

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

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

in the State of

M M / D D / Y Y Y Y

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

General (30G)

Runoff (30R)

Special (30S)

Election on

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

in the State of

M M / D D / Y Y Y Y

5. Covering Period

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

through

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

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

Type or Print Name of Treasurer Nicola Neilon

Signature of Treasurer Nicola Neilon

[Electronically Filed]

Date

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

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))....	60765.00	1309488.11
(b) Total Contribution Refunds (from Line 20(d))	0.00	1850.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	60765.00	1307638.11
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	59708.19	1062367.00
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	4039.04
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	59708.19	1058327.96
8. Cash on Hand at Close of Reporting Period (from Line 27).....	214470.66	
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).....	29000.00	

For further information contact:

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

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

POST-ELECTION DETAILED SUMMARY PAGE

Report of Receipts and Disbursements

- If the candidate participated in the general election, use this form for the 30-day Post-General report.
- If the candidate did NOT participate in the general election, use this form for the Year-end report covering through December 31 of the election year (due on January 31).

This form is used in lieu of filling out Line Numbers 6 through 7 on Page 2 (Summary Page) and Pages 3 and 4 (the Detailed Summary Page) for the last report filed by a candidate during the current election cycle.

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 Total as of <input type="text" value="11"/> / <input type="text" value="06"/> / <input type="text" value="2012"/> (date of general election)	COLUMN C Total for <input type="text" value="11"/> / <input type="text" value="07"/> / <input type="text" value="2012"/> (date after general election) through <input type="text" value="11"/> / <input type="text" value="26"/> / <input type="text" value="2012"/> (last day of reporting period)
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other than Political Committees		
(i) Itemized (use Schedule A)		
<input type="text" value="20900.00"/>	<input type="text" value="556837.77"/>	<input type="text" value="500.00"/>
(ii) Unitemized		
<input type="text" value="1365.00"/>	<input type="text" value="60004.40"/>	<input type="text" value="350.00"/>
(iii) Total of contributions from individuals		
<input type="text" value="22265.00"/>	<input type="text" value="616842.17"/>	<input type="text" value="850.00"/>
(b) Political Party Committees		
<input type="text" value="6500.00"/>	<input type="text" value="29000.00"/>	<input type="text" value="0.00"/>
(c) Other Political Committees		
<input type="text" value="32000.00"/>	<input type="text" value="663645.94"/>	<input type="text" value="1000.00"/>

POST-ELECTION DETAILED SUMMARY PAGE

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

PAGE 4 / 36

COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)
(d) The Candidate		
0.00	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c) and (d))		
60765.00	1309488.11	1850.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES		
0.00	955.65	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate		
0.00	0.00	0.00
(b) All Other Loans		
0.00	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b))		
0.00	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, rebates, etc.)		
0.00	4039.04	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.)		
0.00	0.00	0.00
16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15)		
60765.00	1314482.80	1850.00

POST-ELECTION DETAILED SUMMARY PAGE

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

PAGE 5 / 36

Write or Type Committee Name

Amodei for Nevada

 Report Covering the Period: From: / / To: / /
II. DISBURSEMENTS

COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)
17. OPERATING EXPENDITURES		
59708.19	1062367.00	31895.14
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES		
1000.00	4500.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate		
0.00	0.00	0.00
(b) Of All Other Loans		
0.00	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and 19(b))		
0.00	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees		
0.00	850.00	0.00
(b) Political Party Committees		
0.00	0.00	0.00

POST-ELECTION DETAILED SUMMARY PAGE

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

PAGE 6 / 36

COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)
-------------------------------	---------------------------------------------------------------------------------------------------	-------------------------------------------------------------------------------------------------------------------------------

(c) Other Political Committees (such as PACs)

0.00	1000.00	0.00
------	---------	------

(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b) and (c))

0.00	1850.00	0.00
------	---------	------

21. OTHER DISBURSEMENTS

0.00	1250.00	0.00
------	---------	------

22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d) and 21)

60708.19	1069967.00	31895.14
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III. NET CONTRIBUTIONS (OTHER THAN LOANS)

(Note: Substitute in lieu of Line #6 of Summary Page for this report only; subtract Line 20(d) from Line 11(e))

60765.00	1307638.11	1850.00
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IV. NET OPERATING EXPENDITURES

(Note: Substitute in lieu of Line #7 of Summary Page for this report only; subtract Line 14 from Line 17)

59708.19	1058327.96	31895.14
----------	------------	----------

V. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	214413.85
24. TOTAL RECIEPTS THIS PERIOD (from Line 16).....	60765.00
25. SUBTOTAL (add Line 23 and Line 24).....	275178.85
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	60708.19
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)	214470.66

**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 36
	<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)
George Allison

Mailing Address 2174 Waterford Pl

City Carson City State NV Zip Code 89703

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

Name of Employer Allison Mackenzie Occupation Attorney

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **750.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 01 / 2012

Transaction ID : SA11AI.8813

Amount of Each Receipt this Period
500.00

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

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: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 01 / 2012

Transaction ID : SA11AI.8817

Amount of Each Receipt this Period
200.00

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

Mailing Address 1776 K Street NW

City Washington State DC Zip Code 20006

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

Name of Employer Wiley Rein Occupation Attorney

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 19 / 2012

Transaction ID : SA11AI.8787

Amount of Each Receipt this Period
250.00

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

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

950.00

**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 36
	<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)
Sandra Dye

Mailing Address 7750 West 4th St PMB 101

City Reno State NV Zip Code 89523

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

Name of Employer None Occupation Retired

Receipt For: 2012
 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 / 2012

Transaction ID : SA11AI.8785

Amount of Each Receipt this Period
250.00

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

Mailing Address 610 Oxbow Ct

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: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 01 / 2012

Transaction ID : SA11AI.8818

Amount of Each Receipt this Period
250.00

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

Mailing Address 3169 Midland Drive

City Elko State NV Zip Code 89801

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

Name of Employer Good Morning Furniture Occupation Self Employed

Receipt For: 2012
 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 / 2012

Transaction ID : SA11AI.8782

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 9 OF 36
	<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)
James Jenks

Mailing Address 5655 Old US Hwy 395

City Carson City State NV Zip Code 89704

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

Name of Employer None Occupation Self Employed

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 13 / 2012

Transaction ID : SA11AI.8834

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: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 01 / 2012

Transaction ID : SA11AI.8810

Amount of Each Receipt this Period
 500.00

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

Mailing Address 4741 Caughlin Parkway

City Reno State NV Zip Code 89519

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

Name of Employer Innerwest Advertising Occupation Advertising

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 / 18 / 2012

Transaction ID : SA11AI.8772

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 10 OF 36
	<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)
Amie 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: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 18 / 2012

Transaction ID : SA11AI.8662

Amount of Each Receipt this Period
2500.00

B. 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 Information requested Occupation Information requested
Bodines Casino Marketing Executive

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
7500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 18 / 2012

Transaction ID : SA11AI.8661

Amount of Each Receipt this Period
2500.00

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

Mailing Address 5100 Franktown Rd.

City Reno State NV Zip Code 89704

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

Name of Employer Information requested Occupation Information requested
None Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 01 / 2012

Transaction ID : SA11AI.8812

Amount of Each Receipt this Period
1500.00

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: (check only one)	PAGE 11 OF 36
	<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)
Roger Primm

Mailing Address 5100 Franktown Rd.

City Carson City State NV Zip Code 89704

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

Name of Employer None Occupation Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
4500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 01 / 2012

Transaction ID : SA11AI.8811

Amount of Each Receipt this Period
2500.00

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

Mailing Address 320 Poplar Drive

City Elko State NV Zip Code 89801

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

Name of Employer Sacrison Engineering Occupation Engineer

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 19 / 2012

Transaction ID : SA11AI.8777

Amount of Each Receipt this Period
200.00

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

Mailing Address 2190 Thornberry

City Sonoma State CA Zip Code 95476

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

Name of Employer None Occupation Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 06 / 2012

Transaction ID : SA11AI.8828

Amount of Each Receipt this Period
1000.00

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

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

3700.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 36
	<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: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y
10 / 18 / 2012

Transaction ID : SA11AI.8776

Amount of Each Receipt this Period
500.00

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

Mailing Address **PO Box 618**

City **Genoa** State **NV** Zip Code **89411**

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

Name of Employer **Metalast International** Occupation **Executive**

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y
10 / 18 / 2012

Transaction ID : SA11AI.8653

Amount of Each Receipt this Period
2500.00

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

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 **None** Occupation **None**

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
10 / 18 / 2012

Transaction ID : SA11AI.8774

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: PAGE 13 OF 36
(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)
Barbara Vucanovich

Mailing Address 4900 Plumas Street

City State Zip Code
Reno NV 89509

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

Name of Employer Occupation
None Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
4000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 19 2012

Transaction ID : SA11AI.8784

Amount of Each Receipt this Period
500.00

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

Mailing Address 2857 La Mirada Ct

City State Zip Code
Minden NV 89423

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

Name of Employer Occupation
Carson Valley Inn Carson Valley Inn

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
7500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 18 2012

Transaction ID : SA11AI.8660

Amount of Each Receipt this Period
2500.00

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

Mailing Address 711 S Carson St

City State Zip Code
Carson City NV 89701

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

Name of Employer Occupation
GCM Airgroup Partner

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 18 2012

Transaction ID : SA11AI.8657

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 14 OF 36
	<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)
Roger Williams

Mailing Address 7 Silver Saddle Ct

City Washoe Valley State NV Zip Code 89704

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

Name of Employer Freeman and Williams Occupation CPA

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 / 18 / 2012

Transaction ID : SA11Al.8655

Amount of Each Receipt this Period
 500.00

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).....

500.00

20900.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 15 OF 36	
	<input type="checkbox"/> 11a 12	<input checked="" type="checkbox"/> 11b 13a	<input 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)
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: 2012
 Primary General
 Other (specify)
Election Cycle-to-Date **10000.00**

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 18 / 2012

Transaction ID : SA11B.8659

Amount of Each Receipt this Period
1500.00

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

Mailing Address **604 PENNSYLVANIA AVENUE, NW**
City **WASHINGTON** State **DC** Zip Code **20004-2601**

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

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)
Election Cycle-to-Date **10000.00**

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 20 / 2012

Transaction ID : SA11B.8684

Amount of Each Receipt this Period
5000.00

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).....	6500.00
TOTAL This Period (last page this line number only).....	6500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 36
	<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)
AMAZON CORPORATE LLC SEPARATED SEGREGATED FUND (AMAZON.COM PAC)

Mailing Address **126 C STREET, NW**

City	State	Zip Code
WASHINGTON	DC	20001

FEC ID number of contributing federal political committee. **C C00360354**

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 2000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11	/	01	/	2012

Transaction ID : SA11C.8808

Amount of Each Receipt this Period
 _____ 2000.00

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

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

City	State	Zip Code
DURHAM	NC	27707

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

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 2500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10	/	23	/	2012

Transaction ID : SA11C.8766

Amount of Each Receipt this Period
 _____ 1000.00

Full Name (Last, First, Middle Initial)
AMERICAN MEDICAL ASSOCIATION POLITICAL ACTION COMMITTEE

Mailing Address **25 MASSACHUSETTS AVE, NW
SUITE 600**

City	State	Zip Code
WASHINGTON	DC	20001

FEC ID number of contributing federal political committee. **C C00000422**

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 7500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11	/	01	/	2012

Transaction ID : SA11C.8804

Amount of Each Receipt this Period
 _____ 2500.00

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

_____ 5500.00

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 17 OF 36
	<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)
ANHEUSER-BUSCH COMPANIES INC. POLITICAL ACTION COMMITTEE

Mailing Address **ONE BUSCH PLACE 202-7**

City	State	Zip Code
ST. LOUIS	MO	63118

FEC ID number of contributing federal political committee. **C C00034488**

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 5000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		02		2012

Transaction ID : SA11C.8827

Amount of Each Receipt this Period
 _____ 5000.00

B. Full Name (Last, First, Middle Initial)
Barona Band of Mission Indians

Mailing Address **1095 Barona Road**

City	State	Zip Code
Lakeside	CA	92040

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

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 2000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		01		2012

Transaction ID : SA11C.8806

Amount of Each Receipt this Period
 _____ 2000.00

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

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

City	State	Zip Code
SALT LAKE CITY	UT	84111

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

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 7500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		18		2012

Transaction ID : SA11C.8679

Amount of Each Receipt this Period
 _____ 5000.00

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

_____ 12000.00

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 18 OF 36
	<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)
BOYD GAMING POLITICAL ACTION COMMITTEE

Mailing Address **6465 S RAINBOW BLVD**

City **LAS VEGAS** State **NV** Zip Code **89118**

FEC ID number of contributing federal political committee. **C C00142315**

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y
10 / 18 / 2012

Transaction ID : SA11C.8663

Amount of Each Receipt this Period
5000.00

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

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: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
10000.00

Date of Receipt
 M M / D D / Y Y Y Y
10 / 18 / 2012

Transaction ID : SA11C.8667

Amount of Each Receipt this Period
2500.00

C. Full Name (Last, First, Middle Initial)
MGM RESORTS INTERNATIONAL PAC

Mailing Address **2350 KERNER BLVD., SUITE 250**

City **SAN RAFAEL** State **CA** Zip Code **94901**

FEC ID number of contributing federal political committee. **C C00299321**

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
7000.00

Date of Receipt
 M M / D D / Y Y Y Y
10 / 19 / 2012

Transaction ID : SA11C.8681

Amount of Each Receipt this Period
2500.00

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

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

10000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 36
	<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)
NATIONAL ASSOCIATION OF FEDERAL CREDIT UNIONS POLITICAL ACTION COMMITTEE

Mailing Address 3138 10TH STREET NORTH

City	State	Zip Code
ARLINGTON	VA	22201

FEC ID number of contributing federal political committee. **C** C00040659

Name of Employer	Occupation

Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 1000.00
-----------------------------------------------------------------------------------------------------------------------------------------------	-----------------------------------------

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		13		2012

Transaction ID : SA11C.8830

Amount of Each Receipt this Period
 _____ 1000.00

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

Mailing Address 2901 TELESTAR CT.

City	State	Zip Code
FALLS CHURCH	VA	22042

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

Name of Employer	Occupation

Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 2000.00
-----------------------------------------------------------------------------------------------------------------------------------------------	-----------------------------------------

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		18		2012

Transaction ID : SA11C.8666

Amount of Each Receipt this Period
 _____ 1000.00

Full Name (Last, First, Middle Initial)
NOBLE ENERGY INC. POLITICAL ACTION COMMITTEE

Mailing Address 100 GLENBOROUGH DRIVE
SUITE 100

City	State	Zip Code
HOUSTON	TX	77067

FEC ID number of contributing federal political committee. **C** C00479873

Name of Employer	Occupation

Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 1500.00
-----------------------------------------------------------------------------------------------------------------------------------------------	-----------------------------------------

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		25		2012

Transaction ID : SA11C.8764

Amount of Each Receipt this Period
 _____ 1500.00

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

_____ 3500.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 36
	<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)
TRUCKING POLITICAL ACTION COMMITTEE OF THE AMERICAN TRUCKING ASSOCIATIONS, INC.

Mailing Address 430 FIRST ST. SE

City State Zip Code
WASHINGTON DC 20003

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

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)
 Election Cycle-to-Date
 3000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 18 2012

Transaction ID : SA11C.8665

Amount of Each Receipt this Period
 1000.00

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

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).....

1000.00

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

32000.00

**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 21 OF 36		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

Full Name (Last, First, Middle Initial)
A. American Express Collections

Mailing Address P.O. Box 981540

City El Paso State TX Zip Code 79998

Purpose of Disbursement Merchant fees

Candidate Name

Office Sought: House Senate President

Disbursement For: 2012 Primary General Other (specify)

State: District:

Date of Disbursement: 11 / 01 / 2012

Amount of Each Disbursement this Period: 7.95

Transaction ID : SB17.8891

Full Name (Last, First, Middle Initial)
B. American Express Collections

Mailing Address P.O. Box 981540

City El Paso State TX Zip Code 79998

Purpose of Disbursement Merchant fees

Candidate Name

Office Sought: House Senate President

Disbursement For: 2012 Primary General Other (specify)

State: District:

Date of Disbursement: 11 / 05 / 2012

Amount of Each Disbursement this Period: 7.38

Transaction ID : SB17.8876

Full Name (Last, First, Middle Initial)
C. American Gold Star Mothers

Mailing Address 1846 Crockett lane

City Gardenerville State NV Zip Code 89410

Purpose of Disbursement Donation for troop packages

Candidate Name

Office Sought: House Senate President

Disbursement For: 2012 Primary General Other (specify)

State: District:

Date of Disbursement: 11 / 05 / 2012

Amount of Each Disbursement this Period: 250.00

Transaction ID : SB17.8845

SUBTOTAL of Disbursements This Page (optional) 265.33

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 36		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

Full Name (Last, First, Middle Initial) A. American Strategies		Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2012
Mailing Address 675 Sierra Rose Drive		Amount of Each Disbursement this Period 10000.00 Transaction ID : SB17.8851
City Reno	State NV	
Zip Code 89511	Purpose of Disbursement Campaign management	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2011	State: District:	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input checked="" type="checkbox"/> Other (specify) Special-General	

Full Name (Last, First, Middle Initial) B. Arco		Date of Disbursement M M / D D / Y Y Y Y 10 / 18 / 2012
Mailing Address 4340 N Carson St		Amount of Each Disbursement this Period 68.41 Transaction ID : SB17.8921
City Carson City	State NV	
Zip Code 89703	Purpose of Disbursement Fuel in lieu of mileage	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	State: District:	
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	<input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) C. Arco		Date of Disbursement M M / D D / Y Y Y Y 10 / 26 / 2012
Mailing Address 4340 N Carson St		Amount of Each Disbursement this Period 45.01 Transaction ID : SB17.8908
City Carson City	State NV	
Zip Code 89703	Purpose of Disbursement Fuel in lieu of mileage	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	State: District:	
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	<input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	10113.42
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 36		
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

Full Name (Last, First, Middle Initial) A. Authnet Gateway		Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2012
Mailing Address P.O. Box 8999		Amount of Each Disbursement this Period 24.85
City San Francisco	State CA	
Zip Code 94128	Purpose of Disbursement Bank charges	Transaction ID : SB17.8885
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Greg Bailor Jr.		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2012
Mailing Address 3872 West Seventh St		Amount of Each Disbursement this Period 3500.00
City Reno	State NV	
Zip Code 89503	Purpose of Disbursement Consulting fees - campaign administration	Transaction ID : SB17.8849
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Bauserman Group		Date of Disbursement M M / D D / Y Y Y Y 11 / 26 / 2012
Mailing Address 500 Damonte Ranch Pkwy		Amount of Each Disbursement this Period 2951.67
City Reno	State NV	
Zip Code 89521	Purpose of Disbursement Campaign advertising	Transaction ID : SB17.8940
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	6476.52
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 36	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

Full Name (Last, First, Middle Initial) A. Casey Neilon & Associates, LLC		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2012
Mailing Address 503 N Division St		Amount of Each Disbursement this Period 4000.00
City Carson City	State NV	
Zip Code 89703	Purpose of Disbursement Accounting fees	Transaction ID : SB17.8847
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <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 & Associates, LLC		Date of Disbursement M M / D D / Y Y Y Y 11 / 26 / 2012
Mailing Address 503 N Division St		Amount of Each Disbursement this Period 3158.75
City Carson City	State NV	
Zip Code 89703	Purpose of Disbursement Accounting fees	Transaction ID : SB17.8933
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Casey Neilon & Associates, LLC		Date of Disbursement M M / D D / Y Y Y Y 11 / 26 / 2012
Mailing Address 503 N Division St		Amount of Each Disbursement this Period 21.56
City Carson City	State NV	
Zip Code 89703	Purpose of Disbursement Postage	Transaction ID : SB17.8938
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	7180.31
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 36		
	<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		Date of Disbursement M M / D D / Y Y Y Y 10 / 29 / 2012
Mailing Address 1102 North Carson Street		Amount of Each Disbursement this Period 64.45
City Carson City	State NV	
Zip Code 89703	Purpose of Disbursement Fuel in lieu of mileage	Transaction ID : SB17.8903
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Delta Air		Date of Disbursement M M / D D / Y Y Y Y 10 / 18 / 2012
Mailing Address P.O. Box 20706		Amount of Each Disbursement this Period 313.00
City Atlanta	State GA	
Zip Code 30320	Purpose of Disbursement Campaign airfare	Transaction ID : SB17.8927
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. El Dorado Hotel		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2012
Mailing Address PO Box 3399		Amount of Each Disbursement this Period 587.35
City Reno	State NV	
Zip Code 89505	Purpose of Disbursement Fundraising expenses - food and beverage	Transaction ID : SB17.8848
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	964.80
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 36	
	<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 Mari St Martin		Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2012
Mailing Address 50 S Jones Blvd Ste 202		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB17.8889
City Las Vegas	State NV Zip Code 89107	
Purpose of Disbursement Campaign contribution - state and local race		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Richard Goddard		Date of Disbursement M M / D D / Y Y Y Y 11 / 26 / 2012
Mailing Address 215 Prince St		Amount of Each Disbursement this Period 10000.00 Transaction ID : SB17.8928
City Alexandria	State VA Zip Code 22314	
Purpose of Disbursement Stipend		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Hutchison for Senate		Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2012
Mailing Address 10080 West Alta		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB17.8878
City Las Vegas	State NV Zip Code 89145	
Purpose of Disbursement Campaign contribution - state and local race		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	12000.00
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 27 OF 36	
	<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. Hyatt Hotel		Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2012
Mailing Address 111 Country Club Drive		Amount of Each Disbursement this Period 220.00
City Incline Village	State NV Zip Code 89451	
Purpose of Disbursement Lodging campaign travel	Category/Type	Transaction ID : SB17.8882
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Johnnys Ristorante		Date of Disbursement M M / D D / Y Y Y Y 10 / 23 / 2012
Mailing Address 4245 West 4th Street		Amount of Each Disbursement this Period 300.00
City Reno	State NV Zip Code 89523	
Purpose of Disbursement Fundraising - food and beverage	Category/Type	Transaction ID : SB17.8917
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Kaempfer Crowell Renshaw Gronauer & Fiore		Date of Disbursement M M / D D / Y Y Y Y 11 / 26 / 2012
Mailing Address 8345 West Sunset Road Suite 250		Amount of Each Disbursement this Period 292.50
City Las Vegas	State NV Zip Code 89113	
Purpose of Disbursement Attorney fees	Category/Type	Transaction ID : SB17.8939
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	812.50
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 28 OF 36			
	<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. Maverick		Date of Disbursement M M / D D / Y Y Y Y 10 / 18 / 2012
Mailing Address 2445 Riverboat Rd		Amount of Each Disbursement this Period 64.34
City Dayton	State NV	Zip Code 89403
Purpose of Disbursement Fuel in lieu of mileage	Category/Type	
Candidate Name	Transaction ID : SB17.8923	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Maverick		Date of Disbursement M M / D D / Y Y Y Y 10 / 24 / 2012
Mailing Address 2445 Riverboat Rd		Amount of Each Disbursement this Period 61.25
City Dayton	State NV	Zip Code 89403
Purpose of Disbursement Fuel in lieu of mileage	Category/Type	
Candidate Name	Transaction ID : SB17.8913	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Maverick		Date of Disbursement M M / D D / Y Y Y Y 10 / 24 / 2012
Mailing Address 2445 Riverboat Rd		Amount of Each Disbursement this Period 53.14
City Dayton	State NV	Zip Code 89403
Purpose of Disbursement Fuel in lieu of mileage	Category/Type	
Candidate Name	Transaction ID : SB17.8914	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	178.73
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 29 OF 36	
	<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. Maverick		Date of Disbursement M M / D D / Y Y Y Y 11 / 06 / 2012
Mailing Address 2445 Riverboat Rd		Amount of Each Disbursement this Period 54.12
City Dayton	State NV	
Zip Code 89403	Purpose of Disbursement Fuel in lieu of mileage campaign travel	Transaction ID : SB17.8873
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. MGM Grand		Date of Disbursement M M / D D / Y Y Y Y 11 / 20 / 2012
Mailing Address 3799 Las Vegas Boulevard South		Amount of Each Disbursement this Period 312.16
City Las Vegas	State NV	
Zip Code 89109	Purpose of Disbursement Lodging - campaign travel	Transaction ID : SB17.8855
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Nevada Day Parade Committee		Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2012
Mailing Address P.O. Box 999		Amount of Each Disbursement this Period 320.00
City Carson City	State NV	
Zip Code 89702	Purpose of Disbursement Donation - Governor's Dinner	Transaction ID : SB17.8920
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	686.28
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 36			
	<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. Northwest Territorial Mint		Date of Disbursement M M / D D / Y Y Y Y 11 / 06 / 2012
Mailing Address 80 E Airpark Vista		Amount of Each Disbursement this Period 3834.50
City Dayton	State NV	
Zip Code 89403	Purpose of Disbursement Commemorative coins	Transaction ID : SB17.8843
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. PORTer Group LLC		Date of Disbursement M M / D D / Y Y Y Y 11 / 26 / 2012
Mailing Address PO Box 60246		Amount of Each Disbursement this Period 11313.47
City Boulder City	State NV	
Zip Code 89006	Purpose of Disbursement Fundraising Commissions	Transaction ID : SB17.8936
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Sign Pro		Date of Disbursement M M / D D / Y Y Y Y 11 / 26 / 2012
Mailing Address 1501 North Carson		Amount of Each Disbursement this Period 260.74
City Carson City	State NV	
Zip Code 89706	Purpose of Disbursement Signage	Transaction ID : SB17.8932
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	15408.71
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 31 OF 36			
	<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 11 / 16 / 2012
Mailing Address P.O. Box 36647-1CR		Amount of Each Disbursement this Period 455.60
City Dallas	State TX	
Zip Code 73235	Purpose of Disbursement Airfare - campaign travel	Transaction ID : SB17.8863
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. The M Group		Date of Disbursement M M / D D / Y Y Y Y 11 / 26 / 2012
Mailing Address 100 Luna Park #156		Amount of Each Disbursement this Period 2048.08
City Alexandria	State VA	
Zip Code 22305	Purpose of Disbursement Fundraising commissions	Transaction ID : SB17.8934
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <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 11 / 14 / 2012
Mailing Address PO Box 6995		Amount of Each Disbursement this Period 208.13
City POrtland	State OR	
Zip Code 97228	Purpose of Disbursement Merchant fees	Transaction ID : SB17.8864
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2711.81
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 32 OF 36	
	<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. Wes Duncan for Assembly			Date of Disbursement M M / D D / Y Y Y Y 10 / 25 / 2012	
Mailing Address 3958 Silver Saber Ct			Amount of Each Disbursement this Period 750.00	
City Las Vegas	State NV	Zip Code 89129		
Purpose of Disbursement Campaign contribution - state and local		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

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

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

SUBTOTAL of Disbursements This Page (optional).....	750.00
TOTAL This Period (last page this line number only).....	57548.41

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 33 OF 36	
	<input type="checkbox"/> 17 20a	<input checked="" type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

Full Name (Last, First, Middle Initial) A. CHRIS EDWARDS FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y 10 / 26 / 2012
Mailing Address PO BOX 13105		Amount of Each Disbursement this Period 1000.00
City LAS VEGAS	State NV Zip Code 89112	
Purpose of Disbursement Campaign contributions	Candidate Name	Transaction ID : SB18.8945
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: NV District: 01	Category/Type	

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

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

SUBTOTAL of Disbursements This Page (optional).....	1000.00
TOTAL This Period (last page this line number only).....	1000.00

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 American Strategies		Nature of Debt (Purpose): Professional Fees
Mailing Address 675 Sierra Rose Drive		
City	State	Zip Code
Reno	NV	89511

Outstanding Balance Beginning This Period	Transaction ID : SD10.7265	
<input type="text" value="20000.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="10000.00"/>	<input type="text" value="10000.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Redrock Strategies		Nature of Debt (Purpose): Special Election Win Bonus
Mailing Address 9500 W Flamingo Rd #203		
City	State	Zip Code
Las Vegas	NV	89147

Outstanding Balance Beginning This Period	Transaction ID : SD10.7597	
<input type="text" value="2000.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="2000.00"/>

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

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

1) SUBTOTALS This Period This Page (optional)	<input type="text" value="16500.00"/>
2) TOTALS This Period (last page this line number only)	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

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

Form/Schedule: SD10

Transaction ID : SD10.7593

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

Form/Schedule:

Transaction ID:

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

NAME OF COMMITTEE (In Full)
Amodei for Nevada

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

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

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

Outstanding Balance Beginning This Period 11000.00	Transaction ID : SD10.7284	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 11000.00

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

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

1) SUBTOTALS This Period This Page (optional)	12500.00
2) TOTALS This Period (last page this line number only)	29000.00
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) ▶	29000.00