

# 48-HOUR NOTICE OF CONTRIBUTIONS/LOANS RECEIVED

(See Reverse Side for Instructions)

To be used to report all contributions (including loans) of \$1000 or more, received within 20 days of the election.

<b>1. NAME OF COMMITTEE IN FULL</b> Amodei for Nevada			
ADDRESS (number and street) 503 N Division St			
CITY Carson City	STATE NV	ZIP CODE 89703	
<b>2. NAME OF CANDIDATE</b> AMODEI, MARK EUGENE, , ,		<b>3. OFFICE SOUGHT</b> (State and District) House NV 02	
<b>4. FEC IDENTIFICATION NUMBER</b> C00496760			
<b>5. IS THIS AN AMENDMENT?</b> <input checked="" type="checkbox"/> NO, THIS IS A NEW FILING <input type="checkbox"/> YES, IT AMENDS THE NOTICE FILED ON _____ / _____ / _____			
<b>A. FULL NAME</b> Adams, Weston, , ,			
MAILING ADDRESS 4129 West Cheyenne Avenue		Name of Employer Western States Contracting Inc	
CITY North Las Vegas	STATE NV	ZIP CODE 89032	Date (month, day, year) 10/26/2022
Occupation Contractor		Amount 2900.00	
<b>B. FULL NAME</b> Brown, David, , ,			
MAILING ADDRESS 5309 W Rome Blvd		Name of Employer Land Development Associates	
CITY Las Vegas	STATE NV	ZIP CODE 89131	Date (month, day, year) 10/26/2022
Occupation Land Development Consultant		Amount 2500.00	
<b>C. FULL NAME</b> _____			
MAILING ADDRESS _____		Name of Employer _____	
CITY _____	STATE _____	ZIP CODE _____	Date (month, day, year) _____
Occupation _____		Amount _____	
<b>D. FULL NAME</b> _____			
MAILING ADDRESS _____		Name of Employer _____	
CITY _____	STATE _____	ZIP CODE _____	Date (month, day, year) _____
Occupation _____		Amount _____	
<b>E. FULL NAME</b> _____			
MAILING ADDRESS _____		Name of Employer _____	
CITY _____	STATE _____	ZIP CODE _____	Date (month, day, year) _____
Occupation _____		Amount _____	
<b>SIGNATURE (optional)</b> Neilon, Nicola, , ,		<b>DATE</b> 10/26/2022	<b>For further information contact:</b> Federal Election Commission 999 E Street, NW, Washington, DC 20463 Toll Free 800-424-9530, Local 202-694-1100
[Electronically Filed]			

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