of Each Receipt this Period
 1000.00

Memo Item
2016 Primary

SUBTOTAL of Receipts This Page (optional)..... 6000.00

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

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 56
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

A. HOLLAND & KNIGHT COMMITTEE FOR EFFECTIVE GOVERNMENT

Full Name (Last, First, Middle Initial)
HOLLAND & KNIGHT COMMITTEE FOR EFFECTIVE GOVERNMENT

Mailing Address **800 17TH STREET, NW
SUITE 1100**

City **WASHINGTON** State **DC** Zip Code **20006**

FEC ID number of contributing federal political committee. **C C00171330**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 22 / 2016

Transaction ID : SA11C.14022

Amount of Each Receipt this Period
1000.00

Memo Item
2016 Primary

B. HONEYWELL INTERNATIONAL POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)
HONEYWELL INTERNATIONAL POLITICAL ACTION COMMITTEE

Mailing Address **101 CONSTITUTION AVE. NW
SUITE 500 WEST**

City **WASHINGTON** State **DC** Zip Code **20001**

FEC ID number of contributing federal political committee. **C C00096156**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **2500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 04 / 2016

Transaction ID : SA11C.13987

Amount of Each Receipt this Period
2500.00

Memo Item
2016 Primary

C. INTERNATIONAL COUNCIL OF SHOPPING CENTERS INC POLITICAL ACTION COMMITTEE (ICSC PAC)

Full Name (Last, First, Middle Initial)
INTERNATIONAL COUNCIL OF SHOPPING CENTERS INC POLITICAL ACTION COMMITTEE (ICSC PAC)

Mailing Address **555 12TH STREET, NW
SUITE 660**

City **WASHINGTON** State **DC** Zip Code **20004**

FEC ID number of contributing federal political committee. **C C00217638**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **2500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 24 / 2016

Transaction ID : SA11C.14237

Amount of Each Receipt this Period
2500.00

Memo Item

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

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

6000.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 56
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

A. Full Name (Last, First, Middle Initial)
INTERNATIONAL GAME TECHNOLOGY (IGT) PAC

Mailing Address 9295 PROTOTYPE DRIVE

City RENO State NV Zip Code 89511

FEC ID number of contributing federal political committee. **C C00316331**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **5000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 16 / 2016

Transaction ID : SA11C.14057

Amount of Each Receipt this Period
 2500.00

Memo Item
 Primary 2016

B. Full Name (Last, First, Middle Initial)
MILLERCOORS LLC PAC

Mailing Address 1501 M STREET NW SUITE 330

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C C00457697**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 16 / 2016

Transaction ID : SA11C.14060

Amount of Each Receipt this Period
 1000.00

Memo Item
 2016 Primary

C. Full Name (Last, First, Middle Initial)
NATIONAL ASSOCIATION OF INSURANCE AND FINANCIAL ADVISORS POLITICAL ACTION COMM

Mailing Address 2901 TELESTAR CT.

City FALLS CHURCH State VA Zip Code 22042

FEC ID number of contributing federal political committee. **C C00005249**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **3000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 25 / 2016

Transaction ID : SA11C.14088

Amount of Each Receipt this Period
 3000.00

Memo Item
 2016 Primary

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

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

6500.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 56
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

A. Full Name (Last, First, Middle Initial)
NATIONAL BEER WHOLESALERS ASSOCIATION POLITICAL ACTION COMMITTEE

Mailing Address 1101 KING STREET
SUITE 600

City ALEXANDRIA State VA Zip Code 22314

FEC ID number of contributing federal political committee. **C C00144766**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 24 / 2016

Transaction ID : SA11C.14231

Amount of Each Receipt this Period
2500.00

Memo Item
Primary 2016

B. Full Name (Last, First, Middle Initial)
POLSINELLI PAC

Mailing Address 900 W 48TH PLACE STE 900

City KANSAS CITY State MO Zip Code 64112

FEC ID number of contributing federal political committee. **C C00445981**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 16 / 2016

Transaction ID : SA11C.14055

Amount of Each Receipt this Period
1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
REAL ESTATE ROUNDTABLE POLITICAL ACTION COMMITTEE (REALPAC)

Mailing Address 801 PENNSYLVANIA AVENUE
SUITE 720

City WASHINGTON State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C C00033779**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
04 / 22 / 2016

Transaction ID : SA11C.14021

Amount of Each Receipt this Period
1000.00

Memo Item
Primary 2016

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

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

4500.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 56
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

A. Full Name (Last, First, Middle Initial)
SIERRA NEVADA CORPORATION PAC

Mailing Address P.O. BOX 50193

City State Zip Code
SPARKS NV 89434

FEC ID number of contributing federal political committee. **C C00367995**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
7000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 06 / 2016

Transaction ID : SA11C.14026

Amount of Each Receipt this Period
1000.00

Memo Item
2016 General

B. Full Name (Last, First, Middle Initial)
SPACE EXPLORATION TECHNOLOGIES CORP. PAC

Mailing Address 1 Rocket Road

City State Zip Code
Hawthorne CA 90250

FEC ID number of contributing federal political committee. **C C00411116**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 24 / 2016

Transaction ID : SA11C.14233

Amount of Each Receipt this Period
1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
THE BOEING COMPANY POLITICAL ACTION COMMITTEE

Mailing Address 1200 WILSON BLVD

City State Zip Code
ARLINGTON VA 22209

FEC ID number of contributing federal political committee. **C C00142711**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
6000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 06 / 2016

Transaction ID : SA11C.14028

Amount of Each Receipt this Period
1000.00

Memo Item
2016 General

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

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

3000.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 24 OF 56
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

A. Full Name (Last, First, Middle Initial)
UNION PACIFIC CORP. FUND FOR EFFECTIVE GOVERNMENT

Mailing Address 600 13TH ST., NW
SUITE 340

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C C00010470**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
4000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 24 / 2016

Transaction ID : SA11C.14235

Amount of Each Receipt this Period
2000.00

Memo Item
2016 Primary Election

B. Full Name (Last, First, Middle Initial)
WEXLER & WALKER PUBLIC POLICY ASSOCIATES PAC (A UNIT OF HILL & KNOWLTON)

Mailing Address 1317 F STREET NW
SUITE 800

City WASHINGTON State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C C00248195**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 16 / 2016

Transaction ID : SA11C.14058

Amount of Each Receipt this Period
500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
WINE AND SPIRITS WHOLESALERS OF AMERICA, INC. POLITICAL ACTION COMMITTEE

Mailing Address 805 FIFTEENTH ST NW SUITE 430

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C C00147173**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 16 / 2016

Transaction ID : SA11C.14054

Amount of Each Receipt this Period
2500.00

Memo Item
2016 Primary

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

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

5000.00

41500.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 25 OF 56	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

Full Name (Last, First, Middle Initial) A. Adele's		Date of Disbursement M M / D D / Y Y Y Y 05 / 03 / 2016
Mailing Address 1112 North Carson Street		Amount of Each Disbursement this Period 270.00
City Carson City State NV Zip Code 89701	Purpose of Disbursement Contributor relations - meals & entertainment	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type 003	Transaction ID : SB17.14131
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. American Express Collections		Date of Disbursement M M / D D / Y Y Y Y 04 / 05 / 2016
Mailing Address P.O. Box 981540		Amount of Each Disbursement this Period 14.60
City El Paso State TX Zip Code 79998	Purpose of Disbursement Merchant fees	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type 001	Transaction ID : SB17.14171
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. American Express Collections		Date of Disbursement M M / D D / Y Y Y Y 05 / 05 / 2016
Mailing Address P.O. Box 981540		Amount of Each Disbursement this Period 29.05
City El Paso State TX Zip Code 79998	Purpose of Disbursement Merchant fees	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type 001	Transaction ID : SB17.14165
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	313.65
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 26 OF 56	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

Full Name (Last, First, Middle Initial) A. Arco Carson		Date of Disbursement M M / D D / Y Y Y Y 04 / 07 / 2016
Mailing Address 1017 N Carson		Amount of Each Disbursement this Period 43.12
City Carson City	State NV	
Zip Code 89701	Purpose of Disbursement Gas in lieu of mileage	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type 002	Transaction ID : SB17.14153
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Authnet Gateway		Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2016
Mailing Address P.O. Box 8999		Amount of Each Disbursement this Period 21.85
City San Francisco	State CA	
Zip Code 94128	Purpose of Disbursement Merchant fees	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type 001	Transaction ID : SB17.14172
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Authnet Gateway		Date of Disbursement M M / D D / Y Y Y Y 05 / 03 / 2016
Mailing Address P.O. Box 8999		Amount of Each Disbursement this Period 22.80
City San Francisco	State CA	
Zip Code 94128	Purpose of Disbursement Merchant fees	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type 001	Transaction ID : SB17.14166
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	87.77
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 27 OF 56	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

Full Name (Last, First, Middle Initial) A. Bill.com		Date of Disbursement M M / D D / Y Y Y Y 04 / 07 / 2016
Mailing Address 3200 Ash Street		Amount of Each Disbursement this Period 42.12
City Palo Alto State CA Zip Code 94306	Purpose of Disbursement Bank service charges <input type="checkbox"/> Memo Item	
Candidate Name	Category/Type 001	Transaction ID : SB17.14170
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

Full Name (Last, First, Middle Initial) B. Bill.com		Date of Disbursement M M / D D / Y Y Y Y 05 / 05 / 2016
Mailing Address 3200 Ash Street		Amount of Each Disbursement this Period 42.61
City Palo Alto State CA Zip Code 94306	Purpose of Disbursement bank service charges <input type="checkbox"/> Memo Item	
Candidate Name	Category/Type 001	Transaction ID : SB17.14164
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

Full Name (Last, First, Middle Initial) c. Bob's Printing & Signage		Date of Disbursement M M / D D / Y Y Y Y 05 / 23 / 2016
Mailing Address 3401 Cheechako Drive		Amount of Each Disbursement this Period 180.00
City Reno State NV Zip Code 89519	Purpose of Disbursement Custom printed banner <input type="checkbox"/> Memo Item	
Candidate Name	Category/Type 006	Transaction ID : SB17.14160
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	264.73
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 28 OF 56	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

Full Name (Last, First, Middle Initial) A. Bullys Carson City			Date of Disbursement MM / DD / YYYY 05 / 20 / 2016	
Mailing Address 3530 N. Carson Street			Amount of Each Disbursement this Period 60.00	
City Carson City	State NV	Zip Code 89706	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Contributor relations - meals & entertainment		Category/ Type 003		
Candidate Name			Transaction ID : SB17.14146	
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

Full Name (Last, First, Middle Initial) B. Capital Grill			Date of Disbursement MM / DD / YYYY 05 / 10 / 2016	
Mailing Address 601 Pennsylvania Ave NW			Amount of Each Disbursement this Period 890.00	
City Washington	State DC	Zip Code 20004	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Contributor relations - meals & entertainment		Category/ Type 003		
Candidate Name			Transaction ID : SB17.14135	
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

Full Name (Last, First, Middle Initial) c. Capital Grill			Date of Disbursement MM / DD / YYYY 05 / 18 / 2016	
Mailing Address 601 Pennsylvania Ave NW			Amount of Each Disbursement this Period 863.25	
City Washington	State DC	Zip Code 20004	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Contributor relations - meals & entertainment		Category/ Type 003		
Candidate Name			Transaction ID : SB17.14143	
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

SUBTOTAL of Disbursements This Page (optional).....	1813.25
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 29 OF 56	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

Full Name (Last, First, Middle Initial) A. Capitol Hill Club			Date of Disbursement M M / D D / Y Y Y Y 04 / 15 / 2016	
Mailing Address 300 First Street SE			Amount of Each Disbursement this Period 143.72	
City Washington	State DC	Zip Code 20003	<input type="checkbox"/> Memo Item	
Purpose of Disbursement Contributor relations - meals & entertainment		Category/ Type 003	Transaction ID : SB17.14112	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:			

Full Name (Last, First, Middle Initial) B. Capitol Hill Club			Date of Disbursement M M / D D / Y Y Y Y 04 / 15 / 2016	
Mailing Address 300 First Street SE			Amount of Each Disbursement this Period 244.87	
City Washington	State DC	Zip Code 20003	<input type="checkbox"/> Memo Item	
Purpose of Disbursement Contributor relations - meals & entertainment		Category/ Type 003	Transaction ID : SB17.14113	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:			

Full Name (Last, First, Middle Initial) c. Capitol Hill Club			Date of Disbursement M M / D D / Y Y Y Y 05 / 16 / 2016	
Mailing Address 300 First Street SE			Amount of Each Disbursement this Period 1051.95	
City Washington	State DC	Zip Code 20003	<input type="checkbox"/> Memo Item	
Purpose of Disbursement Contributor relations - meals & entertainment		Category/ Type 003	Transaction ID : SB17.14141	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:			

SUBTOTAL of Disbursements This Page (optional).....	1440.54
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 30 OF 56	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

Full Name (Last, First, Middle Initial) A. Capitol Hill Club			Date of Disbursement M M / D D / Y Y Y Y 05 / 16 / 2016	
Mailing Address 300 First Street SE			Amount of Each Disbursement this Period 137.10	
City Washington	State DC	Zip Code 20003	<input type="checkbox"/> Memo Item	
Purpose of Disbursement Contributor relations - meals & entertainment		Category/ Type 003	Transaction ID : SB17.14142	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:			

Full Name (Last, First, Middle Initial) B. Casey Neilon Inc			Date of Disbursement M M / D D / Y Y Y Y 04 / 11 / 2016	
Mailing Address 503 N Division St			Amount of Each Disbursement this Period 2000.00	
City Carson City	State NV	Zip Code 89703	<input type="checkbox"/> Memo Item	
Purpose of Disbursement Professional fees - accounting		Category/ Type 001	Transaction ID : SB17.14240	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:			

Full Name (Last, First, Middle Initial) c. Casey Neilon Inc			Date of Disbursement M M / D D / Y Y Y Y 05 / 19 / 2016	
Mailing Address 503 N Division St			Amount of Each Disbursement this Period 2000.00	
City Carson City	State NV	Zip Code 89703	<input type="checkbox"/> Memo Item	
Purpose of Disbursement Professional fees - accounting		Category/ Type 001	Transaction ID : SB17.14241	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:			

SUBTOTAL of Disbursements This Page (optional).....	4137.10
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 31 OF 56	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

Full Name (Last, First, Middle Initial) A. Casino Fandango		Date of Disbursement M M / D D / Y Y Y Y 04 / 24 / 2016
Mailing Address 3800 South Carson Street		Amount of Each Disbursement this Period 322.00
City Carson City State NV Zip Code 89701	Purpose of Disbursement Contributor relations - meals & entertainment Category/Type 003	
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) o	Transaction ID : SB17.14121
State: District:		

Full Name (Last, First, Middle Initial) B. Central Michel Richard		Date of Disbursement M M / D D / Y Y Y Y 04 / 14 / 2016
Mailing Address 1001 Pennsylvania Ave NW		Amount of Each Disbursement this Period 470.00
City Washington State DC Zip Code 20004	Purpose of Disbursement Contributor relations - meals & entertainment Category/Type 003	
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.14110
State: District:		

Full Name (Last, First, Middle Initial) c. Danielle Cherry		Date of Disbursement M M / D D / Y Y Y Y 04 / 11 / 2016
Mailing Address 385 Teramo Drive		Amount of Each Disbursement this Period 723.87
City Reno State NV Zip Code 89521	Purpose of Disbursement Expense reimbursements - please see memo Category/Type 003	
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.14195
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1515.87
TOTAL This Period (last page this line number only).....	

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB17

Transaction ID : SB17.14195

Fundraising expenses reimbursement - total \$723.87. Digiprint 4865 Longley Lane Suite C Reno NV 89502 \$459.80
Event invites with envelopes and return envelopes; USPS \$171.50 Stamps for envelopes and return envelopes; UPS
Store 748 South Meadows Pkwy Suite A9 Reno NV 89521 \$25.23 postage; Office Depot 1011 Steamboat Pkwy
Reno NV 89521 \$45.81 envelopes and postage; Yankee Candle 13945 S Virginia St Reno NV 89501 \$21.53 candle
for event hostess.

Form/Schedule:

Transaction ID:

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 56			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

Full Name (Last, First, Middle Initial) A. Danielle Cherry		Date of Disbursement M M / D D / Y Y Y Y 05 / 19 / 2016
Mailing Address 385 Teramo Drive		Amount of Each Disbursement this Period 10352.09
City Reno State NV Zip Code 89521	Purpose of Disbursement Fundraising consulting and expense reimbursements - please see memo	
Candidate Name	Category/Type 003	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.14203
State: District:		

Full Name (Last, First, Middle Initial) B. Chevron - Carson City		Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2016
Mailing Address 1102 North Carson Street		Amount of Each Disbursement this Period 70.19
City Carson City State NV Zip Code 89703	Purpose of Disbursement Gas in lieu of mileage	
Candidate Name	Category/Type 002	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.14148
State: District:		

Full Name (Last, First, Middle Initial) c. Chevron - Carson City		Date of Disbursement M M / D D / Y Y Y Y 05 / 05 / 2016
Mailing Address 1102 North Carson Street		Amount of Each Disbursement this Period 73.33
City Carson City State NV Zip Code 89703	Purpose of Disbursement Gas in lieu of mileage	
Candidate Name	Category/Type 002	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.14157
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	10495.61
TOTAL This Period (last page this line number only).....	

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB17

Transaction ID : SB17.14203

Campaign consulting for funds raised \$10,205.00. Fundraising expense reimbursements total \$147.09 - USPS \$85.75 stamps for invitations; Digiprint 4865 Longley Lane Suite C Reno NV 89502 \$61.34 invitations.

Form/Schedule:

Transaction ID:

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 56			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

Full Name (Last, First, Middle Initial) A. COLLINS FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y 04 / 21 / 2016
Mailing Address PO BOX 1295		Amount of Each Disbursement this Period 1000.00
City GAINESVILLE	State GA Zip Code 30503	
Purpose of Disbursement Contribution	011	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type	Transaction ID : SB17.14179
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: GA District: 09		

Full Name (Last, First, Middle Initial) B. Constant Contact		Date of Disbursement M M / D D / Y Y Y Y 04 / 28 / 2016
Mailing Address 1601 Trapelo Road		Amount of Each Disbursement this Period 40.00
City Waltham	State MA Zip Code 02451	
Purpose of Disbursement Email newsletter	004	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type	Transaction ID : SB17.14183
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Maria C Davis		Date of Disbursement M M / D D / Y Y Y Y 04 / 11 / 2016
Mailing Address 10050 Bronc COurt		Amount of Each Disbursement this Period 3000.00
City Reno	State NV Zip Code 89521	
Purpose of Disbursement Campaign consulting - outreach coordinator	003	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type	Transaction ID : SB17.14196
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	4040.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 36 OF 56	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

Full Name (Last, First, Middle Initial) A. Maria C Davis		Date of Disbursement M M / D D / Y Y Y Y 04 / 29 / 2016
Mailing Address 10050 Bronc COurt		Amount of Each Disbursement this Period 235.96
City Reno State NV Zip Code 89521	Category/Type 003	
Purpose of Disbursement Reimbursement for event costs - please see memo		<input type="checkbox"/> Memo Item
Candidate Name		Transaction ID : SB17.14244
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Delta Air		Date of Disbursement M M / D D / Y Y Y Y 04 / 20 / 2016
Mailing Address P.O. Box 20706		Amount of Each Disbursement this Period 634.60
City Atlanta State GA Zip Code 30320	Category/Type 002	
Purpose of Disbursement Airfare - travel expense		<input type="checkbox"/> Memo Item
Candidate Name		Transaction ID : SB17.14186
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Eagle Promotional Solutions		Date of Disbursement M M / D D / Y Y Y Y 05 / 19 / 2016
Mailing Address 1630 Karin Drive		Amount of Each Disbursement this Period 1398.80
City Carson City State NV Zip Code 89706	Category/Type 006	
Purpose of Disbursement Custom printed jar openers		<input type="checkbox"/> Memo Item
Candidate Name		Transaction ID : SB17.14204
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2269.36
TOTAL This Period (last page this line number only).....	

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB17

Transaction ID : SB17.14244

Total reimbursement for Cinco De Mayo event costs \$235.96. Sierra Mountain Graphics 925 Railborne Ct Sparks NV 89434 \$182.06 custom labels for water bottles; Costco 220 Harvard Way Reno NV 89502 \$33.90 bottled water; Event fees for attendance \$20.00.

Form/Schedule:

Transaction ID:

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 38 OF 56	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

Full Name (Last, First, Middle Initial) A. El Dorado Hotel		Date of Disbursement MM / DD / YYYY 05 / 19 / 2016
Mailing Address PO Box 3399		Amount of Each Disbursement this Period 3738.07
City Reno	State NV	
Zip Code 89505	Purpose of Disbursement Food and banquet costs for fundraising event	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type 003	Transaction ID : SB17.14199
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. FTD.com		Date of Disbursement MM / DD / YYYY 05 / 12 / 2016
Mailing Address 3113 Woodcreek Drive		Amount of Each Disbursement this Period 92.97
City Downers Grove	State IL	
Zip Code 60515	Purpose of Disbursement Flowers in appreciation of last minute event scheduling	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type 001	Transaction ID : SB17.14221
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Kaempfer Crowell		Date of Disbursement MM / DD / YYYY 05 / 19 / 2016
Mailing Address 1980 Festival Plaza Drive Suite 65		Amount of Each Disbursement this Period 1293.00
City Las Vegas	State NV	
Zip Code 89135-2958	Purpose of Disbursement Professional Fees - Legal	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type 001	Transaction ID : SB17.14202
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	5124.04
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 56			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

Full Name (Last, First, Middle Initial) A. Lamar Advertising Company		Date of Disbursement M M / D D / Y Y Y Y 05 / 23 / 2016
Mailing Address 4945 Joule Street		Amount of Each Disbursement this Period 16000.00
City Reno	State NV	
Zip Code 89502	Purpose of Disbursement Billboard advertising	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type 004	Transaction ID : SB17.14248
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Louis' Basque Corner		Date of Disbursement M M / D D / Y Y Y Y 05 / 02 / 2016
Mailing Address 301 E 4th St		Amount of Each Disbursement this Period 253.30
City Reno	State NV	
Zip Code 89512	Purpose of Disbursement Contributor relations - meals & entertainment	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type 003	Transaction ID : SB17.14130
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Maverik - Dayton		Date of Disbursement M M / D D / Y Y Y Y 04 / 05 / 2016
Mailing Address 2445 Riverboat Rd		Amount of Each Disbursement this Period 37.92
City Dayton	State NV	
Zip Code 89403	Purpose of Disbursement Gas in lieu of mileage	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type 002	Transaction ID : SB17.14152
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	16291.22
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 40 OF 56	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

Full Name (Last, First, Middle Initial) A. National Capital Flag Company			Date of Disbursement M M / D D / Y Y Y Y 04 / 13 / 2016	
Mailing Address 100 S Quaker Ln			Amount of Each Disbursement this Period 536.36	
City Alexandria	State VA	Zip Code 22314	<input type="checkbox"/> Memo Item	
Purpose of Disbursement Flags		Category/ Type 001	Transaction ID : SB17.14108	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. Nevada Humane Society			Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2016	
Mailing Address 2825 B Longley Lane			Amount of Each Disbursement this Period 750.00	
City Reno	State NV	Zip Code 89520	<input type="checkbox"/> Memo Item	
Purpose of Disbursement Table at Heels and Hounds benefit		Category/ Type 012	Transaction ID : SB17.14191	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) c. Nevada Women's Fund			Date of Disbursement M M / D D / Y Y Y Y 04 / 25 / 2016	
Mailing Address 770 Smithridge Dr. Suite 300			Amount of Each Disbursement this Period 1000.00	
City Reno	State NV	Zip Code 89502	<input type="checkbox"/> Memo Item	
Purpose of Disbursement Full page advertisement in program		Category/ Type 004	Transaction ID : SB17.14176	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	2286.36
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 41 OF 56	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

Full Name (Last, First, Middle Initial) A. John O'Rourke		Date of Disbursement M M / D D / Y Y Y Y 05 / 11 / 2016
Mailing Address 11028 Stanmore Drive		Amount of Each Disbursement this Period 1000.00
City Potomac	State MD	
Zip Code 20854	Purpose of Disbursement In-kind - fundraising event expenses	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type	Transaction ID : SB17.14239
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Pinocchio's Bar & Grill		Date of Disbursement M M / D D / Y Y Y Y 04 / 08 / 2016
Mailing Address 5995 S. Virginia Street		Amount of Each Disbursement this Period 96.00
City Reno	State NV	
Zip Code 89510	Purpose of Disbursement Contributor relations - meals & entertainment	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type 003	Transaction ID : SB17.14105
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Pinocchio's Bar & Grill		Date of Disbursement M M / D D / Y Y Y Y 04 / 08 / 2016
Mailing Address 5995 S. Virginia Street		Amount of Each Disbursement this Period 30.00
City Reno	State NV	
Zip Code 89510	Purpose of Disbursement Contributor relations - meals & entertainment	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type 003	Transaction ID : SB17.14106
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1126.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 42 OF 56	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

Full Name (Last, First, Middle Initial) A. Pinocchio's Bar & Grill		Date of Disbursement M M / D D / Y Y Y Y 05 / 04 / 2016
Mailing Address 5995 S. Virginia Street		Amount of Each Disbursement this Period 43.00
City Reno	State NV	
Zip Code 89510	Purpose of Disbursement Contributor relations - meals & entertainment	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type 003	Transaction ID : SB17.14132
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. RICK KOZELL FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y 05 / 13 / 2016
Mailing Address PO BOX 2172		Amount of Each Disbursement this Period 500.00
City JUPITER	State FL	
Zip Code 33468	Purpose of Disbursement Contribution	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type 011	Transaction ID : SB17.14207
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: FL District: 18		

Full Name (Last, First, Middle Initial) c. Rotary Club of Winnemucca		Date of Disbursement M M / D D / Y Y Y Y 04 / 13 / 2016
Mailing Address 625 Sheehan St Suite F		Amount of Each Disbursement this Period 250.00
City Winnemucca	State NV	
Zip Code 89445	Purpose of Disbursement Advertisement at golf tournament	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type 004	Transaction ID : SB17.14180
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	793.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 43 OF 56	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

Full Name (Last, First, Middle Initial) A. San Marcos Grill		Date of Disbursement M M / D D / Y Y Y Y 05 / 05 / 2016
Mailing Address 260 E Winnie Ln		Amount of Each Disbursement this Period 129.72
City Carson City	State NV Zip Code 89706	
Purpose of Disbursement Contributor relations - meals & entertainment	Category/Type 003	<input type="checkbox"/> Memo Item
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Transaction ID : SB17.14133
State: District:	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. Shell - Carson Cty		Date of Disbursement M M / D D / Y Y Y Y 04 / 24 / 2016
Mailing Address Hwy 395		Amount of Each Disbursement this Period 68.52
City Carson City	State NV Zip Code 89703	
Purpose of Disbursement Gas in lieu of mileage	Category/Type 002	<input type="checkbox"/> Memo Item
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Transaction ID : SB17.14155
State: District:	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) c. Shell - Carson Cty		Date of Disbursement M M / D D / Y Y Y Y 05 / 02 / 2016
Mailing Address Hwy 395		Amount of Each Disbursement this Period 46.29
City Carson City	State NV Zip Code 89703	
Purpose of Disbursement Gas in lieu of mileage	Category/Type 002	<input type="checkbox"/> Memo Item
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Transaction ID : SB17.14156
State: District:	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	244.59
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 44 OF 56	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

Full Name (Last, First, Middle Initial) A. Shell - Carson Cty		Date of Disbursement M M / D D / Y Y Y Y 05 / 22 / 2016
Mailing Address Hwy 395		Amount of Each Disbursement this Period 71.59
City Carson City	State NV	Zip Code 89703
Purpose of Disbursement Gas in lieu of mileage	Category/Type 002	
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.14158
State: _____ District: _____		

Full Name (Last, First, Middle Initial) B. Southwest Airlines		Date of Disbursement M M / D D / Y Y Y Y 04 / 22 / 2016
Mailing Address P.O. Box 36647-1CR		Amount of Each Disbursement this Period 248.10
City Dallas	State TX	Zip Code 73235
Purpose of Disbursement Airfare - travel expense	Category/Type 002	
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.14185
State: _____ District: _____		

Full Name (Last, First, Middle Initial) C. Stewart Indian School Preservation Alliance		Date of Disbursement M M / D D / Y Y Y Y 05 / 03 / 2016
Mailing Address PO Box 697		Amount of Each Disbursement this Period 600.00
City Carson City	State NV	Zip Code 89702
Purpose of Disbursement Table at benefit event	Category/Type 012	
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.14174
State: _____ District: _____		

SUBTOTAL of Disbursements This Page (optional)	919.69
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 OF 56			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

Full Name (Last, First, Middle Initial) A. Tadich Grill		Date of Disbursement M M / D D / Y Y Y Y 05 / 12 / 2016
Mailing Address 240 California St		Amount of Each Disbursement this Period 250.00
City San Francisco	State CA	
Zip Code 94111	Purpose of Disbursement Contributor relations - meals & entertainment	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type 003	Transaction ID : SB17.14136
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Tamarack Junction		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2016
Mailing Address 13101 S Virginia St		Amount of Each Disbursement this Period 40.00
City Reno	State NV	
Zip Code 89521	Purpose of Disbursement Contributor relations - meals & entertainment	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type 003	Transaction ID : SB17.14100
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Ted's Bulletin		Date of Disbursement M M / D D / Y Y Y Y 04 / 21 / 2016
Mailing Address 505 8th Street		Amount of Each Disbursement this Period 28.00
City Washington	State DC	
Zip Code 20003	Purpose of Disbursement Contributor relations - meals & entertainment	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type 003	Transaction ID : SB17.14117
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	318.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 46 OF 56	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

Full Name (Last, First, Middle Initial) A. Ted's Bulletin		Date of Disbursement M M / D D / Y Y Y Y 04 / 28 / 2016
Mailing Address 505 8th Street		Amount of Each Disbursement this Period 75.00
City Washington State DC Zip Code 20003	Purpose of Disbursement Contributor relations - meals & entertainment 003	
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.14126
State: District:		

Full Name (Last, First, Middle Initial) B. Ten 22		Date of Disbursement M M / D D / Y Y Y Y 04 / 16 / 2016
Mailing Address 1022 2nd Street		Amount of Each Disbursement this Period 260.00
City Sacramento State CA Zip Code 95814	Purpose of Disbursement Contributor relations - meals & entertainment 003	
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.14124
State: District:		

Full Name (Last, First, Middle Initial) c. The Griddle - Meridian		Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2016
Mailing Address 2310 E. Overland Road Suite 120		Amount of Each Disbursement this Period 106.00
City Meridian State ID Zip Code 83642	Purpose of Disbursement Contributor relations - meals & entertainment 003	
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.14102
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	441.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 OF 56			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

Full Name (Last, First, Middle Initial) A. The Grill at Quail Corners			Date of Disbursement M M / D D / Y Y Y Y 04 / 11 / 2016	
Mailing Address 6520 S. McCarran Blvd.			Amount of Each Disbursement this Period 145.00	
City Reno	State NV	Zip Code 89509	<input type="checkbox"/> Memo Item	
Purpose of Disbursement Contributor relations - meals & entertainment		Category/Type 003		
Candidate Name			Transaction ID : SB17.14104	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____	District: _____			

Full Name (Last, First, Middle Initial) B. The Martin Hotel			Date of Disbursement M M / D D / Y Y Y Y 04 / 05 / 2016	
Mailing Address 94 W Railroad S			Amount of Each Disbursement this Period 275.00	
City Winnemucca	State NV	Zip Code 89445	<input type="checkbox"/> Memo Item	
Purpose of Disbursement Contributor relations - meals & entertainment		Category/Type 003		
Candidate Name			Transaction ID : SB17.14103	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____	District: _____			

Full Name (Last, First, Middle Initial) c. The M Group			Date of Disbursement M M / D D / Y Y Y Y 04 / 11 / 2016	
Mailing Address 100 Luna Park #156			Amount of Each Disbursement this Period 3188.06	
City Alexandria	State VA	Zip Code 22305	<input type="checkbox"/> Memo Item	
Purpose of Disbursement Fundraising consulting and expense reimbursements - please see memo		Category/Type 003		
Candidate Name			Transaction ID : SB17.14198	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____	District: _____			

SUBTOTAL of Disbursements This Page (optional).....	3608.06
TOTAL This Period (last page this line number only).....	

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB17

Transaction ID : SB17.14198

Campaign consulting for funds raised \$3,070.00. Fundraising expenses reimbursement - Corner Bakery Cafe 777 6th St NW Washington DC 20001 \$118.06 catering for reception

Form/Schedule:

Transaction ID:

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 49 OF 56	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

Full Name (Last, First, Middle Initial) A. Twisted Fork			Date of Disbursement MM / DD / YYYY 04 / 04 / 2016	
Mailing Address 1911 Steamboat Pkwy			Amount of Each Disbursement this Period 200.00	
City Reno	State NV	Zip Code 89521	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Contributor relations - meals & entertainment		Category/ Type 003	Transaction ID : SB17.14099	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. Veterans Guest House			Date of Disbursement MM / DD / YYYY 05 / 20 / 2016	
Mailing Address 880 Locust St			Amount of Each Disbursement this Period 450.00	
City Reno	State NV	Zip Code 89502	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Sponsor three holes at golf tournament		Category/ Type 012	Transaction ID : SB17.14211	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) C. VFW Post 3819			Date of Disbursement MM / DD / YYYY 04 / 18 / 2016	
Mailing Address 75 Cowan			Amount of Each Disbursement this Period 6000.00	
City Reno	State NV	Zip Code 89501	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Sponsor replacement of GAR cemetery fencing		Category/ Type 012	Transaction ID : SB17.14181	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	6650.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 OF 56			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

Full Name (Last, First, Middle Initial) A. Villa basque Deli		Date of Disbursement M M / D D / Y Y Y Y 05 / 07 / 2016
Mailing Address 730 Basque Way		Amount of Each Disbursement this Period 35.00
City Carson City State NV Zip Code 89701	Purpose of Disbursement Contributor relations - meals & entertainment	
Candidate Name	Category/Type 003	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.14134
State: District:		

Full Name (Last, First, Middle Initial) B. Wells Fargo		Date of Disbursement M M / D D / Y Y Y Y 04 / 13 / 2016
Mailing Address PO Box 6995		Amount of Each Disbursement this Period 46.30
City Portland State OR Zip Code 97228	Purpose of Disbursement Merchant fees	
Candidate Name	Category/Type 001	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.14167
State: District:		

Full Name (Last, First, Middle Initial) c. Wells Fargo		Date of Disbursement M M / D D / Y Y Y Y 04 / 13 / 2016
Mailing Address PO Box 6995		Amount of Each Disbursement this Period 35.16
City Portland State OR Zip Code 97228	Purpose of Disbursement Merchant fees	
Candidate Name	Category/Type 001	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.14168
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	116.46
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 51 OF 56	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

Full Name (Last, First, Middle Initial) A. Wells Fargo		Date of Disbursement M M / D D / Y Y Y Y 04 / 13 / 2016
Mailing Address PO Box 6995		Amount of Each Disbursement this Period 28.84
City Portland State OR Zip Code 97228	Purpose of Disbursement Merchant fees 001	
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.14169
State: District:		

Full Name (Last, First, Middle Initial) B. Wells Fargo		Date of Disbursement M M / D D / Y Y Y Y 05 / 12 / 2016
Mailing Address PO Box 6995		Amount of Each Disbursement this Period 98.47
City Portland State OR Zip Code 97228	Purpose of Disbursement Merchant fees 001	
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.14161
State: District:		

Full Name (Last, First, Middle Initial) c. Wells Fargo		Date of Disbursement M M / D D / Y Y Y Y 05 / 12 / 2016
Mailing Address PO Box 6995		Amount of Each Disbursement this Period 48.12
City Portland State OR Zip Code 97228	Purpose of Disbursement Merchant fees 001	
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.14162
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	175.43
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 OF 56			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

Full Name (Last, First, Middle Initial) A. Wells Fargo			Date of Disbursement M M / D D / Y Y Y Y 05 / 12 / 2016		
Mailing Address PO Box 6995			Amount of Each Disbursement this Period 45.61		
City Portland	State OR	Zip Code 97228	<input type="checkbox"/> Memo Item		
Purpose of Disbursement Merchant fees		Category/ Type 001	Transaction ID : SB17.14163		
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: _____	District: _____				

Full Name (Last, First, Middle Initial) B.			Date of Disbursement M M / D D / Y Y Y Y		
Mailing Address			Amount of Each Disbursement this Period		
City	State	Zip Code	<input type="checkbox"/> Memo Item		
Purpose of Disbursement		Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: _____	District: _____				

Full Name (Last, First, Middle Initial) C.			Date of Disbursement M M / D D / Y Y Y Y		
Mailing Address			Amount of Each Disbursement this Period		
City	State	Zip Code	<input type="checkbox"/> Memo Item		
Purpose of Disbursement		Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: _____	District: _____				

SUBTOTAL of Disbursements This Page (optional)	45.61
TOTAL This Period (last page this line number only)	64517.28

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 53 OF 56			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

Full Name (Last, First, Middle Initial) A. Alan Humphrey			Date of Disbursement MM / DD / YYYY 05 / 25 / 2016	
Mailing Address 1595 Meadow Wood Lane			Amount of Each Disbursement this Period 57.94	
City Reno	State NV	Zip Code 89502	Memo Item <input type="checkbox"/>	
Purpose of Disbursement refund of excess contribution		Category/ Type 010		
Candidate Name			Transaction ID : SB20A.14074	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. Alan E Jurkonis			Date of Disbursement MM / DD / YYYY 05 / 25 / 2016	
Mailing Address 1134 Jo Lane			Amount of Each Disbursement this Period 1500.00	
City Gardenerville	State NV	Zip Code 89410	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Refund excess Primary contribution previously redesignated to General		Category/ Type 010		
Candidate Name			Transaction ID : SB20A.14246	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) C.			Date of Disbursement MM / DD / YYYY	
Mailing Address			Amount of Each Disbursement this Period	
City	State	Zip Code	Memo Item <input type="checkbox"/>	
Purpose of Disbursement		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	1557.94
TOTAL This Period (last page this line number only).....	1557.94

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

NAME OF COMMITTEE (In Full)
Amodei for Nevada

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Casey Neilon Inc	Nature of Debt (Purpose): Accounting services November and December 2015
Mailing Address 503 N Division St	
City State Zip Code Carson City NV 89703	

Outstanding Balance Beginning This Period 4000.00	Transaction ID : SD10.13479	
Amount Incurred This Period 0.00	Payment This Period 4000.00	Outstanding Balance at Close of This Period 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Shirley & Bannister	Nature of Debt (Purpose): Public Relations Service
Mailing Address 122 South Patrick Street	
City State Zip Code Alexandria VA 22314	

Outstanding Balance Beginning This Period 4500.00	Transaction ID : SD10.7593	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 4500.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Stutzman Public Affairs	Nature of Debt (Purpose): Professional Fees
Mailing Address 1415 L Street	
City State Zip Code Sacramento CA 95814	

Outstanding Balance Beginning This Period 1500.00	Transaction ID : SD10.7279	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1500.00

1) SUBTOTALS This Period This Page (optional)	6000.00
2) TOTALS This Period (last page this line number only)	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHŽG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SD10

Transaction ID : SD10.7593

This purported debt is disputed and is currently being addressed by legal counsel

Form/Schedule:

Transaction ID:

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

NAME OF COMMITTEE (In Full)

Amodei for Nevada

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Stutzman Public Affairs		Nature of Debt (Purpose): Production Costs
Mailing Address 1415 L Street		
City State	Zip Code	
Sacramento	CA 95814	

Outstanding Balance Beginning This Period		Transaction ID : SD10.7284	
3000.00			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	3000.00	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor		Nature of Debt (Purpose):
Mailing Address		
City State	Zip Code	

Outstanding Balance Beginning This Period			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor		Nature of Debt (Purpose):
Mailing Address		
City State	Zip Code	

Outstanding Balance Beginning This Period			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	

1) SUBTOTALS This Period This Page (optional)	3000.00
2) TOTALS This Period (last page this line number only)	9000.00
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	0.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	9000.00