

SUMMARY PAGE
of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

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))....	51318.55	56718.55
(b) Total Contribution Refunds (from Line 20(d))	0.00	8700.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	51318.55	48018.55
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	52208.64	98340.10
(b) Total Offsets to Operating Expenditures (from Line 14).....	4317.00	5477.74
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	47891.64	92862.36
8. Cash on Hand at Close of Reporting Period (from Line 27).....	198805.31	
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).....	26800.00	32050.00
(ii) Unitemized.....	1150.00	1300.00
(iii) TOTAL of contributions from individuals ▶	27950.00	33350.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	23368.55	23368.55
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	51318.55	56718.55
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.)	4317.00	5477.74
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)..... ▶	55635.55	62196.29

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	52208.64	98340.10
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	32950.00
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	0.00	8700.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	8700.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	52208.64	139990.10

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	195378.40
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	55635.55
25. SUBTOTAL (add Line 23 and Line 24).....	251013.95
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	52208.64
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	198805.31

**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 50
	<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	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Amodei for Nevada

A. Full Name (Last, First, Middle Initial)
Leslie Adams

Mailing Address 14100 Saddlebow

City State Zip Code
Reno NV 89511

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

Name of Employer Occupation
Adams & Associates 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
03 / 27 / 2015

Transaction ID : SA11AI.12149

Amount of Each Receipt this Period
1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
AMERICAN BANKERS ASSOCIATION PAC (BANKPAC)

Mailing Address 1120 CONNECTICUT AVENUE NW
SUITE 600

City State Zip Code
WASHINGTON DC 20036

FEC ID number of contributing federal political committee. **C** C00004275

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
03 / 30 / 2015

Transaction ID : SA11AI.12187

Amount of Each Receipt this Period
2000.00

Memo Item
contribution to federal candidate Primary 2016

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

Mailing Address PO Box 1984

City State Zip Code
Carson City NV 89701

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
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 27 / 2015

Transaction ID : SA11AI.12158

Amount of Each Receipt this Period
500.00

Memo Item
contribution

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

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

3500.00

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

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

FOR LINE NUMBER: PAGE 6 OF 50
(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)
Patricia D Cafferata

Mailing Address 2636 Edgerock Rd

City Reno State NV Zip Code 89519

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

Name of Employer State of Nevada Occupation Communications Director

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
 03 / 27 / 2015

Transaction ID : SA11AI.12168

Amount of Each Receipt this Period
250.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Severin Carlson

Mailing Address 14745 Chartreuse Ct

City Reno State NV Zip Code 89511

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

Name of Employer Kaempfer Crowell Occupation Attorney

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
 03 / 18 / 2015

Transaction ID : SA11AI.12125

Amount of Each Receipt this Period
250.00

Memo Item

C. Full Name (Last, First, Middle Initial)
DEMAR DAHL

Mailing Address Starr Valley

City Deeth State NV Zip Code 89823

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

Name of Employer None Occupation Rancher

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
 03 / 27 / 2015

Transaction ID : SA11AI.12179

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: (check only one)	PAGE 7 OF 50
	<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. Michael C Dermody
 Full Name (Last, First, Middle Initial)
 Mailing Address 226 California Ave
 City Reno State NV Zip Code 89509
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Dermody Properties Occupation Chairman & CEO
 Receipt For: 2016
 Primary General
 Other (specify)

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 27 / 2015
Transaction ID : SA11AI.12170
 Amount of Each Receipt this Period
 250.00
 Memo Item donation

B. Bruce E Dewing
 Full Name (Last, First, Middle Initial)
 Mailing Address 10475 Osage Road
 City Reno State NV Zip Code 89508
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Casino Manager
 Receipt For: 2016
 Primary General
 Other (specify)

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 27 / 2015
Transaction ID : SA11AI.12154
 Amount of Each Receipt this Period
 250.00
 Memo Item

C. Norman Dianda
 Full Name (Last, First, Middle Initial)
 Mailing Address 2100 Holcomb Ranch Lane
 City Reno State NV Zip Code 89511
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Q&D Construction Occupation President
 Receipt For: 2016
 Primary General
 Other (specify)

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 27 / 2015
Transaction ID : SA11AI.12167
 Amount of Each Receipt this Period
 1000.00
 Memo Item Fundraiser

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

1500.00

**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 8 OF 50
	<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)
EMPLOYEES OF NORTHROP GRUMMAN CORPORATION PAC

Mailing Address 2980 FAIRVIEW PARK DRIVE

City Falls Church State VA Zip Code 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 2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 30 / 2015

Transaction ID : SA11AI.12186

Amount of Each Receipt this Period
 2000.00

Memo Item
2016 Primary

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

Mailing Address 500 Mary St

City Carson City State NV Zip Code 89703

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

Name of Employer Occupation
Self Writer

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 2600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 18 / 2015

Transaction ID : SA11AI.12141

Amount of Each Receipt this Period
 2600.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Paul Enos

Mailing Address 10720 Summer Glen Drive

City Reno State NV Zip Code 89521

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

Name of Employer Occupation
Nevada Trucking Association CEO

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
 03 / 12 / 2015

Transaction ID : SA11AI.12123

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).....

5100.00

**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 50
	<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)
Nancy Flanigan

Mailing Address 2750 Holcomb Ranch Lane

City Reno State NV Zip Code 89511

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 **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 27 / 2015

Transaction ID : SA11AI.12151

Amount of Each Receipt this Period
500.00

Memo Item
 Donation

B. Full Name (Last, First, Middle Initial)
Fred Gibson

Mailing Address 3204 Plaza De Rafael

City Las Vegas State NV Zip Code 89102

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 **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 27 / 2015

Transaction ID : SA11AI.12143

Amount of Each Receipt this Period
1000.00

Memo Item

C. 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 **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 27 / 2015

Transaction ID : SA11AI.12178

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).....

1750.00

**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 50
	<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. Terry Graves
Full Name (Last, First, Middle Initial)
Mailing Address 2205 Plaza del Puerto

City Las Vegas	State NV	Zip Code 89102
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FEC ID number of contributing federal political committee. **C**

Name of Employer Graves Communications	Occupation 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
 03 / 18 / 2015

Transaction ID : SA11AI.12131

Amount of Each Receipt this Period
500.00

Memo Item re-election

B. Jesse Haw
Full Name (Last, First, Middle Initial)
Mailing Address 550 W. Plumb Lane Suite B, #505

City Reno	State NV	Zip Code 89509
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FEC ID number of contributing federal political committee. **C**

Name of Employer Hawco Properties	Occupation President
--------------------------------------	-------------------------

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
 03 / 18 / 2015

Transaction ID : SA11AI.12127

Amount of Each Receipt this Period
500.00

Memo Item

C. Mary Lau
Full Name (Last, First, Middle Initial)
Mailing Address 410 S Minnesota St

City Carson City	State NV	Zip Code 89703
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FEC ID number of contributing federal political committee. **C**

Name of Employer Retail Association of Nevada	Occupation Executive Director
--	----------------------------------

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
 03 / 18 / 2015

Transaction ID : SA11AI.12126

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).....

1500.00

**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 11 OF 50
	<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)
KEITH LEE

Mailing Address 1941 Rolling Brook Lane

City Reno State NV Zip Code 89519

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

Name of Employer Law Offices of Keith Lee Occupation Attorney

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
 03 / 18 / 2015

Transaction ID : SA11AI.12128

Amount of Each Receipt this Period
500.00

Memo Item
Campaign Contribution

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
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 14 / 2015

Transaction ID : SA11AI.12100

Amount of Each Receipt this Period
2000.00

Memo Item

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

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
3500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 26 / 2015

Transaction ID : SA11AI.12110

Amount of Each Receipt this Period
1500.00

Memo Item

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

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

4000.00

**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 12 OF 50
	<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)
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
--------------------------	-------------------------

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 26 / 2015

Transaction ID : SA11AI.12202

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 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
 01 / 26 / 2015

Transaction ID : SA11AI.12203

Amount of Each Receipt this Period
 _____ 900.00

Memo Item
 Redesignate: to General 2016

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
--------------	-------------	-------------------

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
 _____ 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 05 / 2015

Transaction ID : SA11AI.12113

Amount of Each Receipt this Period
 _____ 1500.00

Memo Item

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

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

_____ 1500.00

**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 50
(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
 03 / 05 / 2015

Transaction ID : SA11AI.12205

Amount of Each Receipt this Period
 -1500.00

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
 03 / 05 / 2015

Transaction ID : SA11AI.12206

Amount of Each Receipt this Period
 1500.00

Memo Item
 Redesignate: to General

C. Full Name (Last, First, Middle Initial)
Melissa A Meredith

Mailing Address 130 Juniper Hill Rd

City Reno State NV Zip Code 89519-7951

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

Name of Employer Mt Rose Development Company Occupation Accountant

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
 03 / 27 / 2015

Transaction ID : SA11AI.12153

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

**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)
 11a 12 11b 13a 11c 13b 11d 14 15
 PAGE 14 OF 50

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

A. Full Name (Last, First, Middle Initial)
Rose N Meredith

Mailing Address 150 Juniper Hill Road

City Reno State NV Zip Code 89519-7951

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 **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 27 / 2015

Transaction ID : SA11AI.12152

Amount of Each Receipt this Period
250.00

Memo Item contribution

B. Full Name (Last, First, Middle Initial)
Bill Miller

Mailing Address 4895 Convair Drive

City Carson City State NV Zip Code 89706

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

Name of Employer BME Occupation Owner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **600.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 18 / 2015

Transaction ID : SA11AI.12133

Amount of Each Receipt this Period
600.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Vergie Miller

Mailing Address 4895 Convair Dr

City Carson City State NV Zip Code 89706

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 **600.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 18 / 2015

Transaction ID : SA11AI.12132

Amount of Each Receipt this Period
600.00

Memo Item

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

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

1450.00

**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 50
	<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)
Marilyn McAdams Mora

Mailing Address 4745 Sommerville Way

City	State	Zip Code
Reno	NV	89519-0922

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

Name of Employer	Occupation
Reno-Tahoe Airport Authority	Executive VP/COO

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
 03 / 06 / 2015

Transaction ID : SA11AI.12196

Amount of Each Receipt this Period
500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Dillard Myers

Mailing Address 14800 Chateau Ave

City	State	Zip Code
Reno	NV	89511

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

Name of Employer	Occupation
Cisco Systems	VP Global Service Supply Chain

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
 03 / 12 / 2015

Transaction ID : SA11AI.12124

Amount of Each Receipt this Period
500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
NATIONAL RIFLE ASSOCIATION OF AMERICA POLITICAL VICTORY FUND

Mailing Address 11250 WAPLES MILL ROAD

City	State	Zip Code
FAIRFAX	VA	22030

FEC ID number of contributing federal political committee. **C** C00053553

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
 03 / 30 / 2015

Transaction ID : SA11AI.12188

Amount of Each Receipt this Period
500.00

Memo Item
2016 US Primary Election

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

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

1500.00

**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 50
(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)
Sonny Newman

Mailing Address 9400 Timothy Drive

City Reno State NV Zip Code 89511

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

Name of Employer EE Technologies Occupation President/CEO

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
 03 / 27 / 2015

Transaction ID : SA11AI.12159

Amount of Each Receipt this Period
1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
George Peek

Mailing Address 9345 Lemmon Drive

City Reno State NV Zip Code 89506

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

Name of Employer ERGS, Inc Occupation Real Estate Broker

Receipt For: 2015
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 21 / 2015

Transaction ID : SA11AI.12108

Amount of Each Receipt this Period
500.00

Memo Item
see memo

C. Full Name (Last, First, Middle Initial)
Kalman Schoor

Mailing Address 226 Franklin St

City Brooklyn State NY Zip Code 11222

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

Name of Employer Waterton Global Resource Manag Occupation Chief Strategist

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
 03 / 26 / 2015

Transaction ID : SA11AI.12142

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).....

2500.00

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

Form/Schedule: SA11AI

Transaction ID : SA11AI.12108

\$500 Received from contributor George Peek via conduit VOTESANE PAC ID# C00484535, minus \$25 processing fee to VOTESANE, which is recorded as a disbursement.

Form/Schedule:

Transaction ID:

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

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

FOR LINE NUMBER: PAGE 18 OF 50
(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)
Julie A Schultz

Mailing Address 14150 Saddlebow Drive

City State Zip Code
Reno NV 89511

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

Name of Employer Occupation
Reno Tahoe Airport Authority 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
 03 / 06 / 2015

Transaction ID : SA11AI.12195

Amount of Each Receipt this Period
250.00

Memo Item

B. Full Name (Last, First, Middle Initial)
John Scofield

Mailing Address 703 D Street SE

City State Zip Code
Washington DC 20003

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

Name of Employer Occupation
S-3 Group Partner

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
 03 / 16 / 2015

Transaction ID : SA11AI.12208

Amount of Each Receipt this Period
500.00

Memo Item
In-kind - Beverages for event

C. Full Name (Last, First, Middle Initial)
Debra Struhsacker

Mailing Address 3610 Big Bend Lane

City State Zip Code
Reno NV 89509

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

Name of Employer Occupation
Struhsacker Consulting owner

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
 03 / 18 / 2015

Transaction ID : SA11AI.12129

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).....

1250.00

26800.00

**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 19 OF 50
<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)
AMERICAN FEDERATION OF GOVERNMENT EMPLOYEES

Mailing Address **80 F STREET**

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

FEC ID number of contributing federal political committee. **C C7000104**

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
03 / 06 / 2015

Transaction ID : SA11C.12119

Amount of Each Receipt this Period
1000.00

Memo Item
 2016 Primary US/HOUSE/NV/02

B. Full Name (Last, First, Middle Initial)
AT&T INC. FEDERAL POLITICAL ACTION COMMITTEE (AT&T FEDERAL PAC)

Mailing Address **208 S. AKARD STREET
SUITE 2701**

City **DALLAS** State **TX** Zip Code **75202**

FEC ID number of contributing federal political committee. **C C00109017**

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
03 / 27 / 2015

Transaction ID : SA11C.12176

Amount of Each Receipt this Period
1000.00

Memo Item
 2016 Primary

C. Full Name (Last, First, Middle Initial)
BARRICK GOLD OF NORTH AMERICA INC. EMPLOYEES PAF

Mailing Address **136 E. SOUTH TEMPLE ST.
SUITE 1300**

City **SALT LAKE CITY** State **UT** Zip Code **84111**

FEC ID number of contributing federal political committee. **C C00320580**

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
03 / 30 / 2015

Transaction ID : SA11C.12184

Amount of Each Receipt this Period
2500.00

Memo Item
 Primary 2016 US House

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 20 OF 50
	<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. BEER INSTITUTE PAC (BEER PAC)

Full Name (Last, First, Middle Initial)
BEER INSTITUTE PAC (BEER PAC)

Mailing Address **440 FIRST ST NW
STE 350**

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

FEC ID number of contributing federal political committee. **C C00582999**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
199.35

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 16 / 2015

Transaction ID : SA11C.14222

Amount of Each Receipt this Period
199.35

Memo Item
 In-kind - beer for fundraising event

B. CULAC THE PAC OF CREDIT UNION NATIONAL ASSOCIATION

Full Name (Last, First, Middle Initial)
CULAC THE PAC OF CREDIT UNION NATIONAL ASSOCIATION

Mailing Address **604 PENNSYLVANIA AVENUE, NW**

City **WASHINGTON** State **DC** Zip Code **20004-2601**

FEC ID number of contributing federal political committee. **C C00007880**

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
03 / 30 / 2015

Transaction ID : SA11C.12182

Amount of Each Receipt this Period
2000.00

Memo Item
 2016 Primary

C. INTERNATIONAL PREMIUM CIGAR AND PIPE RETAILERS ASSOCIATION PAC

Full Name (Last, First, Middle Initial)
INTERNATIONAL PREMIUM CIGAR AND PIPE RETAILERS ASSOCIATION PAC

Mailing Address **4 BRADLEY PARK COURT, SUITE 2H**

City **COLUMBUS** State **GA** Zip Code **31904**

FEC ID number of contributing federal political committee. **C C00450239**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
169.20

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 16 / 2015

Transaction ID : SA11C.12190

Amount of Each Receipt this Period
169.20

Memo Item
 In-kind - cigars for event on March 16, 2015

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

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

2368.55

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

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

FOR LINE NUMBER: PAGE 21 OF 50
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

Full Name (Last, First, Middle Initial)
NAT'L TELECOMMUNICATIONS COOPERATIVE ASSN./TELECOMMUNICATIONS EDUCATION COMMITTEE ORG.

A. Mailing Address 4121 WILSON BLVD.
10TH FLOOR

City ARLINGTON State VA Zip Code 22203

FEC ID number of contributing federal political committee. **C** C00004473

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 1000.00

Date of Receipt 03 / 30 / 2015

Transaction ID : SA11C.12183

Amount of Each Receipt this Period 1000.00

Memo Item
2016 Primary Congressional

Full Name (Last, First, Middle Initial)
NATIONAL ASSOCIATION OF REALTORS POLITICAL ACTION COMMITTEE

B. Mailing Address 430 NORTH MICHIGAN AVENUE

City CHICAGO State IL Zip Code 60611

FEC ID number of contributing federal political committee. **C** C00030718

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 500.00

Date of Receipt 03 / 27 / 2015

Transaction ID : SA11C.12147

Amount of Each Receipt this Period 500.00

Memo Item
Primary 2016

Full Name (Last, First, Middle Initial)
NATIONAL CATTLEMEN'S BEEF ASSOCIATION POLITICAL ACTION COMMITTEE (NCBA-PAC)

C. Mailing Address 9110 EAST NICHOLS AVENUE

City CENTENNIAL State CO Zip Code 80112

FEC ID number of contributing federal political committee. **C** C00028787

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 5000.00

Date of Receipt 03 / 25 / 2015

Transaction ID : SA11C.12181

Amount of Each Receipt this Period 5000.00

Memo Item
US House/NV/02

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 50			
	<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)
PORTER GORDON SILVER PAC

Mailing Address **PO Box 751271**

City **Las Vegas** State **NV** Zip Code **89136**

FEC ID number of contributing federal political committee. **C C00507913**

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
03 / 06 / 2015

Transaction ID : SA11C.12114

Amount of Each Receipt this Period
2500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
REPUBLIC SVCS. INC. EMPLOYEES FOR BETTER GOVT. PAC

Mailing Address **18500 NORTH ALLIED WAY**

City **PHOENIX** State **AZ** Zip Code **85054**

FEC ID number of contributing federal political committee. **C C00428391**

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
03 / 27 / 2015

Transaction ID : SA11C.12161

Amount of Each Receipt this Period
500.00

Memo Item
 primary 2016 REP-NV-02

C. Full Name (Last, First, Middle Initial)
REYNOLDS AMERICAN INC. POLITICAL ACTION COMMITTEE; RAI PAC

Mailing Address **P. O. BOX 718**

City **WINSTON-SALEM** State **NC** Zip Code **27102**

FEC ID number of contributing federal political committee. **C C00042002**

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
03 / 06 / 2015

Transaction ID : SA11C.12115

Amount of Each Receipt this Period
2500.00

Memo Item
 contribution to the committee - Primary 2016

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

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

5500.00

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

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

FOR LINE NUMBER: PAGE 23 OF 50
(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)
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
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 30 / 2015

Transaction ID : SA11C.12185

Amount of Each Receipt this Period
2500.00

Memo Item
2016 Prim

B. 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
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 25 / 2015

Transaction ID : SA11C.12180

Amount of Each Receipt this Period
1000.00

Memo Item
2016 Primary

C. Full Name (Last, First, Middle Initial)
TURKISH COALITON USA PAC (TC-USA PAC)

Mailing Address 1025 CONNECTICUT AVE SUITE 1000

City State Zip Code
WASHINGTON DC 20036

FEC ID number of contributing federal political committee. **C C00432526**

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
 03 / 06 / 2015

Transaction ID : SA11C.12116

Amount of Each Receipt this Period
1000.00

Memo Item
R NV/2NV

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

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

4500.00

23368.55

**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 24 OF 50
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input checked="" 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)
MGM Grand

Mailing Address 3799 Las Vegas Boulevard South

City Las Vegas State NV Zip Code 89109

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **292.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 20 / 2015

Transaction ID : SA14.12122

Amount of Each Receipt this Period
 192.00

Memo Item
 refund - travel expense

B. Full Name (Last, First, Middle Initial)
The Glenn Group

Mailing Address 50 Washington Street

City Reno State NV Zip Code 89503

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **4125.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 20 / 2015

Transaction ID : SA14.12105

Amount of Each Receipt this Period
 4040.00

Memo Item
 Refund - Amodei 2014 Campaign

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

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

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

4232.00

4232.00

**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 50	
	<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. Adeles		Date of Disbursement M M / D D / Y Y Y Y 03 / 10 / 2015
Mailing Address 1112 N Carson St		Amount of Each Disbursement this Period 150.00
City Carson City State NV Zip Code 89701	Purpose of Disbursement meals & entertainment - campaign expense	
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 : SB17.12005
State: District:		

Full Name (Last, First, Middle Initial) B. Adeles		Date of Disbursement M M / D D / Y Y Y Y 03 / 20 / 2015
Mailing Address 1112 N Carson St		Amount of Each Disbursement this Period 210.00
City Carson City State NV Zip Code 89701	Purpose of Disbursement meals & entertainment - campaign expense	
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 : SB17.12011
State: District:		

Full Name (Last, First, Middle Initial) C. American Airlines		Date of Disbursement M M / D D / Y Y Y Y 03 / 16 / 2015
Mailing Address 4333 Amon Carter Blvd MD 5675		Amount of Each Disbursement this Period 769.60
City Fort Worth State TX Zip Code 76155	Purpose of Disbursement Airfare - travel expense	
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 : SB17.12065
State: District:		

SUBTOTAL of Disbursements This Page (optional)	1129.60
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 50	
	<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 01 / 26 / 2015	
Mailing Address 300 First Street SE			Amount of Each Disbursement this Period 582.40	
City Washington	State DC	Zip Code 20003	<input type="checkbox"/> Memo Item	
Purpose of Disbursement meals & entertainment - campaign expense		Category/ Type 003	Transaction ID : SB17.11976	
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 01 / 26 / 2015	
Mailing Address 300 First Street SE			Amount of Each Disbursement this Period 285.30	
City Washington	State DC	Zip Code 20003	<input type="checkbox"/> Memo Item	
Purpose of Disbursement meals & entertainment - campaign expense		Category/ Type 003	Transaction ID : SB17.11977	
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 02 / 20 / 2015	
Mailing Address 300 First Street SE			Amount of Each Disbursement this Period 550.00	
City Washington	State DC	Zip Code 20003	<input type="checkbox"/> Memo Item	
Purpose of Disbursement meals & entertainment - campaign expense		Category/ Type 003	Transaction ID : SB17.11989	
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).....	1417.70
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 50	
	<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 MM / DD / YYYY 02 / 20 / 2015	
Mailing Address 300 First Street SE			Amount of Each Disbursement this Period 102.60	
City Washington	State DC	Zip Code 20003	Memo Item <input type="checkbox"/>	
Purpose of Disbursement meals & entertainment - campaign expense		Category/ Type 003	Transaction ID : SB17.11990	
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 MM / DD / YYYY 03 / 16 / 2015	
Mailing Address 300 First Street SE			Amount of Each Disbursement this Period 2185.00	
City Washington	State DC	Zip Code 20003	Memo Item <input type="checkbox"/>	
Purpose of Disbursement meals & entertainment - campaign expense		Category/ Type 003	Transaction ID : SB17.12009	
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. Carson Cigar Bar			Date of Disbursement MM / DD / YYYY 03 / 09 / 2015	
Mailing Address 301 N Carson st			Amount of Each Disbursement this Period 469.19	
City Carson City	State NV	Zip Code 89071	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Fundraising expenses		Category/ Type 003	Transaction ID : SB17.12002	
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).....	2756.79
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 50	
	<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. Carson City Republican Club			Date of Disbursement M M / D D / Y Y Y Y 01 / 22 / 2015	
Mailing Address 1931 California Street			Amount of Each Disbursement this Period 500.00	
City Carson City	State NV	Zip Code 89702	<input type="checkbox"/> Memo Item	
Purpose of Disbursement Contribution		Category/Type 011		
Candidate Name			Transaction ID : SB17.12085	
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 03 / 04 / 2015	
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		
Candidate Name			Transaction ID : SB17.12096	
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 03 / 26 / 2015	
Mailing Address 503 N Division St			Amount of Each Disbursement this Period 800.00	
City Carson City	State NV	Zip Code 89703	<input type="checkbox"/> Memo Item	
Purpose of Disbursement Professional fees - accounting		Category/Type 001		
Candidate Name			Transaction ID : SB17.12093	
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)	3300.00
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 29 OF 50	
	<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 03 / 04 / 2015
Mailing Address 385 Teramo Drive		Amount of Each Disbursement this Period 8082.69 <input type="checkbox"/> Memo Item
City Reno State NV Zip Code 89521	Purpose of Disbursement Fundraising commissions and reimbursements - see memo detail Candidate Name 003 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2015 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.12097
State: _____ District: _____		

Full Name (Last, First, Middle Initial) B. Churchill County Republican Central Committee		Date of Disbursement M M / D D / Y Y Y Y 01 / 22 / 2015
Mailing Address PO Box 1404		Amount of Each Disbursement this Period 500.00 <input type="checkbox"/> Memo Item
City Fallon State NV Zip Code 89407	Purpose of Disbursement Contribution Candidate Name 011 Category/Type	
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 : SB17.12082
State: _____ District: _____		

Full Name (Last, First, Middle Initial) C. Del Frisco Grill		Date of Disbursement M M / D D / Y Y Y Y 02 / 11 / 2015
Mailing Address 1201 Pennsylvania Ave NW		Amount of Each Disbursement this Period 1010.00 <input type="checkbox"/> Memo Item
City Washington State DC Zip Code 20004	Purpose of Disbursement Member Dinner - meals & entertainment Candidate Name 003 Category/Type	
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 : SB17.11982
State: _____ District: _____		

SUBTOTAL of Disbursements This Page (optional).....	9592.69
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 : SB17.12097

Fundraising commissions \$7847.50; Reimbursment - Digiprint 4865 Longley Lane Suite C Reno NV 89502 \$235.19
Xmas Party invites.

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 31 OF 50	
	<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. Delta Air		Date of Disbursement MM / DD / YYYY 02 / 04 / 2015
Mailing Address P.O. Box 20706		Amount of Each Disbursement this Period 677.20
City Atlanta	State GA	
Zip Code 30320	Purpose of Disbursement Airfare - travel expense	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type 002	Transaction ID : SB17.12060
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. Douglas County Republican Central Committee		Date of Disbursement MM / DD / YYYY 01 / 22 / 2015
Mailing Address 1609 Hwy 395		Amount of Each Disbursement this Period 500.00
City Minden	State NV	
Zip Code 89423	Purpose of Disbursement Contribution	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type 011	Transaction ID : SB17.12083
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. Elko County Republican Central Committee		Date of Disbursement MM / DD / YYYY 01 / 22 / 2015
Mailing Address P. O. Box 326		Amount of Each Disbursement this Period 500.00
City Elko	State NV	
Zip Code 89803	Purpose of Disbursement Contribution	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type 011	Transaction ID : SB17.12076
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).....	1677.20
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 32 OF 50	
	<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

A. Eureka County Republican Club

Full Name (Last, First, Middle Initial)
Mailing Address PO Box 816

City Eureka State NV Zip Code 89316

Purpose of Disbursement Contribution
Candidate Name

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify)

State: District:

Date of Disbursement: 01 / 22 / 2015

Amount of Each Disbursement this Period: 500.00

Memo Item

Transaction ID : SB17.12075

B. Glen Eagles

Full Name (Last, First, Middle Initial)
Mailing Address 3700 North Carson Street

City Carson City State NV Zip Code 89706

Purpose of Disbursement legislative fundraiser event
Candidate Name

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify)

State: District:

Date of Disbursement: 03 / 09 / 2015

Amount of Each Disbursement this Period: 1790.00

Memo Item

Transaction ID : SB17.12003

c. Glen Eagles

Full Name (Last, First, Middle Initial)
Mailing Address 3700 North Carson Street

City Carson City State NV Zip Code 89706

Purpose of Disbursement Charitable donation - dinner for 7
Candidate Name

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify)

State: District:

Date of Disbursement: 03 / 11 / 2015

Amount of Each Disbursement this Period: 720.00

Memo Item

Transaction ID : SB17.12006

SUBTOTAL of Disbursements This Page (optional) 3010.00

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 33 OF 50	
	<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. Richard Goddard		Date of Disbursement M M / D D / Y Y Y Y 03 / 04 / 2015
Mailing Address 215 Prince St		Amount of Each Disbursement this Period 560.03 <input type="checkbox"/> Memo Item Transaction ID : SB17.12098
City Alexandria	State VA Zip Code 22314	
Purpose of Disbursement travel expense and meals/ent reimbursment - see memo detail		Category/ Type 002
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. Great Basin Gallery		Date of Disbursement M M / D D / Y Y Y Y 01 / 10 / 2015
Mailing Address 110 South Curry Street		Amount of Each Disbursement this Period 586.01 <input type="checkbox"/> Memo Item Transaction ID : SB17.12024
City Carson City	State NV Zip Code 89701	
Purpose of Disbursement Framing		Category/ Type 001
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. Great Basin Gallery		Date of Disbursement M M / D D / Y Y Y Y 01 / 22 / 2015
Mailing Address 110 South Curry Street		Amount of Each Disbursement this Period 1053.08 <input type="checkbox"/> Memo Item Transaction ID : SB17.12071
City Carson City	State NV Zip Code 89701	
Purpose of Disbursement framing		Category/ Type 001
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).....	2199.12
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 : SB17.12098

Reimbursements: Harrah's 15 Highway 50 Stateleine NV 89449 \$52.10 meals & ent; Eldorado PO Box 3399 Reno NV 89505 \$91.10 lodging; Landini Brothers 115 King Street Alexandria VA 22314 \$132.20 meals & ent; Hill Country BBQ Market 410 7th Street NW Washington DC 20004 \$69.71 meals & ent; Gunbarrel Tavern 1001 Park Ave South Lake Tahoe CA 96150 \$70.00 meals & ent; Peg's Glorified Ham & Eggs 420 S. Sierra St #1 Reno NV 89502 \$23.98 meals & ent; the Capital Grille 601 Pennsylvania Ave NW Washington DC 20004 \$36.25 meals & ent; Bullfeathers 410 First St SE Washington DC 20003 \$32.50 meals & ent; Smashburger Salt Lake Intl Airport \$16.19 meals & ent; Parking at Hartsfield-Jackson Atlanta Airport \$36.00 travel.

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 50	
	<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. Humboldt County Republican Central Committee			Date of Disbursement M M / D D / Y Y Y Y 01 / 22 / 2015	
Mailing Address PO Box 963			Amount of Each Disbursement this Period 500.00	
City Winnemucca	State NV	Zip Code 89446	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Contribution		Category/ Type 011		
Candidate Name		Transaction ID : SB17.12078		
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. Kaempfer Crowell			Date of Disbursement M M / D D / Y Y Y Y 03 / 04 / 2015	
Mailing Address 1980 Festival Plaza Drive Suite 65			Amount of Each Disbursement this Period 829.50	
City Las Vegas	State NV	Zip Code 89135-2958	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Professional services - legal		Category/ Type 001		
Candidate Name		Transaction ID : SB17.12094		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) C. Lander County Republican Central Committee			Date of Disbursement M M / D D / Y Y Y Y 01 / 22 / 2015	
Mailing Address PO Box 1522			Amount of Each Disbursement this Period 500.00	
City Battle Mountain	State NV	Zip Code 89820	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Contribution		Category/ Type 011		
Candidate Name		Transaction ID : SB17.12077		
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).....	1829.50
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 50	
	<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. Lincoln County Republican Club			Date of Disbursement M M / D D / Y Y Y Y 01 / 22 / 2015	
Mailing Address PO Box 1005			Amount of Each Disbursement this Period 500.00	
City Caliente	State NV	Zip Code 89008	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Contribution		Category/Type 011		
Candidate Name		Transaction ID : SB17.12074		
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. Los Tios Grill			Date of Disbursement M M / D D / Y Y Y Y 03 / 02 / 2015	
Mailing Address 2615 Mt Vernon Ave			Amount of Each Disbursement this Period 321.00	
City Alexandria	State VA	Zip Code 22301	Memo Item <input type="checkbox"/>	
Purpose of Disbursement meals & entertainment - campaign expense		Category/Type 003		
Candidate Name		Transaction ID : SB17.11998		
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. Lyon County Republican Central Committee			Date of Disbursement M M / D D / Y Y Y Y 01 / 22 / 2015	
Mailing Address PO Box 619			Amount of Each Disbursement this Period 500.00	
City Yerington	State NV	Zip Code 89447	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Contribution		Category/Type 011		
Candidate Name		Transaction ID : SB17.12079		
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).....	1321.00
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 37 OF 50	
	<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. MGM Grand		Date of Disbursement MM / DD / YYYY 02 / 18 / 2015
Mailing Address 3799 Las Vegas Boulevard South		Amount of Each Disbursement this Period 355.68
City Las Vegas	State NV	
Zip Code 89109	Purpose of Disbursement Lodging - travel expense	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type 002	Transaction ID : SB17.11987
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. MGM Grand		Date of Disbursement MM / DD / YYYY 02 / 18 / 2015
Mailing Address 3799 Las Vegas Boulevard South		Amount of Each Disbursement this Period 44.80
City Las Vegas	State NV	
Zip Code 89109	Purpose of Disbursement meals & entertainment - campaign expense	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type 003	Transaction ID : SB17.11988
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. National Capital Flag Company		Date of Disbursement MM / DD / YYYY 01 / 02 / 2015
Mailing Address 100 S Quaker Ln		Amount of Each Disbursement this Period 303.20
City Alexandria	State VA	
Zip Code 22314	Purpose of Disbursement Flags	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type 001	Transaction ID : SB17.11957
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).....	703.68
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 38 OF 50	
	<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 03 / 23 / 2015
Mailing Address 100 S Quaker Ln		Amount of Each Disbursement this Period 123.07 <input type="checkbox"/> Memo Item
City Alexandria	State VA	
Zip Code 22314	Purpose of Disbursement Flags	Transaction ID : SB17.12012
Candidate Name	001 Category/Type	
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. Pershing County Republican Central Committee		Date of Disbursement M M / D D / Y Y Y Y 01 / 22 / 2015
Mailing Address 1775 Looz Rd.,		Amount of Each Disbursement this Period 500.00 <input type="checkbox"/> Memo Item
City Lovelock	State NV	
Zip Code 89419	Purpose of Disbursement Contribution	Transaction ID : SB17.12080
Candidate Name	011 Category/Type	
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. RAND PAUL VICTORY COMMITTEE		Date of Disbursement M M / D D / Y Y Y Y 01 / 16 / 2015
Mailing Address PO BOX 72190		Amount of Each Disbursement this Period 250.00 <input type="checkbox"/> Memo Item
City NEWPORT	State KY	
Zip Code 41072	Purpose of Disbursement political contribution	Transaction ID : SB17.12068
Candidate Name	011 Category/Type	
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).....	873.07
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 50			
	<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. Reno High Baseball			Date of Disbursement M M / D D / Y Y Y Y 03 / 12 / 2015	
Mailing Address 395 Booth Street			Amount of Each Disbursement this Period 550.00	
City Reno	State NV	Zip Code 89509	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Outfield sign sponsorship		Category/ Type 004	Transaction ID : SB17.12090	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2015 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:			

Full Name (Last, First, Middle Initial) B. John Scofield			Date of Disbursement M M / D D / Y Y Y Y 03 / 16 / 2015	
Mailing Address 703 D Street SE			Amount of Each Disbursement this Period 500.00	
City Washington	State DC	Zip Code 20003	Memo Item <input type="checkbox"/>	
Purpose of Disbursement In-kind - Beverages for event		Category/ Type	Transaction ID : SB17.12209	
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. Shell - Carson Cty			Date of Disbursement M M / D D / Y Y Y Y 01 / 10 / 2015	
Mailing Address Hwy 395			Amount of Each Disbursement this Period 64.55	
City Carson City	State NV	Zip Code 89703	Memo Item <input type="checkbox"/>	
Purpose of Disbursement gas in lieu of mileage - travel expense		Category/ Type 002	Transaction ID : SB17.12058	
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).....	1114.55
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 50	
	<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 MM / DD / YYYY 02 / 02 / 2015
Mailing Address Hwy 395		Amount of Each Disbursement this Period 64.22
City Carson City	State NV	
Zip Code 89703	Purpose of Disbursement gas in lieu of mileage - travel expense	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type 002	
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 : SB17.12042
State: District:		

Full Name (Last, First, Middle Initial) B. Shell - Carson Cty		Date of Disbursement MM / DD / YYYY 02 / 21 / 2015
Mailing Address Hwy 395		Amount of Each Disbursement this Period 64.44
City Carson City	State NV	
Zip Code 89703	Purpose of Disbursement gas in lieu of mileage - travel expense	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type 002	
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 : SB17.12049
State: District:		

Full Name (Last, First, Middle Initial) c. Shell - Carson Cty		Date of Disbursement MM / DD / YYYY 03 / 05 / 2015
Mailing Address Hwy 395		Amount of Each Disbursement this Period 30.40
City Carson City	State NV	
Zip Code 89703	Purpose of Disbursement gas in lieu of mileage - travel expense	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type 002	
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 : SB17.12052
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	159.06
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 50	
	<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 MM / DD / YYYY 03 / 13 / 2015
Mailing Address Hwy 395		Amount of Each Disbursement this Period 39.52
City Carson City	State NV	
Zip Code 89703	Purpose of Disbursement gas in lieu of mileage - travel expense	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type 002	
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 : SB17.12055
State: District:		

Full Name (Last, First, Middle Initial) B. Shell - Carson Cty		Date of Disbursement MM / DD / YYYY 03 / 15 / 2015
Mailing Address Hwy 395		Amount of Each Disbursement this Period 81.70
City Carson City	State NV	
Zip Code 89703	Purpose of Disbursement gas in lieu of mileage - travel expense	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type 002	
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 : SB17.12056
State: District:		

Full Name (Last, First, Middle Initial) C. Southwest Airlines		Date of Disbursement MM / DD / YYYY 03 / 16 / 2015
Mailing Address P.O. Box 36647-1CR		Amount of Each Disbursement this Period 592.60
City Dallas	State TX	
Zip Code 73235	Purpose of Disbursement Airfare - travel expense	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type 002	
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 : SB17.12063
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	713.82
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 50	
	<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. Southwest Airlines		Date of Disbursement M M / D D / Y Y Y Y 03 / 20 / 2015
Mailing Address P.O. Box 36647-1CR		Amount of Each Disbursement this Period 464.20
City Dallas	State TX	
Zip Code 73235	Purpose of Disbursement Airfare - travel expense	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type 002	Transaction ID : SB17.12067
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. Storey County Republican Central Committee		Date of Disbursement M M / D D / Y Y Y Y 01 / 22 / 2015
Mailing Address PO Box 767		Amount of Each Disbursement this Period 500.00
City Virginia City	State NV	
Zip Code 89440	Purpose of Disbursement Contribution	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type 011	Transaction ID : SB17.12084
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. Team Sports Ink		Date of Disbursement M M / D D / Y Y Y Y 01 / 16 / 2015
Mailing Address 5111 Grumman Dr, Ste 1b		Amount of Each Disbursement this Period 4062.00
City Carson City	State NV	
Zip Code 89706	Purpose of Disbursement Custom campaign hats	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type 006	Transaction ID : SB17.12070
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).....	5026.20
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 50	
	<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 Congressional Institute			Date of Disbursement MM / DD / YYYY 02 / 24 / 2015	
Mailing Address 1700 Diagonal Road #730			Amount of Each Disbursement this Period 738.00	
City Alexandria	State VA	Zip Code 22314	<input type="checkbox"/> Memo Item	
Purpose of Disbursement Congress of Tomorrow retreat registration		Category/ Type 001	Transaction ID : SB17.12089	
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. The M Group			Date of Disbursement MM / DD / YYYY 03 / 04 / 2015	
Mailing Address 100 Luna Park #156			Amount of Each Disbursement this Period 161.45	
City Alexandria	State VA	Zip Code 22305	<input type="checkbox"/> Memo Item	
Purpose of Disbursement Reimbursement for Meals & Entertainment - see memo		Category/ Type 003	Transaction ID : SB17.12095	
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. The M Group			Date of Disbursement MM / DD / YYYY 03 / 26 / 2015	
Mailing Address 100 Luna Park #156			Amount of Each Disbursement this Period 8498.93	
City Alexandria	State VA	Zip Code 22305	<input type="checkbox"/> Memo Item	
Purpose of Disbursement fundraising commissions and reimbursements: see memo detail		Category/ Type 003	Transaction ID : SB17.12092	
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).....	9398.38
TOTAL This Period (last page this line number only).....	

: 97 `A-G79 @C B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHZG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB17

Transaction ID : SB17.12095

reimbursement: Prime Rib 2020 K St NW Washington DC 20006 \$161.45 - meals & entertainment

Form/Schedule: SB17

Transaction ID: SB17.12092

Fundraising commissions \$700.00; Reimbursments: Del Frisco's Grille 1201 Pennsylvania Ave NW Washington DC 20004 \$1215.30 - event expense; Capitol Hill Club 300 First St SE Washington DC 20003 \$29.60 - meals & ent; Harrah's/Ceasar's 15 Hwy 50 Stateline NV 89449 \$1969.79 - lodging & meals & ent; Eldorado PO Box 3399 Reno NV 89505 \$91.10 - lodging; Harvey's 18 Us Hwy 50 Stateline NV 89449 \$1380.39 - meals & ent; Bucket of Blood Saloon 1 S C St Virginia City NV 89446 \$42.00 - meals & ent; Sage Room 18 US Hwy 50 Stateline NV 89449 \$2,450.37 - event expense & meals; US Airways \$678.40 Airfare. (\$170.65 of these receipts are paid in a subsequent period. An addition error was made on the invoice submitted by the M Group, causing the invoice total to be less than the receipts attached.)

**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 50	
	<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. USAirways		Date of Disbursement M M / D D / Y Y Y Y 03 / 16 / 2015
Mailing Address 4000 E. Sky Harbor Blvd.		Amount of Each Disbursement this Period 811.45
City Phoenix State AZ Zip Code 85034	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 : SB17.12066
State: District:		

Full Name (Last, First, Middle Initial) B. Washoe county Republican Party		Date of Disbursement M M / D D / Y Y Y Y 01 / 22 / 2015
Mailing Address 3652 South Virginia Street		Amount of Each Disbursement this Period 500.00
City Reno State NV Zip Code 89502	Purpose of Disbursement Contribution Category/Type 011	
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 : SB17.12081
State: District:		

Full Name (Last, First, Middle Initial) c. Washoe county Republican Party		Date of Disbursement M M / D D / Y Y Y Y 03 / 12 / 2015
Mailing Address 3652 South Virginia Street		Amount of Each Disbursement this Period 950.00
City Reno State NV Zip Code 89502	Purpose of Disbursement contribution Category/Type 011	
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 : SB17.12099
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2261.45
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 50	
	<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 MM / DD / YYYY 01 / 09 / 2015
Mailing Address PO Box 6995		Amount of Each Disbursement this Period 3.00
City Portland	State OR	
Zip Code 97228	Purpose of Disbursement bank service charges - deposit image	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type 001	Transaction ID : SB17.12020
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. Wells Fargo		Date of Disbursement MM / DD / YYYY 01 / 14 / 2015
Mailing Address PO Box 6995		Amount of Each Disbursement this Period 45.00
City Portland	State OR	
Zip Code 97228	Purpose of Disbursement Merchant Fees	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type 001	Transaction ID : SB17.12028
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. Wells Fargo		Date of Disbursement MM / DD / YYYY 02 / 09 / 2015
Mailing Address PO Box 6995		Amount of Each Disbursement this Period 3.00
City Portland	State OR	
Zip Code 97228	Purpose of Disbursement bank service charges - deposit image	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type 001	Transaction ID : SB17.12031
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).....	51.00
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 50	
	<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 02 / 12 / 2015
Mailing Address PO Box 6995		Amount of Each Disbursement this Period 62.76
City Portland	State OR	
Zip Code 97228	Purpose of Disbursement Merchant Fees	<input type="checkbox"/> Memo Item
Candidate Name	001 Category/ Type	Transaction ID : SB17.12034
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. Wells Fargo		Date of Disbursement M M / D D / Y Y Y Y 02 / 12 / 2015
Mailing Address PO Box 6995		Amount of Each Disbursement this Period 45.14
City Portland	State OR	
Zip Code 97228	Purpose of Disbursement Merchant Fees	<input type="checkbox"/> Memo Item
Candidate Name	001 Category/ Type	Transaction ID : SB17.12035
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. Wells Fargo		Date of Disbursement M M / D D / Y Y Y Y 02 / 12 / 2015
Mailing Address PO Box 6995		Amount of Each Disbursement this Period 73.00
City Portland	State OR	
Zip Code 97228	Purpose of Disbursement Merchant Fees	<input type="checkbox"/> Memo Item
Candidate Name	001 Category/ Type	Transaction ID : SB17.12036
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).....	180.90
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 48 OF 50	
	<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 03 / 12 / 2015
Mailing Address PO Box 6995		Amount of Each Disbursement this Period 52.14
City Portland	State OR	
Zip Code 97228	Purpose of Disbursement Merchant Fees	<input type="checkbox"/> Memo Item
Candidate Name	001 Category/ Type	Transaction ID : SB17.12040
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. White Pine Republican Club		Date of Disbursement M M / D D / Y Y Y Y 01 / 22 / 2015
Mailing Address 570 First Street		Amount of Each Disbursement this Period 500.00
City Ely	State NV	
Zip Code 89301-1901	Purpose of Disbursement Contribution	<input type="checkbox"/> Memo Item
Candidate Name	011 Category/ Type	Transaction ID : SB17.12073
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.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State	
Zip Code	Purpose of Disbursement	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type	
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).....	552.14
TOTAL This Period (last page this line number only).....	49267.85

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 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	Transaction ID : SD10.7593	
<input type="text" value="4500.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="4500.00"/>

B. 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	Transaction ID : SD10.7279	
<input type="text" value="1500.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="1500.00"/>

C. 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	
<input type="text" value="3000.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="3000.00"/>

1) SUBTOTALS This Period This Page (optional)	<input type="text" value="9000.00"/>
2) TOTALS This Period (last page this line number only)	<input type="text" value="9000.00"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text" value="0.00"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text" value="9000.00"/>

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <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: