

# FEC FORM 3

# REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type over the lines.

12FE4M5

Amodei for Nevada

ADDRESS (number and street)

503 N Division St

Check if different than previously reported. (ACC)

Carson City

NV

89703

2. FEC IDENTIFICATION NUMBER ▼

C C00496760

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

NV

02

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

January 31 Year-End Report (YE)

Termination Report (TER)

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

Primary (12P)

General (12G)

Runoff (12R)

Convention (12C)

Special (12S)

Election on

09

13

2011

in the State of

NV

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

General (30G)

Runoff (30R)

Special (30S)

Election on

09

13

2011

in the State of

NV

5. Covering Period

08

25

2011

through

10

03

2011

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

10

13

2011

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

Office Use Only

FEC FORM 3 (Revised 02/2003)

**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))....	213777.04	750419.74
(b) Total Contribution Refunds (from Line 20(d)) .....	0.00	700.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	213777.04	749719.74
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	281963.37	691314.43
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	281963.37	691314.43
8. Cash on Hand at Close of Reporting Period (from Line 27).....	59360.96	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	106366.29	

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

**Amodei for Nevada**

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

<b>I. RECEIPTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	95908.10	384124.40
(ii) Unitemized.....	9223.00	50749.40
(iii) TOTAL of contributions from individuals ▶	105131.10	434873.80
(b) Political Party Committees.....	0.00	2000.00
(c) Other Political Committees (such as PACs).....	108645.94	313545.94
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	213777.04	750419.74
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>	0.00	955.65
<b>13. LOANS:</b>		
(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
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....</b>	0.00	0.00
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.) .....</b>	0.00	0.00
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶</b>	213777.04	751375.39

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	281963.37	691314.43
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	700.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	700.00
21. OTHER DISBURSEMENTS .....	0.00	0.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	281963.37	692014.43

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	127547.29
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	213777.04
25. SUBTOTAL (add Line 23 and Line 24).....	341324.33
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	281963.37
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	59360.96

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 OF 101
	<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)  
**Lex Adams**

Mailing Address **PO Box 19696**

City **reno** State **NV** Zip Code **89511**

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

Name of Employer **Resorts West** Occupation **President**

Receipt For: 2011  
 Primary  General  
 Other (specify) **Special-General**

Election Cycle-to-Date  
**2000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 30 / 2011**

**Transaction ID : SA11AI.7155**

Amount of Each Receipt this Period  
**1000.00**

**B.** Full Name (Last, First, Middle Initial)  
**Roy Adams**

Mailing Address **14100 Saddlebow Drive**

City **Reno** State **NV** Zip Code **89511**

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

Name of Employer **Self** Occupation **Youth Training**

Receipt For: 2011  
 Primary  General  
 Other (specify) **Special-General**

Election Cycle-to-Date  
**2000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 29 / 2011**

**Transaction ID : SA11AI.6225**

Amount of Each Receipt this Period  
**2000.00**

**C.** Full Name (Last, First, Middle Initial)  
**RD ALLING**

Mailing Address **PO BOX 1005**

City **ZEPHYR COVE** State **NV** Zip Code **89448**

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

Name of Employer **Alling & Jillson** Occupation **Attorney**

Receipt For: 2011  
 Primary  General  
 Other (specify) **Special-General**

Election Cycle-to-Date  
**500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 31 / 2011**

**Transaction ID : SA11AI.7056**

Amount of Each Receipt this Period  
**500.00**

**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: (check only one)	PAGE 6 OF 101
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Amodei for Nevada**

**A.** Full Name (Last, First, Middle Initial)  
**Edward Allison**

Mailing Address 13340 Damonte View

City Reno State NV Zip Code 89511

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

Name of Employer Ed Allison Inc Occupation President

Receipt For: 2011  
 Primary  General  
 Other (specify) Special-General

Election Cycle-to-Date **850.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 30 / 2011**

**Transaction ID : SA11AI.7154**

Amount of Each Receipt this Period  
**200.00**

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

Mailing Address 893 MICA DR SUITE 201

City Carson City State NV Zip Code 89705

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

Name of Employer Tahoe Fracture Occupation Orthopedic Surgeon

Receipt For: 2011  
 Primary  General  
 Other (specify) Special-General

Election Cycle-to-Date **1500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 26 / 2011**

**Transaction ID : SA11AI.7324**

Amount of Each Receipt this Period  
**500.00**

In-kind - EVENT COSTS

**C.** Full Name (Last, First, Middle Initial)  
**Gary Andreas**

Mailing Address 3 Yorktown Dr

City Carson city State NV Zip Code 89703

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

Name of Employer State Farm Occupation Insurance Agent

Receipt For: 2011  
 Primary  General  
 Other (specify) Special-General

Election Cycle-to-Date **300.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 27 / 2011**

**Transaction ID : SA11AI.6861**

Amount of Each Receipt this Period  
**300.00**

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

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

**1000.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 101
	<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 Avansino Jr.**

Mailing Address 165 West Liberty Street

City Reno State NV Zip Code 89501

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

Name of Employer Avansino Melarky Knobel & Mull Occupation Attorney

Receipt For: 2011  
 Primary  General  
 Other (specify) Special-General

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 26 / 2011

**Transaction ID : SA11AI.6184**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Bruce Baldecchi**

Mailing Address 210 Brunswick Mill Rd

City Reno State NV Zip Code 89511

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

Name of Employer Spinal Institute Occupation Doctor

Receipt For: 2011  
 Primary  General  
 Other (specify) Special-General

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 27 / 2011

**Transaction ID : SA11AI.6858**

Amount of Each Receipt this Period  
 400.00

**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: 2011  
 Primary  General  
 Other (specify) Special-General

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 27 / 2011

**Transaction ID : SA11AI.6893**

Amount of Each Receipt this Period  
 450.00

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

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

1850.00

**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 101
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Amodei for Nevada**

**A.** Full Name (Last, First, Middle Initial)  
**THOMAS BALLER**

Mailing Address 777 W Sage

City Elko State NV Zip Code 89801

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2011  
 Primary  General  
 Other (specify) Special-General

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 06 / 2011

**Transaction ID : SA11AI.7084**

Amount of Each Receipt this Period  
 250.00

**B.** Full Name (Last, First, Middle Initial)  
**DENNIS BANKS**

Mailing Address 835 Maestro Drive

City Reno State NV Zip Code 89511

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

Name of Employer Information Requested Occupation Information Requested  
 Dennis Banks Construction Owner

Receipt For: 2011  
 Primary  General  
 Other (specify) Special-General

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 08 / 2011

**Transaction ID : SA11AI.7113**

Amount of Each Receipt this Period  
 750.00

**C.** Full Name (Last, First, Middle Initial)  
**SUSAN BARNES**

Mailing Address HC 30 Box 347

City Spring Creek State NV Zip Code 89815

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

Name of Employer Information Requested Occupation Information Requested  
 None Rancher

Receipt For: 2011  
 Primary  General  
 Other (specify) Special-General

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 06 / 2011

**Transaction ID : SA11AI.7085**

Amount of Each Receipt this Period  
 250.00

**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 9 OF 101
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Amodei for Nevada**

**A.** Full Name (Last, First, Middle Initial)  
**JOSEPH BARRETT**

Mailing Address **6461 BROOKVIEW CIRCLE**

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

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

Name of Employer **BARRETT RESOURCES** Occupation **PRINCIPAL**

Receipt For: 2011  
 Primary  General  
 Other (specify) **Special-General**

Election Cycle-to-Date  
**250.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**09 / 08 / 2011**

**Transaction ID : SA11AI.7103**

Amount of Each Receipt this Period  
**250.00**

**B.** Full Name (Last, First, Middle Initial)  
**MARK BELL**

Mailing Address **685 Oak Creek Dr**

City **Reno** State **NV** Zip Code **89511**

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

Name of Employer **Reno Gallery of Furniture** Occupation **Owner**

Receipt For: 2011  
 Primary  General  
 Other (specify) **Special-General**

Election Cycle-to-Date  
**250.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**09 / 12 / 2011**

**Transaction ID : SA11AI.7143**

Amount of Each Receipt this Period  
**250.00**

**C.** Full Name (Last, First, Middle Initial)  
**Nancy Bilyeau**

Mailing Address **4220 Plumas Street**

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

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

Name of Employer **Boudwin Properties, Ltd.** Occupation **General Partner**

Receipt For: 2011  
 Primary  General  
 Other (specify) **Special-General**

Election Cycle-to-Date  
**1050.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**09 / 08 / 2011**

**Transaction ID : SA11AI.7105**

Amount of Each Receipt this Period  
**200.00**

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

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

**700.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 101
	<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)  
**CHERYL BLOMSTROM**

Mailing Address 3539 CHEROKEE DR

City Carson City State NV Zip Code 89705

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

Name of Employer Blomstrom Consulting Occupation President

Receipt For: 2011  
 Primary  General  
 Other (specify) Special-General

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 12 / 2011

**Transaction ID : SA11AI.7137**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 9550 Gateway

City Reno State NV Zip Code 89521

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

Name of Employer Medical Equipment Occupation President

Receipt For: 2011  
 Primary  General  
 Other (specify) Special-General

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 02 / 2011

**Transaction ID : SA11AI.6648**

Amount of Each Receipt this Period  
2500.00

**C.** Full Name (Last, First, Middle Initial)  
**Cindy Bluth**

Mailing Address 9550 Gateway

City Reno State NV Zip Code 89521

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

Name of Employer Medical Equipment Occupation Business Owner

Receipt For: 2011  
 Primary  General  
 Other (specify) Special-General

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 01 / 2011

**Transaction ID : SA11AI.6662**

Amount of Each Receipt this Period  
2500.00

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

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

5250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 101
	<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)  
**Carolyn Brown O'Rourke**

Mailing Address 11028 Stanmore Dr

City Potomac State MD Zip Code 20854

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

Name of Employer Self Occupation Attorney

Receipt For: 2011  
 Primary  General  
 Other (specify) Special-General

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 10 / 2011

**Transaction ID : SA11AI.6733**

Amount of Each Receipt this Period  
2500.00

**B.** Full Name (Last, First, Middle Initial)  
**CAROL BUCKNER**

Mailing Address 784 Palace Pkwy

City SPRING CREEK State NV Zip Code 89815

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

Name of Employer Coldwell Banker Occupation Broker

Receipt For: 2011  
 Primary  General  
 Other (specify) Special-General

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 06 / 2011

**Transaction ID : SA11AI.7086**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**Patricia Cafferata**

Mailing Address 2620 Spinnaker Dr

City Reno State NV Zip Code 89519

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

Name of Employer Patricia Cafferata Esquire Occupation Lawyer

Receipt For: 2011  
 Primary  General  
 Other (specify) Special-General

Election Cycle-to-Date  
850.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 08 / 2011

**Transaction ID : SA11AI.7107**

Amount of Each Receipt this Period  
250.00

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 101
	<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)  
**SEVERIN CARLSON**

Mailing Address 10400 Chantilly Way

City Reno State NV Zip Code 89521

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

Name of Employer Kaempfer Crowell Occupation Attorney

Receipt For: 2011  
 Primary  General  
 Other (specify) Special-General

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 08 / 2011

**Transaction ID : SA11AI.7110**

Amount of Each Receipt this Period  
 500.00

**B.** Full Name (Last, First, Middle Initial)  
**BRIAN CHATWIN**

Mailing Address 6608 Independence Ave

City Springfield State VA Zip Code 22151

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

Name of Employer PFI Occupation Consultant

Receipt For: 2011  
 Primary  General  
 Other (specify) Special-General

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 09 / 2011

**Transaction ID : SA11AI.7127**

Amount of Each Receipt this Period  
 250.00

**C.** Full Name (Last, First, Middle Initial)  
**Edward Chrisman**

Mailing Address 2998 Brookdale Ct

City Reno State NV Zip Code 89523

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

Name of Employer None Occupation Retired

Receipt For: 2011  
 Primary  General  
 Other (specify) Special-General

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 27 / 2011

**Transaction ID : SA11AI.6890**

Amount of Each Receipt this Period  
 300.00

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

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

1050.00

**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 13 OF 101
	<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)  
**Valerie Clark**

Mailing Address 13105 Thuderbolt Dr

City State Zip Code  
Reno NV 89511

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

Name of Employer Occupation  
Clark & Associates Insurance Broker

Receipt For: 2011  
 Primary  General  
 Other (specify) Special-General

Election Cycle-to-Date  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 08 / 2011

**Transaction ID : SA11AI.6719**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**BRET COLEMAN**

Mailing Address 165 W LIBERTY

City State Zip Code  
RENO NV 89501

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

Name of Employer Occupation  
B&C WESTERN PARTNER

Receipt For: 2011  
 Primary  General  
 Other (specify) Special-General

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 / 29 / 2011

**Transaction ID : SA11AI.7041**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**JAMES COLGAN**

Mailing Address 412 W JOHN ST

City State Zip Code  
CARSON CITY NV 89703

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

Name of Employer Occupation  
CARSON UROLOGY PHYSICIAN

Receipt For: 2011  
 Primary  General  
 Other (specify) Special-General

Election Cycle-to-Date  
1800.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 / 26 / 2011

**Transaction ID : SA11AI.7335**

Amount of Each Receipt this Period  
1800.00  
In-kind - EVENT COSTS

**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: (check only one)	PAGE 14 OF 101
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Amodei for Nevada**

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

Mailing Address **PO Box 2517**

City **Carson City** State **NV** Zip Code **89702**

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

Name of Employer **JP Copolous** Occupation **Architect**

Receipt For: 2011  
 Primary  General  
 Other (specify) **Special-General**

Election Cycle-to-Date  
**300.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 27 / 2011**

**Transaction ID : SA11AI.6860**

Amount of Each Receipt this Period  
**300.00**

**B.** Full Name (Last, First, Middle Initial)  
**James Costa**

Mailing Address **7 Marlette Dr**

City **Carson City** State **NV** Zip Code **89703**

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

Name of Employer **None** Occupation **Retired**

Receipt For: 2011  
 Primary  General  
 Other (specify) **Special-General**

Election Cycle-to-Date  
**250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 27 / 2011**

**Transaction ID : SA11AI.6847**

Amount of Each Receipt this Period  
**250.00**

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

Mailing Address **3785 Meadow Wood Rd**

City **Carson City** State **NV** Zip Code **89703**

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

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2011  
 Primary  General  
 Other (specify) **Special-General**

Election Cycle-to-Date  
**500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 07 / 2011**

**Transaction ID : SA11AI.7094**

Amount of Each Receipt this Period  
**500.00**

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

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

**1050.00**

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

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

FOR LINE NUMBER: PAGE 15 OF 101  
(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)  
**Christopher Cox**

Mailing Address 2205 Windsor Rd

City State Zip Code  
Alexandria VA 22307

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

Name of Employer Occupation  
Navigators Global Principal

Receipt For: 2011  
 Primary  General  
 Other (specify) Special-General

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 12 2011

**Transaction ID : SA11AI.7134**

Amount of Each Receipt this Period  
500.00

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

Mailing Address Starr Valley

City State Zip Code  
Deeth NV 89823

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

Name of Employer Occupation  
None Rancher

Receipt For: 2011  
 Primary  General  
 Other (specify) Special-General

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 02 2011

**Transaction ID : SA11AI.7070**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**MIKE DILLON JR**

Mailing Address PO Box 13430

City State Zip Code  
Reno NV 89507

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

Name of Employer Occupation  
Dillon Insurance Services Owner

Receipt For: 2011  
 Primary  General  
 Other (specify) Special-General

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 08 2011

**Transaction ID : SA11AI.7112**

Amount of Each Receipt this Period  
500.00

**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 16 OF 101
	<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)  
**DWIGHT DORTCH**

Mailing Address **PO Box 8522**

City **Reno** State **NV** Zip Code **89507**

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

Name of Employer **Dwight Dortch Consulting** Occupation **Owner**

Receipt For: 2011  
 Primary  General  
 Other (specify) **Special-General**

Election Cycle-to-Date  
**250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 08 / 2011**

**Transaction ID : SA11AI.7109**

Amount of Each Receipt this Period  
**250.00**

**B.** Full Name (Last, First, Middle Initial)  
**Sheila Dubron-Lambert**

Mailing Address **2204 W Washington St**

City **Carson City** State **NV** Zip Code **89703**

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

Name of Employer **State of Nevada** Occupation **MAIL**

Receipt For: 2011  
 Primary  General  
 Other (specify) **Special-General**

Election Cycle-to-Date  
**250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 27 / 2011**

**Transaction ID : SA11AI.6825**

Amount of Each Receipt this Period  
**250.00**

**C.** Full Name (Last, First, Middle Initial)  
**JOAN DYER**

Mailing Address **1540 Lillian Way**

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

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

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2011  
 Primary  General  
 Other (specify) **Special-General**

Election Cycle-to-Date  
**500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 08 / 2011**

**Transaction ID : SA11AI.7122**

Amount of Each Receipt this Period  
**500.00**

**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 17 OF 101
	<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 Elliott**

Mailing Address 5520 Rue St. Tropez

City Reno State NV Zip Code 89511

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

Name of Employer Self employed Occupation Consultant

Receipt For: 2011  
 Primary  General  
 Other (specify) Special-General

Election Cycle-to-Date **800.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 31 / 2011**

**Transaction ID : SA11AI.7059**

Amount of Each Receipt this Period  
**500.00**

**B.** Full Name (Last, First, Middle Initial)  
**JIM ENDRES**

Mailing Address 14865 LA BRIANA

City RENO State NV Zip Code 89511

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

Name of Employer MCDONALD CARANO Occupation GOVT RELATIONS

Receipt For: 2011  
 Primary  General  
 Other (specify) Special-General

Election Cycle-to-Date **455.25**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 01 / 2011**

**Transaction ID : SA11AI.7306**

Amount of Each Receipt this Period  
**455.25**

In-kind - EVENT COSTS

**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 Self

Receipt For: 2011  
 Primary  General  
 Other (specify) Special-General

Election Cycle-to-Date **3500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 27 / 2011**

**Transaction ID : SA11AI.7153**

Amount of Each Receipt this Period  
**1000.00**

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

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

**1955.25**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 101
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Amodei for Nevada**

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

Mailing Address 5 Golden Eagle Lane

City Littleton State CO Zip Code 80127

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

Name of Employer N/A Occupation Retired

Receipt For: 2011  
 Primary  General  
 Other (specify) Special-General

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 13 / 2011

**Transaction ID : SA11AI.6793**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**David Farahi**

Mailing Address 840 S Center St

City Reno State NV Zip Code 89501

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

Name of Employer Atlantis Casino Resort Occupation Finance

Receipt For: 2011  
 Primary  General  
 Other (specify) Special-General

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 02 / 2011

**Transaction ID : SA11AI.6646**

Amount of Each Receipt this Period  
 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**John Farahi**

Mailing Address 3800 S. Virginia St.

City Reno State NV Zip Code 89502

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

Name of Employer Atlantis Casino Resort Occupation General Manager

Receipt For: 2011  
 Primary  General  
 Other (specify) Special-General

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 25 / 2011

**Transaction ID : SA11AI.7338**

Amount of Each Receipt this Period  
 894.47  
 In-kind - EVENT COSTS

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

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

2894.47

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 101
	<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)  
**John Farahi**

Mailing Address 3800 S. Virginia St.

City	State	Zip Code
Reno	NV	89502

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

Name of Employer	Occupation
Atlantis Casino Resort	General Manager

Receipt For: 1000  
 Primary  General  
 Other (specify) Special-General

Election Cycle-to-Date  
**1894.47**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 02 / 2011**

**Transaction ID : SA11AI.6644**

Amount of Each Receipt this Period  
**1000.00**

**B.** Full Name (Last, First, Middle Initial)  
**Scott Fielden**

Mailing Address 1016 Arabian Sand Court

City	State	Zip Code
Las Vegas	NV	89144

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

Name of Employer	Occupation
Self	Anesthesiologist

Receipt For: 2011  
 Primary  General  
 Other (specify) Special-General

Election Cycle-to-Date  
**250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 27 / 2011**

**Transaction ID : SA11AI.6898**

Amount of Each Receipt this Period  
**250.00**

**C.** Full Name (Last, First, Middle Initial)  
**NORMAN FLANAGAN**

Mailing Address 5295 Canyon Dr

City	State	Zip Code
Reno	NV	89519

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

Name of Employer	Occupation
State of Nevada	US District Judge

Receipt For: 2011  
 Primary  General  
 Other (specify) Special-General

Election Cycle-to-Date  
**250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 08 / 2011**

**Transaction ID : SA11AI.7104**

Amount of Each Receipt this Period  
**250.00**

**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 20 OF 101
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Amodei for Nevada**

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

Mailing Address 100 W LIBERTY

City RENO State NV Zip Code 89501

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

Name of Employer MCDONALD CARANO Occupation ATTORNEY

Receipt For: 2011  
 Primary  General  
 Other (specify) Special-General

Election Cycle-to-Date  
 \_\_\_\_\_ 453.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 01 / 2011

**Transaction ID : SA11AI.7309**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 453.00

In-kind - EVENT COSTS

**B.** Full Name (Last, First, Middle Initial)  
**Phyllis Frias**

Mailing Address 5010 S Valley View Blvd

City Las Vegas State NV Zip Code 89118

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

Name of Employer N/A Occupation Retired

Receipt For: 2011  
 Primary  General  
 Other (specify) Special-General

Election Cycle-to-Date  
 \_\_\_\_\_ 2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 12 / 2011

**Transaction ID : SA11AI.6769**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 2500.00

**C.** Full Name (Last, First, Middle Initial)  
**FRANK GALLAGHER**

Mailing Address 2770 Del Monte Lane

City reno State NV Zip Code 89511

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

Name of Employer Frank Gallagher Commercial Occupation Owner

Receipt For: 2011  
 Primary  General  
 Other (specify) Special-General

Election Cycle-to-Date  
 \_\_\_\_\_ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 08 / 2011

**Transaction ID : SA11AI.7114**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 250.00

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

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

\_\_\_\_\_ 3203.00

\_\_\_\_\_

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 101
	<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)  
**TOM GALLAGHER**

Mailing Address 5405 mae Anne Ave

City	State	Zip Code
Reno	NV	89523

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

Name of Employer	Occupation
Summit Engineering	Engineer

Receipt For: 2011  
 Primary  General  
 Other (specify) Special-General

Election Cycle-to-Date  
 \_\_\_\_\_ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 06 / 2011

**Transaction ID : SA11AI.7082**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 250.00

**B.** Full Name (Last, First, Middle Initial)  
**GRANT GERBER**

Mailing Address 491 Fourth St

City	State	Zip Code
Elko	NV	89801

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

Name of Employer	Occupation
Gerber Law Offices	Attorney

Receipt For: 2011  
 Primary  General  
 Other (specify) Special-General

Election Cycle-to-Date  
 \_\_\_\_\_ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 06 / 2011

**Transaction ID : SA11AI.7083**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 250.00

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

Mailing Address 50 W Liberty St Ste 750

City	State	Zip Code
Reno	NV	89501

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

Name of Employer	Occupation
Parsons Behle & Latimer	Attorney

Receipt For: 2011  
 Primary  General  
 Other (specify) Special-General

Election Cycle-to-Date  
 \_\_\_\_\_ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 08 / 2011

**Transaction ID : SA11AI.7108**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 250.00

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

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

\_\_\_\_\_ 750.00

\_\_\_\_\_

**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 101
	<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)  
**Schell Goravanchi**

Mailing Address 9508 Catalina Cove Circle

City Las Vegas State NV Zip Code 89147

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

Name of Employer Nevada Anesthesia Consultants Occupation Anesthesiologist

Receipt For: 2011  
 Primary  General  
 Other (specify) Special-General

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 27 / 2011

**Transaction ID : SA11AI.6849**

Amount of Each Receipt this Period  
 250.00

**B.** Full Name (Last, First, Middle Initial)  
**Leslie Gospodnetich**

Mailing Address 9400 Laguna Niguel

City Las Vegas State NV Zip Code 89134

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

Name of Employer Veela Designs Occupation Self Employed

Receipt For: 2011  
 Primary  General  
 Other (specify) Special-General

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 29 / 2011

**Transaction ID : SA11AI.6813**

Amount of Each Receipt this Period  
 500.00

**C.** Full Name (Last, First, Middle Initial)  
**Holly Gregory**

Mailing Address PO Box 2688

City Elko State NV Zip Code 89601

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

Name of Employer Pratt Drive LLC Occupation Business Owner

Receipt For: 2011  
 Primary  General  
 Other (specify) Special-General

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 02 / 2011

**Transaction ID : SA11AI.6690**

Amount of Each Receipt this Period  
 2000.00

**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 23 OF 101
	<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)  
**James Gregory**

Mailing Address **PO Box 2688**

City **Elko** State **NV** Zip Code **89601**

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

Name of Employer **Pratt Drive LLC** Occupation **Business Owner**

Receipt For: 2011  
 Primary  General  
 Other (specify) **Special-General**

Election Cycle-to-Date  
**2000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 02 / 2011**

**Transaction ID : SA11AI.6687**

Amount of Each Receipt this Period  
**2000.00**

**B.** Full Name (Last, First, Middle Initial)  
**James Harker**

Mailing Address **1401 West Fourth St**

City **Reno** State **NV** Zip Code **89503**

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

Name of Employer **Harker and Harker Partnership** Occupation **Principal**

Receipt For: 2011  
 Primary  General  
 Other (specify) **Special-General**

Election Cycle-to-Date  
**250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 08 / 2011**

**Transaction ID : SA11AI.7180**

Amount of Each Receipt this Period  
**250.00**

**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: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**4700.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 03 / 2011**

**Transaction ID : SA11AI.7305**

Amount of Each Receipt this Period  
**2000.00**

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

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

**4250.00**

**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 101
	<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)  
**AJ HICKS**

Mailing Address 100 W LIBERTY

City RENO State NV Zip Code 89501

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

Name of Employer MCDONALD CARANO Occupation ATTORNEY

Receipt For: 2011  
 Primary  General  
 Other (specify) Special-General

Election Cycle-to-Date  
 \_\_\_\_\_ 453.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 01 / 2011

**Transaction ID : SA11AI.7312**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 453.00

In-kind - EVENT COSTS

**B.** Full Name (Last, First, Middle Initial)  
**Earl Hill**

Mailing Address 101 Juniper Hill Rd

City Reno State NV Zip Code 89519

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

Name of Employer PB&L Occupation Lawyer

Receipt For: 2011  
 Primary  General  
 Other (specify) Special-General

Election Cycle-to-Date  
 \_\_\_\_\_ 450.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 31 / 2011

**Transaction ID : SA11AI.7053**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 200.00

**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 Self Occupation Mealurgist

Receipt For: 2011  
 Primary  General  
 Other (specify) Special-General

Election Cycle-to-Date  
 \_\_\_\_\_ 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 06 / 2011

**Transaction ID : SA11AI.7077**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 500.00

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

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

\_\_\_\_\_ 1153.00

\_\_\_\_\_



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

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

FOR LINE NUMBER: PAGE 25 OF 101  
(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)  
**PROCTOR HUG**

Mailing Address 2260 Hedgewood

City State Zip Code  
Reno NV 89509

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

Name of Employer Occupation  
Maupin Cox & Legoy Attorney

Receipt For: 2011  
 Primary  General  
 Other (specify) Special-General

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 07 2011

**Transaction ID : SA11AI.7098**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Patricia Idler**

Mailing Address 4900 Canyoi Drive

City State Zip Code  
Reno NV 89519

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

Name of Employer Occupation  
None Homemaker

Receipt For: 2011  
 Primary  General  
 Other (specify) Special-General

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 29 2011

**Transaction ID : SA11AI.6899**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**MARC IVERSON**

Mailing Address 6037 Sharon Rd

City State Zip Code  
Charolette NC 28210

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

Name of Employer Occupation  
None None

Receipt For: 2011  
 Primary  General  
 Other (specify) Special-General

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 08 2011

**Transaction ID : SA11AI.7121**

Amount of Each Receipt this Period  
500.00

**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 26 OF 101
	<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)  
**Mark James**

Mailing Address 4001 S Decatur Blvd

City	State	Zip Code
Las Vegas	NV	89103

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

Name of Employer	Occupation
Mark A James LTD	Attorney

Receipt For: 2011  
 Primary  General  
 Other (specify) Special-General

Election Cycle-to-Date  
 \_\_\_\_\_ 2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 12 / 2011

**Transaction ID : SA11AI.6766**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 2500.00

**B.** Full Name (Last, First, Middle Initial)  
**Brad Johnston**

Mailing Address 1381 Grassland Road

City	State	Zip Code
Dayton	NV	89403

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

Name of Employer	Occupation
Peri & Sons Family Farms, LLC	General Counsel

Receipt For: 2011  
 Primary  General  
 Other (specify) Special-General

Election Cycle-to-Date  
 \_\_\_\_\_ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 10 / 2011

**Transaction ID : SA11AI.6747**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 1000.00

**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: 2011  
 Primary  General  
 Other (specify) Special-General

Election Cycle-to-Date  
 \_\_\_\_\_ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 06 / 2011

**Transaction ID : SA11AI.7078**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 250.00

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

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

\_\_\_\_\_ 3750.00

\_\_\_\_\_

**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 101
	<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**

Full Name (Last, First, Middle Initial) <b>REECE KEENER</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 06 / 2011
Mailing Address 1858 Ruby View Dr		<b>Transaction ID : SA11AI.7079</b>
City Elko	State NV	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Print and Copy Center	Occupation Printer	
Receipt For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-General	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) <b>Gene Krametbauer</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 31 / 2011
Mailing Address 2727 S Rainbow Blvd		<b>Transaction ID : SA11AI.6500</b>
City Las Vegas	State NV	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer VTN Nevada	Occupation Land Surveyor	
Receipt For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-General	Election Cycle-to-Date 1000.00	

Full Name (Last, First, Middle Initial) <b>Michelle Lambert</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 27 / 2011
Mailing Address 366 Carlisle		<b>Transaction ID : SA11AI.6859</b>
City Carson City	State NV	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer None	Occupation Nurse	
Receipt For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-General	Election Cycle-to-Date 300.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1800.00
<b>TOTAL</b> 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 28 OF 101
	<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 Laxalt**

Mailing Address 750 9th St NW #750

City Washington State DC Zip Code 20001

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

Name of Employer The Paul Laxalt Group Occupation Owner

Receipt For: 2011  
 Primary  General  
 Other (specify) Special-General

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 30 / 2011

**Transaction ID : SA11AI.7051**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**JENNIFER LAZOVICH**

Mailing Address 288 Manzanite Ranch Lane

City Henderson State NV Zip Code 89012

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

Name of Employer Kaempfer Crowell Occupation Attorney

Receipt For: 2011  
 Primary  General  
 Other (specify) Special-General

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 08 / 2011

**Transaction ID : SA11AI.7111**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 1941 Rolling Brook Lane

City Reno State NV Zip Code 89519

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

Name of Employer Law Offices of Keith Lee Occupation Attorney

Receipt For: 2011  
 Primary  General  
 Other (specify) Special-General

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2011

**Transaction ID : SA11AI.7158**

Amount of Each Receipt this Period  
500.00

**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 29 OF 101
	<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)  
**Roger Ligtenberg**

Mailing Address 5300 Numaga Pass Road

City Carson City State NV Zip Code 89703

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

Name of Employer Self Occupation Dairyman

Receipt For: 2011  
 Primary  General  
 Other (specify) Special-General

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 26 / 2011

**Transaction ID : SA11AI.6178**

Amount of Each Receipt this Period  
 1000.00

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

Mailing Address 2000 N Meridian Rd

City Lovelock State NV Zip Code 89419

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

Name of Employer List Cattle Co Occupation Farmer

Receipt For: 2011  
 Primary  General  
 Other (specify) Special-General

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 25 / 2011

**Transaction ID : SA11AI.7322**

Amount of Each Receipt this Period  
 209.38

In-kind - EVENT COSTS

**C.** Full Name (Last, First, Middle Initial)  
**DAVID LLOYD**

Mailing Address 15120 Redmond Loop

City Reno State NV Zip Code 89511

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

Name of Employer None Occupation Noen

Receipt For: 2011  
 Primary  General  
 Other (specify) Special-General

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 13 / 2011

**Transaction ID : SA11AI.7150**

Amount of Each Receipt this Period  
 240.00

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

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

1449.38

**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 101  
(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)  
**CRAIG MATA CZYNSKI**

Mailing Address 6395 Zermatt Ct

City State Zip Code  
Reno NV 89511

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

Name of Employer Occupation  
Vulcan Power Manager

Receipt For: 2011  
 Primary  General  
 Other (specify) Special-General

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 07 2011

**Transaction ID : SA11AI.7093**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 1394 Amado Ct

City State Zip Code  
Reno NV 89511

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

Name of Employer Occupation  
Self Physician

Receipt For: 2011  
 Primary  General  
 Other (specify) Special-General

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 01 2011

**Transaction ID : SA11AI.7064**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**MARGARET MCKENNIE**

Mailing Address 100 Rimfire Circle

City State Zip Code  
Reno NV 89519

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

Name of Employer Occupation  
None None

Receipt For: 2011  
 Primary  General  
 Other (specify) Special-General

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 02 2011

**Transaction ID : SA11AI.7073**

Amount of Each Receipt this Period  
250.00

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

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

750.00

**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 101
	<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)  
**KRISTIN MCQUEARY**

Mailing Address 2338 Rodeo Ct

City Elko State NV Zip Code 89801

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

Name of Employer Elko County Occupation Attorney

Receipt For: 2011  
 Primary  General  
 Other (specify) Special-General

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 06 / 2011

**Transaction ID : SA11AI.7087**

Amount of Each Receipt this Period  
 250.00

**B.** Full Name (Last, First, Middle Initial)  
**DOUG MCQUIDE**

Mailing Address 1895 W Huffaker Lane

City Reno State NV Zip Code 89511

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

Name of Employer Comstock Mining Occupation Director of Marketing

Receipt For: 2011  
 Primary  General  
 Other (specify) Special-General

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 06 / 2011

**Transaction ID : SA11AI.7080**

Amount of Each Receipt this Period  
 250.00

**C.** Full Name (Last, First, Middle Initial)  
**Kelly Mellum**

Mailing Address 3956 Vista Ariana Dr

City Carson City State NV Zip Code 89703

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

Name of Employer Self Employed Occupation Anesthesiologist

Receipt For: 2011  
 Primary  General  
 Other (specify) Special-General

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 27 / 2011

**Transaction ID : SA11AI.6888**

Amount of Each Receipt this Period  
 300.00

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

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

800.00

**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 32 OF 101
	<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)  
**Robert Mendenhall**

Mailing Address 1701 Duneville St

City Las Vegas State NV Zip Code 89146

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

Name of Employer Las Vegas Paving Occupation Owner

Receipt For: 2011  
 Primary  General  
 Other (specify) Special-General

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 31 / 2011

**Transaction ID : SA11Al.6504**

Amount of Each Receipt this Period  
 2000.00

**B.** Full Name (Last, First, Middle Initial)  
**RANDY MESSEE**

Mailing Address 2689 Hwy 20

City Marysville State CA Zip Code 95601

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

Name of Employer None Occupation Farmer

Receipt For: 2011  
 Primary  General  
 Other (specify) Special-General

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 02 / 2011

**Transaction ID : SA11Al.7072**

Amount of Each Receipt this Period  
 300.00

**C.** Full Name (Last, First, Middle Initial)  
**Roger Meyer**

Mailing Address PO Box 402

City Genoa State NV Zip Code 89411

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

Name of Employer Carson Medical Group Occupation Physician

Receipt For: 2011  
 Primary  General  
 Other (specify) Special-General

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 27 / 2011

**Transaction ID : SA11Al.6850**

Amount of Each Receipt this Period  
 300.00

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

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

2600.00



**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 101
	<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)  
**Jonathon Miller**

Mailing Address 1730 Chaparral Dr

City Carson City State NV Zip Code 89703

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

Name of Employer Self Occupation Business owner

Receipt For: 2011  
 Primary  General  
 Other (specify) Special-General

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 26 / 2011

**Transaction ID : SA11AI.6194**

Amount of Each Receipt this Period  
 1000.00

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

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: 2011  
 Primary  General  
 Other (specify) Special-General

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 27 / 2011

**Transaction ID : SA11AI.6892**

Amount of Each Receipt this Period  
 500.00

**C.** Full Name (Last, First, Middle Initial)  
**KATHLEEN MUDGE**

Mailing Address 4090 Falling Water Drive

City Reno State NV Zip Code 89509

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

Name of Employer None Occupation None

Receipt For: 2011  
 Primary  General  
 Other (specify) Special-General

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 07 / 2011

**Transaction ID : SA11AI.7099**

Amount of Each Receipt this Period  
 250.00

**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 34 OF 101
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Amodei for Nevada**

**A.** Full Name (Last, First, Middle Initial)  
**MICHAEL OLSON**

Mailing Address 2750 MARION DR

City LAS VEGAS State NV Zip Code 89115

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

Name of Employer Olson Precast Inc Occupation Owner

Receipt For: 2011  
 Primary  General  
 Other (specify) Special-General

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 29 / 2011

**Transaction ID : SA11AI.7044**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**MIKE PAGNI**

Mailing Address 100 W LIBERTY

City RENO State NV Zip Code 89511

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

Name of Employer MCDONALD CARANO Occupation ATTORNEY

Receipt For: 2011  
 Primary  General  
 Other (specify) Special-General

Election Cycle-to-Date  
453.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 01 / 2011

**Transaction ID : SA11AI.7315**

Amount of Each Receipt this Period  
453.00

In-kind - EVENT COSTS

**C.** Full Name (Last, First, Middle Initial)  
**Ronald Parratt**

Mailing Address 2190 Augusta Ave

City Reno State NV Zip Code 89509

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2011  
 Primary  General  
 Other (specify) Special-General

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 06 / 2011

**Transaction ID : SA11AI.6706**

Amount of Each Receipt this Period  
2500.00

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

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

3453.00

**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 101
	<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)  
**George Peek**

Mailing Address 4485 Mountaingate Drive

City Reno State NV Zip Code 89519-7938

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

Name of Employer ERGS, Inc Occupation President

Receipt For: 2011  
 Primary  General  
 Other (specify) Special-General

Election Cycle-to-Date  
3500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2011

**Transaction ID : SA11AI.7156**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 934 Chip Creek Ct

City Minden State NV Zip Code 89423

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

Name of Employer Information requested Occupation Information requested

Receipt For: 2011  
 Primary  General  
 Other (specify) Special-General

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 12 / 2011

**Transaction ID : SA11AI.6774**

Amount of Each Receipt this Period  
2500.00

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

Mailing Address 10645 Blue Moon Ct

City Reno State NV Zip Code 89521

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

Name of Employer Bodines Casino Occupation Marketing Executive

Receipt For: 2011  
 Primary  General  
 Other (specify) Special-General

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 12 / 2011

**Transaction ID : SA11AI.6771**

Amount of Each Receipt this Period  
2500.00

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

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

6000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 101
	<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)  
**David Peri**

Mailing Address **PO Box 35**

City **Yerington** State **NV** Zip Code **89447**

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

Name of Employer **David Peri Family Farms, LLC** Occupation **Owner**

Receipt For: 2011  
 Primary  General  
 Other (specify) **Special-General**

Election Cycle-to-Date  
**1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 10 / 2011**

**Transaction ID : SA11AI.6746**

Amount of Each Receipt this Period  
**1000.00**

**B.** Full Name (Last, First, Middle Initial)  
**Eugene Perry**

Mailing Address **4 Wild Ridge Ct**

City **Las Vegas** State **NV** Zip Code **89135**

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

Name of Employer **None** Occupation **None**

Receipt For: 2011  
 Primary  General  
 Other (specify) **Special-General**

Election Cycle-to-Date  
**1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 31 / 2011**

**Transaction ID : SA11AI.6505**

Amount of Each Receipt this Period  
**1000.00**

**C.** Full Name (Last, First, Middle Initial)  
**Karen Peterson**

Mailing Address **PO Box 646**

City **Carson City** State **NV** Zip Code **89702-0646**

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

Name of Employer **Allison Mackenzie** Occupation **Attorney**

Receipt For: 2011  
 Primary  General  
 Other (specify) **Special-General**

Election Cycle-to-Date  
**650.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 27 / 2011**

**Transaction ID : SA11AI.6889**

Amount of Each Receipt this Period  
**300.00**

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

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

**2300.00**

**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 101
	<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**

Full Name (Last, First, Middle Initial) <b>A. Michael Pieper</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 29 / 2011
Mailing Address 39644 Lovettsville Road		<b>Transaction ID : SA11AI.6900</b>
City Lovettsville	State VA Zip Code 20180	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 500.00
Name of Employer R&R Partners	Occupation Executive VP	
Receipt For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-General	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) <b>B. ADAM PIERGALLINI</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 07 / 2011
Mailing Address 7099 Hualapai Way		<b>Transaction ID : SA11AI.7095</b>
City Las Vegas	State NV Zip Code 89166	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 250.00
Name of Employer Self	Occupation Chemist	
Receipt For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-General	Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) <b>C. Thomas Prato</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 06 / 2011
Mailing Address 105 W Charleston		<b>Transaction ID : SA11AI.6695</b>
City Las Vegas	State NV Zip Code 89102	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1000.00
Name of Employer Self	Occupation Owner Operator	
Receipt For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-General	Election Cycle-to-Date 1000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1750.00
<b>TOTAL</b> 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 38 OF 101
	<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)  
**JAMES PUZEY**

Mailing Address 6446 Evans Creek Dr

City Reno State NV Zip Code 89519

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

Name of Employer Self Occupation Attorney

Receipt For: 2011  
 Primary  General  
 Other (specify) Special-General

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 08 / 2011

**Transaction ID : SA11AI.7106**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**David Rice**

Mailing Address 3611 W Arbu

City Las Vegas State NV Zip Code 89118

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

Name of Employer Rice Construction Occupation President

Receipt For: 2011  
 Primary  General  
 Other (specify) Special-General

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 12 / 2011

**Transaction ID : SA11AI.6770**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Ron Riddels**

Mailing Address 425 Eternity Street

City Las Vegas State NV Zip Code 89138

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

Name of Employer Las Vegas Electric Occupation VP

Receipt For: 2011  
 Primary  General  
 Other (specify) Special-General

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 31 / 2011

**Transaction ID : SA11AI.6506**

Amount of Each Receipt this Period  
1000.00

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

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

2250.00

**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 101
	<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)  
**John Ritter**

Mailing Address 3455 Cliff Shadows Pkwy

City Las Vegas State NV Zip Code 89129

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

Name of Employer Focus Property Group Occupation CEO

Receipt For: 1500  
 Primary  General  
 Other (specify) Special-General

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 08 / 2011

**Transaction ID : SA11AI.6717**

Amount of Each Receipt this Period  
 1500.00

**B.** Full Name (Last, First, Middle Initial)  
**RONALD ROMAN**

Mailing Address 6330 COYOTE PT RD

City RENO State NV Zip Code 89511

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

Name of Employer None Occupation None

Receipt For: 2011  
 Primary  General  
 Other (specify) Special-General

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 01 / 2011

**Transaction ID : SA11AI.7060**

Amount of Each Receipt this Period  
 250.00

**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: 2011  
 Primary  General  
 Other (specify) Special-General

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 08 / 2011

**Transaction ID : SA11AI.6720**

Amount of Each Receipt this Period  
 1000.00

**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 40 OF 101
	<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)  
**Jean Russell**

Mailing Address 1000 Kensington Ct

City Carson City State NV Zip Code 89703

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

Name of Employer None Occupation Housewife

Receipt For: 2011  
 Primary  General  
 Other (specify) Special-General

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 27 / 2011

**Transaction ID : SA11AI.6881**

Amount of Each Receipt this Period  
 300.00

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

Mailing Address 2725 Robb Dr

City Reno State NV Zip Code 89523

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

Name of Employer United Construction Occupation COO

Receipt For: 2011  
 Primary  General  
 Other (specify) Special-General

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 01 / 2011

**Transaction ID : SA11AI.6661**

Amount of Each Receipt this Period  
 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Robert Ryan**

Mailing Address 95 Rimfire Circle

City Reno State NV Zip Code 89519

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

Name of Employer Holland & Hart Occupation Partner

Receipt For: 2011  
 Primary  General  
 Other (specify) Special-General

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 31 / 2011

**Transaction ID : SA11AI.7065**

Amount of Each Receipt this Period  
 250.00

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

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

1550.00



**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 41 OF 101
	<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)  
**ARTHUR SACIGNAC**

Mailing Address 873 Thistle Dr

City Spring Creek State NV Zip Code 89815

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

Name of Employer None Occupation Contractor

Receipt For: 2011  
 Primary  General  
 Other (specify) Special-General

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 06 / 2011

**Transaction ID : SA11AI.7088**

Amount of Each Receipt this Period  
 300.00

**B.** Full Name (Last, First, Middle Initial)  
**Ramon Sanchez**

Mailing Address 5180 Rogers St

City Las Vegas State NV Zip Code 89118

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

Name of Employer P&S MEtals and Supply Company Occupation Business Owner

Receipt For: 2011  
 Primary  General  
 Other (specify) Special-General

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 31 / 2011

**Transaction ID : SA11AI.6507**

Amount of Each Receipt this Period  
 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**LEN SAVAGE**

Mailing Address 4055 Riverhaven Dr

City Reno State NV Zip Code 89519

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

Name of Employer Savage and Son Inc Occupation Contractor

Receipt For: 2011  
 Primary  General  
 Other (specify) Special-General

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 07 / 2011

**Transaction ID : SA11AI.7097**

Amount of Each Receipt this Period  
 250.00

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

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

1550.00

**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 101
	<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)  
**RICHARD SCHALLER**

Mailing Address 14190 POWER RIVER DR

City RENO State NV Zip Code 89511

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

Name of Employer SELF Occupation ATTORNEY

Receipt For: 2011  
 Primary  General  
 Other (specify) Special-General

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 31 / 2011

**Transaction ID : SA11AI.7058**

Amount of Each Receipt this Period  
 500.00

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

Mailing Address 2639 N Roosevelt St

City Alexandria State VA Zip Code 22207

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

Name of Employer Citigroup Occupation VP - Government Affairs

Receipt For: 2011  
 Primary  General  
 Other (specify) Special-General

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 09 / 2011

**Transaction ID : SA11AI.6750**

Amount of Each Receipt this Period  
 1500.00

**C.** Full Name (Last, First, Middle Initial)  
**Mike Schellin**

Mailing Address 741 Derby Ct

City Carson City State NV Zip Code 89703

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

Name of Employer Self Employed Occupation Insurance Agent

Receipt For: 2011  
 Primary  General  
 Other (specify) Special-General

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 27 / 2011

**Transaction ID : SA11AI.6885**

Amount of Each Receipt this Period  
 300.00

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

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

2300.00

**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 43 OF 101
	<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)  
**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: 2011  
 Primary  General  
 Other (specify) **Special-General**

Election Cycle-to-Date  
**1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 08 / 2011**

**Transaction ID : SA11AI.6721**

Amount of Each Receipt this Period  
**1000.00**

**B.** Full Name (Last, First, Middle Initial)  
**JAMES SERGEANT**

Mailing Address **1400 Medical Parkway**

City **CARSON CITY** State **NV** Zip Code **89703**

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

Name of Employer **SIERRA SURGERY** Occupation **CEO**

Receipt For: 2011  
 Primary  General  
 Other (specify) **Special-General**

Election Cycle-to-Date  
**400.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 26 / 2011**

**Transaction ID : SA11AI.7329**

Amount of Each Receipt this Period  
**400.00**

In-kind - EVENT COSTS

**C.** Full Name (Last, First, Middle Initial)  
**MARTHA SKYES**

Mailing Address **2777 Sacred Garden Dr**

City **Reno** State **NV** Zip Code **89511**

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

Name of Employer **Information Requested** Occupation **Information Requested**

Receipt For: 2011  
 Primary  General  
 Other (specify) **Special-General**

Election Cycle-to-Date  
**250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 12 / 2011**

**Transaction ID : SA11AI.7136**

Amount of Each Receipt this Period  
**250.00**

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

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

**1650.00**

**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 101	
	<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)  
**G BLAKE SMITH**

Mailing Address 7690 TOEN SQUARE LN

City RENO State NV Zip Code 89523

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

Name of Employer Altco Construction Occupation Partner

Receipt For: 2011  
 Primary  General  
 Other (specify) Special-General

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 31 / 2011

**Transaction ID : SA11AI.7055**

Amount of Each Receipt this Period  
 500.00

**B.** Full Name (Last, First, Middle Initial)  
**STEVE SMITH**

Mailing Address 10495 Chantilly Way

City Reno State NV Zip Code 89521

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

Name of Employer Computerland Occupation Owner

Receipt For: 2011  
 Primary  General  
 Other (specify) Special-General

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 22 / 2011

**Transaction ID : SA11AI.7151**

Amount of Each Receipt this Period  
 250.00

**C.** Full Name (Last, First, Middle Initial)  
**Charles Sondregger**

Mailing Address 4092 Kings Canyon Rd

City Carson City State NV Zip Code 89703

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

Name of Employer Self Employed Occupation Physican

Receipt For: 2011  
 Primary  General  
 Other (specify) Special-General

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 27 / 2011

**Transaction ID : SA11AI.6853**

Amount of Each Receipt this Period  
 300.00

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

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

1050.00

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

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

FOR LINE NUMBER: PAGE 45 OF 101  
(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)  
**Roland Sturm**

Mailing Address 6680 Rebecca Rd

City State Zip Code  
Las Vegas NV 89131

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

Name of Employer Occupation  
Territory Incorporated Owner

Receipt For: 2011  
 Primary  General  
 Other (specify) Special-General

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 02 / 2011

**Transaction ID : SA11AI.6640**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**William Thomas**

Mailing Address 1954 Ash Canyon Road

City State Zip Code  
Carson City NV 89703

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

Name of Employer Occupation  
Carson Surgical Physician

Receipt For: 2011  
 Primary  General  
 Other (specify) Special-General

Election Cycle-to-Date  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 27 / 2011

**Transaction ID : SA11AI.6855**

Amount of Each Receipt this Period  
300.00

**C.** Full Name (Last, First, Middle Initial)  
**Robin Titus**

Mailing Address PO Box 377

City State Zip Code  
Wellington NV 89444

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

Name of Employer Occupation  
SELF PHYSICIAN

Receipt For: 2011  
 Primary  General  
 Other (specify) Special-General

Election Cycle-to-Date  
445.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 25 / 2011

**Transaction ID : SA11AI.7320**

Amount of Each Receipt this Period  
400.00  
In-kind - EVENT COSTS

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

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

1700.00

**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 46 OF 101
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Amodei for Nevada**

**A.** Full Name (Last, First, Middle Initial)  
**Jon Wahrenbrock**

Mailing Address 2072 Ruby View Drive

City Elko	State NV	Zip Code 89801
--------------	-------------	-------------------

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

Name of Employer McMullen Insurance Agency	Occupation Insurnace
---	-------------------------

Receipt For: 2011  
 Primary  General  
 Other (specify) Special-General

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 02 / 2011

**Transaction ID : SA11AI.7068**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Bob Weise**

Mailing Address PO Box 5009

City Reno	State NV	Zip Code 89513
--------------	-------------	-------------------

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

Name of Employer Bobcat trust	Occupation Rancher
----------------------------------	-----------------------

Receipt For: 2011  
 Primary  General  
 Other (specify) Special-General

Election Cycle-to-Date  
1300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 27 / 2011

**Transaction ID : SA11AI.6886**

Amount of Each Receipt this Period  
300.00

**C.** Full Name (Last, First, Middle Initial)  
**Hazelle Whitacre**

Mailing Address 2857 La Mirada Ct

City Minden	State NV	Zip Code 89423
----------------	-------------	-------------------

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

Name of Employer Information requested	Occupation Information requested
---	-------------------------------------

Receipt For: 2011  
 Primary  General  
 Other (specify) Special-General

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 12 / 2011

**Transaction ID : SA11AI.6773**

Amount of Each Receipt this Period  
2500.00

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

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

3050.00

**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 47 OF 101
	<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**

Full Name (Last, First, Middle Initial) <b>Joseph Whitacre</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 12 / 2011
Mailing Address 2857 La Mirada Ct		<b>Transaction ID : SA11AI.6772</b>
City Minden	State NV	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2500.00
Name of Employer Carson Valley Inn	Occupation Carson Valley Inn	
Receipt For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-General	Election Cycle-to-Date 5000.00	

Full Name (Last, First, Middle Initial) <b>Craig Willcut</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 01 / 2011
Mailing Address 613 Hawk Hill Ct		<b>Transaction ID : SA11AI.6660</b>
City reno	State NV	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer United Construction Co	Occupation President	
Receipt For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-General	Election Cycle-to-Date 1000.00	

Full Name (Last, First, Middle Initial) <b>CALVIN WILLOUGHBY</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 07 / 2011
Mailing Address 159 Antiqua Ct		<b>Transaction ID : SA11AI.7092</b>
City Reno	State NV	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer NOne	Occupation Retired	
Receipt For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-General	Election Cycle-to-Date 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	4000.00
<b>TOTAL</b> 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 48 OF 101
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Amodei for Nevada**

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

Mailing Address 4785 Caughtlin Pkwy

City State Zip Code  
Reno NV 89519

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

Name of Employer Occupation  
Maupin Cox & Legoy Attorney

Receipt For: 2011  
 Primary  General  
 Other (specify) Special-General

Election Cycle-to-Date  
700.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 / 29 / 2011

**Transaction ID : SA11AI.7040**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**Jason Winters**

Mailing Address 170 Virginia St Ste 101

City State Zip Code  
Reno NV 89501

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

Name of Employer Occupation  
La Familia Ristorante Managing Member

Receipt For: 2011  
 Primary  General  
 Other (specify) Special-General

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 07 / 2011

**Transaction ID : SA11AI.7176**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**William Young**

Mailing Address 3 Boulder Rock Circle

City State Zip Code  
Las Vegas NV 89135

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2011  
 Primary  General  
 Other (specify) Special-General

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 06 / 2011

**Transaction ID : SA11AI.6707**

Amount of Each Receipt this Period  
1000.00

**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 49 OF 101
	<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)  
**Andrew Zak**

Mailing Address 9720 Vertaine Ct

City las Vegas State NV Zip Code 89145

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

Name of Employer Self employed Occupation Physician

Receipt For: 2011  
 Primary  General  
 Other (specify) Special-General

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 29 / 2011

**Transaction ID : SA11Al.6902**

Amount of Each Receipt this Period  
250.00

**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

**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

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

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

250.00

95908.10

**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 101
	<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)  
**ALTRIA GROUP, INC. POLITICAL ACTION COMMITTEE (ALTRIAPAC)**

Mailing Address **101 CONSTITUTION AVE NW  
SUITE 400W**  
City **WASHINGTON** State **DC** Zip Code **20001**

FEC ID number of contributing federal political committee. **C C00089136**

Name of Employer Occupation

Receipt For: 2011  
 Primary  General  
 Other (specify) **Special-General**  
 Election Cycle-to-Date **2000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 02 / 2011**

**Transaction ID : SA11C.6659**

Amount of Each Receipt this Period  
**2000.00**

Full Name (Last, First, Middle Initial)  
**AMERICAN ASSOCIATION OF CLINICAL UROLOGISTS - AMERICAN UROLOGICAL ASSOCIATION PAC (UROPAC)**

Mailing Address **1100 E. WOODFIELD ROAD, SUITE 520**  
City **SCHAUMBURG** State **IL** Zip Code **60173**

FEC ID number of contributing federal political committee. **C C00273003**

Name of Employer Occupation

Receipt For: 2011  
 Primary  General  
 Other (specify) **Special-General**  
 Election Cycle-to-Date **1500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 01 / 2011**

**Transaction ID : SA11C.6624**

Amount of Each Receipt this Period  
**1500.00**

Full Name (Last, First, Middle Initial)  
**AMERICAN DENTAL ASSOCIATION PAC INDEPENDENT EXPENDITURES COMMITTEE**

Mailing Address **1111 14TH STREET NW SUITE 1100**  
City **WASHINGTON** State **DC** Zip Code **20005**

FEC ID number of contributing federal political committee. **C C00488338**

Name of Employer Occupation

Receipt For: 2011  
 Primary  General  
 Other (specify) **Special-General**  
 Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 31 / 2011**

**Transaction ID : SA11C.6526**

Amount of Each Receipt this Period  
**1000.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>4500.00</b>
<b>TOTAL</b> 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 51 OF 101	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
**Amodei for Nevada**

**A.** Full Name (Last, First, Middle Initial)  
**AMERICAN DENTAL ASSOCIATION PAC INDEPENDENT EXPENDITURES COMMITTEE**

Mailing Address **1111 14TH STREET NW SUITE 1100**

City **WASHINGTON** State **DC** Zip Code **20005**

FEC ID number of contributing federal political committee. **C C00488338**

Name of Employer Occupation

Receipt For: 2011  
 Primary  General  
 Other (specify) **Special-General**

Election Cycle-to-Date  
**2500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 03 / 2011**

**Transaction ID : SA11C.7159**

Amount of Each Receipt this Period  
**1500.00**

**B.** Full Name (Last, First, Middle Initial)  
**AMERICAN LIBERTY AND NATION PAC (ALAN PAC)**

Mailing Address **438 EAST MAIN STREET  
POST OFFICE BOX 7092**

City **TUPELO** State **MS** Zip Code **38802**

FEC ID number of contributing federal political committee. **C C00495150**

Name of Employer Occupation

Receipt For: 2011  
 Primary  General  
 Other (specify) **Special-General**

Election Cycle-to-Date  
**1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 13 / 2011**

**Transaction ID : SA11C.7164**

Amount of Each Receipt this Period  
**1000.00**

**C.** Full Name (Last, First, Middle Initial)  
**AMODEI VICTORY COMMITTEE**

Mailing Address **228 S WASHINGTON ST STE 115**

City **ALEXANDRIA** State **VA** Zip Code **22314**

FEC ID number of contributing federal political committee. **C C00499293**

Name of Employer Occupation

Receipt For: 2011  
 Primary  General  
 Other (specify) **Special-General**

Election Cycle-to-Date  
**4722.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 02 / 2011**

**Transaction ID : SA11C.6680**

Amount of Each Receipt this Period  
**4722.00**

Reimbursement for plan

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

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

**7222.00**

**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 101
	<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)  
**AMODEI VICTORY COMMITTEE**

Mailing Address 228 S WASHINGTON ST STE 115

City State Zip Code  
ALEXANDRIA VA 22314

FEC ID number of contributing federal political committee. **C C00499293**

Name of Employer Occupation

Receipt For: 2011  
 Primary     General  
 Other (specify)    Special-General

Election Cycle-to-Date  
**10775.28**

Date of Receipt  
 M  M /  D  D /  Y  Y  Y  Y  
**09 02 2011**

**Transaction ID : SA11C.6681**

Amount of Each Receipt this Period  
**6053.28**

Distribution fro JFC

**B.** Full Name (Last, First, Middle Initial)  
**ANDY HARRIS FOR CONGRESS**

Mailing Address PO BOX 426

City State Zip Code  
STEVENSVILLE MD 21666

FEC ID number of contributing federal political committee. **C C00435974**

Name of Employer Occupation

Receipt For: 2011  
 Primary     General  
 Other (specify)    Special-General

Election Cycle-to-Date  
**500.00**

Date of Receipt  
 M  M /  D  D /  Y  Y  Y  Y  
**09 13 2011**

**Transaction ID : SA11C.7168**

Amount of Each Receipt this Period  
**500.00**

**C.** Full Name (Last, First, Middle Initial)  
**ASSOCIATED BUILDERS AND CONTRACTORS POLITICAL ACTION COMMITTEE (ABC PAC)**

Mailing Address 4250 NORTH FAIRFAX DRIVE 9TH FLOOR

City State Zip Code  
ARLINGTON VA 22203

FEC ID number of contributing federal political committee. **C C00010421**

Name of Employer Occupation

Receipt For: 2011  
 Primary     General  
 Other (specify)    Special-General

Election Cycle-to-Date  
**5000.00**

Date of Receipt  
 M  M /  D  D /  Y  Y  Y  Y  
**08 31 2011**

**Transaction ID : SA11C.6508**

Amount of Each Receipt this Period  
**5000.00**

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

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

**11553.28**

**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 101
	<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: 2011  
 Primary  General  
 Other (specify) **Special-General**

Election Cycle-to-Date  
**5000.00**

Date of Receipt  
 M  M /  D  D /  Y  Y  Y  Y  
**09 / 12 / 2011**

**Transaction ID : SA11C.6768**

Amount of Each Receipt this Period  
**2000.00**

**B.** Full Name (Last, First, Middle Initial)  
**BATTLE BORN POLITICAL ACTION COMMITTEE**

Mailing Address **P.O. BOX 370667**

City **LAS VEGAS** State **NV** Zip Code **89137**

FEC ID number of contributing federal political committee. **C C00364596**

Name of Employer Occupation

Receipt For: 2011  
 Primary  General  
 Other (specify) **Special-General**

Election Cycle-to-Date  
**5000.00**

Date of Receipt  
 M  M /  D  D /  Y  Y  Y  Y  
**09 / 02 / 2011**

**Transaction ID : SA11C.6677**

Amount of Each Receipt this Period  
**5000.00**

**C.** Full Name (Last, First, Middle Initial)  
**BUILD POLITICAL ACTION COMMITTEE OF THE NATIONAL ASSOCIATION OF HOME BUILDERS (BUILDPAAC)**

Mailing Address **1201 15TH STREET, NW**

City **WASHINGTON** State **DC** Zip Code **20005**

FEC ID number of contributing federal political committee. **C C00000901**

Name of Employer Occupation

Receipt For: 2011  
 Primary  General  
 Other (specify) **Special-General**

Election Cycle-to-Date  
**2500.00**

Date of Receipt  
 M  M /  D  D /  Y  Y  Y  Y  
**09 / 02 / 2011**

**Transaction ID : SA11C.6642**

Amount of Each Receipt this Period  
**2500.00**

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

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

**9500.00**

**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 101
	<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)  
**Caesars Entertainment Political Action Committee**

Mailing Address **One Caesars Palace Drive**

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

FEC ID number of contributing federal political committee. **C C00239947**

Name of Employer Occupation

Receipt For: 2011  
 Primary  General  
 Other (specify) **Special-General**

Election Cycle-to-Date **5000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 31 / 2011**

**Transaction ID : SA11C.6502**

Amount of Each Receipt this Period  
**2500.00**

**B.** Full Name (Last, First, Middle Initial)  
**CALIFORNIA DAIRIES FEDERAL POLITICAL ACTION COMMITTEE**

Mailing Address **475 SOUTH TEGNER**

City **TURLOCK** State **CA** Zip Code **95380**

FEC ID number of contributing federal political committee. **C C00349746**

Name of Employer Occupation

Receipt For: 2011  
 Primary  General  
 Other (specify) **Special-General**

Election Cycle-to-Date **2500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 09 / 2011**

**Transaction ID : SA11C.6748**

Amount of Each Receipt this Period  
**2500.00**

**C.** Full Name (Last, First, Middle Initial)  
**CALPORTLAND COMPANY POLITICAL ACTION COMMITTEE (CPCC-PAC)**

Mailing Address **2025 E. FINANCIAL WAY SUITE 200**

City **GLENDORA** State **CA** Zip Code **91741**

FEC ID number of contributing federal political committee. **C C00389429**

Name of Employer Occupation

Receipt For: 2011  
 Primary  General  
 Other (specify) **Special-General**

Election Cycle-to-Date **2500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 12 / 2011**

**Transaction ID : SA11C.6767**

Amount of Each Receipt this Period  
**2500.00**

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

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

**7500.00**

**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 101
	<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)  
**CATHY M-RODGERS FOR CONGRESS**

Mailing Address **PO BOX 137**

City **SPOKANE** State **WA** Zip Code **99210**

FEC ID number of contributing federal political committee. **C C00390476**

Name of Employer Occupation

Receipt For: 2011  
 Primary     General  
 Other (specify)     Special-General

Election Cycle-to-Date **1627.09**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 12 / 2011**

**Transaction ID : SA11C.6789**

Amount of Each Receipt this Period  
**627.09**

In-kind -

**B.** Full Name (Last, First, Middle Initial)  
**CEMEX INC. EMPLOYEES POLITICAL ACTION COMMITTEE**

Mailing Address **920 MEMORIAL CITY WAY SUITE 100**

City **HOUSTON** State **TX** Zip Code **77024**

FEC ID number of contributing federal political committee. **C C00111880**

Name of Employer Occupation

Receipt For: 2011  
 Primary     General  
 Other (specify)     Special-General

Election Cycle-to-Date **1500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 31 / 2011**

**Transaction ID : SA11C.6499**

Amount of Each Receipt this Period  
**1500.00**

**C.** Full Name (Last, First, Middle Initial)  
**CENTURYLINK INC. EMPLOYEES POLITICAL ACTION COMMITTEE**

Mailing Address **150 FAYETTEVILLE STREET SUITE 2810**

City **RALEIGH** State **NC** Zip Code **27601**

FEC ID number of contributing federal political committee. **C C00419911**

Name of Employer Occupation

Receipt For: 2011  
 Primary     General  
 Other (specify)     Special-General

Election Cycle-to-Date **1500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 31 / 2011**

**Transaction ID : SA11C.6501**

Amount of Each Receipt this Period  
**1500.00**

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

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

**3627.09**

**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 101
	<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)  
**CONSERVATIVE & REPUBLICAN TOGETHER EQUALS RESULTS PAC**

Mailing Address 1717 N. IH-35

City State Zip Code  
ROUND ROCK TX 78664

FEC ID number of contributing federal political committee. **C** C00427401

Name of Employer Occupation

Receipt For: 2011  
 Primary  General  
 Other (specify) Special-General

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 / 26 / 2011

**Transaction ID : SA11C.6195**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**CONSERVATIVE NATIONAL COMMITTEE (FKA-CONGRESSIONAL MAJORITY COMMITTEE)**

Mailing Address PO BOX 101326

City State Zip Code  
ARLINGTON VA 22210

FEC ID number of contributing federal political committee. **C** C00139097

Name of Employer Occupation

Receipt For: 2011  
 Primary  General  
 Other (specify) Special-General

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 12 / 2011

**Transaction ID : SA11C.7142**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**FERTITTA ENTERTAINMENT PAC**

Mailing Address 2411W Sahara Ave

City State Zip Code  
LAS VEGAS NV 89102

FEC ID number of contributing federal political committee. **C** C00263731

Name of Employer Occupation

Receipt For: 2011  
 Primary  General  
 Other (specify) Special-General

Election Cycle-to-Date  
2500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 06 / 2011

**Transaction ID : SA11C.6705**

Amount of Each Receipt this Period  
2500.00

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

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

3750.00



**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 57 OF 101
	<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)  
**GOOD FUND, THE**

Mailing Address **PO BOX 3404**

City **ALEXANDRIA** State **VA** Zip Code **22302**

FEC ID number of contributing federal political committee. **C C00409185**

Name of Employer Occupation

Receipt For: 2011  
 Primary  General  
 Other (specify) **Special-General**

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 29 / 2011**

**Transaction ID : SA11C.6223**

Amount of Each Receipt this Period  
 2000.00

**B.** Full Name (Last, First, Middle Initial)  
**HellerHighwaterPAC**

Mailing Address **PO BOX 370672**

City **Las Vegas** State **NV** Zip Code **89137**

FEC ID number of contributing federal political committee. **C C00471607**

Name of Employer Occupation

Receipt For: 2011  
 Primary  General  
 Other (specify) **Special-General**

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 29 / 2011**

**Transaction ID : SA11C.6224**

Amount of Each Receipt this Period  
 1000.00

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

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

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

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 13 / 2011**

**Transaction ID : SA11C.7166**

Amount of Each Receipt this Period  
 1000.00

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

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

4000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 58 OF 101	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
**Amodei for Nevada**

**A.** Full Name (Last, First, Middle Initial)  
**HOOSIERS FOR ROKITA, INC.**

Mailing Address 7643 EAST U.S. 36

City AVON State IN Zip Code 46123

FEC ID number of contributing federal political committee. **C** C00476192

Name of Employer Occupation

Receipt For: 2011  
 Primary  General  
 Other (specify) Special-General

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 31 / 2011

**Transaction ID : SA11C.6527**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**HUMANA INC. POLITICAL ACTION COMMITTEE**

Mailing Address 975 F STREET, NW  
SUITE 550

City WASHINGTON State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00271007

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 10 / 2011

**Transaction ID : SA11C.6734**

Amount of Each Receipt this Period  
 2500.00

**C.** Full Name (Last, First, Middle Initial)  
**INDEPENDENT INSURANCE AGENTS & BROKERS OF AMERICA, INC. POLITICAL ACTION COMMITTEE (INSURP**

Mailing Address 412 FIRST STREET, SE, SUITE 300

City WASHINGTON State DC Zip Code 20003

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

Name of Employer Occupation

Receipt For: 2011  
 Primary  General  
 Other (specify) Special-General

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 02 / 2011

**Transaction ID : SA11C.6658**

Amount of Each Receipt this Period  
 2000.00

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

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

5500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 59 OF 101
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Amodei for Nevada**

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

Mailing Address 9295 PROTOTYPE DRIVE

City RENO State NV Zip Code 89511

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

Name of Employer Occupation

Receipt For: 2011  
 Primary  General  
 Other (specify) Special-General

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 26 / 2011

**Transaction ID : SA11C.6193**

Amount of Each Receipt this Period  
 1000.00

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

Mailing Address 9295 PROTOTYPE DRIVE

City RENO State NV Zip Code 89511

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

Name of Employer Occupation

Receipt For: 2011  
 Primary  General  
 Other (specify) Special-General

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 08 / 2011

**Transaction ID : SA11C.6714**

Amount of Each Receipt this Period  
 4000.00

**C.** Full Name (Last, First, Middle Initial)  
**JONES VARGAS CHARTERED PAC**

Mailing Address 300 E 2ND STREET  
SUITE 1510

City RENO State NV Zip Code 89504

FEC ID number of contributing federal political committee. **C** C00454926

Name of Employer Occupation

Receipt For: 2011  
 Primary  General  
 Other (specify) Special-General

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 08 / 2011

**Transaction ID : SA11C.6716**

Amount of Each Receipt this Period  
 1000.00

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

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

6000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 60 OF 101
	<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)  
**LANDRY FOR LOUISIANA**

Mailing Address **PO BOX 13816**

City **NEW IBERIA** State **LA** Zip Code **70562**

FEC ID number of contributing federal political committee. **C C00472712**

Name of Employer Occupation

Receipt For: 2011  
 Primary  General  
 Other (specify) Special-General

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 01 / 2011**

**Transaction ID : SA11C.6623**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**LIBERTY MUTUAL INSURANCE COMPANY - PAC**

Mailing Address **175 BERKELEY STREET**

City **BOSTON** State **MA** Zip Code **02117**

FEC ID number of contributing federal political committee. **C C00171843**

Name of Employer Occupation

Receipt For: 2011  
 Primary  General  
 Other (specify) Special-General

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 03 / 2011**

**Transaction ID : SA11C.7160**

Amount of Each Receipt this Period  
 1000.00

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

Mailing Address **2121 CRYSTAL DRIVE  
SUITE 100**

City **ARLINGTON** State **VA** Zip Code **22202**

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify) Special-General

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 29 / 2011**

**Transaction ID : SA11C.6226**

Amount of Each Receipt this Period  
 1000.00

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 61 OF 101
	<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)  
**MICHAEL BURGESS FOR CONGRESS**

Mailing Address **PO BOX 2334**

City **DENTON** State **TX** Zip Code **76202**

FEC ID number of contributing federal political committee. **C C00372532**

Name of Employer Occupation

Receipt For: 2011  
 Primary  General  
 Other (specify) **Special-General**

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 13 / 2011**

**Transaction ID : SA11C.6794**

Amount of Each Receipt this Period  
 \_\_\_\_\_  
**1000.00**

\_\_\_\_\_

**B.** Full Name (Last, First, Middle Initial)  
**NATIONAL ASSOCIATION OF CHAIN DRUG STORES POLITICAL ACTION COMMITTEE**

Mailing Address **413 N. LEE STREET**

City **ALEXANDRIA** State **VA** Zip Code **22314**

FEC ID number of contributing federal political committee. **C C00022368**

Name of Employer Occupation

Receipt For: 2011  
 Primary  General  
 Other (specify) **Special-General**

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 06 / 2011**

**Transaction ID : SA11C.6704**

Amount of Each Receipt this Period  
 \_\_\_\_\_  
**2000.00**

\_\_\_\_\_

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

Mailing Address **430 NORTH MICHIGAN AVENUE**

City **CHICAGO** State **IL** Zip Code **60611**

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

Name of Employer Occupation

Receipt For: 2011  
 Primary  General  
 Other (specify) **Special-General**

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 31 / 2011**

**Transaction ID : SA11C.6503**

Amount of Each Receipt this Period  
 \_\_\_\_\_  
**5000.00**

\_\_\_\_\_

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

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

\_\_\_\_\_

**8000.00**

\_\_\_\_\_

**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 62 OF 101	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
**Amodei for Nevada**

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

Mailing Address **1101 KING STREET  
SUITE 600**  
City **ALEXANDRIA** State **VA** Zip Code **22314**

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

Name of Employer Occupation

Receipt For: 2011  
 Primary  General  
 Other (specify) **Special-General**  
Election Cycle-to-Date **5000.00**

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
**10 / 03 / 2011**

**Transaction ID : SA11C.7303**

Amount of Each Receipt this Period  
**5000.00**

B. Full Name (Last, First, Middle Initial)  
**NATIONAL FEDERATION OF INDEPENDENT BUSINESS SAVE AMERICA'S FREE ENTERPRISE TRUST**

Mailing Address **1201 F ST NW SUITE 200**  
City **WASHINGTON** State **DC** Zip Code **20004**

FEC ID number of contributing federal political committee. **C C70002969**

Name of Employer Occupation

Receipt For: 2011  
 Primary  General  
 Other (specify) **Special-General**  
Election Cycle-to-Date **5000.00**

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
**08 / 26 / 2011**

**Transaction ID : SA11C.6189**

Amount of Each Receipt this Period  
**2500.00**

C. Full Name (Last, First, Middle Initial)  
**NATIONAL RESTAURANT ASSOCIATION PAC**

Mailing Address **1200 17TH STREET NW**  
City **WASHINGTON** State **DC** Zip Code **20036**

FEC ID number of contributing federal political committee. **C C00003764**

Name of Employer Occupation

Receipt For: 2011  
 Primary  General  
 Other (specify) **Special-General**  
Election Cycle-to-Date **5000.00**

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
**08 / 31 / 2011**

**Transaction ID : SA11C.6521**

Amount of Each Receipt this Period  
**5000.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>12500.00</b>
<b>TOTAL</b> 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 63 OF 101
	<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)  
**NEWMONT MINING CORPORATION PAC**

Mailing Address 101 CONSTITUTION AVE. NW SUITE 800

City WASHINGTON State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00206672

Name of Employer Occupation

Receipt For: 2011  
 Primary  General  
 Other (specify) Special-General

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 09 / 2011

**Transaction ID : SA11C.6739**

Amount of Each Receipt this Period  
5000.00

**B.** Full Name (Last, First, Middle Initial)  
**JON PORTER**

Mailing Address 1420 CYPRESS CREEK ROAD, #200-320

City CEDAR PARK State TX Zip Code 78613

FEC ID number of contributing federal political committee. **C** H4TX31016

Name of Employer Occupation  
FEDERAL GOVERNMENT US CONGRESSMAN

Receipt For: 2011  
 Primary  General  
 Other (specify) Special-General

Election Cycle-to-Date  
1493.57

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 14 / 2011

**Transaction ID : SA11C.7342**

Amount of Each Receipt this Period  
1493.57

In-kind - EVENT COSTS

**C.** Full Name (Last, First, Middle Initial)  
**R.J. REYNOLDS POLITICAL ACTION COMMITTEE; REYNOLDS AMERICAN INC.**

Mailing Address P. O. BOX 718

City WINSTON-SALEM State NC Zip Code 27102

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

Name of Employer Occupation

Receipt For: 2011  
 Primary  General  
 Other (specify) Special-General

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 06 / 2011

**Transaction ID : SA11C.6703**

Amount of Each Receipt this Period  
2500.00

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

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

8993.57

**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 64 OF 101
	<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)  
**RAGGIO POLITICAL FUND**

Mailing Address **PO BOX 281**

City **RENO** State **NV** Zip Code **89504**

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

Name of Employer Occupation

Receipt For: 2011  
 Primary  General  
 Other (specify) **Special-General**

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 25 / 2011**

**Transaction ID : SA11C.7033**

Amount of Each Receipt this Period  
**500.00**

**ALL FUNDS FROM FEDERALLY ALLOWABLE SOURCES**

**B.** Full Name (Last, First, Middle Initial)  
**SAIC, INC. VOLUNTARY POLITICAL ACTION COMMITTEE**

Mailing Address **10260 CAMPUS POINT DRIVE  
MS: A3**

City **SAN DIEGO** State **CA** Zip Code **92121**

FEC ID number of contributing federal political committee. **C C00300418**

Name of Employer Occupation

Receipt For: 2011  
 Primary  General  
 Other (specify) **Special-General**

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 15 / 2011**

**Transaction ID : SA11C.7162**

Amount of Each Receipt this Period  
**1000.00**

**C.** Full Name (Last, First, Middle Initial)  
**SEQUA CORP/CHROMALLOY GAS TURBINE LLC PAC (SEQUA/CHROMALLOY PAC)**

Mailing Address **300 BLAISDELL ROAD**

City **ORANGEBURG** State **NY** Zip Code **10962**

FEC ID number of contributing federal political committee. **C C00235911**

Name of Employer Occupation

Receipt For: 2011  
 Primary  General  
 Other (specify) **Special-General**

Election Cycle-to-Date **5000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 31 / 2011**

**Transaction ID : SA11C.6625**

Amount of Each Receipt this Period  
**5000.00**

**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: PAGE 65 OF 101  
(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)  
**THE COUNCIL OF INSURANCE AGENTS & BROKERS POLITICAL ACTION COMMITTEE**

Mailing Address **701 PENNSYLVANIA AVENUE, NW  
SUITE 750**

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

FEC ID number of contributing federal political committee. **C C00039578**

Name of Employer Occupation

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
**10 / 03 / 2011**

**Transaction ID : SA11C.7304**

Amount of Each Receipt this Period  
**1000.00**

**B.** Full Name (Last, First, Middle Initial)  
**THE NATIONAL REPUBLICAN TRUST PAC**

Mailing Address **2100 M STREET, NW, SUITE 170-340**

City **WASHINGTON** State **DC** Zip Code **20037**

FEC ID number of contributing federal political committee. **C C00455378**

Name of Employer Occupation

Receipt For: 2011  
 Primary     General  
 Other (specify) **Special-General**

Election Cycle-to-Date

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
**09 / 09 / 2011**

**Transaction ID : SA11C.7174**

Amount of Each Receipt this Period  
**500.00**

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

Mailing Address **600 13TH ST., NW  
SUITE 340**

City **WASHINGTON** State **DC** Zip Code **20005**

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

Name of Employer Occupation

Receipt For: 2011  
 Primary     General  
 Other (specify) **Special-General**

Election Cycle-to-Date

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
**09 / 01 / 2011**

**Transaction ID : SA11C.7177**

Amount of Each Receipt this Period  
**2000.00**

**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: (check only one)	PAGE 66 OF 101
	<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)  
**UNITED SERVICES AUTOMOBILE ASSOCIATION EMPLOYEE PAC - USAA EMPLOYEE PAC**

Mailing Address **9800 FREDERICKSBURG ROAD**

City State Zip Code  
**SAN ANTONIO TX 78288**

FEC ID number of contributing federal political committee. **C C00164145**

Name of Employer Occupation

Receipt For: 2011  
 Primary  General  
 Other (specify) Special-General  
 Election Cycle-to-Date **2500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 12 2011**

**Transaction ID : SA11C.6777**

Amount of Each Receipt this Period  
**2500.00**

Full Name (Last, First, Middle Initial)  
**WASHOE REPUBLICAN WOMEN**

Mailing Address **9335 Fremont Way**

City State Zip Code  
**Reno NV 89506**

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

Name of Employer Occupation

Receipt For: 2011  
 Primary  General  
 Other (specify) Special-General  
 Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 31 2011**

**Transaction ID : SA11C.7300**

Amount of Each Receipt this Period  
**500.00**  
 ALL FUNDS ARE FEDERALLY ALLOWABLE

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

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>3000.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	<b>108645.94</b>

**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 101	
	<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) <b>A. A Catered Affaire</b>		Date of Disbursement M M / D D / Y Y Y Y <b>08 / 31 / 2011</b>
Mailing Address <b>2811 South Carson Street</b>		Amount of Each Disbursement this Period <b>300.00</b> <b>Transaction ID : SB17.7196</b>
City <b>Carson City</b> State <b>NV</b> Zip Code <b>89701</b>	Purpose of Disbursement <b>Event Costs</b>	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <b>Special-General</b>	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. American Express Collections</b>		Date of Disbursement M M / D D / Y Y Y Y <b>09 / 06 / 2011</b>
Mailing Address <b>P.O. Box 981540</b>		Amount of Each Disbursement this Period <b>149.79</b> <b>Transaction ID : SB17.7215</b>
City <b>El paso</b> State <b>TX</b> Zip Code <b>79998</b>	Purpose of Disbursement <b>Merchant Fees</b>	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <b>Special-General</b>	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. American Express Collections</b>		Date of Disbursement M M / D D / Y Y Y Y <b>09 / 09 / 2011</b>
Mailing Address <b>P.O. Box 981540</b>		Amount of Each Disbursement this Period <b>4.95</b> <b>Transaction ID : SB17.7226</b>
City <b>El paso</b> State <b>TX</b> Zip Code <b>79998</b>	Purpose of Disbursement <b>Merchant Fees</b>	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <b>Special-General</b>	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>454.74</b>
<b>TOTAL</b> 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 101			
	<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) <b>A. American Express Collections</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2011
Mailing Address P.O. Box 981540		Amount of Each Disbursement this Period 4.95
City El paso	State TX	
Zip Code 79998	Purpose of Disbursement Merchant fees	Transaction ID : SB17.7293
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-General	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Mark Eugene Amodei</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 13 / 2011
Mailing Address 503 W Sunset		Amount of Each Disbursement this Period 2886.96
City Carson City	State NV	
Zip Code 89703	Purpose of Disbursement Expense Reimbursement	Transaction ID : SB17.7228
Candidate Name	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-General	
State: NV District: 02		

Full Name (Last, First, Middle Initial) <b>c. Martin Anderson</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 26 / 2011
Mailing Address 893 MICA DR SUITE 201		Amount of Each Disbursement this Period 500.00
City Carson City	State NV	
Zip Code 89705	Purpose of Disbursement In-kind - EVENT COSTS	Transaction ID : SB17.7325
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-General	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3391.91
<b>TOTAL</b> 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 101			
	<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) <b>A. AT &amp; T</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 21 / 2011
Mailing Address PO Box 5025		Amount of Each Disbursement this Period 444.86
City Carol Stream	State IL	
Zip Code 60197	Purpose of Disbursement Telephone expense	Transaction ID : SB17.7243
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-General	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. AT &amp; T</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 26 / 2011
Mailing Address PO Box 5025		Amount of Each Disbursement this Period 226.79
City Carol Stream	State IL	
Zip Code 60197	Purpose of Disbursement Telephone expenses	Transaction ID : SB17.7292
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-General	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Authnet Gateway</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 01 / 2011
Mailing Address P.O. Box 8999		Amount of Each Disbursement this Period 33.60
City San Francisco	State CA	
Zip Code 94128	Purpose of Disbursement Bank charges	Transaction ID : SB17.7210
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-General	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	705.25
<b>TOTAL</b> 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 101	
	<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) <b>A. Kim Bacchus</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 03 / 2011</b>
Mailing Address <b>2702 lakeridge SHores East</b>		Amount of Each Disbursement this Period <b>44.86</b>
City <b>Reno</b> State <b>NV</b> Zip Code <b>89519</b>	Purpose of Disbursement <b>Expense Reimbursement</b>	
Candidate Name		<b>Transaction ID : SB17.7258</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <b>Special-General</b>	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>B. Biggest Little Investments</b>		Date of Disbursement M M / D D / Y Y Y Y <b>08 / 31 / 2011</b>
Mailing Address <b>3702 S Virginia</b>		Amount of Each Disbursement this Period <b>1062.50</b>
City <b>Reno</b> State <b>NV</b> Zip Code <b>89502</b>	Purpose of Disbursement <b>Rent</b>	
Candidate Name		<b>Transaction ID : SB17.7197</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <b>Special-General</b>	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>c. Business Computer Rentals</b>		Date of Disbursement M M / D D / Y Y Y Y <b>09 / 15 / 2011</b>
Mailing Address <b>1430 Greg St # 511</b>		Amount of Each Disbursement this Period <b>619.42</b>
City <b>Sparks</b> State <b>NV</b> Zip Code <b>89431</b>	Purpose of Disbursement <b>Computer Rentals</b>	
Candidate Name		<b>Transaction ID : SB17.7240</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <b>Special-General</b>	
State: District:	Category/Type	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>1726.78</b>
<b>TOTAL</b> 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 101	
	<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) <b>A. Casey Neilon &amp; Associates, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y <b>09 / 15 / 2011</b>
Mailing Address <b>503 N Division St</b>		Amount of Each Disbursement this Period <b>4000.00</b> <b>Transaction ID : SB17.7187</b>
City <b>Carson City</b> State <b>NV</b> Zip Code <b>89703</b>	Purpose of Disbursement <b>Professional Fees</b>	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <b>Special-General</b>	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Casey Neilon &amp; Associates, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 03 / 2011</b>
Mailing Address <b>503 N Division St</b>		Amount of Each Disbursement this Period <b>4000.00</b> <b>Transaction ID : SB17.7262</b>
City <b>Carson City</b> State <b>NV</b> Zip Code <b>89703</b>	Purpose of Disbursement <b>Professional Fees</b>	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <b>Special-General</b>	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. CATHY M-RODGERS FOR CONGRESS</b>		Date of Disbursement M M / D D / Y Y Y Y <b>09 / 12 / 2011</b>
Mailing Address <b>PO BOX 137</b>		Amount of Each Disbursement this Period <b>627.09</b> <b>Transaction ID : SB17.6790</b>
City <b>SPOKANE</b> State <b>WA</b> Zip Code <b>99210</b>	Purpose of Disbursement <b>In-kind -</b>	
Candidate Name	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <b>Special-General</b>	
State: <b>WA</b> District: <b>05</b>		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>8627.09</b>
<b>TOTAL</b> 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 101	
	<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) <b>A. JAMES COLGAN</b>		Date of Disbursement MM / DD / YYYY 08 / 26 / 2011
Mailing Address 412 W JOHN ST		Amount of Each Disbursement this Period 1800.00 <b>Transaction ID : SB17.7337</b>
City CARSON CITY	State NV	
Zip Code 89703	Purpose of Disbursement In-kind - EVENT COSTS	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-General	State: District:	

Full Name (Last, First, Middle Initial) <b>B. John Cross</b>		Date of Disbursement MM / DD / YYYY 10 / 03 / 2011
Mailing Address 12526 High Bluff Drive		Amount of Each Disbursement this Period 615.79 <b>Transaction ID : SB17.7255</b>
City San Diego	State CA	
Zip Code 92130	Purpose of Disbursement Travel	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-General	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Peter DeMarco</b>		Date of Disbursement MM / DD / YYYY 09 / 01 / 2011
Mailing Address 2916 Sierra Mills lane		Amount of Each Disbursement this Period 2500.00 <b>Transaction ID : SB17.7287</b>
City Sacramento	State CA	
Zip Code 95864	Purpose of Disbursement Consulting fees	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-General	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4915.79
<b>TOTAL</b> 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 101			
	<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) <b>A. Peter DeMarco</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 01 / 2011
Mailing Address 2916 Sierra Mills lane		Amount of Each Disbursement this Period 570.77
City Sacramento	State CA	
Zip Code 95864		
Purpose of Disbursement Travel Expenses		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-General	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) <b>B. Peter DeMarco</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 16 / 2011
Mailing Address 2916 Sierra Mills lane		Amount of Each Disbursement this Period 2500.00
City Sacramento	State CA	
Zip Code 95864		
Purpose of Disbursement Consulting fees		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-General	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) <b>c. El Dorado Hotel</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 08 / 2011
Mailing Address PO Box 3399		Amount of Each Disbursement this Period 1324.40
City Reno	State NV	
Zip Code 89505		
Purpose of Disbursement Housing Costs		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-General	
State: _____	District: _____	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4395.17
<b>TOTAL</b> 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 101	
	<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) <b>A. El Dorado Hotel</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 08 / 2011
Mailing Address PO Box 3399		Amount of Each Disbursement this Period 331.52
City Reno	State NV	
Zip Code 89505	Purpose of Disbursement Housing Costs	Transaction ID : SB17.7286
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-General	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. El Dorado Hotel</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2011
Mailing Address PO Box 3399		Amount of Each Disbursement this Period 2337.64
City Reno	State NV	
Zip Code 89505	Purpose of Disbursement Housing costs	Transaction ID : SB17.7253
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-General	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. JIM ENDRES</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 01 / 2011
Mailing Address 14865 LA BRIANA		Amount of Each Disbursement this Period 455.25
City RENO	State NV	
Zip Code 89511	Purpose of Disbursement In-kind - EVENT COSTS	Transaction ID : SB17.7308
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-General	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3124.41
<b>TOTAL</b> 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 101			
	<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) <b>A. Enterprise Rent a Car</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 14 / 2011
Mailing Address 3005 Mill St		Amount of Each Disbursement this Period 904.00
City Reno	State NV	
Zip Code 89502	Purpose of Disbursement Rental Car Expenses	<b>Transaction ID : SB17.7232</b>
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-General	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Enterprise Rent a Car</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2011
Mailing Address 3005 Mill St		Amount of Each Disbursement this Period 1044.06
City Reno	State NV	
Zip Code 89502	Purpose of Disbursement Rental car expenses	<b>Transaction ID : SB17.7238</b>
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-General	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Enterprise Rent a Car</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 27 / 2011
Mailing Address 3005 Mill St		Amount of Each Disbursement this Period 703.28
City Reno	State NV	
Zip Code 89502	Purpose of Disbursement Rental car	<b>Transaction ID : SB17.7294</b>
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-General	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2651.34
<b>TOTAL</b> 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 101			
	<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) <b>A. John Farahi</b>		Date of Disbursement M M / D D / Y Y Y Y <b>08 / 25 / 2011</b>
Mailing Address <b>3800 S. Virginia St.</b>		Amount of Each Disbursement this Period <b>894.47</b> <b>Transaction ID : SB17.7339</b>
City <b>Reno</b> State <b>NV</b> Zip Code <b>89502</b>	Purpose of Disbursement <b>In-kind - EVENT COSTS</b>	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <b>2011</b> <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <b>Special-General</b>	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Megan Fielder</b>		Date of Disbursement M M / D D / Y Y Y Y <b>09 / 08 / 2011</b>
Mailing Address <b>3216 Winder Drive</b>		Amount of Each Disbursement this Period <b>4500.00</b> <b>Transaction ID : SB17.7218</b>
City <b>Bridgewater</b> State <b>NJ</b> Zip Code <b>08807</b>	Purpose of Disbursement <b>Consulting fees</b>	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <b>2011</b> <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <b>Special-General</b>	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Megan Fielder</b>		Date of Disbursement M M / D D / Y Y Y Y <b>09 / 08 / 2011</b>
Mailing Address <b>3216 Winder Drive</b>		Amount of Each Disbursement this Period <b>305.30</b> <b>Transaction ID : SB17.7221</b>
City <b>Bridgewater</b> State <b>NJ</b> Zip Code <b>08807</b>	Purpose of Disbursement <b>Expense Reimbursement</b>	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <b>2011</b> <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <b>Special-General</b>	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>5699.77</b>
<b>TOTAL</b> 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 101	
	<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) <b>A. FLS Connect</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 13 / 2011
Mailing Address 7300 Hudson Blvd, Suite 270,		Amount of Each Disbursement this Period 2210.60
City Saint Paul State MN Zip Code 55128	Transaction ID : SB17.7230	
Purpose of Disbursement Canvas Calls	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-General	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. JOHN FRANKOVICH</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 01 / 2011
Mailing Address 100 W LIBERTY		Amount of Each Disbursement this Period 453.00
City RENO State NV Zip Code 89501	Transaction ID : SB17.7311	
Purpose of Disbursement In-kind - EVENT COSTS	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-General	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Robert Gastonguay</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 31 / 2011
Mailing Address 2210 Sugar		Amount of Each Disbursement this Period 668.54
City Reno State NV Zip Code 89511	Transaction ID : SB17.7200	
Purpose of Disbursement Expense reimbursement	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-General	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3332.14
<b>TOTAL</b> 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 101			
	<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) <b>A. Robert Gastonguay</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 21 / 2011	
Mailing Address 2210 Sugar			Amount of Each Disbursement this Period 266.96	
City Reno	State NV	Zip Code 89511	Transaction ID : SB17.7245	
Purpose of Disbursement expense Reimbursement		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-General			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Grass Roots 2.0</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 08 / 2011	
Mailing Address PO Box 19553			Amount of Each Disbursement this Period 429.55	
City Reno	State NV	Zip Code 89511	Transaction ID : SB17.7222	
Purpose of Disbursement Phone canvassing		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-General			
State: District:				

Full Name (Last, First, Middle Initial) <b>c. Lynne Haueter</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 08 / 2011	
Mailing Address 27516 Artine Drive			Amount of Each Disbursement this Period 2273.18	
City Santa Clarita	State CA	Zip Code 91350	Transaction ID : SB17.7223	
Purpose of Disbursement Expense reimbursement - GOTV		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-General			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2969.69
<b>TOTAL</b> 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 101	
	<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) <b>A. Lynne Haueter</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 03 / 2011</b>
Mailing Address <b>27516 Artine Drive</b>		Amount of Each Disbursement this Period <b>4517.29</b> <b>Transaction ID : SB17.7251</b>
City <b>Santa Clarita</b> State <b>CA</b> Zip Code <b>91350</b>	Purpose of Disbursement <b>Travel Reimburment - GOTV Volunteers</b>	
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) <b>B. AJ HICKS</b>		Date of Disbursement M M / D D / Y Y Y Y <b>09 / 01 / 2011</b>
Mailing Address <b>100 W LIBERTY</b>		Amount of Each Disbursement this Period <b>453.00</b> <b>Transaction ID : SB17.7314</b>
City <b>RENO</b> State <b>NV</b> Zip Code <b>89501</b>	Purpose of Disbursement <b>In-kind - EVENT COSTS</b>	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <b>Special-General</b>	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Jaron Hilderbrand</b>		Date of Disbursement M M / D D / Y Y Y Y <b>08 / 31 / 2011</b>
Mailing Address <b>206 White Rose Drive</b>		Amount of Each Disbursement this Period <b>1000.00</b> <b>Transaction ID : SB17.7195</b>
City <b>Sparks</b> State <b>NV</b> Zip Code <b>89436</b>	Purpose of Disbursement <b>Payroll</b>	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <b>Special-General</b>	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>5970.29</b>
<b>TOTAL</b> 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 101			
	<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) <b>A. Jaron Hilderbrand</b>		Date of Disbursement M M / D D / Y Y Y Y <b>08 / 31 / 2011</b>
Mailing Address <b>206 White Rose Drive</b>		Amount of Each Disbursement this Period <b>336.33</b>
City <b>Sparks</b>	State <b>NV</b>	
Zip Code <b>89436</b>	Purpose of Disbursement <b>Expense Reimbursement</b>	<b>Transaction ID : SB17.7203</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <b>Special-General</b>	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Jaron Hilderbrand</b>		Date of Disbursement M M / D D / Y Y Y Y <b>09 / 15 / 2011</b>
Mailing Address <b>206 White Rose Drive</b>		Amount of Each Disbursement this Period <b>1000.00</b>
City <b>Sparks</b>	State <b>NV</b>	
Zip Code <b>89436</b>	Purpose of Disbursement <b>Payroll</b>	<b>Transaction ID : SB17.7235</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <b>Special-General</b>	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Jaron Hilderbrand</b>		Date of Disbursement M M / D D / Y Y Y Y <b>09 / 15 / 2011</b>
Mailing Address <b>206 White Rose Drive</b>		Amount of Each Disbursement this Period <b>730.19</b>
City <b>Sparks</b>	State <b>NV</b>	
Zip Code <b>89436</b>	Purpose of Disbursement <b>Expense Reimbursement</b>	<b>Transaction ID : SB17.7237</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <b>Special-General</b>	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>2066.52</b>
<b>TOTAL</b> 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 101			
	<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) <b>A. Jaron Hilderbrand</b>		Date of Disbursement M M / D D / Y Y Y Y <b>09 / 26 / 2011</b>
Mailing Address <b>206 White Rose Drive</b>		Amount of Each Disbursement this Period <b>653.51</b>
City <b>Sparks</b>	State <b>NV</b>	Zip Code <b>89436</b>
Purpose of Disbursement <b>Travel reimbursement</b>	Category/Type	
Candidate Name	Transaction ID : <b>SB17.7291</b>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <b>2011</b> <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <b>Special-General</b>	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Jaron Hilderbrand</b>		Date of Disbursement M M / D D / Y Y Y Y <b>09 / 30 / 2011</b>
Mailing Address <b>206 White Rose Drive</b>		Amount of Each Disbursement this Period <b>1000.00</b>
City <b>Sparks</b>	State <b>NV</b>	Zip Code <b>89436</b>
Purpose of Disbursement <b>Payroll</b>	Category/Type	
Candidate Name	Transaction ID : <b>SB17.7247</b>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <b>2011</b> <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <b>Special-General</b>	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. JM Studio</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 03 / 2011</b>
Mailing Address <b>PO Box 1666</b>		Amount of Each Disbursement this Period <b>978.64</b>
City <b>Reno</b>	State <b>NV</b>	Zip Code <b>89703</b>
Purpose of Disbursement <b>Website Design</b>	Category/Type	
Candidate Name	Transaction ID : <b>SB17.7254</b>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <b>2011</b> <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <b>Special-General</b>	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>2632.15</b>
<b>TOTAL</b> 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 101			
	<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) <b>A. King Strategic Communications</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 01 / 2011
Mailing Address 4605 Morse Road		Amount of Each Disbursement this Period 6443.58
City Gahanna State OH Zip Code 43230	Purpose of Disbursement Advertising	
Candidate Name	Category/Type	<b>Transaction ID : SB17.7208</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-General	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Larry Gatlin Enterprises</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2011
Mailing Address 9901 Brodie Lane		Amount of Each Disbursement this Period 2735.37
City Austin State TX Zip Code 78748	Purpose of Disbursement Event costs	
Candidate Name	Category/Type	<b>Transaction ID : SB17.7260</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-General	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Alan List</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 25 / 2011
Mailing Address 2000 N Meridian Rd		Amount of Each Disbursement this Period 209.38
City Lovelock State NV Zip Code 89419	Purpose of Disbursement In-kind - EVENT COSTS	
Candidate Name	Category/Type	<b>Transaction ID : SB17.7323</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-General	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	9388.38
<b>TOTAL</b> 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 101			
	<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) <b>A. McLaughlin and Associates</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 25 / 2011		
Mailing Address 566 South Route 303			Amount of Each Disbursement this Period 47000.00		
City Blauvelt	State NY	Zip Code 10913	Transaction ID : SB17.7190		
Purpose of Disbursement Media Buys		Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-General				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. McLaughlin and Associates</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 31 / 2011		
Mailing Address 566 South Route 303			Amount of Each Disbursement this Period 16800.00		
City Blauvelt	State NY	Zip Code 10913	Transaction ID : SB17.7205		
Purpose of Disbursement Media Buys		Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-General				
State: District:					

Full Name (Last, First, Middle Initial) <b>c. McLaughlin and Associates</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 01 / 2011		
Mailing Address 566 South Route 303			Amount of Each Disbursement this Period 60000.00		
City Blauvelt	State NY	Zip Code 10913	Transaction ID : SB17.7204		
Purpose of Disbursement Media Buys		Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-General				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	123800.00
<b>TOTAL</b> 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 101			
	<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) <b>A. McLaughlin and Associates</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 09 / 2011
Mailing Address 566 South Route 303		Amount of Each Disbursement this Period 21600.00 <b>Transaction ID : SB17.7227</b>
City Blauvelt State NY Zip Code 10913	Purpose of Disbursement Media Buys	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-General	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. McLaughlin and Associates</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2011
Mailing Address 566 South Route 303		Amount of Each Disbursement this Period 7305.00 <b>Transaction ID : SB17.7252</b>
City Blauvelt State NY Zip Code 10913	Purpose of Disbursement Polling costs	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-General	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. McLaughlin and Associates</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2011
Mailing Address 566 South Route 303		Amount of Each Disbursement this Period 798.93 <b>Transaction ID : SB17.7257</b>
City Blauvelt State NY Zip Code 10913	Purpose of Disbursement Expense Reimbursement	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-General	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	29703.93
<b>TOTAL</b> 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 101			
	<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	
<b>A. Minor Advertising</b>		M M / D D / Y Y Y Y 08 / 31 / 2011	
Mailing Address 6170 Ridgeview Ct		Amount of Each Disbursement this Period	
City Reno State NV Zip Code 89519		7961.88	
Purpose of Disbursement Advertising		Transaction ID : SB17.7201	
Candidate Name		Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-General		
State: District:			

Full Name (Last, First, Middle Initial)		Date of Disbursement	
<b>B. Minor Advertising</b>		M M / D D / Y Y Y Y 09 / 21 / 2011	
Mailing Address 6170 Ridgeview Ct		Amount of Each Disbursement this Period	
City Reno State NV Zip Code 89519		888.43	
Purpose of Disbursement Advertising Costs		Transaction ID : SB17.7242	
Candidate Name		Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-General		
State: District:			

Full Name (Last, First, Middle Initial)		Date of Disbursement	
<b>c. Nevada Payroll Services</b>		M M / D D / Y Y Y Y 08 / 30 / 2011	
Mailing Address 8555 Double R Blvd #106		Amount of Each Disbursement this Period	
City Reno State NV Zip Code 89511		149.50	
Purpose of Disbursement Payroll expenses		Transaction ID : SB17.7194	
Candidate Name		Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-General		
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	8999.81
<b>TOTAL</b> 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 101			
	<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) <b>A. Nevada Payroll Services</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2011
Mailing Address 8555 Double R Blvd #106		Amount of Each Disbursement this Period 149.50 <b>Transaction ID : SB17.7236</b>
City Reno State NV Zip Code 89511	Purpose of Disbursement Payroll expenses	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-General	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Nevada Payroll Services</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2011
Mailing Address 8555 Double R Blvd #106		Amount of Each Disbursement this Period 149.50 <b>Transaction ID : SB17.7248</b>
City Reno State NV Zip Code 89511	Purpose of Disbursement Payroll expenses	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-General	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. MIKE PAGNI</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 01 / 2011
Mailing Address 100 W LIBERTY		Amount of Each Disbursement this Period 453.00 <b>Transaction ID : SB17.7317</b>
City RENO State NV Zip Code 89511	Purpose of Disbursement In-kind - EVENT COSTS	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-General	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	752.00
<b>TOTAL</b> 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 87 OF 101			
	<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) <b>A. JON PORTER</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 14 / 2011
Mailing Address 1420 CYPRESS CREEK ROAD, #200-320		Amount of Each Disbursement this Period 1493.57
City CEDAR PARK State TX Zip Code 78613	Purpose of Disbursement In-kind - EVENT COSTS	
Candidate Name	Category/Type	Transaction ID : SB17.7343
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 31	Disbursement For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-General	

Full Name (Last, First, Middle Initial) <b>B. JAMES SERGEANT</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 26 / 2011
Mailing Address 1400 Medical Parkway		Amount of Each Disbursement this Period 400.00
City CARSON CITY State NV Zip Code 89703	Purpose of Disbursement In-kind - EVENT COSTS	
Candidate Name	Category/Type	Transaction ID : SB17.7331
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-General	

Full Name (Last, First, Middle Initial) <b>c. Sign Pro</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 31 / 2011
Mailing Address 1501 North Carson		Amount of Each Disbursement this Period 1961.42
City Carson City State NV Zip Code 89706	Purpose of Disbursement Signage	
Candidate Name	Category/Type	Transaction ID : SB17.7183
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-General	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3854.99
<b>TOTAL</b> 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 88 OF 101			
	<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) <b>A. Southwest Airlines</b>		Date of Disbursement M M / D D / Y Y Y Y <b>08 / 26 / 2011</b>
Mailing Address P.O. Box 36647-1CR		Amount of Each Disbursement this Period <b>667.80</b>
City Dallas	State TX	
Zip Code 73235	Purpose of Disbursement Travel	<b>Transaction ID : SB17.7191</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-General	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Southwest Airlines</b>		Date of Disbursement M M / D D / Y Y Y Y <b>09 / 06 / 2011</b>
Mailing Address P.O. Box 36647-1CR		Amount of Each Disbursement this Period <b>218.40</b>
City Dallas	State TX	
Zip Code 73235	Purpose of Disbursement Travel	<b>Transaction ID : SB17.7214</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-General	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Southwest Airlines</b>		Date of Disbursement M M / D D / Y Y Y Y <b>09 / 15 / 2011</b>
Mailing Address P.O. Box 36647-1CR		Amount of Each Disbursement this Period <b>1057.50</b>
City Dallas	State TX	
Zip Code 73235	Purpose of Disbursement Travel Expenses	<b>Transaction ID : SB17.7239</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-General	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>1943.70</b>
<b>TOTAL</b> 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 89 OF 101			
	<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) <b>A. Stutzman Public Affairs</b>		Date of Disbursement M M / D D / Y Y Y Y <b>08 / 31 / 2011</b>
Mailing Address <b>1415 L Street</b>		Amount of Each Disbursement this Period <b>1205.27</b>
City <b>Sacramento</b> State <b>CA</b> Zip Code <b>95814</b>	Purpose of Disbursement <b>Travel Expenses</b>	
Candidate Name	Category/Type	<b>Transaction ID : SB17.7186</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <b>Special-General</b>	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Stutzman Public Affairs</b>		Date of Disbursement M M / D D / Y Y Y Y <b>09 / 21 / 2011</b>
Mailing Address <b>1415 L Street</b>		Amount of Each Disbursement this Period <b>33000.00</b>
City <b>Sacramento</b> State <b>CA</b> Zip Code <b>95814</b>	Purpose of Disbursement <b>Media Production</b>	
Candidate Name	Category/Type	<b>Transaction ID : SB17.7244</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <b>Special-General</b>	State: District:	

Full Name (Last, First, Middle Initial) <b>c. The Winnemucca Inn</b>		Date of Disbursement M M / D D / Y Y Y Y <b>09 / 06 / 2011</b>
Mailing Address <b>7410 West Winnemucca Blvd</b>		Amount of Each Disbursement this Period <b>228.48</b>
City <b>Winnemucca</b> State <b>NV</b> Zip Code <b>89445</b>	Purpose of Disbursement <b>Travel</b>	
Candidate Name	Category/Type	<b>Transaction ID : SB17.7289</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <b>Special-General</b>	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>34433.75</b>
<b>TOTAL</b> 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 90 OF 101	
	<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) <b>A. Robin Titus</b>		Date of Disbursement M M / D D / Y Y Y Y <b>08 / 25 / 2011</b>
Mailing Address <b>PO Box 377</b>		Amount of Each Disbursement this Period <b>400.00</b> <b>Transaction ID : SB17.7321</b>
City <b>Wellington</b> State <b>NV</b> Zip Code <b>89444</b>	Purpose of Disbursement <b>In-kind - EVENT COSTS</b>	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <b>Special-General</b>	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. USAirways</b>		Date of Disbursement M M / D D / Y Y Y Y <b>09 / 21 / 2011</b>
Mailing Address <b>4000 E. Sky Harbor Blvd.</b>		Amount of Each Disbursement this Period <b>556.40</b> <b>Transaction ID : SB17.7295</b>
City <b>Phoeniz</b> State <b>AZ</b> Zip Code <b>85034</b>	Purpose of Disbursement	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <b>Special-General</b>	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. USAirways</b>		Date of Disbursement M M / D D / Y Y Y Y <b>09 / 28 / 2011</b>
Mailing Address <b>4000 E. Sky Harbor Blvd.</b>		Amount of Each Disbursement this Period <b>556.40</b> <b>Transaction ID : SB17.7246</b>
City <b>Phoeniz</b> State <b>AZ</b> Zip Code <b>85034</b>	Purpose of Disbursement <b>Travel</b>	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <b>Special-General</b>	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>1512.80</b>
<b>TOTAL</b> 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 101			
	<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) <b>A. USAirways</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 03 / 2011</b>
Mailing Address <b>4000 E. Sky Harbor Blvd.</b>		Amount of Each Disbursement this Period <b>944.80</b>
City <b>Phoeniz</b> State <b>AZ</b> Zip Code <b>85034</b>	Purpose of Disbursement <b>Travel</b>	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <b>2011</b> <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <b>Special-General</b>	Transaction ID : <b>SB17.7259</b>
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Wells Fargo</b>		Date of Disbursement M M / D D / Y Y Y Y <b>08 / 25 / 2011</b>
Mailing Address <b>PO Box 6995</b>		Amount of Each Disbursement this Period <b>20.00</b>
City <b>POrtland</b> State <b>OR</b> Zip Code <b>97228</b>	Purpose of Disbursement <b>Wire fees</b>	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <b>2011</b> <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <b>Special-General</b>	Transaction ID : <b>SB17.7189</b>
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Wells Fargo</b>		Date of Disbursement M M / D D / Y Y Y Y <b>08 / 31 / 2011</b>
Mailing Address <b>PO Box 6995</b>		Amount of Each Disbursement this Period <b>20.00</b>
City <b>POrtland</b> State <b>OR</b> Zip Code <b>97228</b>	Purpose of Disbursement <b>Wire Fee</b>	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <b>2011</b> <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <b>Special-General</b>	Transaction ID : <b>SB17.7206</b>
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>984.80</b>
<b>TOTAL</b> 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 101			
	<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) <b>A. Wells Fargo</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 01 / 2011
Mailing Address PO Box 6995		Amount of Each Disbursement this Period 20.00
City PORtland	State OR	
Zip Code 97228	Purpose of Disbursement Wire Fee	Transaction ID : SB17.7207
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-General	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Wells Fargo</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 09 / 2011
Mailing Address PO Box 6995		Amount of Each Disbursement this Period 23.00
City PORtland	State OR	
Zip Code 97228	Purpose of Disbursement Bank fees	Transaction ID : SB17.7225
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-General	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Wells Fargo</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 14 / 2011
Mailing Address PO Box 6995		Amount of Each Disbursement this Period 374.88
City PORtland	State OR	
Zip Code 97228	Purpose of Disbursement Merchant fees	Transaction ID : SB17.7234
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-General	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	417.88
<b>TOTAL</b> 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 101			
	<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) <b>A. Wells Fargo</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 27 / 2011
Mailing Address PO Box 6995		Amount of Each Disbursement this Period 22.00
City Portland	State OR	
Zip Code 97228	Purpose of Disbursement Bank charges	Transaction ID : SB17.7296
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-General	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Will Milligan Events</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2011
Mailing Address 601 13th St NW		Amount of Each Disbursement this Period 12792.17
City Washington	State DC	
Zip Code 20005	Purpose of Disbursement Fundraising costs	Transaction ID : SB17.7249
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-General	
State: District:		

Full Name (Last, First, Middle Initial) <b>C.</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	
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	12814.17
<b>TOTAL</b> This Period (last page this line number only).....	281269.20

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

(Use separate schedule(s) for each numbered line)	PAGE 94 OF 101
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**Amodei for Nevada**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>American Strategies</b>	Nature of Debt (Purpose): Expense Reimbursement
Mailing Address 675 Sierra Rose Drive	
City State Zip Code Reno NV 89511	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID : SD10.7263</b>	
Amount Incurred This Period 10445.31	Payment This Period 0.00	Outstanding Balance at Close of This Period 10445.31

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>American Strategies</b>	Nature of Debt (Purpose): Professional Fees
Mailing Address 675 Sierra Rose Drive	
City State Zip Code Reno NV 89511	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID : SD10.7265</b>	
Amount Incurred This Period 20000.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 20000.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Blue Print Advisors</b>	Nature of Debt (Purpose): Professional Fees
Mailing Address 4201 Yuma Street	
City State Zip Code Washington DC DC 20016	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID : SD10.7277</b>	
Amount Incurred This Period 5000.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 5000.00

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	35445.31
2) <b>TOTALS</b> This Period (last page this line number only) .....	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	0.00
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	0.00

**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 <b>Casey Neilon &amp; Associates, LLC</b>	Nature of Debt (Purpose): Accounting fees
Mailing Address 503 N Division St	
City State Zip Code Carson City NV 89703	

Outstanding Balance Beginning This Period 4000.00	<b>Transaction ID : SD10.6638</b>	
Amount Incurred This Period 0.00	Payment This Period 4000.00	Outstanding Balance at Close of This Period 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>DeBug Computer</b>	Nature of Debt (Purpose): Computer Purchase
Mailing Address PO Box 2866	
City State Zip Code Carson City NV 89702	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID : SD10.7271</b>	
Amount Incurred This Period 1778.71	Payment This Period 0.00	Outstanding Balance at Close of This Period 1778.71

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>EI Dorado Hotel</b>	Nature of Debt (Purpose): Housing
Mailing Address PO Box 3399	
City State Zip Code Reno NV 89505	

Outstanding Balance Beginning This Period 1324.40	<b>Transaction ID : SD10.6567</b>	
Amount Incurred This Period 0.00	Payment This Period 1324.40	Outstanding Balance at Close of This Period 0.00

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	1778.71
2) <b>TOTALS</b> This Period (last page this line number only) .....	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	0.00
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	0.00

**SCHEDULE D (FEC Form 3)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 96 OF 101
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**Amodei for Nevada**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>EI Dorado Hotel</b>	Nature of Debt (Purpose): Event Costs
Mailing Address PO Box 3399	
City State Zip Code Reno NV 89505	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID : SD10.7275</b>	
Amount Incurred This Period 2076.67	Payment This Period 0.00	Outstanding Balance at Close of This Period 2076.67

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>EI Dorado Hotel</b>	Nature of Debt (Purpose): Housing Costs
Mailing Address PO Box 3399	
City State Zip Code Reno NV 89505	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID : SD10.7276</b>	
Amount Incurred This Period 2322.25	Payment This Period 0.00	Outstanding Balance at Close of This Period 2322.25

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Megan Fielder</b>	Nature of Debt (Purpose): Fundraising Consultant
Mailing Address 3216 Winder Drive	
City State Zip Code Bridgewater NJ 08807	

Outstanding Balance Beginning This Period 4500.00	<b>Transaction ID : SD10.6537</b>	
Amount Incurred This Period 0.00	Payment This Period 4500.00	Outstanding Balance at Close of This Period 0.00

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	4398.92
2) <b>TOTALS</b> This Period (last page this line number only) .....	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	0.00
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	0.00



**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 <b>Megan Fielder</b>		Nature of Debt (Purpose): Travel reimbursement
Mailing Address 3216 Winder Drive		
City	State	Zip Code
Bridgewater	NJ	08807

Outstanding Balance Beginning This Period		<b>Transaction ID : SD10.6539</b>	
305.30			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	305.30	0.00	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>JB Graphic Design</b>		Nature of Debt (Purpose): Media Database
Mailing Address 625 Beldon Way		
City	State	Zip Code
Reno	NV	89503

Outstanding Balance Beginning This Period		<b>Transaction ID : SD10.7269</b>	
0.00			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
308.75	0.00	308.75	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>K&amp;L Gates</b>		Nature of Debt (Purpose): Event Costs
Mailing Address 1601 K Street NW		
City	State	Zip Code
Washington	DC	20006

Outstanding Balance Beginning This Period		<b>Transaction ID : SD10.7280</b>	
0.00			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
165.00	0.00	165.00	

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	473.75
2) <b>TOTALS</b> This Period (last page this line number only) .....	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	0.00
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	0.00

**SCHEDULE D (FEC Form 3)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 98 OF 101
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)

**Amodei for Nevada**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>King Strategic Communications</b>	Nature of Debt (Purpose): Advertising costs
Mailing Address 4605 Morse Road	
City State Zip Code Gahanna OH 43230	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID : SD10.7268</b>	
Amount Incurred This Period 6443.58	Payment This Period 0.00	Outstanding Balance at Close of This Period 6443.58

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Martin Ross &amp; Associates</b>	Nature of Debt (Purpose): Security Costs
Mailing Address 9480 Double Diamond Pkwy	
City State Zip Code Reno NV 89521	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID : SD10.7273</b>	
Amount Incurred This Period 900.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 900.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>McLaughlin and Associates</b>	Nature of Debt (Purpose): Polling costs
Mailing Address 566 South Route 303	
City State Zip Code Blauvelt NY 10913	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID : SD10.7278</b>	
Amount Incurred This Period 15862.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 15862.00

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	23205.58
2) <b>TOTALS</b> This Period (last page this line number only) .....	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	0.00
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	0.00

**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 <b>New Las Vegas Country Club</b>	Nature of Debt (Purpose): Event costs
Mailing Address PO Box 42156	
City State Zip Code Las Vegas NV 89116	

Outstanding Balance Beginning This Period 1556.31	<b>Transaction ID : SD10.6470</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1556.31

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Republican National Committee</b>	Nature of Debt (Purpose): Phone Reimbursement
Mailing Address 310 1st St SE	
City State Zip Code Washington DC 20003	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID : SD10.7282</b>	
Amount Incurred This Period 58.96	Payment This Period 0.00	Outstanding Balance at Close of This Period 58.96

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Something Else Strategies</b>	Nature of Debt (Purpose): Production Costs
Mailing Address 112 Lantern Ridge Dr	
City State Zip Code Easley SC 29642	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID : SD10.7266</b>	
Amount Incurred This Period 21755.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 21755.00

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	23370.27
2) <b>TOTALS</b> This Period (last page this line number only) .....	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	0.00
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	0.00

**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 <b>Stutzman Public Affairs</b>	Nature of Debt (Purpose): August consulting services
Mailing Address 1415 L Street	
City State Zip Code Sacramento CA 95814	

Outstanding Balance Beginning This Period 3000.00	<b>Transaction ID : SD10.6455</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 3000.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Stutzman Public Affairs</b>	Nature of Debt (Purpose): Travel reimbursement
Mailing Address 1415 L Street	
City State Zip Code Sacramento CA 95814	

Outstanding Balance Beginning This Period 1205.27	<b>Transaction ID : SD10.6456</b>	
Amount Incurred This Period 0.00	Payment This Period 1205.27	Outstanding Balance at Close of This Period 0.00

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

Outstanding Balance Beginning This Period 33000.00	<b>Transaction ID : SD10.6535</b>	
Amount Incurred This Period 0.00	Payment This Period 33000.00	Outstanding Balance at Close of This Period 0.00

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

**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 <b>Stutzman Public Affairs</b>		Nature of Debt (Purpose): Professional Fees
Mailing Address 1415 L Street		
City State	Zip Code	
Sacramento CA	95814	

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

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

Outstanding Balance Beginning This Period	Transaction ID : SD10.7284	
<input type="text" value="0.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="13193.75"/>	<input type="text" value="0.00"/>	<input type="text" value="13193.75"/>

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		
<input type="text"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text"/>	<input type="text"/>	<input type="text"/>

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	<input type="text" value="14693.75"/>
2) <b>TOTALS</b> This Period (last page this line number only) .....	<input type="text" value="106366.29"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	<input type="text" value="0.00"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text" value="106366.29"/>