

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12FE4M5
Amodei for Nevada

ADDRESS (number and street) 503 N Division St
Carson City NV 89703
Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER C C00496760
3. IS THIS REPORT NEW (N) OR AMENDED (A)
CITY STATE ZIP CODE STATE DISTRICT
NV 02

4. TYPE OF REPORT (Choose One)
(a) Quarterly Reports:
[X] April 15 Quarterly Report (Q1)
[] July 15 Quarterly Report (Q2)
[] October 15 Quarterly Report (Q3)
[] January 31 Year-End Report (YE)
[] Termination Report (TER)

(b) 12-Day PRE-Election Report for the:
[] Primary (12P) [] General (12G) [] Runoff (12R)
[] Convention (12C) [] Special (12S)
Election on M M / D D / Y Y Y Y in the State of
(c) 30-Day POST-Election Report for the:
[] General (30G) [] Runoff (30R) [] Special (30S)
Election on M M / D D / Y Y Y Y in the State of

5. Covering Period M M / D D / Y Y Y Y 01 / 01 / 2016 through M M / D D / Y Y Y Y 03 / 31 / 2016

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Nicola Neilon

Signature of Treasurer Nicola Neilon [Electronically Filed] Date M M / D D / Y Y Y Y 04 / 15 / 2016

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

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
Amodei for Nevada

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	150832.94	485326.49
(b) Total Contribution Refunds (from Line 20(d))	3501.43	14601.43
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	147331.51	470725.06
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	106826.43	378333.06
(b) Total Offsets to Operating Expenditures (from Line 14).....	313.98	8993.28
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	106512.45	369339.78
8. Cash on Hand at Close of Reporting Period (from Line 27).....	285934.40	
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).....	13000.00	

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)

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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).....	75557.94	272557.94
(ii) Unitemized.....	1825.00	12750.00
(iii) TOTAL of contributions from individuals ▶	77382.94	285307.94
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	73450.00	200018.55
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	150832.94	485326.49
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.)	313.98	8993.28
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	151146.92	494319.77

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	106826.43	378333.06
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	59100.00	92050.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	2850.00	13950.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	651.43	651.43
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	3501.43	14601.43
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	169427.86	484984.49

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	304215.34
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	151146.92
25. SUBTOTAL (add Line 23 and Line 24).....	455362.26
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	169427.86
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	285934.40

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

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

FOR LINE NUMBER: PAGE 5 OF 100
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 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)
Jeanne L Ackley
 Mailing Address 5920 Sky Terrace Ct
 City State Zip Code
 Reno NV 89511-4364
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Retired 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 31 2016
Transaction ID : SA11AI.13723
 Amount of Each Receipt this Period
 1000.00
 Memo Item

B. 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
 1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 09 2016
Transaction ID : SA11AI.13620
 Amount of Each Receipt this Period
 500.00
 Memo Item

C. 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
 2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 09 2016
Transaction ID : SA11AI.13621
 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).....

2000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 100
	<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)
Shelly Aldean

Mailing Address 2614 Bohr Rd

City Carson City State NV Zip Code 89706

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

Name of Employer Self Occupation Broker

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 22 / 2016

Transaction ID : SA11AI.13707

Amount of Each Receipt this Period
500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Kosta M Arger

Mailing Address 2685 Spinnaker Drive

City Reno State NV Zip Code 89519

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

Name of Employer Sierra Nevada Cardiology Assoc Occupation Cardiologist

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 / 09 / 2016

Transaction ID : SA11AI.13628

Amount of Each Receipt this Period
500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Whitaker Lee Askew

Mailing Address 1809 Stirrup Lane

City Alexandria State VA Zip Code 22308

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

Name of Employer American Gaming Association Occupation government affairs

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 / 2016

Transaction ID : SA11AI.13739

Amount of Each Receipt this Period
1000.00

Memo Item
Primary 2016

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

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

2000.00

**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 100
	<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)
Kim Bacchus

Mailing Address 2702 Lakeridge Shores East

City Reno State NV Zip Code 89519

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 **600.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 09 / 2016

Transaction ID : SA11AI.13649

Amount of Each Receipt this Period
 200.00

Memo Item

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

Mailing Address PO Box 1984

City Carson City State NV Zip Code 89701

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 / 09 / 2016

Transaction ID : SA11AI.13615

Amount of Each Receipt this Period
 500.00

Memo Item

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

Mailing Address PO Box 1984

City Carson City State NV Zip Code 89701

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 **1500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 09 / 2016

Transaction ID : SA11AI.13619

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).....

1200.00

**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 100
	<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)
Susan Banks

Mailing Address 100 Sawbuck Road

City Reno State NV Zip Code 89519

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

Name of Employer: Dennis Banks Construction Occupation: Owner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date: 1000.00

Date of Receipt: 03 / 09 / 2016

Transaction ID : SA11AI.13630

Amount of Each Receipt this Period: 500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Kathleen Bennett

Mailing Address PO Box 311

City Silver Springs State NV Zip Code 89429

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

Name of Employer: Self Occupation: Airport Manager

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date: 350.00

Date of Receipt: 03 / 09 / 2016

Transaction ID : SA11AI.13641

Amount of Each Receipt this Period: 250.00

Memo Item

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

Mailing Address PO Box 311

City Silver Springs State NV Zip Code 89429

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

Name of Employer: Self Occupation: Airport Manager

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date: 850.00

Date of Receipt: 03 / 31 / 2016

Transaction ID : SA11AI.13728

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

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

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

FOR LINE NUMBER: PAGE 9 OF 100
(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)
Nancy Bilyeau

Mailing Address 4220 Plumas Street

City State Zip Code
Reno NV 89509

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

Name of Employer Occupation
Boudwin Properties, Ltd. General 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 / 09 / 2016

Transaction ID : SA11AI.13613

Amount of Each Receipt this Period
500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Charles Bluth

Mailing Address PO Box 293

City State Zip Code
Glenbrook NV 89413-0293

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

Name of Employer Occupation
Computerized Screening Inc President

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 19 / 2016

Transaction ID : SA11AI.13544

Amount of Each Receipt this Period
2700.00

Memo Item

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

Mailing Address 30 Promontory Pointe

City State Zip Code
Reno NV 89519

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
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 09 / 2016

Transaction ID : SA11AI.13636

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).....

3450.00

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

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

FOR LINE NUMBER: PAGE 10 OF 100
(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)
Angelina Capurro

Mailing Address 30 Promontory Pointe

City State Zip Code
Reno NV 89519

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 / 09 / 2016

Transaction ID : SA11AI.13669

Amount of Each Receipt this Period
250.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Cindy Carano

Mailing Address 550 W. Plumb Ln Ste. B436

City State Zip Code
Reno NV 89509

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

Name of Employer Occupation
El Dorado Hotel Casino Executive Director

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1750.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 09 / 2016

Transaction ID : SA11AI.13635

Amount of Each Receipt this Period
500.00

Memo Item

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

Mailing Address 9185 Mile Circle Dr.

City State Zip Code
Reno NV 89511

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

Name of Employer Occupation
J&J Mechanical Owner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 09 / 2016

Transaction ID : SA11AI.13606

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).....

1750.00

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

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

FOR LINE NUMBER: PAGE 11 OF 100
(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)
Patricia D Clark

Mailing Address **PO Box 1923**

City **Minden** State **NV** Zip Code **89423**

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

Name of Employer **Self** Occupation **Real Estate**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
750.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 09 / 2016

Transaction ID : SA11A1.13616

Amount of Each Receipt this Period
500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Christopher Cox

Mailing Address **2205 Windsor Rd**

City **Alexandria** State **VA** Zip Code **22307**

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

Name of Employer **Navigators Global** Occupation **Principal**

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 / 30 / 2016

Transaction ID : SA11A1.13738

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
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 09 / 2016

Transaction ID : SA11A1.13679

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

**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 100
	<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)
Audrey Damonte

Mailing Address 12500 Sage Hill Rd

City	State	Zip Code
Reno	NV	89521

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

Name of Employer	Occupation
Holley Driggs Walch	Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 09 / 2016

Transaction ID : SA11AI.13605

Amount of Each Receipt this Period
1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Corrado DeGasperis

Mailing Address 777 American Flat Road

City	State	Zip Code
Virginia City	NV	89440

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

Name of Employer	Occupation
Comstock Mining	CEO

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 / 31 / 2016

Transaction ID : SA11AI.13722

Amount of Each Receipt this Period
1000.00

Memo Item

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

Mailing Address 874 Ophir Peak

City	State	Zip Code
Incline Village	NV	89451

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

Name of Employer	Occupation
Self	consultant

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
350.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 09 / 2016

Transaction ID : SA11AI.13677

Amount of Each Receipt this Period
150.00

Memo Item

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

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

2150.00

**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 100
(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)
George Delcarlo

Mailing Address 874 Ophir Peak

City Incline Village State NV Zip Code 89451

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

Name of Employer Self Occupation consultant

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 09 / 2016

Transaction ID : SA11AI.13678

Amount of Each Receipt this Period
150.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Robert Depaoli

Mailing Address 1415 Arobio Ln

City Lovelock State NV Zip Code 89419-1074

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

Name of Employer None Occupation Self-Rancher

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 / 2016

Transaction ID : SA11AI.13705

Amount of Each Receipt this Period
1000.00

Memo Item

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

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)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 09 / 2016

Transaction ID : SA11AI.13609

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).....

2150.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 100
	<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)
Perry DiLoreto

Mailing Address 985 Damonte Ranch Pkwy Ste. 310

City Reno	State NV	Zip Code 89521
--------------	-------------	-------------------

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

Name of Employer DiLoreto Construction	Occupation Owner
---	---------------------

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 09 / 2016

Transaction ID : SA11AI.13611

Amount of Each Receipt this Period
500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Mendy K Elliott

Mailing Address 401 Ryland St. Suite 1105

City Reno	State NV	Zip Code 89502
--------------	-------------	-------------------

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

Name of Employer Capitol Partners LLC	Occupation Partner
--	-----------------------

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 09 / 2016

Transaction ID : SA11AI.13585

Amount of Each Receipt this Period
500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Mendy K Elliott

Mailing Address 401 Ryland St. Suite 1105

City Reno	State NV	Zip Code 89502
--------------	-------------	-------------------

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

Name of Employer Capitol Partners LLC	Occupation Partner
--	-----------------------

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2750.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2016

Transaction ID : SA11AI.13727

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 15 OF 100
	<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)
Mendy K Elliott

Mailing Address 401 Ryland St. Suite 1105

City	State	Zip Code
Reno	NV	89502

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

Name of Employer	Occupation
Capitol Partners LLC	Partner

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 / 31 / 2016

Transaction ID : SA11AI.13736

Amount of Each Receipt this Period
 _____ -50.00

Memo Item
 Redesignate:

B. Full Name (Last, First, Middle Initial)
Mendy K Elliott

Mailing Address 401 Ryland St. Suite 1105

City	State	Zip Code
Reno	NV	89502

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

Name of Employer	Occupation
Capitol Partners LLC	Partner

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 / 31 / 2016

Transaction ID : SA11AI.13737

Amount of Each Receipt this Period
 _____ 50.00

Memo Item
 Redesignate: to General

C. Full Name (Last, First, Middle Initial)
Mendy K Elliott

Mailing Address 401 Ryland St. Suite 1105

City	State	Zip Code
Reno	NV	89502

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

Name of Employer	Occupation
Capitol Partners LLC	Partner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 2850.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2016

Transaction ID : SA11AI.13966

Amount of Each Receipt this Period
 _____ 100.00

Memo Item
 In-kind - Flowers and appetizer for campaign event

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

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

_____ 100.00

**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 16 OF 100
	<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)
Mendy K Elliott

Mailing Address 401 Ryland St. Suite 1105

City Reno	State NV	Zip Code 89502
--------------	-------------	-------------------

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

Name of Employer Capitol Partners LLC	Occupation Partner
--	-----------------------

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 / 31 / 2016

Transaction ID : SA11AI.13971

Amount of Each Receipt this Period
 _____ -100.00

Memo Item
 Redesignate: In-kind - Flowers and appetizer for campaign event

B. Full Name (Last, First, Middle Initial)
Mendy K Elliott

Mailing Address 401 Ryland St. Suite 1105

City Reno	State NV	Zip Code 89502
--------------	-------------	-------------------

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

Name of Employer Capitol Partners LLC	Occupation Partner
--	-----------------------

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 / 31 / 2016

Transaction ID : SA11AI.13972

Amount of Each Receipt this Period
 _____ 100.00

Memo Item
 Redesignate: in-kind to General

C. 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 Self	Occupation Writer
--------------------------	----------------------

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 4550.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 02 / 2016

Transaction ID : SA11AI.13550

Amount of Each Receipt this Period
 _____ 200.00

Memo Item

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

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

_____ 200.00

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

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

FOR LINE NUMBER: PAGE 17 OF 100
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 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)
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 Self Occupation Writer
 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 / 02 / 2016
Transaction ID : SA11AI.13694
 Amount of Each Receipt this Period
 -200.00
 Memo Item
 Redesignate:

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 Self Occupation Writer
 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 / 02 / 2016
Transaction ID : SA11AI.13695
 Amount of Each Receipt this Period
 200.00
 Memo Item
 Redesignate: to General

C. Full Name (Last, First, Middle Initial)
Thomas Enos
 Mailing Address 7351 Granite Ridge Ct
 City Washoe Valley State NV Zip Code 89704
 FEC ID number of contributing federal political committee. **C**
 Name of Employer N/A Occupation Retired
 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 / 09 / 2016
Transaction ID : SA11AI.13626
 Amount of Each Receipt this Period
 500.00
 Memo Item

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

500.00

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

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

FOR LINE NUMBER: PAGE 18 OF 100
(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)
John Estill

Mailing Address **PO Box 320**

City **Gerlach** State **NV** Zip Code **89412**

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

Name of Employer **Self** Occupation **Rancher**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 09 / 2016

Transaction ID : SA11AI.13634

Amount of Each Receipt this Period
500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Norman Patrick Flanagan

Mailing Address **5295 Canyon Dr**

City **Reno** State **NV** Zip Code **89519**

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

Name of Employer **State of Nevada** Occupation **US District Judge**

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 / 09 / 2016

Transaction ID : SA11AI.13612

Amount of Each Receipt this Period
500.00

Memo Item

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

Mailing Address **4545 Mountaingate Dr**

City **RENO** State **NV** Zip Code **89519**

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

Name of Employer **MCDONALD CARANO** Occupation **ATTORNEY**

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 / 09 / 2016

Transaction ID : SA11AI.13631

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: PAGE 19 OF 100
(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)
Christie Gescheider

Mailing Address 14250 Sorrel Lane

City State Zip Code
Reno NV 89511

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

Name of Employer Occupation
Moana Nursery Business Owner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
750.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 09 / 2016

Transaction ID : SA11AI.13639

Amount of Each Receipt this Period
200.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Lance Gilman

Mailing Address 420 USA Pkwy Suite 106

City State Zip Code
Sparks NV 89434-4200

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

Name of Employer Occupation
Lance Gilman Commercial Real E Real Estate

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 / 07 / 2016

Transaction ID : SA11AI.13571

Amount of Each Receipt this Period
2000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Martin R Giudici

Mailing Address PO Box 12217

City State Zip Code
Reno NV 89510

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

Name of Employer Occupation
retired 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 / 09 / 2016

Transaction ID : SA11AI.13623

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).....

2700.00

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

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

FOR LINE NUMBER: PAGE 20 OF 100
(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)
Terry Gough

Mailing Address 4100 Inwood Lane

City State Zip Code
Reno NV 89502

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

Name of Employer Occupation
retired 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 / 09 / 2016

Transaction ID : SA11AI.13673

Amount of Each Receipt this Period
 300.00

Memo Item

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

Mailing Address 150 Plantation Dr

City State Zip Code
Carson City NV 89703

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

Name of Employer Occupation
Hartman & Hartman 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
 02 / 19 / 2016

Transaction ID : SA11AI.13539

Amount of Each Receipt this Period
 1000.00

Memo Item

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

Mailing Address 150 Plantation Dr

City State Zip Code
Carson City NV 89703

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

Name of Employer Occupation
Hartman & Hartman Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 19 / 2016

Transaction ID : SA11AI.13541

Amount of Each Receipt this Period
 -550.00

Memo Item
Redesignate:

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

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

1300.00

**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 100
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

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

Mailing Address 150 Plantation Dr

City Carson City State NV Zip Code 89703

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

Name of Employer Hartman & Hartman Occupation Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 19 / 2016

Transaction ID : SA11AI.13542

Amount of Each Receipt this Period
 550.00

Memo Item
 Redesignate: to General

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

Mailing Address 150 Plantation Dr

City Carson City State NV Zip Code 89703

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

Name of Employer Hartman & Hartman 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 / 09 / 2016

Transaction ID : SA11AI.13625

Amount of Each Receipt this Period
 500.00

Memo Item

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

Mailing Address 150 Plantation Dr

City Carson City State NV Zip Code 89703

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

Name of Employer Hartman & Hartman Occupation Attorney

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 / 09 / 2016

Transaction ID : SA11AI.13681

Amount of Each Receipt this Period
 -500.00

Memo Item
 Redesignate:

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

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

500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 100
	<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)
Stephen Hartman

Mailing Address 150 Plantation Dr

City Carson City State NV Zip Code 89703

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

Name of Employer Hartman & Hartman Occupation Attorney

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 / 09 / 2016

Transaction ID : SA11AI.13682

Amount of Each Receipt this Period
 500.00

Memo Item
 Redesignate: to General

B. Full Name (Last, First, Middle Initial)
Amber Henniger

Mailing Address 1453 Tirol Drive

City Incline Village State NV Zip Code 89451

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

Name of Employer retired Occupation retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2016

Transaction ID : SA11AI.13965

Amount of Each Receipt this Period
 50.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Christy L Hess

Mailing Address 60 S Stewart St PO Box 801

City Virginia City State NV Zip Code 89440

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

Name of Employer requested Occupation requested

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 07 / 2016

Transaction ID : SA11AI.13572

Amount of Each Receipt this Period
 300.00

Memo Item

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

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

350.00

**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 100
(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)
Alvin J. Hicks

Mailing Address 2450 Skyline Blvd.

City Reno State NV Zip Code 89509

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

Name of Employer MCDONALD CARANO 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 / 25 / 2016

Transaction ID : SA11AI.13706

Amount of Each Receipt this Period
500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Lee E Hoffman

Mailing Address 1085 Barrington Ave

City Elko State NV Zip Code 89801

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
750.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 01 / 2016

Transaction ID : SA11AI.13708

Amount of Each Receipt this Period
500.00

Memo Item

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

Mailing Address 1085 Barrington Ave

City Elko State NV Zip Code 89801

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
750.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 01 / 2016

Transaction ID : SA11AI.13549

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 24 OF 100
	<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)
James House

Mailing Address 2777 Northtowne Ln OFC

City Reno State NV Zip Code 89512-5029

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

Name of Employer East Summit Company Occupation Manager

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
 02 / 19 / 2016

Transaction ID : SA11AI.13531

Amount of Each Receipt this Period
1000.00

Memo Item

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

Mailing Address 1595 Meadow Wood Lane

City Reno State NV Zip Code 89502

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

Name of Employer International Test Solutions Occupation President

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2957.94

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2016

Transaction ID : SA11AI.13968

Amount of Each Receipt this Period
1207.94

Memo Item
In-kind - Wine and catering for campaign event

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

Mailing Address 1595 Meadow Wood Lane

City Reno State NV Zip Code 89502

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

Name of Employer International Test Solutions Occupation President

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2016

Transaction ID : SA11AI.13974

Amount of Each Receipt this Period
-257.94

Memo Item
Redesignate: In-kind - Wine and catering for campaign event

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

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

2207.94

**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 25 OF 100
	<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)
Alan Humphrey

Mailing Address 1595 Meadow Wood Lane

City	State	Zip Code
Reno	NV	89502

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

Name of Employer	Occupation
International Test Solutions	President

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2016

Transaction ID : SA11AI.13975

Amount of Each Receipt this Period
 _____ 257.94

Memo Item
 Redesignate: excess of in-kind to General

B. Full Name (Last, First, Middle Initial)
Donald L Jensen

Mailing Address 825 Steneri Way

City	State	Zip Code
Sparks	NV	89431-6312

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

Name of Employer	Occupation
Jensen Precast	CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 19 / 2016

Transaction ID : SA11AI.13532

Amount of Each Receipt this Period
 _____ 1000.00

Memo Item

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

Mailing Address PO Box 1298

City	State	Zip Code
Carson City	NV	89702

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

Name of Employer	Occupation
None	Consultant

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 / 08 / 2016

Transaction ID : SA11AI.13581

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 26 OF 100
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

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

Mailing Address 1134 Jo Lane

City State Zip Code
Gardenerville NV 89410

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

Name of Employer Occupation
AVK Company Presidenyt

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
4200.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2016

Transaction ID : SA11AI.13725

Amount of Each Receipt this Period
2700.00

Memo Item

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

Mailing Address 1134 Jo Lane

City State Zip Code
Gardenerville NV 89410

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

Name of Employer Occupation
AVK Company Presidenyt

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 / 31 / 2016

Transaction ID : SA11AI.13733

Amount of Each Receipt this Period
-1500.00

Memo Item
Redesignate:

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

Mailing Address 1134 Jo Lane

City State Zip Code
Gardenerville NV 89410

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

Name of Employer Occupation
AVK Company Presidenyt

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 / 31 / 2016

Transaction ID : SA11AI.13734

Amount of Each Receipt this Period
1500.00

Memo Item
Redesignate: to General

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

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

2700.00

**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 27 OF 100
	<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)
Peter Krueger

Mailing Address 401 Ryland St. Suite 111

City State Zip Code
Reno NV 89502

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

Name of Employer Occupation
Self Employed Lobbyist

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 / 31 / 2016

Transaction ID : SA11AI.13729

Amount of Each Receipt this Period
500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Paul Laxalt

Mailing Address 750 9th St NW #750

City State Zip Code
Washington DC 20001

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

Name of Employer Occupation
The Paul Laxalt Group 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 / 2016

Transaction ID : SA11AI.13984

Amount of Each Receipt this Period
500.00

Memo Item

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

Mailing Address 1941 Rolling Brook Lane

City State Zip Code
Reno NV 89519

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

Name of Employer Occupation
Law Offices of Keith Lee Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 09 / 2016

Transaction ID : SA11AI.13627

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: PAGE 28 OF 100
(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)
Frank Lepori

Mailing Address 1580 Hymar Ave Suite 100

City Sparks State NV Zip Code 89431

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

Name of Employer Frank Lepori Construction Occupation Owner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
4000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 09 / 2016

Transaction ID : SA11AI.13600

Amount of Each Receipt this Period
2000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Christopher Mackenzie

Mailing Address PO Box 646

City Carson City State NV Zip Code 89702

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

Name of Employer Allison Mackenzie 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 / 03 / 2016

Transaction ID : SA11AI.13982

Amount of Each Receipt this Period
500.00

Memo Item

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

Mailing Address 1527 Kestrel Ct

City Reno State NV Zip Code 89509

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

Name of Employer Mancini Properties, Inc. Occupation Executive

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 / 09 / 2016

Transaction ID : SA11AI.13637

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).....

2750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 100
	<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)
Liza Marroquin

Mailing Address 2500 Manzanita Lane

City State Zip Code
Reno NV 89509

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

Name of Employer Occupation
Smart Living MD 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
03 / 07 / 2016

Transaction ID : SA11AI.13562

Amount of Each Receipt this Period
2000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Maralene Martin

Mailing Address 10280 Copper Cloud Dr

City State Zip Code
Reno NV 89511-5349

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

Name of Employer Occupation
Retired 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 / 31 / 2016

Transaction ID : SA11AI.13724

Amount of Each Receipt this Period
1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Marshall L McBride

Mailing Address PO Box E

City State Zip Code
Virginia City NV 89440-0140

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

Name of Employer Occupation
Bucket O Blood Saloon Owner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 07 / 2016

Transaction ID : SA11AI.13566

Amount of Each Receipt this Period
300.00

Memo Item

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

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

3300.00

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

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

FOR LINE NUMBER: PAGE 30 OF 100
(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)
Ryan McGinness

Mailing Address 1127 4th St NE

City Washington State DC Zip Code 20002

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

Name of Employer Self Employed Occupation Management Consultant

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 01 / 2016

Transaction ID : SA11AI.13502

Amount of Each Receipt this Period
 1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Jackie R McGuffey

Mailing Address 1721 Harte Road

City Reno State NV Zip Code 89521

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

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 07 / 2016

Transaction ID : SA11AI.13577

Amount of Each Receipt this Period
 300.00

Memo Item

C. 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

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 18 / 2016

Transaction ID : SA11AI.13529

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).....

2800.00

**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 31 OF 100
	<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)
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

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 18 / 2016

Transaction ID : SA11AI.13684

Amount of Each Receipt this Period
 _____ -400.00

Memo Item
Redesignate:

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

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 18 / 2016

Transaction ID : SA11AI.13685

Amount of Each Receipt this Period
 _____ 400.00

Memo Item
Redesignate: to General

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

Mailing Address 10250 Donnay Court

City Reno State NV Zip Code 89521

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

Name of Employer CORE Construction Occupation VP

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 750.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 09 / 2016

Transaction ID : SA11AI.13629

Amount of Each Receipt this Period
 _____ 500.00

Memo Item

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

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

_____ 500.00

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

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

FOR LINE NUMBER: PAGE 32 OF 100
(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)
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 **3200.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 19 / 2016

Transaction ID : SA11A1.13535

Amount of Each Receipt this Period
 1500.00

Memo Item

B. 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

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 19 / 2016

Transaction ID : SA11A1.13687

Amount of Each Receipt this Period
 -500.00

Memo Item
 Redesignate:

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

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 19 / 2016

Transaction ID : SA11A1.13688

Amount of Each Receipt this Period
 500.00

Memo Item
 Redesignate: to General

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 33 OF 100
	<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)
Lee Moisio

Mailing Address **PO Box 12458**

City **Zephyr Cove** State **NV** Zip Code **89448**

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 **2500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 09 / 2016

Transaction ID : SA11AI.13672

Amount of Each Receipt this Period
500.00

Memo Item

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

Mailing Address **PO Box 12458**

City **Zephyr Cove** State **NV** Zip Code **89448**

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

Name of Employer **Vertex Chemical** Occupation **Executive**

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 / 09 / 2016

Transaction ID : SA11AI.13671

Amount of Each Receipt this Period
500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Marilyn McAdams Mora

Mailing Address **4745 Sommerville Way**

City **Reno** State **NV** Zip Code **89519-0922**

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

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

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **750.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 20 / 2016

Transaction ID : SA11AI.13523

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).....

1250.00

**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 34 OF 100
	<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)
Paul J Moradkhan

Mailing Address **PO Box 400305**

City **Las Vegas** State **NV** Zip Code **89140**

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

Name of Employer **Las Vegas Metro Chamber of Com** Occupation **Vice 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 / 07 / 2016

Transaction ID : SA11AI.13576

Amount of Each Receipt this Period
250.00

Memo Item

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

Mailing Address **2279 Rainwood Ct.**

City **Reno** State **NV** Zip Code **89509**

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

Name of Employer **Morrey Distributing Co.** Occupation **President**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 10 / 2016

Transaction ID : SA11AI.13618

Amount of Each Receipt this Period
500.00

Memo Item

C. 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
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 19 / 2016

Transaction ID : SA11AI.13543

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).....

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 35 OF 100
	<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)
Jintana Patnaude

Mailing Address 2355 Lois Ct

City Sparks State NV Zip Code 89434

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

Name of Employer Retired Occupation None

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **800.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 09 / 2016

Transaction ID : SA11AI.13610

Amount of Each Receipt this Period
500.00

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: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 05 / 2016

Transaction ID : SA11AI.13593

Amount of Each Receipt this Period
500.00

Memo Item
 check via VOTESANE PAC, \$25 fee deducted, \$475 net

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

Mailing Address 2118 Riverside Dr Ste 209

City Mount Vernon State WA Zip Code 98273-5466

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

Name of Employer Bodines Casino Occupation Owner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **5550.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 09 / 2016

Transaction ID : SA11AI.13670

Amount of Each Receipt this Period
2700.00

Memo Item

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

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

3700.00

**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 36 OF 100
	<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)
Michael Pegram

Mailing Address 2118 Riverside Dr Ste 209

City State Zip Code
Mount Vernon WA 98273-5466

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

Name of Employer Occupation
Bodines Casino Owner

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 / 09 / 2016

Transaction ID : SA11AI.13690

Amount of Each Receipt this Period
 -2550.00

Memo Item
Redesignate:

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

Mailing Address 2118 Riverside Dr Ste 209

City State Zip Code
Mount Vernon WA 98273-5466

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

Name of Employer Occupation
Bodines Casino Owner

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 / 09 / 2016

Transaction ID : SA11AI.13691

Amount of Each Receipt this Period
 2550.00

Memo Item
Redesignate: to General

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

Mailing Address 2118 Riverside Dr Ste 209

City State Zip Code
Mount Vernon WA 98273-5466

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

Name of Employer Occupation
Bodines Casino Owner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 8250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 09 / 2016

Transaction ID : SA11AI.13891

Amount of Each Receipt this Period
 2700.00

Memo Item
for Mary Ellen Pegram - will be refunded - in name of another

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

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

2700.00

**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 37 OF 100
	<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)
Gary Pestello

Mailing Address 10198 Via Verona

City Reno State NV Zip Code 89511

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

Name of Employer Retired Occupation None

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 / 28 / 2016

Transaction ID : SA11AI.13731

Amount of Each Receipt this Period
 1000.00

Memo Item

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

Mailing Address 4720 Aberfeldy Dr

City Reno State NV Zip Code 89519

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

Name of Employer Children's Cabinet Occupation Executive Driector

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 11 / 2016

Transaction ID : SA11AI.13583

Amount of Each Receipt this Period
 100.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Carolyn M Quilici

Mailing Address 7810 Lakeside Dr

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 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 09 / 2016

Transaction ID : SA11AI.13675

Amount of Each Receipt this Period
 300.00

Memo Item

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

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

1400.00

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

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

FOR LINE NUMBER: PAGE 38 OF 100
(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)
Richard Reviglio

Mailing Address 950 S Rock Blvd

City Sparks State NV Zip Code 89431

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

Name of Employer Western Nevada Supply Occupation General Manager

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 / 09 / 2016

Transaction ID : SA11AI.13608

Amount of Each Receipt this Period
1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Kent R Robison

Mailing Address 71 Washington Street

City Reno State NV Zip Code 89503

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

Name of Employer Robison, Belaustegui, Sharp an Occupation Attorney

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
 02 / 19 / 2016

Transaction ID : SA11AI.13545

Amount of Each Receipt this Period
1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
John Tom Ross

Mailing Address PO Box 635

City Carson City State NV Zip Code 89072-0635

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

Name of Employer Self Employed Occupation Lawyer

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 / 25 / 2016

Transaction ID : SA11AI.13890

Amount of Each Receipt this Period
500.00

Memo Item
 Reattribute: to John Tom Ross per check and statement

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

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

2500.00

**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 39 OF 100
	<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)
Michael Rossetti

Mailing Address 6611 Dearborn Dr.

City Falls Church State VA Zip Code 22044

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

Name of Employer Akin Gump Occupation Partner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 03 / 2016

Transaction ID : SA11AI.13489

Amount of Each Receipt this Period
250.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Nicholas Rossi

Mailing Address 3555 Southampton Dr.

City Reno State NV Zip Code 89509

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

Name of Employer Lucini Pariol Insurance Occupation Insurance Broker

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 19 / 2016

Transaction ID : SA11AI.13547

Amount of Each Receipt this Period
1000.00

Memo Item

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

Mailing Address 3555 Southampton Dr.

City Reno State NV Zip Code 89509

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

Name of Employer Lucini Pariol Insurance Occupation Insurance Broker

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1750.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 09 / 2016

Transaction ID : SA11AI.13624

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).....

1750.00

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

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

FOR LINE NUMBER: PAGE 40 OF 100
(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)
Ned Ryder

Mailing Address 1425 Treat Blvd

City Walnut Creek State CA Zip Code 94567

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

Name of Employer: Ryder Homes Occupation: Chairman

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date: 1000.00

Date of Receipt: 02 / 19 / 2016

Transaction ID : SA11AI.13533

Amount of Each Receipt this Period: 1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Gail A. Sande

Mailing Address 85 Hawken Road

City Reno State NV Zip Code 89509

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: 1500.00

Date of Receipt: 03 / 09 / 2016

Transaction ID : SA11AI.13607

Amount of Each Receipt this Period: 1000.00

Memo Item

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

Mailing Address 774 Mays Blvd #10-466

City Incline Village State NV Zip Code 89451

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: 2700.00

Date of Receipt: 03 / 31 / 2016

Transaction ID : SA11AI.13964

Amount of Each Receipt this Period: 2700.00

Memo Item

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

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

4700.00

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

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

FOR LINE NUMBER: PAGE 41 OF 100
(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)
Julie A Schultz

Mailing Address 14150 Saddlebow Drive

City Reno State NV Zip Code 89511

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

Name of Employer Reno Tahoe Airport Authority Occupation COO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 450.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 16 / 2016

Transaction ID : SA11AI.13515

Amount of Each Receipt this Period
 _____ 200.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Jerry Scolari

Mailing Address PO Box 5070

City Reno State NV Zip Code 89513

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

Name of Employer Scolaris Occupation Businessman

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 / 09 / 2016

Transaction ID : SA11AI.13674

Amount of Each Receipt this Period
 _____ 500.00

Memo Item

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

Mailing Address PO Box 5070

City Reno State NV Zip Code 89513

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

Name of Employer Scolari's Food and Drug Compan Occupation 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 / 09 / 2016

Transaction ID : SA11AI.13668

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).....

_____ 1200.00

**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 42 OF 100
	<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)
Maria C Sheehan

Mailing Address 2363 Manzanita Lane

City State Zip Code
Reno NV 89509-7022

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

Name of Employer Occupation
TMCC 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 / 31 / 2016

Transaction ID : SA11AI.13726

Amount of Each Receipt this Period
1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Cassandra Smith

Mailing Address 3411 Cheechako Dr

City State Zip Code
Reno NV 89519

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
400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 09 / 2016

Transaction ID : SA11AI.13642

Amount of Each Receipt this Period
200.00

Memo Item

C. Full Name (Last, First, Middle Initial)
G BLAKE SMITH

Mailing Address 1 East Liberty St Suite 444

City State Zip Code
RENO NV 89511

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

Name of Employer Occupation
Somerset Development Co Managing Partner

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
 02 / 19 / 2016

Transaction ID : SA11AI.13548

Amount of Each Receipt this Period
2000.00

Memo Item

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

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

3200.00

**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 43 OF 100

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

A. Full Name (Last, First, Middle Initial)
John Stanko

Mailing Address 12785 Silver Wolf Rd

City Reno State NV Zip Code 89511

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

Name of Employer Chamion Chevrolet Occupation Auto Dealer

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
 02 / 19 / 2016

Transaction ID : SA11AI.13580

Amount of Each Receipt this Period
 1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Conrad Stitser

Mailing Address 850 Maestro Drive Suite 100

City Reno State NV Zip Code 89511-2247

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

Name of Employer Mayberry Properties Occupation President

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 09 / 2016

Transaction ID : SA11AI.13604

Amount of Each Receipt this Period
 1000.00

Memo Item

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

Mailing Address PO Box 1330

City Fallon State NV Zip Code 89407

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

Name of Employer Tedford Tire Occupation Owner

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 / 09 / 2016

Transaction ID : SA11AI.13617

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).....

2500.00

**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 44 OF 100
	<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)
Raymond P Tolles III

Mailing Address 4315 Water Hole Road

City	State	Zip Code
Reno	NV	89519-2985

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

Name of Employer	Occupation
Basin Street Properties	Commercial Real Estate

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
 02 / 19 / 2016

Transaction ID : SA11AI.13536

Amount of Each Receipt this Period
1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Ralph Weir

Mailing Address PO Box 635

City	State	Zip Code
Carson City	NV	89702-0635

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

Name of Employer	Occupation
Self employed	contractor

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 / 25 / 2016

Transaction ID : SA11AI.13703

Amount of Each Receipt this Period
500.00

Memo Item
 will be re-attributed to John Tom Ross as indicated- two party check

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

Mailing Address PO Box 635

City	State	Zip Code
Carson City	NV	89702-0635

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

Name of Employer	Occupation
Self employed	contractor

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 / 25 / 2016

Transaction ID : SA11AI.13889

Amount of Each Receipt this Period
-500.00

Memo Item
 Reattribute: will be re-attributed to John Tom Ross as indicated- two party check

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 45 OF 100
	<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)
Patrick Alan Whitten

Mailing Address **PO Box 846**

City **Virginia City** State **NV** Zip Code **89440-0846**

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

Name of Employer **retired** Occupation **retired**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 07 / 2016

Transaction ID : SA11AI.13568

Amount of Each Receipt this Period
300.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Robert Winkel

Mailing Address **4785 Caughlin Pkwy**

City **Reno** State **NV** Zip Code **89519**

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

Name of Employer **Maupin Cox & Legoy** Occupation **Attorney**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **1250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 19 / 2016

Transaction ID : SA11AI.13538

Amount of Each Receipt this Period
1000.00

Memo Item

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

Mailing Address **255 N Sierra St #608**

City **Reno** State **NV** Zip Code **89501**

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

Name of Employer **Bristlecone Inc** Occupation **CEO**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **750.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 09 / 2016

Transaction ID : SA11AI.13633

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).....

1800.00

7557.94

**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 46 OF 100
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

Full Name (Last, First, Middle Initial)
ACTION COMMITTEE FOR RURAL ELECTRIFICATION. (ACRE) NATIONAL RURAL ELECTRIC COOPERATIVE

A. Mailing Address 4301 WILSON BOULEVARD

City State Zip Code
ARLINGTON VA 22203

FEC ID number of contributing federal political committee. **C** C00002972

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
 02 / 02 / 2016

Transaction ID : SA11C.13487

Amount of Each Receipt this Period
 1000.00

Memo Item
2016 Primary

Full Name (Last, First, Middle Initial)
ACTION COMMITTEE FOR RURAL ELECTRIFICATION. (ACRE) NATIONAL RURAL ELECTRIC COOPERATIVE

B. Mailing Address 4301 WILSON BOULEVARD

City State Zip Code
ARLINGTON VA 22203

FEC ID number of contributing federal political committee. **C** C00002972

Name of Employer Occupation

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

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 30 / 2016

Transaction ID : SA11C.13742

Amount of Each Receipt this Period
 4000.00

Memo Item

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

C. Mailing Address 495 NORTH KELLER ROAD
SUITE 300

City State Zip Code
MAITLAND FL 32751

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date 2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 09 / 2016

Transaction ID : SA11C.13588

Amount of Each Receipt this Period
 2500.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	7500.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 47 OF 100
(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)
AKIN GUMP STRAUSS HAUER & FELD LLP CIVIC ACTION COMMITTEE (AKA AGSH&F CIVIC ACTION COMMITTEE)

A. Mailing Address 1333 NEW HAMPSHIRE AVE., NW

City WASHINGTON State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00104901

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 750.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 16 / 2016

Transaction ID : SA11C.13519

Amount of Each Receipt this Period
 750.00

Memo Item
 2016 Primary

Full Name (Last, First, Middle Initial)
AMERICAN ACADEMY OF PEDIATRIC DENTISTRY POLITICAL ACTION COMMITTEE

B. Mailing Address 211 E CHICAGO AVE
SUITE 1600

City CHICAGO State IL Zip Code 60611

FEC ID number of contributing federal political committee. **C** C00365965

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 / 09 / 2016

Transaction ID : SA11C.13598

Amount of Each Receipt this Period
 2500.00

Memo Item
 2016 General

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

C. Mailing Address 520 N NORTHWEST HIGHWAY

City PARK RIDGE State IL Zip Code 60068-2538

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 4000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2016

Transaction ID : SA11C.13710

Amount of Each Receipt this Period
 2500.00

Memo Item

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

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

5750.00

**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 48 OF 100			
	<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)
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 **7500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 22 / 2016

Transaction ID : SA11C.13701

Amount of Each Receipt this Period
2500.00

Memo Item
 2016 General

B. 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 **10000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 14 / 2016

Transaction ID : SA11C.13661

Amount of Each Receipt this Period
5000.00

Memo Item
 General 2016

C. Full Name (Last, First, Middle Initial)
CAPITAL ONE FINANCIAL CORP. ASSOC. POLITICAL FUND

Mailing Address **1680 CAPITAL ONE DRIVE ATTN:19050-**

City **MCLEAN** State **VA** Zip Code **22102**

FEC ID number of contributing federal political committee. **C C00326595**

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 / 30 / 2016

Transaction ID : SA11C.13740

Amount of Each Receipt this Period
1000.00

Memo Item
 Primary 2016

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

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

8500.00

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

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

FOR LINE NUMBER: PAGE 49 OF 100
(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)
CIGAR-PAC

Mailing Address **818 CONNECTICUT AVENUE, NW
SUITE 200**

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

FEC ID number of contributing federal political committee. **C C00121350**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
3200.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 09 / 2016

Transaction ID : SA11C.13495

Amount of Each Receipt this Period
 Memo Item
2500.00

B. Full Name (Last, First, Middle Initial)
COEUR MINING INC PAC

Mailing Address **104 S MICHIGAN AVENUE**

City **CHICAGO** State **IL** Zip Code **60603**

FEC ID number of contributing federal political committee. **C C00563072**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 09 / 2016

Transaction ID : SA11C.13602

Amount of Each Receipt this Period
 Memo Item
1200.00
 Primary 2016

C. 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
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 09 / 2016

Transaction ID : SA11C.13499

Amount of Each Receipt this Period
 Memo Item
1000.00
 2016 Primary

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

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

4700.00

**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 50 OF 100
	<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. EMPLOYEES OF NORTHROP GRUMMAN CORPORATION PAC

Full Name (Last, First, Middle Initial)
Mailing Address 2980 FAIRVIEW PARK DRIVE

City State Zip Code
FALLS CHURCH VA 22042

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
6000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 09 / 2016

Transaction ID : SA11C.13500

Amount of Each Receipt this Period
1000.00

Memo Item
2016 General

B. ENTRUST INC. PAC

Full Name (Last, First, Middle Initial)
Mailing Address 16633 DALLAS PARKWAY SUITE 800

City State Zip Code
ADDISON TX 75001

FEC ID number of contributing federal political committee. **C C00373787**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 09 / 2016

Transaction ID : SA11C.13496

Amount of Each Receipt this Period
1500.00

Memo Item

C. HOLLAND & HART LLP FEDERAL PAC

Full Name (Last, First, Middle Initial)
Mailing Address 555 SEVENTEENTH STREET SUITE 3200

City State Zip Code
DENVER CO 80202

FEC ID number of contributing federal political committee. **C C00137729**

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
 02 / 09 / 2016

Transaction ID : SA11C.13492

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).....

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 51 OF 100
(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)
INDEPENDENT INSURANCE AGENTS & BROKERS OF AMERICA, INC. POLITICAL ACTION COMMITTEE (INSURP)

A. Mailing Address 412 FIRST STREET, SE, SUITE 300

City State Zip Code
WASHINGTON DC 20003

FEC ID number of contributing federal political committee. **C** C00022343

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 / 09 / 2016

Transaction ID : SA11C.13664

Amount of Each Receipt this Period
500.00

Memo Item
2016 Primary

Full Name (Last, First, Middle Initial)
LOCKHEED MARTIN CORPORATION EMPLOYEES' POLITICAL ACTION COMMITTEE

B. Mailing Address 2121 CRYSTAL DRIVE
SUITE 100

City State Zip Code
ARLINGTON VA 22202

FEC ID number of contributing federal political committee. **C** C00303024

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
4000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 29 / 2016

Transaction ID : SA11C.13553

Amount of Each Receipt this Period
1000.00

Memo Item
2016 US Primary

Full Name (Last, First, Middle Initial)
MAJORITY COMMITTEE PAC--MC PAC

C. Mailing Address P.O. BOX 10134

City State Zip Code
BAKERSFIELD CA 93389

FEC ID number of contributing federal political committee. **C** C00428052

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 16 / 2016

Transaction ID : SA11C.13509

Amount of Each Receipt this Period
5000.00

Memo Item
2016 General

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 52 OF 100
	<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)
MAJORITY COMMITTEE PAC--MC PAC

Mailing Address P.O. BOX 10134

City BAKERSFIELD State CA Zip Code 93389

FEC ID number of contributing federal political committee. **C** C00428052

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 10000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 16 / 2016

Transaction ID : SA11C.13510

Amount of Each Receipt this Period
 5000.00

Memo Item
2016 Primary

B. Full Name (Last, First, Middle Initial)
KEVIN MCCARTHY

Mailing Address PO BOX 12667

City BAKERSFIELD State CA Zip Code 93389

FEC ID number of contributing federal political committee. **C** H6CA22125

Name of Employer Occupation
House of Representatives US Representative

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
 02 / 16 / 2016

Transaction ID : SA11C.13507

Amount of Each Receipt this Period
 2000.00

Memo Item
2016 General

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

Mailing Address PO BOX 12667

City BAKERSFIELD State CA Zip Code 93389

FEC ID number of contributing federal political committee. **C** H6CA22125

Name of Employer Occupation
House of Representatives US Representative

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 4000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 16 / 2016

Transaction ID : SA11C.13508

Amount of Each Receipt this Period
 2000.00

Memo Item
2016 Primary

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

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

9000.00

**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 53 OF 100
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

A. Full Name (Last, First, Middle Initial)
NATIONAL AIR TRAFFIC CONTROLLERS ASSOCIATION PAC

Mailing Address 1325 MASSACHUSETTS AVE., NW

City	State	Zip Code
WASHINGTON	DC	20005

FEC ID number of contributing federal political committee. **C** C00238725

Name of Employer	Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 4500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 07 / 2016

Transaction ID : SA11C.13563

Amount of Each Receipt this Period
 _____ 2500.00

Memo Item
 2016 Primary

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

Mailing Address 430 NORTH MICHIGAN AVENUE

City	State	Zip Code
CHICAGO	IL	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
 _____ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 22 / 2016

Transaction ID : SA11C.13486

Amount of Each Receipt this Period
 _____ 500.00

Memo Item
 Primary 2016

C. Full Name (Last, First, Middle Initial)
NATIONAL AUTOMOBILE DEALERS ASSOCIATION POLITICAL ACTION COMMITTEE

Mailing Address 8400 WESTPARK DRIVE

City	State	Zip Code
TYSONS	VA	22102

FEC ID number of contributing federal political committee. **C** C00040998

Name of Employer	Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 4000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 16 / 2016

Transaction ID : SA11C.13520

Amount of Each Receipt this Period
 _____ 4000.00

Memo Item
 2016 Primary

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

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

_____ 7000.00

**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 54 OF 100
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

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

Mailing Address 9110 EAST NICHOLS AVENUE

City State Zip Code
CENTENNIAL CO 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
10000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 22 / 2016

Transaction ID : SA11C.13699

Amount of Each Receipt this Period
5000.00

Memo Item
2016 General

B. Full Name (Last, First, Middle Initial)
NATIONAL RETAIL FEDERATION RETAILPAC

Mailing Address 325 7TH STREET NW SUITE #1100

City State Zip Code
WASHINGTON DC 20004

FEC ID number of contributing federal political committee. **C** C00040329

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 / 30 / 2016

Transaction ID : SA11C.13745

Amount of Each Receipt this Period
1000.00

Memo Item
Primary 2016

C. Full Name (Last, First, Middle Initial)
NATSO INC. NATSO PAC

Mailing Address 1330 BRADDOCK PLACE, SUITE 501

City State Zip Code
ALEXANDRIA VA 22314

FEC ID number of contributing federal political committee. **C** C00097865

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 / 2016

Transaction ID : SA11C.13698

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).....

7000.00

**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 55 OF 100
	<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)
REYNOLDS AMERICAN INC. POLITICAL ACTION COMMITTEE; RAI PAC

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

City	State	Zip Code
WINSTON-SALEM	NC	27102

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

Name of Employer	Occupation

Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 5000.00
---	---

Date of Receipt

M M	/	D D	/	Y Y Y Y
02	/	09	/	2016

Transaction ID : SA11C.13501

Amount of Each Receipt this Period
 _____ 2500.00

Memo Item
Primary 2016

B. Full Name (Last, First, Middle Initial)
RITE AID CORPORATION PAC

Mailing Address **30 HUNTER LANE**

City	State	Zip Code
CAMP HILL	PA	17011

FEC ID number of contributing federal political committee. **C C00104083**

Name of Employer	Occupation

Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 1000.00
---	---

Date of Receipt

M M	/	D D	/	Y Y Y Y
03	/	14	/	2016

Transaction ID : SA11C.13659

Amount of Each Receipt this Period
 _____ 1000.00

Memo Item

C. 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 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 4500.00
---	---

Date of Receipt

M M	/	D D	/	Y Y Y Y
02	/	16	/	2016

Transaction ID : SA11C.13517

Amount of Each Receipt this Period
 _____ 1000.00

Memo Item
2016 General

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

_____ 4500.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 56 OF 100
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

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

Mailing Address P.O. BOX 50193

City State Zip Code
SPARKS NV 89434

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
6000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 16 / 2016

Transaction ID : SA11C.13518

Amount of Each Receipt this Period
1500.00

Memo Item
2016 Primary

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
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 18 / 2016

Transaction ID : SA11C.13525

Amount of Each Receipt this Period
1000.00

Memo Item
2016 Primary

C. Full Name (Last, First, Middle Initial)
TRUCKING POLITICAL ACTION COMMITTEE OF THE AMERICAN TRUCKING ASSOCIATIONS, INC.

Mailing Address 430 FIRST ST. SE

City State Zip Code
WASHINGTON DC 20003

FEC ID number of contributing federal political committee. **C C00002881**

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 / 14 / 2016

Transaction ID : SA11C.13663

Amount of Each Receipt this Period
2000.00

Memo Item
2016 Primary

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: PAGE 57 OF 100
(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)
WAL-MART STORES INC. PAC FOR RESPONSIBLE GOVERNMENT

Mailing Address 702 S.W. 8TH STREET

City Bentonville State AR Zip Code 72716

FEC ID number of contributing federal political committee. **C** C00093054

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 / 22 / 2016

Transaction ID : SA11C.13700

Amount of Each Receipt this Period
 1000.00

Memo Item
 2016 Primary

B. Full Name (Last, First, Middle Initial)
WAL-MART STORES INC. PAC FOR RESPONSIBLE GOVERNMENT

Mailing Address 702 S.W. 8TH STREET

City Bentonville State AR Zip Code 72716

FEC ID number of contributing federal political committee. **C** C00093054

Name of Employer Occupation

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
 03 / 30 / 2016

Transaction ID : SA11C.13747

Amount of Each Receipt this Period
 2500.00

Memo Item
 2016 Primary

C. Full Name (Last, First, Middle Initial)
WESTERN ENERGY ALLIANCE PAC

Mailing Address 1775 SHERMAN ST
 SUITE 2700

City Denver State CO Zip Code 80203

FEC ID number of contributing federal political committee. **C** C00426569

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 07 / 2016

Transaction ID : SA11C.13564

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).....

5000.00

73450.00

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

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

FOR LINE NUMBER: PAGE 58 OF 100
(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)
Southwest Airlines

Mailing Address P.O. Box 36647-1CR

City State Zip Code
Dallas TX 73235

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1246.38

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 01 / 2016

Transaction ID : SA14.13748

Amount of Each Receipt this Period
 313.98

Memo Item
purchase return on travel expense

B. 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

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).....

313.98

313.98

**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 59 OF 100			
	<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. 7-Eleven Reno			Date of Disbursement MM / DD / YYYY 02 / 20 / 2016		
Mailing Address 12605 South Virginia St			Amount of Each Disbursement this Period 37.66		
City Reno	State NV	Zip Code 89511	Memo Item <input type="checkbox"/>		
Purpose of Disbursement Gas in lieu of mileage - travel expense		Category/ Type 002	Transaction ID : SB17.13862		
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. 7-Eleven Reno			Date of Disbursement MM / DD / YYYY 03 / 11 / 2016		
Mailing Address 12605 South Virginia St			Amount of Each Disbursement this Period 62.58		
City Reno	State NV	Zip Code 89511	Memo Item <input type="checkbox"/>		
Purpose of Disbursement Gas in lieu of mileage - travel expense		Category/ Type 002	Transaction ID : SB17.13868		
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. Acqua AI 2			Date of Disbursement MM / DD / YYYY 02 / 11 / 2016		
Mailing Address 212 7th St SE			Amount of Each Disbursement this Period 760.00		
City Washington	State DC	Zip Code 20003	Memo Item <input type="checkbox"/>		
Purpose of Disbursement Contributor relations - meals & entertainment		Category/ Type 003	Transaction ID : SB17.13790		
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)	860.24
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 60 OF 100	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

Full Name (Last, First, Middle Initial) A. Adele's		Date of Disbursement MM / DD / YYYY 01 / 04 / 2016
Mailing Address 1112 North Carson Street		Amount of Each Disbursement this Period 330.00
City Carson City	State NV	
Zip Code 89701	Purpose of Disbursement Contributor relations - meals & entertainment	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type 003	Transaction ID : SB17.13752
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. Adele's		Date of Disbursement MM / DD / YYYY 01 / 30 / 2016
Mailing Address 1112 North Carson Street		Amount of Each Disbursement this Period 250.00
City Carson City	State NV	
Zip Code 89701	Purpose of Disbursement Contributor relations - meals & entertainment	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type 003	Transaction ID : SB17.13781
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. Adele's		Date of Disbursement MM / DD / YYYY 03 / 24 / 2016
Mailing Address 1112 North Carson Street		Amount of Each Disbursement this Period 69.00
City Carson City	State NV	
Zip Code 89701	Purpose of Disbursement Contributor relations - meals & entertainment	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type 003	Transaction ID : SB17.13824
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).....	649.00
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 61 OF 100	
	<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. American Express Collections		Date of Disbursement M M / D D / Y Y Y Y 01 / 05 / 2016
Mailing Address P.O. Box 981540		Amount of Each Disbursement this Period 144.65
City El Paso State TX Zip Code 79998	Purpose of Disbursement Merchant fees	<input type="checkbox"/> Memo Item
Candidate Name	001 Category/Type	Transaction ID : SB17.13829
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. Arco Carson		Date of Disbursement M M / D D / Y Y Y Y 02 / 22 / 2016
Mailing Address 1017 N Carson		Amount of Each Disbursement this Period 48.97
City Carson City State NV Zip Code 89701	Purpose of Disbursement Gas in lieu of mileage - travel expense	<input type="checkbox"/> Memo Item
Candidate Name	002 Category/Type	Transaction ID : SB17.13863
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. Arco Carson		Date of Disbursement M M / D D / Y Y Y Y 03 / 24 / 2016
Mailing Address 1017 N Carson		Amount of Each Disbursement this Period 33.29
City Carson City State NV Zip Code 89701	Purpose of Disbursement Gas in lieu of mileage - travel expense	<input type="checkbox"/> Memo Item
Candidate Name	002 Category/Type	Transaction ID : SB17.13872
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).....	226.91
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 62 OF 100			
	<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. Authnet Gateway			Date of Disbursement M M / D D / Y Y Y Y 01 / 05 / 2016	
Mailing Address P.O. Box 8999			Amount of Each Disbursement this Period 21.55	
City San Francisco	State CA	Zip Code 94128	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Merchant fees		Category/ Type 001	Transaction ID : SB17.13830	
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. Authnet Gateway			Date of Disbursement M M / D D / Y Y Y Y 02 / 02 / 2016	
Mailing Address P.O. Box 8999			Amount of Each Disbursement this Period 20.35	
City San Francisco	State CA	Zip Code 94128	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Merchant fees		Category/ Type 001	Transaction ID : SB17.13836	
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. Authnet Gateway			Date of Disbursement M M / D D / Y Y Y Y 03 / 03 / 2016	
Mailing Address P.O. Box 8999			Amount of Each Disbursement this Period 21.05	
City San Francisco	State CA	Zip Code 94128	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Merchant fees		Category/ Type 001	Transaction ID : SB17.13846	
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).....	62.95
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 63 OF 100	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

Full Name (Last, First, Middle Initial) A. Bill.com		Date of Disbursement M M / D D / Y Y Y Y 01 / 05 / 2016
Mailing Address 3200 Ash Street		Amount of Each Disbursement this Period 28.00
City Palo Alto State CA Zip Code 94306	Purpose of Disbursement Bank service charges <input type="checkbox"/> Memo Item	
Candidate Name	Category/Type 001	Transaction ID : SB17.13832
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

Full Name (Last, First, Middle Initial) B. Bill.com		Date of Disbursement M M / D D / Y Y Y Y 02 / 05 / 2016
Mailing Address 3200 Ash Street		Amount of Each Disbursement this Period 43.10
City Palo Alto State CA Zip Code 94306	Purpose of Disbursement Bank service charges <input type="checkbox"/> Memo Item	
Candidate Name	Category/Type 001	Transaction ID : SB17.13839
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. Bill.com		Date of Disbursement M M / D D / Y Y Y Y 03 / 05 / 2016
Mailing Address 3200 Ash Street		Amount of Each Disbursement this Period 41.61
City Palo Alto State CA Zip Code 94306	Purpose of Disbursement Bank service charges <input type="checkbox"/> Memo Item	
Candidate Name	Category/Type 001	Transaction ID : SB17.13866
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).....	112.71
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 64 OF 100	
	<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 / 15 / 2016
Mailing Address 300 First Street SE		Amount of Each Disbursement this Period 281.45
City Washington	State DC Zip Code 20003	
Purpose of Disbursement Contributor relations - meals & entertainment		<input type="checkbox"/> Memo Item
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)	Transaction ID : SB17.13757
State: District:	Category/Type 003	

Full Name (Last, First, Middle Initial) B. Capitol Hill Club		Date of Disbursement M M / D D / Y Y Y Y 01 / 15 / 2016
Mailing Address 300 First Street SE		Amount of Each Disbursement this Period 245.60
City Washington	State DC Zip Code 20003	
Purpose of Disbursement Contributor relations - meals & entertainment		<input type="checkbox"/> Memo Item
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)	Transaction ID : SB17.13758
State: District:	Category/Type 003	

Full Name (Last, First, Middle Initial) c. Capitol Hill Club		Date of Disbursement M M / D D / Y Y Y Y 02 / 16 / 2016
Mailing Address 300 First Street SE		Amount of Each Disbursement this Period 10.00
City Washington	State DC Zip Code 20003	
Purpose of Disbursement Contributor relations - meals & entertainment		<input type="checkbox"/> Memo Item
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)	Transaction ID : SB17.13797
State: District:	Category/Type 003	

SUBTOTAL of Disbursements This Page (optional).....	537.05
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 65 OF 100	
	<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 / 16 / 2016
Mailing Address 300 First Street SE		Amount of Each Disbursement this Period 69.50
City Washington	State DC	
Zip Code 20003	Purpose of Disbursement Contributor relations - meals & entertainment	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type 003	
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 : SB17.13798
State: District:		

Full Name (Last, First, Middle Initial) B. Capitol Hill Club		Date of Disbursement MM / DD / YYYY 03 / 15 / 2016
Mailing Address 300 First Street SE		Amount of Each Disbursement this Period 35.56
City Washington	State DC	
Zip Code 20003	Purpose of Disbursement Contributor relations - meals & entertainment	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type 003	
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 : SB17.13819
State: District:		

Full Name (Last, First, Middle Initial) c. Capitol Hill Club		Date of Disbursement MM / DD / YYYY 03 / 15 / 2016
Mailing Address 300 First Street SE		Amount of Each Disbursement this Period 167.10
City Washington	State DC	
Zip Code 20003	Purpose of Disbursement Contributor relations - meals & entertainment	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type 003	
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 : SB17.13820
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	272.16
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 66 OF 100	
	<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 Central Committee		Date of Disbursement M M / D D / Y Y Y Y 01 / 13 / 2016
Mailing Address 1931 California Street, Suite B		Amount of Each Disbursement this Period 500.00 <input type="checkbox"/> Memo Item Transaction ID : SB17.13908
City Carson City State NV Zip Code 89701	Purpose of Disbursement Lincoln Day donation Category/Type 012	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. Carson Valley Country Club		Date of Disbursement M M / D D / Y Y Y Y 01 / 02 / 2016
Mailing Address 1029 Riverview Drive		Amount of Each Disbursement this Period 215.00 <input type="checkbox"/> Memo Item Transaction ID : SB17.13753
City Gardnerville State NV Zip Code 89460	Purpose of Disbursement Contributor relations - meals & entertainment Category/Type 003	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) c. Carson Valley Country Club		Date of Disbursement M M / D D / Y Y Y Y 01 / 23 / 2016
Mailing Address 1029 Riverview Drive		Amount of Each Disbursement this Period 240.00 <input type="checkbox"/> Memo Item Transaction ID : SB17.13771
City Gardnerville State NV Zip Code 89460	Purpose of Disbursement Contributor relations - meals & entertainment Category/Type 003	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	955.00
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 67 OF 100			
	<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. Casey Neilon Inc			Date of Disbursement M M / D D / Y Y Y Y 01 / 14 / 2016		
Mailing Address 503 N Division St			Amount of Each Disbursement this Period 4000.00		
City Carson City	State NV	Zip Code 89703	Memo Item <input type="checkbox"/>		
Purpose of Disbursement Professional Fees - Accounting		Category/ Type 001	Transaction ID : SB17.13928		
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) B. Casey Neilon Inc			Date of Disbursement M M / D D / Y Y Y Y 02 / 29 / 2016		
Mailing Address 503 N Division St			Amount of Each Disbursement this Period 2000.00		
City Carson City	State NV	Zip Code 89703	Memo Item <input type="checkbox"/>		
Purpose of Disbursement Professional Fees - Accounting		Category/ Type 001	Transaction ID : SB17.13933		
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) C. Casey Neilon Inc			Date of Disbursement M M / D D / Y Y Y Y 03 / 10 / 2016		
Mailing Address 503 N Division St			Amount of Each Disbursement this Period 101.24		
City Carson City	State NV	Zip Code 89703	Memo Item <input type="checkbox"/>		
Purpose of Disbursement Reimbursement for postage costs		Category/ Type 001	Transaction ID : SB17.13939		
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).....	6101.24
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 68 OF 100			
	<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. Casey Neilon Inc		Date of Disbursement M M / D D / Y Y Y Y 03 / 10 / 2016
Mailing Address 503 N Division St		Amount of Each Disbursement this Period 2000.00 <input type="checkbox"/> Memo Item Transaction ID : SB17.13940
City Carson City State NV Zip Code 89703	Purpose of Disbursement Professional Fees - Accounting 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) B. Chart House		Date of Disbursement M M / D D / Y Y Y Y 02 / 26 / 2016
Mailing Address 392 Nevada State Route 207		Amount of Each Disbursement this Period 260.00 <input type="checkbox"/> Memo Item Transaction ID : SB17.13814
City Stateline State NV Zip Code 89449	Purpose of Disbursement Contributor relations - meals & entertainment Category/Type 003	
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. Danielle Cherry		Date of Disbursement M M / D D / Y Y Y Y 02 / 29 / 2016
Mailing Address 385 Teramo Drive		Amount of Each Disbursement this Period 5877.50 <input type="checkbox"/> Memo Item Transaction ID : SB17.13935
City Reno State NV Zip Code 89521	Purpose of Disbursement Fundraising consulting - commissions on funds raised Category/Type 003	
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).....	8137.50
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 69 OF 100	
	<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. Chevron - Carson City		Date of Disbursement M M / D D / Y Y Y Y 03 / 20 / 2016
Mailing Address 1102 North Carson Street		Amount of Each Disbursement this Period 30.48
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	Transaction ID : SB17.13871
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. Churchill County Republican Central Committee		Date of Disbursement M M / D D / Y Y Y Y 01 / 13 / 2016
Mailing Address PO Box 1404		Amount of Each Disbursement this Period 500.00
City Fallon	State NV	
Zip Code 89407	Purpose of Disbursement Lincoln Day donation	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type 012	Transaction ID : SB17.13906
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. Constant Contact		Date of Disbursement M M / D D / Y Y Y Y 01 / 02 / 2016
Mailing Address 1601 Trapelo Road		Amount of Each Disbursement this Period 35.00
City Waltham	State MA	
Zip Code 02451	Purpose of Disbursement Email newsletter	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type 004	Transaction ID : SB17.13828
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).....	565.48
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 70 OF 100			
	<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)		Date of Disbursement	
A. Constant Contact		M M / D D / Y Y Y Y 02 / 02 / 2016	
Mailing Address 1601 Trapelo Road		Amount of Each Disbursement this Period	
City	State	Zip Code	35.00
Waltham	MA	02451	<input type="checkbox"/> Memo Item
Purpose of Disbursement Email newsletter		Category/ Type	Transaction ID : SB17.13837
Candidate Name		004	
Office Sought:	Disbursement For: 2016		
<input type="checkbox"/> House	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		
<input type="checkbox"/> Senate	<input type="checkbox"/> Other (specify)		
<input type="checkbox"/> President			
State:	District:		

Full Name (Last, First, Middle Initial)		Date of Disbursement	
B. Constant Contact		M M / D D / Y Y Y Y 03 / 02 / 2016	
Mailing Address 1601 Trapelo Road		Amount of Each Disbursement this Period	
City	State	Zip Code	35.00
Waltham	MA	02451	<input type="checkbox"/> Memo Item
Purpose of Disbursement Email newsletter		Category/ Type	Transaction ID : SB17.13845
Candidate Name		004	
Office Sought:	Disbursement For: 2016		
<input type="checkbox"/> House	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		
<input type="checkbox"/> Senate	<input type="checkbox"/> Other (specify)		
<input type="checkbox"/> President			
State:	District:		

Full Name (Last, First, Middle Initial)		Date of Disbursement	
C. Constant Contact		M M / D D / Y Y Y Y 03 / 29 / 2016	
Mailing Address 1601 Trapelo Road		Amount of Each Disbursement this Period	
City	State	Zip Code	35.00
Waltham	MA	02451	<input type="checkbox"/> Memo Item
Purpose of Disbursement Email newsletter		Category/ Type	Transaction ID : SB17.13851
Candidate Name		004	
Office Sought:	Disbursement For: 2016		
<input type="checkbox"/> House	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		
<input type="checkbox"/> Senate	<input type="checkbox"/> Other (specify)		
<input type="checkbox"/> President			
State:	District:		

SUBTOTAL of Disbursements This Page (optional).....	105.00
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 71 OF 100	
	<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. Costco Wholesale		Date of Disbursement M M / D D / Y Y Y Y 03 / 29 / 2016
Mailing Address 700n Old Clear Creek Road		Amount of Each Disbursement this Period 32.61
City Carson City State NV Zip Code 89701	Category/Type 002	
Purpose of Disbursement Gas in lieu of mileage - travel expense	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 : SB17.13874
State: District:		

Full Name (Last, First, Middle Initial) B. Creative Direct		Date of Disbursement M M / D D / Y Y Y Y 01 / 14 / 2016
Mailing Address 25 E Main Street		Amount of Each Disbursement this Period 1127.00
City Richmond State VA Zip Code 23219	Category/Type 001	
Purpose of Disbursement Notecards and envelopes	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 : SB17.13929
State: District:		

Full Name (Last, First, Middle Initial) c. Douglas County Republican Central Committee		Date of Disbursement M M / D D / Y Y Y Y 01 / 13 / 2016
Mailing Address 1609 Hwy 395		Amount of Each Disbursement this Period 500.00
City Minden State NV Zip Code 89423	Category/Type 012	
Purpose of Disbursement Lincoln Day donation	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 : SB17.13910
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1659.61
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 72 OF 100	
	<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. Douglas County Republican Central Committee			Date of Disbursement M M / D D / Y Y Y Y 01 / 13 / 2016	
Mailing Address 1609 Hwy 395			Amount of Each Disbursement this Period 125.00	
City Minden	State NV	Zip Code 89423	<input type="checkbox"/> Memo Item	
Purpose of Disbursement Ad in Lincoln Day program		Category/Type 004	Transaction ID : SB17.13912	
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. El Dorado Hotel			Date of Disbursement M M / D D / Y Y Y Y 01 / 28 / 2016	
Mailing Address PO Box 3399			Amount of Each Disbursement this Period 174.00	
City Reno	State NV	Zip Code 89505	<input type="checkbox"/> Memo Item	
Purpose of Disbursement Contributor relations - meals & entertainment		Category/Type 003	Transaction ID : SB17.13776	
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. Elko County Republican Central Committee			Date of Disbursement M M / D D / Y Y Y Y 01 / 13 / 2016	
Mailing Address P. O. Box 326			Amount of Each Disbursement this Period 500.00	
City Elko	State NV	Zip Code 89803	<input type="checkbox"/> Memo Item	
Purpose of Disbursement Lincoln Day donation		Category/Type 012	Transaction ID : SB17.13903	
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).....	799.00
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 73 OF 100	
	<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. Elko County Republican Central Committee			Date of Disbursement MM / DD / YYYY 02 / 16 / 2016	
Mailing Address P. O. Box 326			Amount of Each Disbursement this Period 1200.00	
City Elko	State NV	Zip Code 89803	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Purchase side of beef - campaign event cost		Category/ Type 007	Transaction ID : SB17.13962	
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. FRIENDS OF JOE HECK			Date of Disbursement MM / DD / YYYY 03 / 03 / 2016	
Mailing Address PO BOX 750114			Amount of Each Disbursement this Period 700.00	
City LAS VEGAS	State NV	Zip Code 89136	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Contribution - general 2016		Category/ Type 011	Transaction ID : SB17.13895	
Candidate Name				
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: NV District: 03				

Full Name (Last, First, Middle Initial) c. Glen Eagles			Date of Disbursement MM / DD / YYYY 03 / 07 / 2016	
Mailing Address 3700 North Carson Street			Amount of Each Disbursement this Period 320.00	
City Carson City	State NV	Zip Code 89706	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Contributor relations - meals & entertainment		Category/ Type 003	Transaction ID : SB17.13818	
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).....	2220.00
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 74 OF 100	
	<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. Glen Eagles		Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2016
Mailing Address 3700 North Carson Street		Amount of Each Disbursement this Period 145.00
City Carson City State NV Zip Code 89706	Purpose of Disbursement Contributor relations - meals & entertainment	
Candidate Name	Category/Type 003	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.13827
State: District:		

Full Name (Last, First, Middle Initial) B. Gold Country Inn		Date of Disbursement M M / D D / Y Y Y Y 02 / 07 / 2016
Mailing Address 2050 Idaho St		Amount of Each Disbursement this Period 62.70
City Elko State NV Zip Code 89801	Purpose of Disbursement Lodging - 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 : SB17.13785
State: District:		

Full Name (Last, First, Middle Initial) c. Harris Media LLC		Date of Disbursement M M / D D / Y Y Y Y 03 / 10 / 2016
Mailing Address 611 S Congress Ave Suite 400		Amount of Each Disbursement this Period 350.00
City Austin State TX Zip Code 78704	Purpose of Disbursement Website domain renewals	
Candidate Name	Category/Type 001	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.13941
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	557.70
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 75 OF 100			
	<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 / 13 / 2016	
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 Lincoln Day donation		Category/ Type 012	Transaction ID : SB17.13904	
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. Alan Humphrey			Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2016	
Mailing Address 1595 Meadow Wood Lane			Amount of Each Disbursement this Period 1207.94	
City Reno	State NV	Zip Code 89502	Memo Item <input type="checkbox"/>	
Purpose of Disbursement In-kind - Wine and catering for campaign event		Category/ Type	Transaction ID : SB17.13969	
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. Kaempfer Crowell			Date of Disbursement M M / D D / Y Y Y Y 01 / 14 / 2016	
Mailing Address 1980 Festival Plaza Drive Suite 65			Amount of Each Disbursement this Period 790.00	
City Las Vegas	State NV	Zip Code 89135-2958	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Professional Fees - Legal		Category/ Type 001	Transaction ID : SB17.13927	
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).....	2497.94
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 76 OF 100			
	<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. Kaempfer Crowell			Date of Disbursement M M / D D / Y Y Y Y 02 / 01 / 2016	
Mailing Address 1980 Festival Plaza Drive Suite 65			Amount of Each Disbursement this Period 11.85	
City Las Vegas	State NV	Zip Code 89135-2958	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Professional Fees - Legal		Category/ Type 001		
Candidate Name			Transaction ID : SB17.13932	
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 02 / 29 / 2016	
Mailing Address 1980 Festival Plaza Drive Suite 65			Amount of Each Disbursement this Period 2765.00	
City Las Vegas	State NV	Zip Code 89135-2958	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Professional Fees - Legal		Category/ Type 001		
Candidate Name			Transaction ID : SB17.13936	
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. Kim Lee Sushi			Date of Disbursement M M / D D / Y Y Y Y 02 / 08 / 2016	
Mailing Address 319 Carson St			Amount of Each Disbursement this Period 106.00	
City Carson City	State NV	Zip Code 89701	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Contributor relations - meals & entertainment		Category/ Type 003		
Candidate Name			Transaction ID : SB17.13788	
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).....	2882.85
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 77 OF 100	
	<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. Lander County Republican Central Committee		Date of Disbursement M M / D D / Y Y Y Y 02 / 04 / 2016
Mailing Address PO Box 1522		Amount of Each Disbursement this Period 500.00
City Battle Mountain State NV Zip Code 89820	Category/Type 012	
Purpose of Disbursement Lincoln Day donation	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 : SB17.13918
State: District:		

Full Name (Last, First, Middle Initial) B. Louis' Basque Corner		Date of Disbursement M M / D D / Y Y Y Y 02 / 19 / 2016
Mailing Address 301 E 4th St		Amount of Each Disbursement this Period 339.11
City Reno State NV Zip Code 89512	Category/Type 001	
Purpose of Disbursement Campaign staff dinner	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 : SB17.13801
State: District:		

Full Name (Last, First, Middle Initial) c. Maverik - Carson City		Date of Disbursement M M / D D / Y Y Y Y 01 / 20 / 2016
Mailing Address 1451 College Parkway		Amount of Each Disbursement this Period 56.37
City Carson City State NV Zip Code 89706	Category/Type 002	
Purpose of Disbursement Gas in lieu of mileage - travel expense	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 : SB17.13881
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	895.48
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 78 OF 100	
	<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. Maverik - Carson City			Date of Disbursement M M / D D / Y Y Y Y 01 / 28 / 2016	
Mailing Address 1451 College Parkway			Amount of Each Disbursement this Period 53.00	
City Carson City	State NV	Zip Code 89706	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Gas in lieu of mileage - travel expense		002 Category/ Type		
Candidate Name			Transaction ID : SB17.13856	
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. Maverik - Dayton			Date of Disbursement M M / D D / Y Y Y Y 01 / 04 / 2016	
Mailing Address 2445 Riverboat Rd			Amount of Each Disbursement this Period 32.97	
City Dayton	State NV	Zip Code 89403	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Gas in lieu of mileage - travel expense		002 Category/ Type		
Candidate Name			Transaction ID : SB17.13852	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) C. Maverik - Fallon			Date of Disbursement M M / D D / Y Y Y Y 01 / 04 / 2016	
Mailing Address 850 W. Williams Ave.			Amount of Each Disbursement this Period 33.09	
City Fallon	State NV	Zip Code 89406	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Gas in lieu of mileage - travel expense		002 Category/ Type		
Candidate Name			Transaction ID : SB17.13853	
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).....	119.06
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 79 OF 100			
	<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. Maverik - Fallon		Date of Disbursement M M / D D / Y Y Y Y 01 / 29 / 2016
Mailing Address 850 W. Williams Ave.		Amount of Each Disbursement this Period 59.63
City Fallon State NV Zip Code 89406	Purpose of Disbursement Gas in lieu of mileage - 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 : SB17.13857
State: District:		

Full Name (Last, First, Middle Initial) B. Maverik - Fallon		Date of Disbursement M M / D D / Y Y Y Y 03 / 29 / 2016
Mailing Address 850 W. Williams Ave.		Amount of Each Disbursement this Period 33.88
City Fallon State NV Zip Code 89406	Purpose of Disbursement Gas in lieu of mileage - 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 : SB17.13875
State: District:		

Full Name (Last, First, Middle Initial) C. Micasa Too		Date of Disbursement M M / D D / Y Y Y Y 02 / 21 / 2016
Mailing Address 3809 N. Carson St.		Amount of Each Disbursement this Period 120.00
City Carson City State NV Zip Code 89706	Purpose of Disbursement Contributor relations - meals & entertainment	
Candidate Name	Category/Type 003	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.13806
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	213.51
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 80 OF 100	
	<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

A. Nevada Secretary of State

Full Name (Last, First, Middle Initial)
Mailing Address 101 N Carson Street Suite 3

City Carson City State NV Zip Code 89701

Purpose of Disbursement Filing Fees Category/Type 001

Candidate Name

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

State: District:

Date of Disbursement 03 / 10 / 2016

Amount of Each Disbursement this Period 300.00

Memo Item

Transaction ID : SB17.13959

B. Osteria Morini

Full Name (Last, First, Middle Initial)
Mailing Address 301 Water St SE

City Washington State DC Zip Code 20003

Purpose of Disbursement Contributor relations - meals & entertainment Category/Type 003

Candidate Name

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

State: District:

Date of Disbursement 01 / 06 / 2016

Amount of Each Disbursement this Period 730.00

Memo Item

Transaction ID : SB17.13755

C. Osteria Morini

Full Name (Last, First, Middle Initial)
Mailing Address 301 Water St SE

City Washington State DC Zip Code 20003

Purpose of Disbursement Contributor relations - meals & entertainment Category/Type 003

Candidate Name

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

State: District:

Date of Disbursement 02 / 02 / 2016

Amount of Each Disbursement this Period 570.00

Memo Item

Transaction ID : SB17.13782

SUBTOTAL of Disbursements This Page (optional) 1600.00

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 81 OF 100	
	<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. Pershing County Republican Central Committee			Date of Disbursement M M / D D / Y Y Y Y 01 / 13 / 2016	
Mailing Address 1775 Looz Rd.,			Amount of Each Disbursement this Period 500.00	
City Lovelock	State NV	Zip Code 89419	<input type="checkbox"/> Memo Item	
Purpose of Disbursement Lincoln Day donation		Category/Type 012	Transaction ID : SB17.13905	
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. RapsCALLIONS			Date of Disbursement M M / D D / Y Y Y Y 01 / 28 / 2016	
Mailing Address 1555 S Wells Ave.,			Amount of Each Disbursement this Period 135.00	
City Reno	State NV	Zip Code 89509	<input type="checkbox"/> Memo Item	
Purpose of Disbursement Contributor relations - meals & entertainment		Category/Type 003	Transaction ID : SB17.13774	
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. RapsCALLIONS			Date of Disbursement M M / D D / Y Y Y Y 02 / 18 / 2016	
Mailing Address 1555 S Wells Ave.,			Amount of Each Disbursement this Period 1364.87	
City Reno	State NV	Zip Code 89509	<input type="checkbox"/> Memo Item	
Purpose of Disbursement Fundraising event - Campaign expense		Category/Type 007	Transaction ID : SB17.13800	
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).....	1999.87
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 82 OF 100	
	<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. Rapscallions		Date of Disbursement M M / D D / Y Y Y Y 03 / 18 / 2016
Mailing Address 1555 S Wells Ave,		Amount of Each Disbursement this Period 42.00
City Reno	State NV Zip Code 89509	
Purpose of Disbursement Contributor relations - meals & entertainment		Memo Item <input type="checkbox"/>
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)	Transaction ID : SB17.13821
State: District:	Category/Type 003	

Full Name (Last, First, Middle Initial) B. Renaissance The Battle House Hotel & Spa		Date of Disbursement M M / D D / Y Y Y Y 01 / 18 / 2016
Mailing Address 26 N Royal St		Amount of Each Disbursement this Period 385.32
City Mobile	State AL Zip Code 36602	
Purpose of Disbursement Lodging - travel expense		Memo Item <input type="checkbox"/>
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)	Transaction ID : SB17.13763
State: District:	Category/Type 002	

Full Name (Last, First, Middle Initial) c. Reno High Baseball		Date of Disbursement M M / D D / Y Y Y Y 02 / 02 / 2016
Mailing Address 395 Booth Street		Amount of Each Disbursement this Period 500.00
City Reno	State NV Zip Code 89509	
Purpose of Disbursement Outfield advertising		Memo Item <input type="checkbox"/>
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)	Transaction ID : SB17.13916
State: District:	Category/Type 004	

SUBTOTAL of Disbursements This Page (optional).....	927.32
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 83 OF 100	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

Full Name (Last, First, Middle Initial) A. San Marcos Grill		Date of Disbursement M M / D D / Y Y Y Y 03 / 24 / 2016
Mailing Address 260 E Winnie Ln		Amount of Each Disbursement this Period 100.00
City Carson City	State NV	
Zip Code 89706	Purpose of Disbursement Contributor relations - meals & entertainment	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type 003	Transaction ID : SB17.13825
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. Shell - Carson Cty		Date of Disbursement M M / D D / Y Y Y Y 03 / 05 / 2016
Mailing Address Hwy 395		Amount of Each Disbursement this Period 42.39
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	Transaction ID : SB17.13865
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. Southwest Airlines		Date of Disbursement M M / D D / Y Y Y Y 01 / 07 / 2016
Mailing Address P.O. Box 36647-1CR		Amount of Each Disbursement this Period 313.98
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 : SB17.13882
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).....	456.37
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 84 OF 100	
	<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 01 / 07 / 2016
Mailing Address P.O. Box 36647-1CR		Amount of Each Disbursement this Period 244.98
City Dallas State TX Zip Code 73235	Category/Type 002	
Purpose of Disbursement Airfare - travel expense	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 : SB17.13883
State: District:		

Full Name (Last, First, Middle Initial) B. Southwest Airlines		Date of Disbursement M M / D D / Y Y Y Y 01 / 07 / 2016
Mailing Address P.O. Box 36647-1CR		Amount of Each Disbursement this Period 244.98
City Dallas State TX Zip Code 73235	Category/Type 002	
Purpose of Disbursement Airfare - travel expense	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 : SB17.13884
State: District:		

Full Name (Last, First, Middle Initial) c. Storey County Republican Central Committee		Date of Disbursement M M / D D / Y Y Y Y 01 / 13 / 2016
Mailing Address PO Box 767		Amount of Each Disbursement this Period 500.00
City Virginia City State NV Zip Code 89440	Category/Type 012	
Purpose of Disbursement Lincoln Day donation	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 : SB17.13907
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	989.96
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 85 OF 100			
	<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. Team Sports Ink			Date of Disbursement MM / DD / YYYY 01 / 14 / 2016
Mailing Address 5111 Grumman Dr, Ste 1b			Amount of Each Disbursement this Period 899.34
City Carson City	State NV	Zip Code 89706	
Purpose of Disbursement Custom hats		Candidate Name	Memo Item <input type="checkbox"/>
Category/Type 006			
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 : SB17.13913
State: District:			

Full Name (Last, First, Middle Initial) B. Team Sports Ink			Date of Disbursement MM / DD / YYYY 01 / 20 / 2016
Mailing Address 5111 Grumman Dr, Ste 1b			Amount of Each Disbursement this Period 1333.97
City Carson City	State NV	Zip Code 89706	
Purpose of Disbursement Custom sweatshirts and ski hats		Candidate Name	Memo Item <input type="checkbox"/>
Category/Type 006			
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 : SB17.13915
State: District:			

Full Name (Last, First, Middle Initial) c. Ted's Bulletin			Date of Disbursement MM / DD / YYYY 02 / 11 / 2016
Mailing Address 505 8th Street			Amount of Each Disbursement this Period 100.00
City Washington	State DC	Zip Code 20003	
Purpose of Disbursement Contributor relations - meals & entertainment		Candidate Name	Memo Item <input type="checkbox"/>
Category/Type 003			
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 : SB17.13844
State: District:			

SUBTOTAL of Disbursements This Page (optional).....	2333.31
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 86 OF 100			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

Full Name (Last, First, Middle Initial) A. The Grill at Quail Corners			Date of Disbursement M M / D D / Y Y Y Y 01 / 22 / 2016		
Mailing Address 6520 S. McCarran Blvd.			Amount of Each Disbursement this Period 75.00		
City Reno	State NV	Zip Code 89509	Memo Item <input type="checkbox"/>		
Purpose of Disbursement Contributor relations - meals & entertainment		Category/ Type 003			
Candidate Name			Transaction ID : SB17.13769		
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 Grill at Quail Corners			Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2016		
Mailing Address 6520 S. McCarran Blvd.			Amount of Each Disbursement this Period 60.00		
City Reno	State NV	Zip Code 89509	Memo Item <input type="checkbox"/>		
Purpose of Disbursement Contributor relations - meals & entertainment		Category/ Type 003			
Candidate Name			Transaction ID : SB17.13870		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: _____	District: _____				

Full Name (Last, First, Middle Initial) c. The M Group			Date of Disbursement M M / D D / Y Y Y Y 01 / 14 / 2016		
Mailing Address 100 Luna Park #156			Amount of Each Disbursement this Period 3072.80		
City Alexandria	State VA	Zip Code 22305	Memo Item <input type="checkbox"/>		
Purpose of Disbursement Fundraising consulting and expense reimbursements - see memo		Category/ Type 003			
Candidate Name			Transaction ID : SB17.13931		
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)	3207.80
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 : SB17.13931

Total \$3072.80 . Fundraising consulting - commissions on funds raised \$650.00; Expense reimbursements - USPS Alexandria VA \$9.80 for postage stamps; Sonoma DC 223 Pennsylvania Ave SE Washington DC 20003 \$2,413.00 catering for campaign event.

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 88 OF 100	
	<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 M Group		Date of Disbursement M M / D D / Y Y Y Y 03 / 24 / 2016
Mailing Address 100 Luna Park #156		Amount of Each Disbursement this Period 14900.04 <input type="checkbox"/> Memo Item Transaction ID : SB17.13942
City Alexandria State VA Zip Code 22305	Purpose of Disbursement Fundraising consulting and expense reimbursements - see memo Candidate Name 003 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. Twisted Fork		Date of Disbursement M M / D D / Y Y Y Y 02 / 15 / 2016
Mailing Address 1911 Steamboat Pkwy		Amount of Each Disbursement this Period 52.00 <input type="checkbox"/> Memo Item Transaction ID : SB17.13793
City Reno State NV Zip Code 89521	Purpose of Disbursement Contributor relations - meals & entertainment Candidate Name 003 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) C. Twisted Fork		Date of Disbursement M M / D D / Y Y Y Y 03 / 25 / 2016
Mailing Address 1911 Steamboat Pkwy		Amount of Each Disbursement this Period 47.00 <input type="checkbox"/> Memo Item Transaction ID : SB17.13826
City Reno State NV Zip Code 89521	Purpose of Disbursement Contributor relations - meals & entertainment Candidate Name 003 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	14999.04
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 : SB17.13942

Total \$14,900.04. Fundraising consulting - commissions on funds raised \$5,330.00. Fundraising Consulting for Lou Barletta for Congress (in-kind contribution) \$1,000.00. Expense Reimbursements totalling \$8,570.04 as follows: Paradise shops Airport Washington DC \$5.49 travel expense; Harrah's 18 Hwy 50 Stateline NV 89449 \$4,434.04 fundraising event; La Brea Airport Reno NV \$9.69 travel expense; BJ's Restaurant 13999 S Virginia St Reno NV 89501 \$61.82 travel expense; American Airlines 4333 Amon Carter Blvd Fort Worth TX 76155 \$880.74 travel expense; Uber 1455 Market St San Francisco CA 94103 \$25.26 travel expense; Bell Limo Airport Minibus 2001 W Plumb Lane Reno NV 89502 \$692.16 fundraising event; Fedex 3965 Airways Memphis TN 38116 \$44.10 postage; USPS Alexandria VA \$40.97 postage; DC Taste 1600 Fitzgerald Lane Alexandria VA 22302 \$598.64 catering for fundraising event; Harvey's Hwy 50 at Stateline Ave Lake Tahoe NV 89449 \$1,704.04 lodging for fundraising event; Eldorado Casino PO Box 3399 Reno NV 89505 \$73.09 lodging for fundraising event;

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 90 OF 100			
	<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. Washoe county Republican Party			Date of Disbursement M M / D D / Y Y Y Y 01 / 13 / 2016	
Mailing Address 3652 South Virginia Street			Amount of Each Disbursement this Period 1000.00	
City Reno	State NV	Zip Code 89502	<input type="checkbox"/> Memo Item	
Purpose of Disbursement Lincoln Day Dinner donation		Category/ Type 012	Transaction ID : SB17.13901	
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. Wells Fargo			Date of Disbursement M M / D D / Y Y Y Y 01 / 14 / 2016	
Mailing Address PO Box 6995			Amount of Each Disbursement this Period 1.12	
City Portland	State OR	Zip Code 97228	<input type="checkbox"/> Memo Item	
Purpose of Disbursement Merchant fees		Category/ Type 001	Transaction ID : SB17.13833	
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. Wells Fargo			Date of Disbursement M M / D D / Y Y Y Y 01 / 14 / 2016	
Mailing Address PO Box 6995			Amount of Each Disbursement this Period 1.15	
City Portland	State OR	Zip Code 97228	<input type="checkbox"/> Memo Item	
Purpose of Disbursement Merchant fees		Category/ Type 001	Transaction ID : SB17.13834	
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)	1002.27
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 91 OF 100			
	<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 01 / 14 / 2016
Mailing Address PO Box 6995		Amount of Each Disbursement this Period 46.66
City Portland State OR Zip Code 97228	Purpose of Disbursement Merchant fees <input type="checkbox"/> Memo Item	
Candidate Name	Category/Type 001	Transaction ID : SB17.13835
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 / 08 / 2016
Mailing Address PO Box 6995		Amount of Each Disbursement this Period 3.00
City Portland State OR Zip Code 97228	Purpose of Disbursement Bank fees - deposit image <input type="checkbox"/> Memo Item	
Candidate Name	Category/Type 001	Transaction ID : SB17.13838
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 / 11 / 2016
Mailing Address PO Box 6995		Amount of Each Disbursement this Period 0.26
City Portland State OR Zip Code 97228	Purpose of Disbursement Merchant fees <input type="checkbox"/> Memo Item	
Candidate Name	Category/Type 001	Transaction ID : SB17.13840
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).....	49.92
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 92 OF 100			
	<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 02 / 11 / 2016
Mailing Address PO Box 6995		Amount of Each Disbursement this Period 0.44 <input type="checkbox"/> Memo Item Transaction ID : SB17.13841
City Portland	State OR Zip Code 97228	
Purpose of Disbursement Merchant fees	001	Category/ Type
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. Wells Fargo		Date of Disbursement MM / DD / YYYY 02 / 11 / 2016
Mailing Address PO Box 6995		Amount of Each Disbursement this Period 45.14 <input type="checkbox"/> Memo Item Transaction ID : SB17.13842
City Portland	State OR Zip Code 97228	
Purpose of Disbursement Merchant fees	001	Category/ Type
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. Wells Fargo		Date of Disbursement MM / DD / YYYY 03 / 10 / 2016
Mailing Address PO Box 6995		Amount of Each Disbursement this Period 2.50 <input type="checkbox"/> Memo Item Transaction ID : SB17.13847
City Portland	State OR Zip Code 97228	
Purpose of Disbursement Bank charges	001	Category/ Type
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).....	48.08
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 93 OF 100			
	<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 / 10 / 2016
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 fee <input type="checkbox"/> Memo Item	
Candidate Name	Category/Type 001	Transaction ID : SB17.13961
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 03 / 11 / 2016
Mailing Address PO Box 6995		Amount of Each Disbursement this Period 33.65
City Portland State OR Zip Code 97228	Purpose of Disbursement Merchant fees <input type="checkbox"/> Memo Item	
Candidate Name	Category/Type 001	Transaction ID : SB17.13848
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 03 / 11 / 2016
Mailing Address PO Box 6995		Amount of Each Disbursement this Period 39.54
City Portland State OR Zip Code 97228	Purpose of Disbursement Merchant fees <input type="checkbox"/> Memo Item	
Candidate Name	Category/Type 001	Transaction ID : SB17.13849
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)	76.19
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 94 OF 100			
	<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 / 11 / 2016
Mailing Address PO Box 6995		Amount of Each Disbursement this Period 45.34
City Portland State OR Zip Code 97228	Category/Type 001	
Purpose of Disbursement Merchant fees	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 : SB17.13850
State: District:		

Full Name (Last, First, Middle Initial) B. Wyman & Associates		Date of Disbursement M M / D D / Y Y Y Y 01 / 16 / 2016
Mailing Address 1941 Radcliffe Drive		Amount of Each Disbursement this Period 22865.00
City Carson City State NV Zip Code 89703	Category/Type 004	
Purpose of Disbursement Radio advertising	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 : SB17.13914
State: District:		

Full Name (Last, First, Middle Initial) C. Wyman & Associates		Date of Disbursement M M / D D / Y Y Y Y 03 / 01 / 2016
Mailing Address 1941 Radcliffe Drive		Amount of Each Disbursement this Period 22865.00
City Carson City State NV Zip Code 89703	Category/Type 004	
Purpose of Disbursement Radio advertising	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 : SB17.13938
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	45775.34
TOTAL This Period (last page this line number only).....	103895.86

**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 95 OF 100
	<input type="checkbox"/> 17 20a <input checked="" 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 REPUBLICAN CONGRESSIONAL COMMITTEE		Date of Disbursement M M / D D / Y Y Y Y 01 / 05 / 2016
Mailing Address 320 FIRST STREET SE		Amount of Each Disbursement this Period 59100.00
City WASHINGTON State DC Zip Code 20003	<input type="checkbox"/> Memo Item	
Purpose of Disbursement	<input type="checkbox"/> 008 Category/Type	Transaction ID : SB18.13897
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

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

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

SUBTOTAL of Disbursements This Page (optional).....	59100.00
TOTAL This Period (last page this line number only).....	59100.00

**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 96 OF 100			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

Full Name (Last, First, Middle Initial) A. Michael Pegram		Date of Disbursement M M / D D / Y Y Y Y 03 / 18 / 2016
Mailing Address 2118 Riverside Dr Ste 209		Amount of Each Disbursement this Period 2700.00
City Mount Vernon State WA Zip Code 98273-5466	Category/Type 010	
Purpose of Disbursement Funds intended for another name - cannot accept		<input type="checkbox"/> Memo Item
Candidate Name		Transaction ID : SB20A.13892
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

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

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

SUBTOTAL of Disbursements This Page (optional).....	2700.00
TOTAL This Period (last page this line number only).....	2700.00

**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 97 OF 100	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input checked="" 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. MAJORITY COMMITTEE PAC--MC PAC		Date of Disbursement M M / D D / Y Y Y Y 02 / 17 / 2016
Mailing Address P.O. BOX 10134		Amount of Each Disbursement this Period 651.43
City BAKERSFIELD State CA Zip Code 93389	Purpose of Disbursement Refund of excess in-kind contribution in 2011	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type 010	Transaction ID : SB20C.13920
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City State Zip Code	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:		

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).....	651.43
TOTAL This Period (last page this line number only).....	651.43

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

NAME OF COMMITTEE (In Full)
Amodei for Nevada

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

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

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

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

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

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

1) SUBTOTALS This Period This Page (optional)	10000.00
2) TOTALS This Period (last page this line number only)	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	

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

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

NAME OF COMMITTEE (In Full)

Amodei for Nevada

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

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

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

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

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

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

1) SUBTOTALS This Period This Page (optional)	▶	3000.00
2) TOTALS This Period (last page this line number only)	▶	13000.00
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	▶	0.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶		13000.00