

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

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

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

2. FEC IDENTIFICATION NUMBER C C00496760
3. IS THIS REPORT NEW (N) OR AMENDED (A)
STATE DISTRICT 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 11 / 08 / 2016 in the State of NV
(c) 30-Day POST-Election Report for the: General (30G), Runoff (30R), Special (30S)
Election on / / in the State of

5. Covering Period 10 / 01 / 2016 through 10 / 19 / 2016

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.
Type or Print Name of Treasurer Neilon, Nicola, , ,
Signature of Treasurer Neilon, Nicola, , , [Electronically Filed] Date 10 / 27 / 2016

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. §30109.

SUMMARY PAGE
of Receipts and Disbursements

FEC Form 3 (Revised 05/2016)

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))....	25850.00	789917.02
(b) Total Contribution Refunds (from Line 20(d))	0.00	16459.37
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	25850.00	773457.65
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	84320.69	754985.11
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	8993.28
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	84320.69	745991.83
8. Cash on Hand at Close of Reporting Period (from Line 27).....	212014.94	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	9000.00	

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

Amodei for Nevada

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

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	10450.00	393157.94
(ii) Unitemized.....	650.00	15225.00
(iii) TOTAL of contributions from individuals ▶	11100.00	408382.94
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	14750.00	381534.08
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	25850.00	789917.02
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	8993.28
15. OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	25850.00	798910.30

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3 (Revised 05/2016)

PAGE 4 / 32

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	84320.69	754985.11
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	92050.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	15807.94
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	651.43
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	16459.37
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	84320.69	863494.48

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	270485.63
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	25850.00
25. SUBTOTAL (add Line 23 and Line 24).....	296335.63
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	84320.69
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	212014.94

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

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

FOR LINE NUMBER: PAGE 5 OF 32
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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

NAME OF COMMITTEE (In Full)
Amodei for Nevada

A. Full Name (Last, First, Middle Initial)
Adelson, Miriam, , ,

Mailing Address 410 S Rampart Blvd
Suite 440

City Las Vegas State NV Zip Code 89145

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

Name of Employer Adelson Drug Clinic Occupation Physician

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2700.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 19 / 2016

Transaction ID : SA11AI.14981

Amount of Each Receipt this Period
2700.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Adelson, Sheldon, , ,

Mailing Address 410 S Rampart Blvd
Suite 440

City Las Vegas State NV Zip Code 89145

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

Name of Employer The Interface Group Occupation Chairman

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2700.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 19 / 2016

Transaction ID : SA11AI.14980

Amount of Each Receipt this Period
2700.00

Memo Item

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

Mailing Address 1690 Horizon Sunset Dr

City Las Vegas State NV Zip Code 89123

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

Name of Employer NEVADA FEDERAL CREDIT UNION Occupation President

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 05 / 2016

Transaction ID : SA11AI.14929

Amount of Each Receipt this Period
250.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 5650.00

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

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

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

FOR LINE NUMBER: PAGE 6 OF 32
(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)
DiLoreto, Perry, , ,
 Mailing Address 985 Damonte Ranch Pkwy Ste. 310
 City Reno State NV Zip Code 89521
 FEC ID number of contributing federal political committee. **C**
 Name of Employer DiLoreto Construction Occupation Owner
 Receipt For: 2016
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 06 2016
Transaction ID : SA11AI.14961
 Amount of Each Receipt this Period
 2000.00
 Memo Item

B. Full Name (Last, First, Middle Initial)
Estill, John, , ,
 Mailing Address PO Box 320
 City Gerlach State NV Zip Code 89412
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Rancher
 Receipt For: 2016
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 1750.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 10 2016
Transaction ID : SA11AI.14962
 Amount of Each Receipt this Period
 500.00
 Memo Item

C. Full Name (Last, First, Middle Initial)
Graves, Terry, , ,
 Mailing Address 2205 Plaza del Puerto
 City Las Vegas State NV Zip Code 89102
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Graves Communications Occupation Consultant
 Receipt For: 2016
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 2250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 19 2016
Transaction ID : SA11AI.15070
 Amount of Each Receipt this Period
 500.00
 Memo Item

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

3000.00

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

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

FOR LINE NUMBER: PAGE 7 OF 32
(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)
Graves, William, P, ,
Mailing Address 900 Whann Ave
City McLean State VA Zip Code 22101
FEC ID number of contributing federal political committee. **C**
Name of Employer ATA American Trucking Assoc Occupation President/CEO
Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 02 / 2016
Transaction ID : SA11AI.14942
Amount of Each Receipt this Period
250.00
 Memo Item

B. Full Name (Last, First, Middle Initial)
Kaplan, Dean, E, ,
Mailing Address 131 Matzinger ROad
City Toledo State OH Zip Code 43612
FEC ID number of contributing federal political committee. **C**
Name of Employer K Limited Occupation Executive Vice President
Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 02 / 2016
Transaction ID : SA11AI.14944
Amount of Each Receipt this Period
250.00
 Memo Item

C. Full Name (Last, First, Middle Initial)
Maier, Philip, , ,
Mailing Address PO Box 467
City Genoa State NV Zip Code 89411
FEC ID number of contributing federal political committee. **C**
Name of Employer Valley Van and Storage Co Occupation Accountant
Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 18 / 2016
Transaction ID : SA11AI.14976
Amount of Each Receipt this Period
300.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 800.00
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 8 OF 32
(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)
Meyer, Edwin, , ,
 Mailing Address PO Box 7042
 City Reno State NV Zip Code 89510
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Nev Cal Trucking Occupation President
 Receipt For: 2016
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 02 / 2016
Transaction ID : SA11AI.14946
 Amount of Each Receipt this Period
 250.00
 Memo Item

B. Full Name (Last, First, Middle Initial)
Smith, John, M, ,
 Mailing Address 315 Rosedale Rd
 City Cedar Rapids State IA Zip Code 52403
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CRST International Occupation Executive
 Receipt For: 2016
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 02 / 2016
Transaction ID : SA11AI.14940
 Amount of Each Receipt this Period
 250.00
 Memo Item

C. Full Name (Last, First, Middle Initial)
Whittington, Charles, L, ,
 Mailing Address 6400 S 1000 E
 City Elizabethtown State IN Zip Code 47236-9708
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Grammer Industries Occupation CEO
 Receipt For: 2016
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 19 / 2016
Transaction ID : SA11AI.14983
 Amount of Each Receipt this Period
 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 750.00
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 9 OF 32
(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)
Wyatt, Denny, , ,

Mailing Address 6312 Foxcroft Ave

City Las Vegas State NV Zip Code 89108-5242

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

Name of Employer Apex Logistics Occupation Owner

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 02 / 2016

Transaction ID : SA11AI.14947

Amount of Each Receipt this Period
 250.00

Memo Item

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

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

Amount of Each Receipt this Period

Memo Item

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

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

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	10450.00

**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 32	
	<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)
AIRCRAFT OWNERS AND PILOTS ASSOCIATION POLITICAL ACTION COMMITTEE

Mailing Address 421 AVIATION WAY

City FREDERICK	State MD	Zip Code 21701
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FEC ID number of contributing federal political committee. **C** C00131185

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

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 18 / 2016

Transaction ID : SA11C.14975

Amount of Each Receipt this Period
1000.00

Memo Item
2016 General

B. Full Name (Last, First, Middle Initial)
AMERICAN PHYSICAL THERAPY ASSOCIATION PHYSICAL THERAPY POLITICAL ACTION COMMITTEE (PT-PAC)

Mailing Address 1111 NORTH FAIRFAX ST.

City ALEXANDRIA	State VA	Zip Code 22314
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00012880

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

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 17 / 2016

Transaction ID : SA11C.14967

Amount of Each Receipt this Period
1000.00

Memo Item
2016 US General

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

Mailing Address 520 N NORTHWEST HIGHWAY

City PARK RIDGE	State IL	Zip Code 60068-2538
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FEC ID number of contributing federal political committee. **C** C70004684

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

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
10000.00

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

Transaction ID : SA11C.14963

Amount of Each Receipt this Period
5000.00

Memo Item
2016 General

SUBTOTAL of Receipts This Page (optional)..... ▶	7000.00
TOTAL This Period (last page this line number only)..... ▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 11 OF 32	
	<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)
ARCBEST CORPORATION POLITICAL ACTION COMMITTEE

Mailing Address 3801 OLD GREENWOOD ROAD
PO BOX 10048

City FORT SMITH	State AR	Zip Code 72903
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00193383

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

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 07 / 2016

Transaction ID : SA11C.14956

Amount of Each Receipt this Period
250.00

Memo Item
General Contribution 2016

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: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 14 / 2016

Transaction ID : SA11C.14966

Amount of Each Receipt this Period
1000.00

Memo Item
General - 2016

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

Mailing Address 11250 WAPLES MILL ROAD

City FAIRFAX	State VA	Zip Code 22030
-----------------	-------------	-------------------

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

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

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1500.00

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

Transaction ID : SA11C.14926

Amount of Each Receipt this Period
1000.00

Memo Item
2016 US General Election

SUBTOTAL of Receipts This Page (optional)..... ▶	2250.00
TOTAL This Period (last page this line number only)..... ▶	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 12 OF 32
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

Full Name (Last, First, Middle Initial)
NATIONAL SHOOTING SPORTS FOUNDATION, INC. POLITICAL ACTION COMMITTEE (NSSF PAC)

A. Mailing Address 11 MILE HILL RD

City: NEWTOWN State: CT Zip Code: 06470

FEC ID number of contributing federal political committee: **C** C00480863

Name of Employer: Occupation:

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

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

Transaction ID : SA11C.14925

Amount of Each Receipt this Period
1000.00

Memo Item
2016 General

Full Name (Last, First, Middle Initial)
NATIONAL TANK TRUCK CARRIERS INC POLITICAL ACTION COMMITTEE

B. Mailing Address 950 NORTH GLEBE RD STE 520

City: ARLINGTON State: VA Zip Code: 22203

FEC ID number of contributing federal political committee: **C** C00188011

Name of Employer: Occupation:

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date: 2000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 02 / 2016

Transaction ID : SA11C.14937

Amount of Each Receipt this Period
1000.00

Memo Item
Nevada 2nd

Full Name (Last, First, Middle Initial)
SHEET METAL AND AIR CONDITIONING CONTRACTORS POLITICAL ACTION COMMITTEE

C. Mailing Address 4201 LAFAYETTE CENTER DRIVE

City: CHANTILLY State: VA Zip Code: 20151

FEC ID number of contributing federal political committee: **C** C00013961

Name of Employer: Occupation:

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

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 18 / 2016

Transaction ID : SA11C.14973

Amount of Each Receipt this Period
1000.00

Memo Item
2016 General

SUBTOTAL of Receipts This Page (optional) ▶ 3000.00
TOTAL This Period (last page this line number only) ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 13 OF 32	
	<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)
UNITEDHEALTH GROUP INCORPORATED PAC (UNITED FOR HEALTH)

Mailing Address 701 PENNSYLVANIA AVE NW SUITE 200

City Washington	State DC	Zip Code 20004
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00274431

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

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 17 / 2016

Transaction ID : SA11C.14968

Amount of Each Receipt this Period
1000.00

Memo Item
2016 US General Election

B. Full Name (Last, First, Middle Initial)
UNITED PARCEL SERVICE INC. PAC

Mailing Address 55 GLENLAKE PARKWAY NE

City ATLANTA	State GA	Zip Code 30328
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00064766

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

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
6000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 18 / 2016

Transaction ID : SA11C.14971

Amount of Each Receipt this Period
500.00

Memo Item
General 2016

C. Full Name (Last, First, Middle Initial)
WERNER ENTERPRISES INC POLITICAL ACTION COMMITTEE

Mailing Address PO Box 45308

City OMAHA	State NE	Zip Code 68145
---------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00236034

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

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 02 / 2016

Transaction ID : SA11C.14950

Amount of Each Receipt this Period
1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶	2500.00
TOTAL This Period (last page this line number only)..... ▶	14750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 14 OF 32	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

Full Name (Last, First, Middle Initial) A. 7-Eleven Reno			Date of Disbursement M M / D D / Y Y Y Y 10 / 10 / 2016	
Mailing Address 12605 South Virginia St			FEC Identification Number C	
City Reno	State NV	Zip Code 89511	Amount of Each Disbursement this Period 27.89	
Purpose of Disbursement Travel expense - Gas in lieu of mileage		Category/ Type 002	Transaction ID : SB17.15021	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. Anadot			Date of Disbursement M M / D D / Y Y Y Y 10 / 19 / 2016	
Mailing Address PO Box 84314			FEC Identification Number C	
City Baton Rouge	State LA	Zip Code 70884	Amount of Each Disbursement this Period 41.10	
Purpose of Disbursement Merchant fees		Category/ Type 001	Transaction ID : SB17.15069	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) c. Authnet Gateway			Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2016	
Mailing Address P.O. Box 8999			FEC Identification Number C	
City San Francisco	State CA	Zip Code 94128	Amount of Each Disbursement this Period 20.00	
Purpose of Disbursement Merchant fees		Category/ Type 001	Transaction ID : SB17.15010	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	88.99
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 15 OF 32	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

Full Name (Last, First, Middle Initial) A. Bauserman Group			Date of Disbursement M M / D D / Y Y Y Y 10 / 11 / 2016	
Mailing Address 500 Damonte Ranch Pkwy			FEC Identification Number C	
City Reno	State NV	Zip Code 89521	Amount of Each Disbursement this Period 1927.36	
Purpose of Disbursement Design for advertising and promotional materials		Category/ Type 004	Transaction ID : SB17.15058	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. Bill.com			Date of Disbursement M M / D D / Y Y Y Y 10 / 05 / 2016	
Mailing Address 3200 Ash Street			FEC Identification Number C	
City Palo Alto	State CA	Zip Code 94306	Amount of Each Disbursement this Period 45.10	
Purpose of Disbursement Bank service charges		Category/ Type 001	Transaction ID : SB17.15013	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) c. Capitol Hill Club			Date of Disbursement M M / D D / Y Y Y Y 10 / 17 / 2016	
Mailing Address 300 First Street SE			FEC Identification Number C	
City Washington	State DC	Zip Code 20003	Amount of Each Disbursement this Period 729.55	
Purpose of Disbursement Contributor relations - Meals & entertainment		Category/ Type 003	Transaction ID : SB17.15006	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	2702.01
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 16 OF 32	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

Full Name (Last, First, Middle Initial) A. Capitol Hill Club			Date of Disbursement M M / D D / Y Y Y Y 10 / 17 / 2016	
Mailing Address 300 First Street SE			FEC Identification Number C	
City Washington	State DC	Zip Code 20003	Amount of Each Disbursement this Period 343.49	
Purpose of Disbursement Contributor relations - Meals & entertainment		Category/ Type 003	Transaction ID : SB17.15007	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. Casey Neilon Inc			Date of Disbursement M M / D D / Y Y Y Y 10 / 11 / 2016	
Mailing Address 503 N Division St			FEC Identification Number C	
City Carson City	State NV	Zip Code 89703	Amount of Each Disbursement this Period 2000.00	
Purpose of Disbursement Professional fees - accounting		Category/ Type 001	Transaction ID : SB17.15061	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) c. Chevron - Carson City			Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2016	
Mailing Address 1102 North Carson Street			FEC Identification Number C	
City Carson City	State NV	Zip Code 89703	Amount of Each Disbursement this Period 39.42	
Purpose of Disbursement Travel expense - Gas in lieu of mileage		Category/ Type 002	Transaction ID : SB17.15011	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	2382.91
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 17 OF 32	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

Full Name (Last, First, Middle Initial) A. Chevron - Carson City			Date of Disbursement M M / D D / Y Y Y Y 10 / 06 / 2016	
Mailing Address 1102 North Carson Street			FEC Identification Number C	
City Carson City	State NV	Zip Code 89703	Amount of Each Disbursement this Period 69.88	
Purpose of Disbursement Travel expense - Gas in lieu of mileage		Category/ Type 002	Transaction ID : SB17.15012	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. Chevron - Carson City			Date of Disbursement M M / D D / Y Y Y Y 10 / 12 / 2016	
Mailing Address 1102 North Carson Street			FEC Identification Number C	
City Carson City	State NV	Zip Code 89703	Amount of Each Disbursement this Period 36.23	
Purpose of Disbursement Travel expense - Gas in lieu of mileage		Category/ Type 002	Transaction ID : SB17.15026	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) c. City of Sparks Parks & Recreation			Date of Disbursement M M / D D / Y Y Y Y 10 / 14 / 2016	
Mailing Address 98 Richards Way			FEC Identification Number C	
City Sparks	State NV	Zip Code 89431	Amount of Each Disbursement this Period 500.00	
Purpose of Disbursement Golf Tournament and Hole Sponsorship		Category/ Type 012	Transaction ID : SB17.15030	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	606.11
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 18 OF 32	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

Full Name (Last, First, Middle Initial) A. CRESENT HARDY FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y 10 / 07 / 2016
Mailing Address PO BOX 753941		FEC Identification Number C C00550608
City LAS VEGAS	State NV	Zip Code 89136
Purpose of Disbursement Contribution	Category/ Type 011	Amount of Each Disbursement this Period 2000.00
Candidate Name CRESENT HARDY FOR CONGRESS	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.15064
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: NV District: 04	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) B. Davis, Maria, C, ,		Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2016
Mailing Address 10050 Bronc Court		FEC Identification Number C
City Reno	State NV	Zip Code 89521
Purpose of Disbursement Reimburse expenses for outreach event - please see memo	Category/ Type 007	Amount of Each Disbursement this Period 183.13
Candidate Name	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.15071
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) c. Davis, Maria, C, ,		Date of Disbursement M M / D D / Y Y Y Y 10 / 11 / 2016
Mailing Address 10050 Bronc Court		FEC Identification Number C
City Reno	State NV	Zip Code 89521
Purpose of Disbursement Campaign consulting - outreach coordinator	Category/ Type 001	Amount of Each Disbursement this Period 3000.00
Candidate Name	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.15056
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	<input type="checkbox"/> Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	5183.13
TOTAL This Period (last page this line number only).....▶	

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

Form/Schedule: SB17

Transaction ID : SB17.15071

Costco 2200 Harvard Way Reno NV 89502 \$183.13 Soda, water and ice for event

Form/Schedule:

Transaction ID:

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 20 OF 32	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

Full Name (Last, First, Middle Initial) A. FRIENDS OF JOE HECK		Date of Disbursement M M / D D / Y Y Y Y 10 / 07 / 2016
Mailing Address PO BOX 750114		FEC Identification Number C C00468421
City LAS VEGAS	State NV	Zip Code 89136
Purpose of Disbursement Contribution	Category/ Type 011	Amount of Each Disbursement this Period 1300.00
Candidate Name FRIENDS OF JOE HECK	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: NV District: 03	Transaction ID : SB17.15063 <input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. Fumare Fine Cigar Boutique		Date of Disbursement M M / D D / Y Y Y Y 10 / 05 / 2016
Mailing Address 7530 Longley Lane #101		FEC Identification Number C
City Reno	State NV	Zip Code 89511
Purpose of Disbursement Supplies for fundraising event	Category/ Type 003	Amount of Each Disbursement this Period 421.04
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:	Transaction ID : SB17.15015 <input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) c. Garzon, Arturo, , ,		Date of Disbursement M M / D D / Y Y Y Y 10 / 18 / 2016
Mailing Address 1011 Ricco Drive		FEC Identification Number C
City Sparks	State NV	Zip Code 89434
Purpose of Disbursement Reimbursement for driver fees - travel expense	Category/ Type 002	Amount of Each Disbursement this Period 325.00
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:	Transaction ID : SB17.15068 <input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	2046.04
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 21 OF 32	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

Full Name (Last, First, Middle Initial) A. Hertz Rent-A-Car			Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2016	
Mailing Address 7200 Sahara Ave			FEC Identification Number C	
City Las Vegas	State NV	Zip Code 89119	Amount of Each Disbursement this Period 101.72	
Purpose of Disbursement Travel expense - Car rental		Category/ Type 002	Transaction ID : SB17.14986	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. Hertz Rent-A-Car			Date of Disbursement M M / D D / Y Y Y Y 10 / 17 / 2016	
Mailing Address 7200 Sahara Ave			FEC Identification Number C	
City Las Vegas	State NV	Zip Code 89119	Amount of Each Disbursement this Period 84.50	
Purpose of Disbursement Travel expense - Car rental		Category/ Type 002	Transaction ID : SB17.14988	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) c. JT Basque Bar			Date of Disbursement M M / D D / Y Y Y Y 10 / 13 / 2016	
Mailing Address 1426 Highway 395			FEC Identification Number C	
City Gardnerville	State NV	Zip Code 89410	Amount of Each Disbursement this Period 90.00	
Purpose of Disbursement Contributor relations - Meals & entertainment		Category/ Type 003	Transaction ID : SB17.15003	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	276.22
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 22 OF 32	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

Full Name (Last, First, Middle Initial) A. La Vecchia Restaurant			Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2016	
Mailing Address 3005 Skyline Blvd #160			FEC Identification Number C	
City Reno	State NV	Zip Code 89509	Amount of Each Disbursement this Period 312.91	
Purpose of Disbursement Contributor relations - Meals & entertainment		Category/ Type 003	Transaction ID : SB17.14990	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. Mandalay Bay			Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2016	
Mailing Address 3950 S Las Vegas Blvd			FEC Identification Number C	
City Las Vegas	State NV	Zip Code 89119	Amount of Each Disbursement this Period 95.19	
Purpose of Disbursement Travel expense - Lodging		Category/ Type 002	Transaction ID : SB17.14996	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) c. McCormick & Schmick's			Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2016	
Mailing Address 335 Hughes Center Drive			FEC Identification Number C	
City Las Vegas	State NV	Zip Code 89169	Amount of Each Disbursement this Period 85.00	
Purpose of Disbursement Contributor relations - Meals & entertainment		Category/ Type 003	Transaction ID : SB17.14995	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	493.10
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 23 OF 32	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

Full Name (Last, First, Middle Initial) A. Mom and Pops Diner			Date of Disbursement M M / D D / Y Y Y Y 10 / 16 / 2016	
Mailing Address 224 S. Carson Street #3			FEC Identification Number C	
City Carson City	State NV	Zip Code 89701	Amount of Each Disbursement this Period 40.00	
Purpose of Disbursement Contributor relations - Meals & entertainment		Category/ Type 003	Transaction ID : SB17.15005	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. Pinocchio's Bar & Grill			Date of Disbursement M M / D D / Y Y Y Y 10 / 10 / 2016	
Mailing Address 5995 S. Virginia Street			FEC Identification Number C	
City Reno	State NV	Zip Code 89510	Amount of Each Disbursement this Period 90.00	
Purpose of Disbursement Contributor relations - Meals & entertainment		Category/ Type 003	Transaction ID : SB17.15001	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. Ponderosa Stamp & Engraving			Date of Disbursement M M / D D / Y Y Y Y 10 / 11 / 2016	
Mailing Address 104 Corbett Street Suite A			FEC Identification Number C	
City Carson City	State NV	Zip Code 89706	Amount of Each Disbursement this Period 426.78	
Purpose of Disbursement Promotional custom printed stress balls		Category/ Type 006	Transaction ID : SB17.15059	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	556.78
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 32			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

Full Name (Last, First, Middle Initial) A. Shell - Carson Cty			Date of Disbursement M M / D D / Y Y Y Y 10 / 12 / 2016		
Mailing Address Hwy 395			FEC Identification Number C		
City Carson City	State NV	Zip Code 89703	Amount of Each Disbursement this Period 39.43		
Purpose of Disbursement Travel expense - Gas in lieu of mileage		Category/ Type 002	Transaction ID : SB17.15025		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) B. Shell - Carson Cty			Date of Disbursement M M / D D / Y Y Y Y 10 / 16 / 2016		
Mailing Address Hwy 395			FEC Identification Number C		
City Carson City	State NV	Zip Code 89703	Amount of Each Disbursement this Period 41.96		
Purpose of Disbursement Travel expense - Gas in lieu of mileage		Category/ Type 002	Transaction ID : SB17.15029		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) c. Silverado Resort			Date of Disbursement M M / D D / Y Y Y Y 10 / 09 / 2016		
Mailing Address 1600 Atlas Peak Rd			FEC Identification Number C		
City Napa	State CA	Zip Code 94558	Amount of Each Disbursement this Period 543.00		
Purpose of Disbursement Travel expense - lodging		Category/ Type 002	Transaction ID : SB17.15023		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	624.39
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 32			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

Full Name (Last, First, Middle Initial) A. Southwest Airlines			Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2016		
Mailing Address P.O. Box 36647-1CR			FEC Identification Number C		
City Dallas	State TX	Zip Code 73235	Amount of Each Disbursement this Period 253.98		
Purpose of Disbursement Travel expense - Airfare		Category/ Type 002	Transaction ID : SB17.14985		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) B. Southwest Airlines			Date of Disbursement M M / D D / Y Y Y Y 10 / 06 / 2016		
Mailing Address P.O. Box 36647-1CR			FEC Identification Number C		
City Dallas	State TX	Zip Code 73235	Amount of Each Disbursement this Period 507.96		
Purpose of Disbursement Travel expense - Airfare		Category/ Type 002	Transaction ID : SB17.14987		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) c. Super Heros LLC			Date of Disbursement M M / D D / Y Y Y Y 10 / 11 / 2016		
Mailing Address 3290 Lapwing Lane			FEC Identification Number C		
City Reno	State NV	Zip Code 89509	Amount of Each Disbursement this Period 4500.00		
Purpose of Disbursement Consulting - Administrative Services		Category/ Type 001	Transaction ID : SB17.15057		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	5261.94
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 26 OF 32	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

Full Name (Last, First, Middle Initial) A. Tamarack Junction			Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2016	
Mailing Address 13101 S Virginia St			FEC Identification Number C	
City Reno	State NV	Zip Code 89521	Amount of Each Disbursement this Period 32.00	
Purpose of Disbursement Contributor relations - Meals & entertainment		Category/ Type 003	Transaction ID : SB17.14992	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. The Abbi Agency			Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2016	
Mailing Address 1385 Haskell Street			FEC Identification Number C	
City Reno	State NV	Zip Code 89509	Amount of Each Disbursement this Period 23480.71	
Purpose of Disbursement Media Buy - print and digital advertising		Category/ Type 004	Transaction ID : SB17.15052	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) c. Trattoria Del Lupo			Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2016	
Mailing Address 3950 Las Vegas Blvd South			FEC Identification Number C	
City Las Vegas	State NV	Zip Code 89119	Amount of Each Disbursement this Period 390.00	
Purpose of Disbursement Contributor relations - Meals & entertainment		Category/ Type 003	Transaction ID : SB17.14993	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	23902.71
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 27 OF 32	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

Full Name (Last, First, Middle Initial) A. Villa basque Deli		Date of Disbursement M M / D D / Y Y Y Y 10 / 12 / 2016
Mailing Address 730 Basque Way		FEC Identification Number C
City Carson City	State NV	Zip Code 89701
Purpose of Disbursement Contributor relations - Meals & entertainment		Category/ Type 003
Candidate Name		Amount of Each Disbursement this Period 100.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.15002 <input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. Washoe County Republican Party		Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2016
Mailing Address 3652 South Virginia Street		FEC Identification Number C
City Reno	State NV	Zip Code 89502
Purpose of Disbursement Donation		Category/ Type 012
Candidate Name		Amount of Each Disbursement this Period 2000.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.15033 <input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C. WASHOE REPUBLICAN WOMEN		Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2016
Mailing Address 9335 Fremont Way		FEC Identification Number C
City Reno	State NV	Zip Code 89506
Purpose of Disbursement Donation		Category/ Type 012
Candidate Name		Amount of Each Disbursement this Period 500.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.15033 <input type="checkbox"/> Memo Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	2600.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 32			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

Full Name (Last, First, Middle Initial) A. Wells Fargo			Date of Disbursement M M / D D / Y Y Y Y 10 / 11 / 2016		
Mailing Address PO Box 6995			FEC Identification Number C		
City Portland	State OR	Zip Code 97228	Amount of Each Disbursement this Period 3.00		
Purpose of Disbursement Bank service charges		Category/ Type 001	Transaction ID : SB17.15016		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) B. Wells Fargo			Date of Disbursement M M / D D / Y Y Y Y 10 / 11 / 2016		
Mailing Address PO Box 6995			FEC Identification Number C		
City Portland	State OR	Zip Code 97228	Amount of Each Disbursement this Period 14.95		
Purpose of Disbursement Bank Service Charges		Category/ Type 001	Transaction ID : SB17.15017		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) c. Wells Fargo			Date of Disbursement M M / D D / Y Y Y Y 10 / 12 / 2016		
Mailing Address PO Box 6995			FEC Identification Number C		
City Portland	State OR	Zip Code 97228	Amount of Each Disbursement this Period 12.00		
Purpose of Disbursement Bank fee		Category/ Type 001	Transaction ID : SB17.15022		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	29.95
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 32			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

Full Name (Last, First, Middle Initial) A. Wells Fargo			Date of Disbursement M M / D D / Y Y Y Y 10 / 12 / 2016		
Mailing Address PO Box 6995			FEC Identification Number C		
City Portland	State OR	Zip Code 97228	Amount of Each Disbursement this Period 2.50		
Purpose of Disbursement Bank fee		Category/ Type 001	Transaction ID : SB17.15028		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) B. Wells Fargo			Date of Disbursement M M / D D / Y Y Y Y 10 / 13 / 2016		
Mailing Address PO Box 6995			FEC Identification Number C		
City Portland	State OR	Zip Code 97228	Amount of Each Disbursement this Period 12.00		
Purpose of Disbursement Bank Fee		Category/ Type 001	Transaction ID : SB17.15027		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) c. Wyman & Associates			Date of Disbursement M M / D D / Y Y Y Y 10 / 07 / 2016		
Mailing Address 1941 Radcliffe Drive			FEC Identification Number C		
City Carson City	State NV	Zip Code 89703	Amount of Each Disbursement this Period 33424.00		
Purpose of Disbursement Radio Advertising		Category/ Type 004	Transaction ID : SB17.15051		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	33438.50
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 30 OF 32	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

Full Name (Last, First, Middle Initial) A. Wyman & Associates		Date of Disbursement M M / D D / Y Y Y Y 10 / 13 / 2016
Mailing Address 1941 Radcliffe Drive		FEC Identification Number C
City Carson City	State NV	Zip Code 89703
Purpose of Disbursement Radio advertising	Category/Type 004	
Candidate Name		Amount of Each Disbursement this Period 3250.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.15032
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		FEC Identification Number C
City	State	Zip Code
Purpose of Disbursement	Category/Type	
Candidate Name		Amount of Each Disbursement this Period
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		FEC Identification Number C
City	State	Zip Code
Purpose of Disbursement	Category/Type	
Candidate Name		Amount of Each Disbursement this Period
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	3250.00
TOTAL This Period (last page this line number only).....▶	83442.78

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

NAME OF COMMITTEE (In Full)
Amodei for Nevada

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

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

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

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

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

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

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

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

Form/Schedule: SD10

Transaction ID : SD10.7593

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

Form/Schedule:

Transaction ID: