

**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
REPORTNEW
(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

in the
State of(c) 30-Day **POST**-Election Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

M M / D D / Y Y Y Y

in the
State of

5. Covering Period

M M / D D / Y Y Y Y
01 / 01 / 2014

through

M M / D D / Y Y Y Y
03 / 31 / 2014

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

Type or Print Name of Treasurer Nicola Neilon

Signature of Treasurer

Nicola Neilon

[Electronically Filed]

Date

M M / D D / Y Y Y Y
04 / 15 / 2014

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

FEC Form 3 (Revised 02/2003)

PAGE 2 / 87

Write or Type Committee Name

Amodei for Nevada

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	1		2	0	1	4

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	1	4

	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))....	141101.00	339222.00
(b) Total Contribution Refunds (from Line 20(d))	0.00	500.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	141101.00	338722.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	40435.55	251224.31
(b) Total Offsets to Operating Expenditures (from Line 14).....	890.00	2081.90
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	39545.55	249142.41
8. Cash on Hand at Close of Reporting Period (from Line 27).....	254495.39	
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 12/2003)

PAGE 3 / 87

Write or Type Committee Name

Amodei for Nevada

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	1		2	0	1	4

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	1	4

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).....

102400.00

181475.00

(ii) Unitemized.....

2201.00

8197.00

(iii) TOTAL of contributions from individuals ▶

104601.00

189672.00

(b) Political Party Committees.....

0.00

0.00

(c) Other Political Committees (such as PACs).....

36500.00

149550.00

(d) The Candidate.....

0.00

0.00

(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..

141101.00

339222.00

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.)

890.00

2081.90

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)..... ▶

141991.00

341303.90

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3 (Revised 02/2003)

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II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	40435.55	251224.31
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	78600.00	79600.00
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	500.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	500.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	119035.55	331324.31

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	231539.94
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	141991.00
25. SUBTOTAL (add Line 23 and Line 24).....	373530.94
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	119035.55
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	254495.39

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 87

(check only one)

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

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) Leon Aberasturi			Date of Receipt <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>01</td> <td></td> <td>16</td> <td></td> <td>2014</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	01		16		2014
M M	/	D D	/	Y Y Y Y										
01		16		2014										
Mailing Address 1710 Short Oak Ct			Transaction ID : SA11Al.10102											
City Fernley	State NV	Zip Code 89408	Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="5">250.00</td> </tr> </table>		250.00									
250.00														
FEC ID number of contributing federal political committee. <div>C</div>			Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="5">250.00</td> </tr> </table>		250.00									
250.00														
Name of Employer State of Nevada		Occupation District Court Judge	Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="5">250.00</td> </tr> </table>		250.00									
250.00														
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date <table border="1"> <tr> <td colspan="5">250.00</td> </tr> </table>			250.00									
250.00														

B. Full Name (Last, First, Middle Initial) Leslie Adams			Date of Receipt <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>01</td> <td></td> <td>29</td> <td></td> <td>2014</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	01		29		2014
M M	/	D D	/	Y Y Y Y										
01		29		2014										
Mailing Address 14100 Saddlebow			Transaction ID : SA11Al.10167											
City Reno	State NV	Zip Code 89511	Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="5">500.00</td> </tr> </table>		500.00									
500.00														
FEC ID number of contributing federal political committee. <div>C</div>			Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="5">500.00</td> </tr> </table>		500.00									
500.00														
Name of Employer Adams & Associates		Occupation President	Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="5">500.00</td> </tr> </table>		500.00									
500.00														
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date <table border="1"> <tr> <td colspan="5">500.00</td> </tr> </table>			500.00									
500.00														

C. Full Name (Last, First, Middle Initial) Lex Adams			Date of Receipt <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>02</td> <td></td> <td>19</td> <td></td> <td>2014</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	02		19		2014
M M	/	D D	/	Y Y Y Y										
02		19		2014										
Mailing Address PO Box 19696			Transaction ID : SA11Al.10436											
City reno	State NV	Zip Code 89511	Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="5">2000.00</td> </tr> </table>		2000.00									
2000.00														
FEC ID number of contributing federal political committee. <div>C</div>			Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="5">2000.00</td> </tr> </table>		2000.00									
2000.00														
Name of Employer Resorts West		Occupation President	Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="5">2000.00</td> </tr> </table>		2000.00									
2000.00														
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date <table border="1"> <tr> <td colspan="5">4500.00</td> </tr> </table>			4500.00									
4500.00														

SUBTOTAL of Receipts This Page (optional).....			<table border="1"> <tr> <td colspan="5">2750.00</td> </tr> </table>		2750.00				
2750.00									
TOTAL This Period (last page this line number only).....			<table border="1"> <tr> <td colspan="5"></td> </tr> </table>						

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 87
 (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) Lex Adams			Date of Receipt M M / D D / Y Y Y Y 02 / 19 / 2014
Mailing Address PO Box 19696			Transaction ID : SA11AI.10476
City reno	State NV	Zip Code 89511	
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period -1900.00
Name of Employer Resorts West	Occupation President		Redesignate:
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date		[MEMO ITEM]

Full Name (Last, First, Middle Initial) Lex Adams			Date of Receipt M M / D D / Y Y Y Y 02 / 19 / 2014
Mailing Address PO Box 19696			Transaction ID : SA11AI.10477
City reno	State NV	Zip Code 89511	
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 1900.00
Name of Employer Resorts West	Occupation President		Redesignate: to General
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date		[MEMO ITEM]

Full Name (Last, First, Middle Initial) Gary Ailes			Date of Receipt M M / D D / Y Y Y Y 03 / 27 / 2014
Mailing Address 2961 Conte Dr			Transaction ID : SA11AI.10072
City Carson City	State NV	Zip Code 89701	
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 1000.00
Name of Employer Sierra Veterinary Hospital	Occupation Veterinarian		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00		

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

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

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FOR LINE NUMBER:

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(check only one)

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

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

Full Name (Last, First, Middle Initial) Shelly Aldean		Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y</td> </tr> <tr> <td>01</td> <td></td> <td>29</td> <td></td> <td>2014</td> </tr> </table>	M M M	/	D D D	/	Y Y Y Y Y	01		29		2014
M M M	/	D D D	/	Y Y Y Y Y								
01		29		2014								
Mailing Address 2614 Bohr Rd		Transaction ID : SA11AI.10183										
City Carson City	State NV	Zip Code 89706										
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period <table border="1"> <tr> <td>500.00</td> </tr> </table>	500.00									
500.00												
Name of Employer Carson City	Occupation Supervisor											
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <table border="1"> <tr> <td>1000.00</td> </tr> </table>	1000.00										
1000.00												

Full Name (Last, First, Middle Initial) Frances P Alling		Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y</td> </tr> <tr> <td>03</td> <td></td> <td>17</td> <td></td> <td>2014</td> </tr> </table>	M M M	/	D D D	/	Y Y Y Y Y	03		17		2014
M M M	/	D D D	/	Y Y Y Y Y								
03		17		2014								
Mailing Address PO Box 1005		Transaction ID : SA11AI.10200										
City Zephyr Cove	State NV	Zip Code 89448										
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period <table border="1"> <tr> <td>300.00</td> </tr> </table>	300.00									
300.00												
Name of Employer information requested	Occupation information requested											
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <table border="1"> <tr> <td>300.00</td> </tr> </table>	300.00										
300.00												

Full Name (Last, First, Middle Initial) George Allison		Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y</td> </tr> <tr> <td>03</td> <td></td> <td>17</td> <td></td> <td>2014</td> </tr> </table>	M M M	/	D D D	/	Y Y Y Y Y	03		17		2014
M M M	/	D D D	/	Y Y Y Y Y								
03		17		2014								
Mailing Address 2174 Waterford Pl		Transaction ID : SA11AI.10199										
City Carson City	State NV	Zip Code 89703										
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period <table border="1"> <tr> <td>500.00</td> </tr> </table>	500.00									
500.00												
Name of Employer Allison Mackenzie	Occupation Attorney											
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <table border="1"> <tr> <td>500.00</td> </tr> </table>	500.00										
500.00												

SUBTOTAL of Receipts This Page (optional)	<table border="1"> <tr> <td>1300.00</td> </tr> </table>	1300.00
1300.00		
TOTAL This Period (last page this line number only)	<table border="1"> <tr> <td></td> </tr> </table>	

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 87

(check only one)

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

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

A. Full Name (Last, First, Middle Initial) Robert E. Armstrong			Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y</td> </tr> <tr> <td>01</td> <td></td> <td>29</td> <td></td> <td>2014</td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y	01		29		2014
M M M	/	D D D	/	Y Y Y Y Y										
01		29		2014										
Mailing Address 1750 Skyline Blvd.			Transaction ID : SA11AI.10151											
City	State	Zip Code												
Reno	NV	89509												
FEC ID number of contributing federal political committee.			Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="5">1000.00</td> </tr> </table>		1000.00									
1000.00														
Name of Employer McDonald, Carano & Wilson		Occupation Attorney												
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date <table border="1"> <tr> <td colspan="5">1000.00</td> </tr> </table>			1000.00									
1000.00														
B. Full Name (Last, First, Middle Initial) Kristen Avansino			Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y</td> </tr> <tr> <td>02</td> <td></td> <td>06</td> <td></td> <td>2014</td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y	02		06		2014
M M M	/	D D D	/	Y Y Y Y Y										
02		06		2014										
Mailing Address 165 W Liberty St STE 200			Transaction ID : SA11AI.10057											
City	State	Zip Code												
Reno	NV	89501												
FEC ID number of contributing federal political committee.			Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="5">2000.00</td> </tr> </table>		2000.00									
2000.00														
Name of Employer EL Wiegand Foundation		Occupation Executive Director												
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date <table border="1"> <tr> <td colspan="5">2000.00</td> </tr> </table>			2000.00									
2000.00														
C. Full Name (Last, First, Middle Initial) Joanne Ballardini			Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y</td> </tr> <tr> <td>01</td> <td></td> <td>16</td> <td></td> <td>2014</td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y	01		16		2014
M M M	/	D D D	/	Y Y Y Y Y										
01		16		2014										
Mailing Address PO Box 1984			Transaction ID : SA11AI.10097											
City	State	Zip Code												
Carson City	NV	89701												
FEC ID number of contributing federal political committee.			Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="5">500.00</td> </tr> </table>		500.00									
500.00														
Name of Employer None		Occupation Retired												
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date <table border="1"> <tr> <td colspan="5">500.00</td> </tr> </table>			500.00									
500.00														
SUBTOTAL of Receipts This Page (optional).....			<table border="1"> <tr> <td colspan="5">3500.00</td> </tr> </table>		3500.00									
3500.00														
TOTAL This Period (last page this line number only).....			<table border="1"> <tr> <td colspan="5"></td> </tr> </table>											

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

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

FOR LINE NUMBER:

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(check only one)

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

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

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

Mailing Address **PO Box 1984**

City Carson City	State NV	Zip Code 89701
----------------------------	--------------------	--------------------------

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

Name of Employer None	Occupation Retired
---------------------------------	------------------------------

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
700.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 17 / 2014

Transaction ID : SA11AI.10207

Amount of Each Receipt this Period

200.00

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

Mailing Address **100 Sawbuck Road**

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

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

Name of Employer Dennis Banks Construction	Occupation Owner
--	----------------------------

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt

M M / D D / Y Y Y Y
01 / 29 / 2014

Transaction ID : SA11AI.10164

Amount of Each Receipt this Period

500.00

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

Mailing Address **3480 GS Richards Blvd #302**

City Carson City	State NV	Zip Code 89703
----------------------------	--------------------	--------------------------

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

Name of Employer self	Occupation Dentist
---------------------------------	------------------------------

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 25 / 2014

Transaction ID : SA11AI.10210

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:

PAGE 10 OF 87

(check only one)

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

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

A. Full Name (Last, First, Middle Initial) Leo Bergin		Date of Receipt <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>01</td> <td></td> <td>29</td> <td></td> <td>2014</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	01		29		2014
M M	/	D D	/	Y Y Y Y									
01		29		2014									
Mailing Address 160 Greenridge Drive		Transaction ID : SA11AI.10168											
City Reno	State NV	Zip Code 89509	Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="4"></td> <td>500.00</td> </tr> </table>					500.00					
				500.00									
FEC ID number of contributing federal political committee. <div>C</div>													
Name of Employer None	Occupation Retired												
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <table border="1"> <tr> <td colspan="4"></td> <td>500.00</td> </tr> </table>							500.00					
				500.00									

B. Full Name (Last, First, Middle Initial) Frederic Boyden		Date of Receipt <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>01</td> <td></td> <td>29</td> <td></td> <td>2014</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	01		29		2014
M M	/	D D	/	Y Y Y Y									
01		29		2014									
Mailing Address 2380 Tuttle Circle		Transaction ID : SA11AI.10143											
City Reno	State NV	Zip Code 89509	Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="4"></td> <td>500.00</td> </tr> </table>					500.00					
				500.00									
FEC ID number of contributing federal political committee. <div>C</div>													
Name of Employer Veterans Hospital	Occupation Physician												
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <table border="1"> <tr> <td colspan="4"></td> <td>500.00</td> </tr> </table>							500.00					
				500.00									

C. Full Name (Last, First, Middle Initial) Patricia Cafferata		Date of Receipt <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>01</td> <td></td> <td>16</td> <td></td> <td>2014</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	01		16		2014
M M	/	D D	/	Y Y Y Y									
01		16		2014									
Mailing Address 2620 Spinnaker Dr		Transaction ID : SA11AI.10040											
City Reno	State NV	Zip Code 89519	Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="4"></td> <td>500.00</td> </tr> </table>					500.00					
				500.00									
FEC ID number of contributing federal political committee. <div>C</div>													
Name of Employer Patricia Cafferata Esquire	Occupation Lawyer												
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <table border="1"> <tr> <td colspan="4"></td> <td>800.00</td> </tr> </table>							800.00					
				800.00									

SUBTOTAL of Receipts This Page (optional).....	<table border="1"> <tr> <td colspan="4"></td> <td>1500.00</td> </tr> </table>					1500.00
				1500.00		
TOTAL This Period (last page this line number only).....	<table border="1"> <tr> <td colspan="4"></td> <td></td> </tr> </table>					

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

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

FOR LINE NUMBER:

PAGE 11 OF 87

(check only one)

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

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

Full Name (Last, First, Middle Initial)

Richard Campagni

Mailing Address PO Box 3600

City

Carson City

State

NV

Zip Code

89702

FEC ID number of contributing
federal political committee.

C

Name of Employer

Capital Ford Mazda Hyundai

Occupation

Owner

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		27		2014

Transaction ID : SA11AI.10221

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

Malinda Campbell

Mailing Address 7280 Cheltenham Way

City

Reno

State

NV

Zip Code

89502

FEC ID number of contributing
federal political committee.

C

Name of Employer

Dynonemic Diesel

Occupation

Owner

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
01		22		2014

Transaction ID : SA11AI.10126

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

Angelina Capurro

Mailing Address 30 Promontory Pointe

City

Reno

State

NV

Zip Code

89519

FEC ID number of contributing
federal political committee.

C

Name of Employer

None

Occupation

Housewife

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
01		22		2014

Transaction ID : SA11AI.10127

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:

PAGE 12 OF 87

(check only one)

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

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

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

Mailing Address 550 W. Plumb Ln Ste. B436

City Reno	State NV	Zip Code 89509
--------------	-------------	-------------------

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

Name of Employer El Dorado Hotel Casino	Occupation Executive Director
--	----------------------------------

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
 1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		29		2014

Transaction ID : SA11AI.10050

Amount of Each Receipt this Period

500.00

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

Mailing Address PO Box 2540

City Reno	State NV	Zip Code 89505
--------------	-------------	-------------------

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

Name of Employer McDonald Carano and Wilson	Occupation Attorney
--	------------------------

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
 5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		29		2014

Transaction ID : SA11AI.10186

Amount of Each Receipt this Period

5000.00

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

Mailing Address PO Box 2540

City Reno	State NV	Zip Code 89505
--------------	-------------	-------------------

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

Name of Employer McDonald Carano and Wilson	Occupation Attorney
--	------------------------

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
 2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		29		2014

Transaction ID : SA11AI.10457

Amount of Each Receipt this Period

-2500.00

Reattribute:

3000.00

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

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)

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☒ 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) Rhonda Carano		Date of Receipt M M / D D / Y Y Y Y 01 / 29 / 2014	
Mailing Address PO Box 2540		Transaction ID : SA11AI.10458	
City Reno	State NV	Zip Code 89505	Amount of Each Receipt this Period 2500.00
FEC ID number of contributing federal political committee. C		Reattribute:	
Name of Employer None	Occupation Housewife		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2500.00		
B. Full Name (Last, First, Middle Initial) Donald L. Carlson		Date of Receipt M M / D D / Y Y Y Y 01 / 29 / 2014	
Mailing Address 1912 Marian Ave.		Transaction ID : SA11AI.10172	
City Carson City	State NV	Zip Code 89706	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C		Reattribute:	
Name of Employer retired	Occupation retired		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00		
C. Full Name (Last, First, Middle Initial) SEVERIN CARLSON		Date of Receipt M M / D D / Y Y Y Y 01 / 29 / 2014	
Mailing Address 10400 Chantilly Way		Transaction ID : SA11AI.10049	
City Reno	State NV	Zip Code 89521	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C		Reattribute:	
Name of Employer Kaempfer Crowell	Occupation Attorney		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00		
SUBTOTAL of Receipts This Page (optional).....		3250.00	
TOTAL This Period (last page this line number only).....			

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 14 OF 87

(check only one)

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

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NAME OF COMMITTEE (In Full)
Amodei for NevadaFull Name (Last, First, Middle Initial)
A. SEVERIN CARLSON

Mailing Address 10400 Chantilly Way

City	State	Zip Code
Reno	NV	89521

FEC ID number of contributing
federal political committee.

C

Name of Employer
Kaempfer CrowellOccupation
Attorney

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		27		2014

Transaction ID : SA11AI.10068

Amount of Each Receipt this Period

500.00

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

Mailing Address 1200 Financial Blvd. Suite 101

City	State	Zip Code
Reno	NV	89502

FEC ID number of contributing
federal political committee.

C

Name of Employer
City of RenoOccupation
Mayor

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
01		29		2014

Transaction ID : SA11AI.10144

Amount of Each Receipt this Period

1000.00

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

Mailing Address PO Box 5596

City	State	Zip Code
Incline Village	NV	89450

FEC ID number of contributing
federal political committee.

C

Name of Employer
CT&E, Inc.Occupation
Real Estate Consultant

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
01		29		2014

Transaction ID : SA11AI.10177

Amount of Each Receipt this Period

500.00

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

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

2000.00

×	11a	11b	11c	11d	
	12	13a	13b	14	15

NAME OF COMMITTEE (In Full)
Amodei for Nevada

FEC Schedule A (Form 3) (Revised 02/2009)

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

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

Full Name (Last, First, Middle Initial) Deborah C. Day		Date of Receipt <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>01</td> <td></td> <td>29</td> <td></td> <td>2014</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	01		29		2014
M M	/	D D	/	Y Y Y Y								
01		29		2014								
Mailing Address 165 W. Liberty Street Suite 100		Transaction ID : SA11AI.10179 Amount of Each Receipt this Period <table border="1"> <tr> <td>2600.00</td> </tr> </table>	2600.00									
2600.00												
City Reno	State NV		Zip Code 89501									
FEC ID number of contributing federal political committee. <table border="1"> <tr> <td>C</td> </tr> </table>			C									
C												
Name of Employer none	Occupation housewife											
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <table border="1"> <tr> <td>2600.00</td> </tr> </table>	2600.00										
2600.00												

Full Name (Last, First, Middle Initial) Theodore Day		Date of Receipt <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>01</td> <td></td> <td>29</td> <td></td> <td>2014</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	01		29		2014
M M	/	D D	/	Y Y Y Y								
01		29		2014								
Mailing Address 165 W Liberty St Ste 100		Transaction ID : SA11AI.10045 Amount of Each Receipt this Period <table border="1"> <tr> <td>2600.00</td> </tr> </table>	2600.00									
2600.00												
City Reno	State NV		Zip Code 89501									
FEC ID number of contributing federal political committee. <table border="1"> <tr> <td>C</td> </tr> </table>			C									
C												
Name of Employer Hale, Day & Gallagher	Occupation Investor											
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <table border="1"> <tr> <td>2600.00</td> </tr> </table>	2600.00										
2600.00												

Full Name (Last, First, Middle Initial) Norman Dianda		Date of Receipt <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>01</td> <td></td> <td>16</td> <td></td> <td>2014</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	01		16		2014
M M	/	D D	/	Y Y Y Y								
01		16		2014								
Mailing Address 2100 Holcomb Ranch Lane		Transaction ID : SA11AI.10110 Amount of Each Receipt this Period <table border="1"> <tr> <td>1000.00</td> </tr> </table>	1000.00									
1000.00												
City Reno	State NV		Zip Code 89511									
FEC ID number of contributing federal political committee. <table border="1"> <tr> <td>C</td> </tr> </table>			C									
C												
Name of Employer Q&D Construction	Occupation President											
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <table border="1"> <tr> <td>1000.00</td> </tr> </table>	1000.00										
1000.00												

SUBTOTAL of Receipts This Page (optional)	<table border="1"> <tr> <td>6200.00</td> </tr> </table>	6200.00
6200.00		
TOTAL This Period (last page this line number only)	<table border="1"> <tr> <td></td> </tr> </table>	

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

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

FOR LINE NUMBER:

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(check only one)

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

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

Full Name (Last, First, Middle Initial)

Perry DiLoreto

Mailing Address 985 Damonte Ranch Pkwy Ste. 310

City	State	Zip Code
Reno	NV	89521

FEC ID number of contributing federal political committee.

C

Name of Employer
DiLoreto ConstructionOccupation
Owner

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		15		2014

Transaction ID : SA11AI.10038

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

Rose Marie Dooley

Mailing Address 4330 Ross Drive

City	State	Zip Code
Reno	NV	89519

FEC ID number of contributing federal political committee.

C

Name of Employer
John & Rosemarie Dooley FamilyOccupation
Treasurer/Secretary

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		29		2014

Transaction ID : SA11AI.10174

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

Andrea Engleman

Mailing Address 500 Mary St

City	State	Zip Code
Carson City	NV	89703

FEC ID number of contributing federal political committee.

C

Name of Employer
SelfOccupation
Self

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		16		2014

Transaction ID : SA11AI.10037

Amount of Each Receipt this Period

1000.00

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

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

2000.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

A. Full Name (Last, First, Middle Initial)
Michelle M. Erlach

Mailing Address 633 Saint Lawrence Ave.

City Reno	State NV	Zip Code 89509-1441
--------------	-------------	------------------------

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

Name of Employer Sierra Nevada Corporation	Occupation Director of Corporate Communications
---	--

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt

M M / D D / Y Y Y Y
01 / 29 / 2014

Transaction ID : SA11AI.10153

Amount of Each Receipt this Period

500.00

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

Mailing Address PO Box 398

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

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

Name of Employer Legacy Land and Water	Occupation Principal
---	-------------------------

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 26 / 2014

Transaction ID : SA11AI.10212

Amount of Each Receipt this Period

1000.00

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

Mailing Address 3800 S. Virginia St.

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

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

Name of Employer Atlantis Casino Resort	Occupation General Manager
--	-------------------------------

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt

M M / D D / Y Y Y Y
01 / 24 / 2014

Transaction ID : SA11AI.10043

Amount of Each Receipt this Period

2600.00

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

4100.00

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

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

A. Full Name (Last, First, Middle Initial) John Farahi			Date of Receipt <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>03</td> <td></td> <td>27</td> <td></td> <td>2014</td> </tr> </table>			M M	/	D D	/	Y Y Y Y	03		27		2014
M M	/	D D	/	Y Y Y Y											
03		27		2014											
Mailing Address 3800 S. Virginia St.			Transaction ID : SA11AI.10078												
City Reno	State NV	Zip Code 89502	Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="5">500.00</td> </tr> </table>			500.00									
500.00															
FEC ID number of contributing federal political committee. <div>C</div>		Name of Employer Atlantis Casino Resort													
Occupation General Manager		Election Cycle-to-Date <table border="1"> <tr> <td colspan="5">3100.00</td> </tr> </table>				3100.00									
3100.00															
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)															
B. Full Name (Last, First, Middle Initial) John Farahi			Date of Receipt <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>03</td> <td></td> <td>27</td> <td></td> <td>2014</td> </tr> </table>			M M	/	D D	/	Y Y Y Y	03		27		2014
M M	/	D D	/	Y Y Y Y											
03		27		2014											
Mailing Address 3800 S. Virginia St.			Transaction ID : SA11AI.10483												
City Reno	State NV	Zip Code 89502	Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="5">-500.00</td> </tr> </table>			-500.00									
-500.00															
FEC ID number of contributing federal political committee. <div>C</div>		Name of Employer Atlantis Casino Resort													
Occupation General Manager		Election Cycle-to-Date <table border="1"> <tr> <td colspan="5"></td> </tr> </table>													
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Redesignate: to General [MEMO ITEM]													
C. Full Name (Last, First, Middle Initial) John Farahi			Date of Receipt <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>03</td> <td></td> <td>27</td> <td></td> <td>2014</td> </tr> </table>			M M	/	D D	/	Y Y Y Y	03		27		2014
M M	/	D D	/	Y Y Y Y											
03		27		2014											
Mailing Address 3800 S. Virginia St.			Transaction ID : SA11AI.10484												
City Reno	State NV	Zip Code 89502	Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="5">500.00</td> </tr> </table>			500.00									
500.00															
FEC ID number of contributing federal political committee. <div>C</div>		Name of Employer Atlantis Casino Resort													
Occupation General Manager		Election Cycle-to-Date <table border="1"> <tr> <td colspan="5"></td> </tr> </table>													
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Redesignate: from Primary [MEMO ITEM]													
SUBTOTAL of Receipts This Page (optional).....			<table border="1"> <tr> <td colspan="5">500.00</td> </tr> </table>			500.00									
500.00															
TOTAL This Period (last page this line number only).....			<table border="1"> <tr> <td colspan="5"></td> </tr> </table>												

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

Use separate schedule(s)
for each category of the
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(check only one)

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

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

A. Full Name (Last, First, Middle Initial)
Erik Fong

Mailing Address 2780 Cintoia Drive

City Sparks	State NV	Zip Code 89434
----------------	-------------	-------------------

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

Name of Employer MBA Architecture & Design	Occupation Architect
---	-------------------------

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
 500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
01		22		2014

Transaction ID : SA11AI.10122

Amount of Each Receipt this Period

500.00

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

Mailing Address 100 W LIBERTY

City RENO	State NV	Zip Code 89501
--------------	-------------	-------------------

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

Name of Employer MCDONALD CARANO	Occupation ATTORNEY
-------------------------------------	------------------------

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
 500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
01		29		2014

Transaction ID : SA11AI.10160

Amount of Each Receipt this Period

500.00

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

Mailing Address 5405 mae Anne Ave

City Reno	State NV	Zip Code 89523
--------------	-------------	-------------------

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

Name of Employer Summit Engineering	Occupation Engineer
--	------------------------

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
 500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		17		2014

Transaction ID : SA11AI.10061

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)
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(check only one)

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

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

A. Full Name (Last, First, Middle Initial) Fred Gibson		Date of Receipt M M / D D / Y Y Y Y 03 / 24 / 2014	
Mailing Address 3204 Plaza De Rafael		Transaction ID : SA11AI.10064	
City Las Vegas	State NV	Zip Code 89102	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C			
Name of Employer None	Occupation Retired		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00		
B. Full Name (Last, First, Middle Initial) REW GOODENOW		Date of Receipt M M / D D / Y Y Y Y 01 / 29 / 2014	
Mailing Address 50 W Liberty St Ste 750		Transaction ID : SA11AI.10055	
City Reno	State NV	Zip Code 89501	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C			
Name of Employer Parsons Behle & Latimer	Occupation Attorney		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00		
C. Full Name (Last, First, Middle Initial) REW GOODENOW		Date of Receipt M M / D D / Y Y Y Y 03 / 27 / 2014	
Mailing Address 50 W Liberty St Ste 750		Transaction ID : SA11AI.10075	
City Reno	State NV	Zip Code 89501	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C			
Name of Employer Parsons Behle & Latimer	Occupation Attorney		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00		
SUBTOTAL of Receipts This Page (optional).....		1500.00	
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
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(check only one)

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

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

Full Name (Last, First, Middle Initial) Terry Gough		Date of Receipt M M / D D / Y Y Y Y 03 / 27 / 2014
Mailing Address 4100 Inwood Lane		Transaction ID : SA11Al.10073
City Reno	State NV	Zip Code 89502
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 150.00
Name of Employer retired	Occupation retired	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 350.00	

Full Name (Last, First, Middle Initial) JOHN W. GRIFFIN		Date of Receipt M M / D D / Y Y Y Y 01 / 29 / 2014
Mailing Address 4050 Lone Tree Lane		Transaction ID : SA11Al.10157
City Reno	State NV	Zip Code 89511-7680
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Information Requested	Occupation Information Requested	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) Nancy Hartman		Date of Receipt M M / D D / Y Y Y Y 03 / 27 / 2014
Mailing Address 150 Plantation Dr		Transaction ID : SA11Al.10493
City Carson City	State NV	Zip Code 89703
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Information requested	Occupation Information requested	Reattribute: Nancy Hartman
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

SUBTOTAL of Receipts This Page (optional).....	900.00
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
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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

A. Full Name (Last, First, Middle Initial) Stephen Hartman		Date of Receipt M M / D D / Y Y Y Y 01 / 29 / 2014	
Mailing Address 150 Plantation Dr		Transaction ID : SA11AI.10044	
City Carson City	State NV	Zip Code 89703	Amount of Each Receipt this Period 2600.00
FEC ID number of contributing federal political committee. C			
Name of Employer Hartman & Hartman	Occupation Attorney		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 3500.00		
B. Full Name (Last, First, Middle Initial) Stephen Hartman		Date of Receipt M M / D D / Y Y Y Y 01 / 29 / 2014	
Mailing Address 150 Plantation Dr		Transaction ID : SA11AI.10495	
City Carson City	State NV	Zip Code 89703	Amount of Each Receipt this Period -2600.00
FEC ID number of contributing federal political committee. C			
Name of Employer Hartman & Hartman	Occupation Attorney		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date		
C. Full Name (Last, First, Middle Initial) Stephen Hartman		Date of Receipt M M / D D / Y Y Y Y 01 / 29 / 2014	
Mailing Address 150 Plantation Dr		Transaction ID : SA11AI.10496	
City Carson City	State NV	Zip Code 89703	Amount of Each Receipt this Period 2600.00
FEC ID number of contributing federal political committee. C			
Name of Employer Hartman & Hartman	Occupation Attorney		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date		
SUBTOTAL of Receipts This Page (optional).....		2600.00	
TOTAL This Period (last page this line number only).....			

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

Use separate schedule(s)
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☒ 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) A. Stephen Hartman			Date of Receipt M M / D D / Y Y Y Y Y 03 / 27 / 2014	
Mailing Address 150 Plantation Dr			Transaction ID : SA11AI.10081	
City Carson City	State NV	Zip Code 89703	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C				
Name of Employer Hartman & Hartman		Occupation Attorney		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 4000.00		

Full Name (Last, First, Middle Initial) B. Stephen Hartman			Date of Receipt M M / D D / Y Y Y Y Y 03 / 27 / 2014	
Mailing Address 150 Plantation Dr			Transaction ID : SA11AI.10492	
City Carson City	State NV	Zip Code 89703	Amount of Each Receipt this Period -500.00	
FEC ID number of contributing federal political committee. C				
Name of Employer Hartman & Hartman		Occupation Attorney		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 3500.00		
			Reattribute:	

Full Name (Last, First, Middle Initial) C. Jesse Haw			Date of Receipt M M / D D / Y Y Y Y Y 01 / 29 / 2014	
Mailing Address 550 W. Plumb Lane Suite B, #505			Transaction ID : SA11AI.10434	
City Reno	State NV	Zip Code 89509	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C				
Name of Employer Hawco Properties		Occupation President		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 500.00		

SUBTOTAL of Receipts This Page (optional).....			500.00	
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 PageFOR LINE NUMBER:
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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Amodei for NevadaFull Name (Last, First, Middle Initial)
A. Alvin J. Hicks

Mailing Address 2450 Skyline Blvd.

City	State	Zip Code
Reno	NV	89509

FEC ID number of contributing
federal political committee.

C

Name of Employer
MCDONALD CARANOOccupation
ATTORNEY

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
01		29		2014

Transaction ID : SA11AI.10178

Amount of Each Receipt this Period

500.00

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

Mailing Address 900 Schellbourne St

City	State	Zip Code
Reno	NV	89511

FEC ID number of contributing
federal political committee.

C

Name of Employer
The Holders GroupOccupation
Owner

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		27		2014

Transaction ID : SA11AI.10218

Amount of Each Receipt this Period

500.00

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

Mailing Address 11650 Meadowood Lane

City	State	Zip Code
Reno	NV	89506

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information requestedOccupation
Information requested

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
01		29		2014

Transaction ID : SA11AI.10053

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 RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Amodei for NevadaFull Name (Last, First, Middle Initial)
A. Kappes W. Kappes

Mailing Address 7950 Security Cir.

City	State	Zip Code
Reno	NV	89506

FEC ID number of contributing
federal political committee.

C

Name of Employer
Kappes, Cassidy & AssociatesOccupation
President

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
01		16		2014

Transaction ID : SA11AI.10111

Amount of Each Receipt this Period

2600.00

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

Mailing Address 1844 Wellington West

City	State	Zip Code
Carson City	NV	89701

FEC ID number of contributing
federal political committee.

C

Name of Employer
McDonaldsOccupation
Franchisee

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
03		27		2014

Transaction ID : SA11AI.10223

Amount of Each Receipt this Period

500.00

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

Mailing Address PO Box 507

City	State	Zip Code
Reno	NV	89504-0507

FEC ID number of contributing
federal political committee.

C

Name of Employer
Crisis Collections ManagementOccupation
President

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
01		29		2014

Transaction ID : SA11AI.10187

Amount of Each Receipt this Period

1000.00

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

4100.00

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

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

A. Full Name (Last, First, Middle Initial)
Stanley K. Kinder
 Mailing Address 3565 Lone Tree Lane

City State Zip Code
 Carson City NV 89511

FEC ID number of contributing
federal political committee.

C

Name of Employer
retired

Occupation
retired

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y
 03 17 2014

Transaction ID : SA11AI.10205

Amount of Each Receipt this Period

500.00

B. Full Name (Last, First, Middle Initial)
Mitchell Krebs
 Mailing Address 2104 Bellerive LN Unit 106

City State Zip Code
 Coeur D Alene ID 83814

FEC ID number of contributing
federal political committee.

C

Name of Employer
Coeur D'Alene Mines

Occupation
President

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y
 03 27 2014

Transaction ID : SA11AI.10085

Amount of Each Receipt this Period

500.00

C. Full Name (Last, First, Middle Initial)
Peter Krueger
 Mailing Address 401 Ryland St. Suite 111

City State Zip Code
 Reno NV 89502

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self Employed

Occupation
Lobbyist

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M / D D / Y Y Y Y
 03 27 2014

Transaction ID : SA11AI.10220

Amount of Each Receipt this Period

2600.00

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

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

3600.00

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

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

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

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

A. Full Name (Last, First, Middle Initial)
Mary Lau
 Mailing Address 410 S Minnesota St

City State Zip Code
 Carson City NV 89703

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Retail Association of Nevada

Occupation
 Executive Director

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M / D D / Y Y Y Y
 03 27 2014

Transaction ID : SA11AI.10079

Amount of Each Receipt this Period

250.00

B. Full Name (Last, First, Middle Initial)
KEITH LEE
 Mailing Address 1941 Rolling Brook Lane

City State Zip Code
 Reno NV 89519

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Law Offices of Keith Lee

Occupation
 Attorney

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M / D D / Y Y Y Y
 01 29 2014

Transaction ID : SA11AI.10056

Amount of Each Receipt this Period

250.00

C. Full Name (Last, First, Middle Initial)
Steven Lempert
 Mailing Address PO Box 4856

City State Zip Code
 Incline Village NV 89450

FEC ID number of contributing
federal political committee.

C

Name of Employer
 retired

Occupation
 retired

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y
 03 27 2014

Transaction ID : SA11AI.10069

Amount of Each Receipt this Period

500.00

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

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

1000.00

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

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

A. Full Name (Last, First, Middle Initial) Frances Lepori		Date of Receipt M M / D D / Y Y Y Y 01 / 22 / 2014	
Mailing Address 1580 Hymer Drive		Transaction ID : SA11AI.10481	
City Sparks	State NV	Zip Code 89431	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 400.00	
Name of Employer None	Occupation None		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 400.00		
		Reattribute: Frances Lepori	

B. Full Name (Last, First, Middle Initial) Frank Lepori		Date of Receipt M M / D D / Y Y Y Y 01 / 22 / 2014	
Mailing Address 1475 Hymer Avenue		Transaction ID : SA11AI.10042	
City Sparks	State NV	Zip Code 89431	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00	
Name of Employer Frank Lepori Construction	Occupation Owner		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 3000.00		

C. Full Name (Last, First, Middle Initial) Frank Lepori		Date of Receipt M M / D D / Y Y Y Y 01 / 22 / 2014	
Mailing Address 1475 Hymer Avenue		Transaction ID : SA11AI.10480	
City Sparks	State NV	Zip Code 89431	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period -400.00	
Name of Employer Frank Lepori Construction	Occupation Owner		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2600.00		
		Reattribute:	

SUBTOTAL of Receipts This Page (optional).....	1000.00
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:

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(check only one)

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

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

A. Full Name (Last, First, Middle Initial) Jill Lillaney			Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y</td> </tr> <tr> <td>02</td> <td></td> <td>19</td> <td></td> <td>2014</td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y	02		19		2014
M M M	/	D D D	/	Y Y Y Y Y										
02		19		2014										
Mailing Address 3983 S. McCarran Blvd #404			Transaction ID : SA11AI.10194											
City	State	Zip Code												
Reno	VT	89502												
FEC ID number of contributing federal political committee.			Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="5">500.00</td> </tr> </table>		500.00									
500.00														
Name of Employer MRB Holdings Corp		Occupation CEO												
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date <table border="1"> <tr> <td colspan="5">500.00</td> </tr> </table>			500.00									
500.00														

B. Full Name (Last, First, Middle Initial) Ingrid Lubbers			Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y</td> </tr> <tr> <td>03</td> <td></td> <td>21</td> <td></td> <td>2014</td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y	03		21		2014
M M M	/	D D D	/	Y Y Y Y Y										
03		21		2014										
Mailing Address 10447 Double R Blvd			Transaction ID : SA11AI.10087											
City	State	Zip Code												
Reno	NV	89521												
FEC ID number of contributing federal political committee.			Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="5">500.00</td> </tr> </table>		500.00									
500.00														
Name of Employer Damonte Ranch Dental		Occupation Owner												
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date <table border="1"> <tr> <td colspan="5">500.00</td> </tr> </table>			500.00									
500.00														

C. Full Name (Last, First, Middle Initial) Brooks Mancini			Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y</td> </tr> <tr> <td>03</td> <td></td> <td>24</td> <td></td> <td>2014</td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y	03		24		2014
M M M	/	D D D	/	Y Y Y Y Y										
03		24		2014										
Mailing Address 1527 Kestrel Ct			Transaction ID : SA11AI.10067											
City	State	Zip Code												
Reno	NV	89509												
FEC ID number of contributing federal political committee.			Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="5">100.00</td> </tr> </table>		100.00									
100.00														
Name of Employer Mancini Properties, Inc.		Occupation Executive												
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date <table border="1"> <tr> <td colspan="5">300.00</td> </tr> </table>			300.00									
300.00														

SUBTOTAL of Receipts This Page (optional).....			<table border="1"> <tr> <td colspan="5">1100.00</td> </tr> </table>		1100.00				
1100.00									
TOTAL This Period (last page this line number only).....			<table border="1"> <tr> <td colspan="5"></td> </tr> </table>						

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

Use separate schedule(s)
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12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

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

Mailing Address 1394 Amado Ct

City Reno	State NV	Zip Code 89511
--------------	-------------	-------------------

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

Name of Employer Self	Occupation Physician
--------------------------	-------------------------

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt

M M / D D / Y Y Y Y
02 / 07 / 2014

Transaction ID : SA11AI.10059

Amount of Each Receipt this Period

500.00

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

Mailing Address 1394 Amado Ct

City Reno	State NV	Zip Code 89511
--------------	-------------	-------------------

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

Name of Employer Self	Occupation Physician
--------------------------	-------------------------

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 27 / 2014

Transaction ID : SA11AI.10084

Amount of Each Receipt this Period

500.00

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

Mailing Address 540 Port Circle

City Cloverdale	State CA	Zip Code 95425-3679
--------------------	-------------	------------------------

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

Name of Employer Ferrari-Carano Vineyards & Win	Occupation Managing Director
--	---------------------------------

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt

M M / D D / Y Y Y Y
01 / 29 / 2014

Transaction ID : SA11AI.10184

Amount of Each Receipt this Period

2600.00

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

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

3600.00

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

Use separate schedule(s)
for each category of the
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12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

<p>Full Name (Last, First, Middle Initial) A. Greg Mckay</p>			<p>Date of Receipt M M / D D / Y Y Y Y 02 / 06 / 2014</p>		
<p>Mailing Address PO Box 4720</p>			<p>Transaction ID : SA11AI.10058</p>		
City Incline Village	State NV	Zip Code 89450	<p>Amount of Each Receipt this Period 500.00</p>		
<p>FEC ID number of contributing federal political committee. C</p>		<p>Amount of Each Receipt this Period 500.00</p>			
<p>Name of Employer Retired</p>		<p>Occupation None</p>		<p>Amount of Each Receipt this Period 500.00</p>	
<p>Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>		<p>Election Cycle-to-Date 500.00</p>		<p>Amount of Each Receipt this Period 500.00</p>	
<p>Full Name (Last, First, Middle Initial) B. Greg Mckay</p>			<p>Date of Receipt M M / D D / Y Y Y Y 03 / 24 / 2014</p>		
<p>Mailing Address PO Box 4720</p>			<p>Transaction ID : SA11AI.10062</p>		
City Incline Village	State NV	Zip Code 89450	<p>Amount of Each Receipt this Period 500.00</p>		
<p>FEC ID number of contributing federal political committee. C</p>		<p>Amount of Each Receipt this Period 500.00</p>			
<p>Name of Employer Retired</p>		<p>Occupation None</p>		<p>Amount of Each Receipt this Period 500.00</p>	
<p>Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>		<p>Election Cycle-to-Date 1000.00</p>		<p>Amount of Each Receipt this Period 500.00</p>	
<p>Full Name (Last, First, Middle Initial) C. Alex Mervelo</p>			<p>Date of Receipt M M / D D / Y Y Y Y 03 / 20 / 2014</p>		
<p>Mailing Address 9550 Firestone Blvd Suite 105</p>			<p>Transaction ID : SA11AI.10208</p>		
City Downey	State CA	Zip Code 90241	<p>Amount of Each Receipt this Period 500.00</p>		
<p>FEC ID number of contributing federal political committee. C</p>		<p>Amount of Each Receipt this Period 500.00</p>			
<p>Name of Employer Mervelo Group</p>		<p>Occupation Self Employed</p>		<p>Amount of Each Receipt this Period 500.00</p>	
<p>Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>		<p>Election Cycle-to-Date 500.00</p>		<p>Amount of Each Receipt this Period 500.00</p>	
<p>SUBTOTAL of Receipts This Page (optional).....</p>			<p>1500.00</p>		
<p>TOTAL This Period (last page this line number only).....</p>			<p></p>		

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

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

FOR LINE NUMBER:

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(check only one)

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

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

A. Full Name (Last, First, Middle Initial) Bill Miller		Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>01</td> <td></td> <td>29</td> <td></td> <td>2014</td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y Y	01		29		2014
M M M	/	D D D	/	Y Y Y Y Y Y									
01		29		2014									
Mailing Address 4895 Convair Drive		Transaction ID : SA11AI.10444											
City Carson City	State NV	Zip Code 89706											
FEC ID number of contributing federal political committee. <div>C</div>		Amount of Each Receipt this Period <div>2600.00</div>											
Name of Employer BME	Occupation Owner	Reattribute:											
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <div>2600.00</div>												

B. Full Name (Last, First, Middle Initial) Vergie Miller		Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>01</td> <td></td> <td>29</td> <td></td> <td>2014</td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y Y	01		29		2014
M M M	/	D D D	/	Y Y Y Y Y Y									
01		29		2014									
Mailing Address 4895 Convair Dr		Transaction ID : SA11AI.10176											
City Carson City	State NV	Zip Code 89706											
FEC ID number of contributing federal political committee. <div>C</div>		Amount of Each Receipt this Period <div>3000.00</div>											
Name of Employer None	Occupation Retired	Reattribute:											
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <div>3000.00</div>												

C. Full Name (Last, First, Middle Initial) Vergie Miller		Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>01</td> <td></td> <td>29</td> <td></td> <td>2014</td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y Y	01		29		2014
M M M	/	D D D	/	Y Y Y Y Y Y									
01		29		2014									
Mailing Address 4895 Convair Dr		Transaction ID : SA11AI.10443											
City Carson City	State NV	Zip Code 89706											
FEC ID number of contributing federal political committee. <div>C</div>		Amount of Each Receipt this Period <div>-2600.00</div>											
Name of Employer None	Occupation Retired	Reattribute:											
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <div>400.00</div>												

SUBTOTAL of Receipts This Page (optional).....		<div>3000.00</div>	
TOTAL This Period (last page this line number only).....		<div></div>	

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

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

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

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

A. Full Name (Last, First, Middle Initial)
Vergie Miller

Mailing Address 4895 Convair Dr

City Carson City	State NV	Zip Code 89706
---------------------	-------------	-------------------

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

Name of Employer None	Occupation Retired
--------------------------	-----------------------

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
 1600.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
03 / 27 / 2014

Transaction ID : SA11AI.10077

Amount of Each Receipt this Period

1200.00

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

Mailing Address PO Box 12458

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

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

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

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
 1500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
01 / 29 / 2014

Transaction ID : SA11AI.10051

Amount of Each Receipt this Period

500.00

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

Mailing Address PO Box 12458

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

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

Name of Employer Vertex Chemical	Occupation Executive
-------------------------------------	-------------------------

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
 1500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
01 / 29 / 2014

Transaction ID : SA11AI.10048

Amount of Each Receipt this Period

500.00

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

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

2200.00

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

Use separate schedule(s)
for each category of the
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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

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

Mailing Address 2279 Rainwood Ct.

City Reno	State NV	Zip Code 89509
--------------	-------------	-------------------

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

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

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
 1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		17		2014

Transaction ID : SA11AI.10201

Amount of Each Receipt this Period

1000.00

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

Mailing Address 4385 Bitterroot Road

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

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

Name of Employer El Dorado Hotel Casino	Occupation Vice President
--	------------------------------

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
 250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
02		27		2014

Transaction ID : SA11AI.10060

Amount of Each Receipt this Period

250.00

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

Mailing Address 2996 Halleck Dr.

City Carson City	State NV	Zip Code 89701
---------------------	-------------	-------------------

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

Name of Employer GNCU	Occupation President
--------------------------	-------------------------

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
 1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		27		2014

Transaction ID : SA11AI.10071

Amount of Each Receipt this Period

1000.00

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

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

2250.00

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

Full Name (Last, First, Middle Initial)

Daniel B. Norem

Mailing Address 3212 Old Coach Way

City

Reno

State

NV

Zip Code

89511-5322

FEC ID number of contributing
federal political committee.

C

Name of Employer

Daniel B. Norem Consulting

Occupation

consultant

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
01		29		2014

Transaction ID : SA11AI.10139

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

Chad Osorno

Mailing Address 1790 Caughlin Creek Rd

City

Reno

State

NV

Zip Code

89519-0683

FEC ID number of contributing
federal political committee.

C

Name of Employer

Wells Fargo Bank

Occupation

President

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
01		22		2014

Transaction ID : SA11AI.10125

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

Chad Osorno

Mailing Address 1790 Caughlin Creek Rd

City

Reno

State

NV

Zip Code

89519-0683

FEC ID number of contributing
federal political committee.

C

Name of Employer

Wells Fargo Bank

Occupation

President

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		27		2014

Transaction ID : SA11AI.10070

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)
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Detailed Summary Page

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(check only one)

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

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

A. Full Name (Last, First, Middle Initial)
Eren Akman Ozmen

Mailing Address **444 Salomon Ct.**

City Sparks	State NV	Zip Code 89434-9651
-----------------------	--------------------	-------------------------------

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

Name of Employer Sierra Nevada Corporation	Occupation President
--	--------------------------------

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt

M M / D D / Y Y Y Y
01 / 29 / 2014

Transaction ID : SA11AI.10161

Amount of Each Receipt this Period

2600.00

B. Full Name (Last, First, Middle Initial)
Eren Akman Ozmen

Mailing Address **444 Salomon Ct.**

City Sparks	State NV	Zip Code 89434-9651
-----------------------	--------------------	-------------------------------

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

Name of Employer Sierra Nevada Corporation	Occupation President
--	--------------------------------

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
5200.00

Date of Receipt

M M / D D / Y Y Y Y
01 / 29 / 2014

Transaction ID : SA11AI.10163

Amount of Each Receipt this Period

2600.00

C. Full Name (Last, First, Middle Initial)
Eren Akman Ozmen

Mailing Address **444 Salomon Ct.**

City Sparks	State NV	Zip Code 89434-9651
-----------------------	--------------------	-------------------------------

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

Name of Employer Sierra Nevada Corporation	Occupation President
--	--------------------------------

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt

M M / D D / Y Y Y Y
01 / 29 / 2014

Transaction ID : SA11AI.10447

Amount of Each Receipt this Period

-2600.00

Reattribute to Faith Ozmen

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

2600.00

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

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

FOR LINE NUMBER:
(check only one)

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☒ 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) Fatih Ozmen			Date of Receipt M M / D D / Y Y Y Y 01 / 29 / 2014	
Mailing Address 444 Salomon Circle			Transaction ID : SA11Al.10448	
City	State	Zip Code		
Sparks	NV	89434		
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 2600.00		
Name of Employer Sierra Nevada Corporation		Occupation CEO		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 2600.00		
B. Full Name (Last, First, Middle Initial) Michael A. Pagni			Date of Receipt M M / D D / Y Y Y Y 01 / 29 / 2014	
Mailing Address 4385 Bitterroot Road			Transaction ID : SA11Al.10182	
City	State	Zip Code		
Reno	NV	89519		
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 500.00		
Name of Employer MCDONALD CARANO		Occupation ATTORNEY		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 500.00		
C. Full Name (Last, First, Middle Initial) Janet Parker			Date of Receipt M M / D D / Y Y Y Y 01 / 22 / 2014	
Mailing Address 1390 Creek Drive			Transaction ID : SA11Al.10129	
City	State	Zip Code		
Reno	NV	89410		
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 1500.00		
Name of Employer Information requested		Occupation Information requested		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 3500.00		
SUBTOTAL of Receipts This Page (optional).....			4600.00	
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:

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(check only one)

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

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

A. Full Name (Last, First, Middle Initial) Janet Parker			Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y</td> </tr> <tr> <td>01</td> <td></td> <td>22</td> <td></td> <td>2014</td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y	01		22		2014
M M M	/	D D D	/	Y Y Y Y Y										
01		22		2014										
Mailing Address 1390 Creek Drive			Transaction ID : SA11AI.10487											
City	State	Zip Code												
Reno	NV	89410												
FEC ID number of contributing federal political committee.			Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="5">-500.00</td> </tr> </table>		-500.00									
-500.00														
Name of Employer Information requested		Occupation Information requested												
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date <table border="1"> <tr> <td colspan="5">3000.00</td> </tr> </table>			3000.00									
3000.00														
B. Full Name (Last, First, Middle Initial) Leonard Parker			Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y</td> </tr> <tr> <td>01</td> <td></td> <td>22</td> <td></td> <td>2014</td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y	01		22		2014
M M M	/	D D D	/	Y Y Y Y Y										
01		22		2014										
Mailing Address 1390 Creek Dr			Transaction ID : SA11AI.10488											
City Gardnerville														
State NV														
Zip Code 89410														
FEC ID number of contributing federal political committee.			Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="5">500.00</td> </tr> </table>		500.00									
500.00														
Name of Employer Information requested		Occupation Information requested												
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date <table border="1"> <tr> <td colspan="5">500.00</td> </tr> </table>			500.00									
500.00														
C. Full Name (Last, First, Middle Initial) Jintana Patnaude			Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y</td> </tr> <tr> <td>03</td> <td></td> <td>24</td> <td></td> <td>2014</td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y	03		24		2014
M M M	/	D D D	/	Y Y Y Y Y										
03		24		2014										
Mailing Address 2355 Lois Ct			Transaction ID : SA11AI.10065											
City Sparks														
State NV														
Zip Code 89434														
FEC ID number of contributing federal political committee.			Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="5">200.00</td> </tr> </table>		200.00									
200.00														
Name of Employer Retired		Occupation None												
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date <table border="1"> <tr> <td colspan="5">300.00</td> </tr> </table>			300.00									
300.00														
SUBTOTAL of Receipts This Page (optional).....			<table border="1"> <tr> <td colspan="5">200.00</td> </tr> </table>		200.00									
200.00														
TOTAL This Period (last page this line number only).....			<table border="1"> <tr> <td colspan="5"></td> </tr> </table>											

FOR LINE NUMBER:		PAGE 40 OF 87	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
			<input type="checkbox"/> 15

NAME OF COMMITTEE (In Full)
Amodei for Nevada

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

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

A. Full Name (Last, First, Middle Initial) Timothy Pegram			Date of Receipt <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>01</td> <td></td> <td>29</td> <td></td> <td>2014</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	01		29		2014
M M	/	D D	/	Y Y Y Y										
01		29		2014										
Mailing Address 10645 Blue Moon Ct			Transaction ID : SA11AI.10046											
City	State	Zip Code												
Reno	NV	89521												
FEC ID number of contributing federal political committee.			Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="5">2000.00</td> </tr> </table>		2000.00									
2000.00														
Name of Employer Bodines Casino		Occupation Marketing Executive												
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date <table border="1"> <tr> <td colspan="5">2000.00</td> </tr> </table>	2000.00											
2000.00														
B. Full Name (Last, First, Middle Initial) David Peri			Date of Receipt <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>02</td> <td></td> <td>06</td> <td></td> <td>2014</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	02		06		2014
M M	/	D D	/	Y Y Y Y										
02		06		2014										
Mailing Address PO Box 35			Transaction ID : SA11AI.10193											
City	State	Zip Code												
Yerington	NV	89447												
FEC ID number of contributing federal political committee.			Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="5">2600.00</td> </tr> </table>		2600.00									
2600.00														
Name of Employer David Peri Family Farms, LLC		Occupation Owner												
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date <table border="1"> <tr> <td colspan="5">2600.00</td> </tr> </table>	2600.00											
2600.00														
C. Full Name (Last, First, Middle Initial) Brigid Sullivan Pierce			Date of Receipt <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>01</td> <td></td> <td>29</td> <td></td> <td>2014</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	01		29		2014
M M	/	D D	/	Y Y Y Y										
01		29		2014										
Mailing Address 1490 Skyline Blvd.			Transaction ID : SA11AI.10149											
City	State	Zip Code												
Reno	NV	89509												
FEC ID number of contributing federal political committee.			Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="5">500.00</td> </tr> </table>		500.00									
500.00														
Name of Employer Douglas E. Damon CPA		Occupation CPA												
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date <table border="1"> <tr> <td colspan="5">500.00</td> </tr> </table>	500.00											
500.00														
SUBTOTAL of Receipts This Page (optional).....			<table border="1"> <tr> <td colspan="5">5100.00</td> </tr> </table>		5100.00									
5100.00														
TOTAL This Period (last page this line number only).....			<table border="1"> <tr> <td colspan="5"></td> </tr> </table>											

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

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

FOR LINE NUMBER:

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(check only one)

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

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

Full Name (Last, First, Middle Initial) Bob Quilici		Date of Receipt M M / D D / Y Y Y Y 01 / 16 / 2014
Mailing Address 7810 Lakeside Dr		Transaction ID : SA11AI.10109
City Reno	State NV	Zip Code 89511
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer Retired	Occupation None	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 300.00	

Full Name (Last, First, Middle Initial) Richard Reviglio		Date of Receipt M M / D D / Y Y Y Y 01 / 29 / 2014
Mailing Address 950 S Rock Blvd		Transaction ID : SA11AI.10047
City Sparks	State NV	Zip Code 89431
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Western Nevada Supply	Occupation General Manager	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

Full Name (Last, First, Middle Initial) Brenda Robertson		Date of Receipt M M / D D / Y Y Y Y 03 / 27 / 2014
Mailing Address 3541 Mont Blanc Court		Transaction ID : SA11AI.10080
City Carson City	State NV	Zip Code 89705
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Information requested	Occupation Information requested	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

SUBTOTAL of Receipts This Page (optional)	1550.00
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

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(check only one)

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

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

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

Mailing Address 3555 Southampton Dr.

City Reno	State NV	Zip Code 89509
--------------	-------------	-------------------

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

Name of Employer Lucini Pariol Insurance	Occupation Insurance Broker
---	--------------------------------

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
 500.00

Date of Receipt

M M / D D / Y Y Y Y
01 / 29 / 2014

Transaction ID : SA11AI.10138

Amount of Each Receipt this Period

500.00

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

Mailing Address 3950 GS Richards Blvd

City Carson City	State NV	Zip Code 89703
---------------------	-------------	-------------------

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

Name of Employer Skin Cancer & Derm Institute	Occupation Physician
--	-------------------------

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
 5200.00

Date of Receipt

M M / D D / Y Y Y Y
01 / 22 / 2014

Transaction ID : SA11AI.10121

Amount of Each Receipt this Period

5200.00

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

Mailing Address 3950 GS Richards Blvd

City Carson City	State NV	Zip Code 89703
---------------------	-------------	-------------------

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

Name of Employer Skin Cancer & Derm Institute	Occupation Physician
--	-------------------------

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M / D D / Y Y Y Y
01 / 22 / 2014

Transaction ID : SA11AI.10454

Amount of Each Receipt this Period

-2600.00

Redesignate: to General

[MEMO ITEM]

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

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

5700.00

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

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

Full Name (Last, First, Middle Initial) A. Dan Rowe		Date of Receipt M M / D D / Y Y Y Y 01 / 22 / 2014
Mailing Address 3950 GS Richards Blvd		Transaction ID : SA11AI.10455
City Carson City	State NV	Zip Code 89703
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2600.00
Name of Employer Skin Cancer & Derm Institute	Occupation Physician	Redesignate: from primary
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	[MEMO ITEM]

Full Name (Last, First, Middle Initial) B. Gail A. Sande		Date of Receipt M M / D D / Y Y Y Y 01 / 16 / 2014
Mailing Address 85 Hawken Road		Transaction ID : SA11AI.10101
City Reno	State NV	Zip Code 89509
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer retired	Occupation retired	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

Full Name (Last, First, Middle Initial) C. Jerry Scolari		Date of Receipt M M / D D / Y Y Y Y 01 / 16 / 2014
Mailing Address PO Box 5070		Transaction ID : SA11AI.10041
City Reno	State NV	Zip Code 89513
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Scolari	Occupation Businessman	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

SUBTOTAL of Receipts This Page (optional).....	1500.00
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

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(check only one)

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

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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: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt

M M / D D / Y Y Y Y
01 / 16 / 2014

Transaction ID : SA11AI.10039

Amount of Each Receipt this Period

500.00

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

Mailing Address **7690 TOEN SQUARE LN**

City RENO	State NV	Zip Code 89523
---------------------	--------------------	--------------------------

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

Name of Employer Altco Construction	Occupation Partner
---	------------------------------

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt

M M / D D / Y Y Y Y
01 / 29 / 2014

Transaction ID : SA11AI.10148

Amount of Each Receipt this Period

500.00

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

Mailing Address **12785 Silver Wolf Rd**

City Reno	State NV	Zip Code 89511
---------------------	--------------------	--------------------------

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

Name of Employer Chamion Chevrolet	Occupation Auto Dealer
--	----------------------------------

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt

M M / D D / Y Y Y Y
01 / 29 / 2014

Transaction ID : SA11AI.10171

Amount of Each Receipt this Period

1000.00

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

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

2000.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

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

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NAME OF COMMITTEE (In Full)

Amodei for Nevada

Full Name (Last, First, Middle Initial)

A. Virginia Starrett

Mailing Address 891 Stutler Creek Ct

City

Gardnerville

State

NV

Zip Code

89460

FEC ID number of contributing
federal political committee.

C

Name of Employer

WNC

Occupation

Professor

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		27		2014

Transaction ID : SA11AI.10083

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Patrick Sullivan

Mailing Address 2317 Dant Court

City

Reno

State

NV

Zip Code

89509

FEC ID number of contributing
federal political committee.

C

Name of Employer

Tamarack Junction Casino

Occupation

Manager

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
01		27		2014

Transaction ID : SA11AI.10190

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C. Ken Tedford

Mailing Address PO Box 1330

City

Fallon

State

NV

Zip Code

89407

FEC ID number of contributing
federal political committee.

C

Name of Employer

Tedford Tire

Occupation

Owner

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
01		13		2014

Transaction ID : SA11AI.10036

Amount of Each Receipt this Period

500.00

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

1500.00

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)
Amodei for Nevada










Full Name (Last, First, Middle Initial) Dorothy Timian Palmer		Date of Receipt <table border="1"> <tr> <td>M M</td> <td>D D</td> <td>Y Y Y Y</td> </tr> <tr> <td>01</td> <td>29</td> <td>2014</td> </tr> </table>	M M	D D	Y Y Y Y	01	29	2014
M M	D D	Y Y Y Y						
01	29	2014						
Mailing Address 2600 Manhattan Dr		Transaction ID : SA11AI.10052						
City Carson City	State NV	Zip Code 89703						
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period <table border="1"> <tr> <td>500.00</td> </tr> </table>	500.00					
500.00								
Name of Employer Vidler	Occupation COO/President							
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <table border="1"> <tr> <td>500.00</td> </tr> </table>	500.00						
500.00								

Full Name (Last, First, Middle Initial) Dorothy Timian Palmer		Date of Receipt <table border="1"> <tr> <td>M M</td> <td>D D</td> <td>Y Y Y Y</td> </tr> <tr> <td>03</td> <td>27</td> <td>2014</td> </tr> </table>	M M	D D	Y Y Y Y	03	27	2014
M M	D D	Y Y Y Y						
03	27	2014						
Mailing Address 2600 Manhattan Dr		Transaction ID : SA11AI.10219						
City Carson City	State NV	Zip Code 89703						
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period <table border="1"> <tr> <td>500.00</td> </tr> </table>	500.00					
500.00								
Name of Employer Vidler	Occupation COO/President							
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <table border="1"> <tr> <td>1000.00</td> </tr> </table>	1000.00						
1000.00								

Full Name (Last, First, Middle Initial) Jale Trepp		Date of Receipt <table border="1"> <tr> <td>M M</td> <td>D D</td> <td>Y Y Y Y</td> </tr> <tr> <td>01</td> <td>29</td> <td>2014</td> </tr> </table>	M M	D D	Y Y Y Y	01	29	2014
M M	D D	Y Y Y Y						
01	29	2014						
Mailing Address PO Box 19688		Transaction ID : SA11AI.10169						
City Reno	State NV	Zip Code 89511						
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period <table border="1"> <tr> <td>5000.00</td> </tr> </table>	5000.00					
5000.00								
Name of Employer Kenny G & Co Jewelers	Occupation Owner							
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <table border="1"> <tr> <td>5000.00</td> </tr> </table>	5000.00						
5000.00								

SUBTOTAL of Receipts This Page (optional)	<table border="1"> <tr> <td>6000.00</td> </tr> </table>	6000.00
6000.00		
TOTAL This Period (last page this line number only)	<table border="1"> <tr> <td></td> </tr> </table>	

FOR LINE NUMBER:
(check only one)

	11a		11b		11c		11d	
	12		13a		13b		14	 15

NAME OF COMMITTEE (In Full)
Amodei for Nevada

FEC Schedule A (Form 3) (Revised 02/2009)

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

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

FOR LINE NUMBER:
(check only one)

PAGE 49 OF 87

☒ 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)
Richard H. Wells

Mailing Address 6900 S. McCarran Blvd. Suite 3030

City Reno	State NV	Zip Code 89509
--------------	-------------	-------------------

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

Name of Employer Wells Gaming Research	Occupation President
---	-------------------------

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt

M M / D D / Y Y Y Y
01 / 21 / 2014

Transaction ID : SA11AI.10130

Amount of Each Receipt this Period

500.00

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

Mailing Address 18000 Logan Meadow Ln

City Reno	State NV	Zip Code 89511
--------------	-------------	-------------------

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

Name of Employer WWW Construction	Occupation Owner
--------------------------------------	---------------------

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
350.00

Date of Receipt

M M / D D / Y Y Y Y
01 / 29 / 2014

Transaction ID : SA11AI.10141

Amount of Each Receipt this Period

250.00

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

Mailing Address 4785 Caughtlin Pkwy

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

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

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

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt

M M / D D / Y Y Y Y
01 / 29 / 2014

Transaction ID : SA11AI.10175

Amount of Each Receipt this Period

500.00

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

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

1250.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 50 OF 87

(check only one)

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

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

A. Full Name (Last, First, Middle Initial) Robert Winkel		Date of Receipt <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>03</td> <td></td> <td>28</td> <td></td> <td>2014</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	03		28		2014
M M	/	D D	/	Y Y Y Y									
03		28		2014									
Mailing Address 4785 Caughlin Pkwy		Transaction ID : SA11AI.10228											
City Reno	State NV	Zip Code 89519											
FEC ID number of contributing federal political committee. <div>C</div>		Amount of Each Receipt this Period <div>250.00</div>											
Name of Employer Maupin Cox & Legoy	Occupation Attorney												
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <div>750.00</div>												
B. Full Name (Last, First, Middle Initial) Brenda Wipfli		Date of Receipt <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>03</td> <td></td> <td>17</td> <td></td> <td>2014</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	03		17		2014
M M	/	D D	/	Y Y Y Y									
03		17		2014									
Mailing Address 3480 GS Richards Blvd Suite 301		Transaction ID : SA11AI.10203											
City Carson City	State NV	Zip Code 89703											
FEC ID number of contributing federal political committee. <div>C</div>		Amount of Each Receipt this Period <div>250.00</div>											
Name of Employer self	Occupation general contractor												
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <div>250.00</div>												
C. Full Name (Last, First, Middle Initial)		Date of Receipt <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </table>		M M	/	D D	/	Y Y Y Y					
M M	/	D D	/	Y Y Y Y									
Mailing Address													
City	State	Zip Code											
FEC ID number of contributing federal political committee. <div>C</div>		Amount of Each Receipt this Period <div></div>											
Name of Employer	Occupation												
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <div></div>												
SUBTOTAL of Receipts This Page (optional).....		<div>500.00</div>											
TOTAL This Period (last page this line number only).....		<div>102400.00</div>											

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

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

FOR LINE NUMBER:
(check only one)

PAGE 51 OF 87

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

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

A. Full Name (Last, First, Middle Initial)
AMERICAN BANKERS ASSOCIATION PAC (BANKPAC)

Mailing Address 1120 CONNECTICUT AVENUE NW
 SUITE 600

City	State	Zip Code
WASHINGTON	DC	20036

FEC ID number of contributing
federal political committee.

C C00004275

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		27		2014

Transaction ID : SA11C.10025

Amount of Each Receipt this Period

2500.00

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

Mailing Address 520 N NORTHWEST HIGHWAY

City	State	Zip Code
PARK RIDGE	IL	60068-2538

FEC ID number of contributing
federal political committee.

C C70004684

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
02		06		2014

Transaction ID : SA11C.10023

Amount of Each Receipt this Period

2500.00

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

Mailing Address 1201 15TH STREET, NW

City	State	Zip Code
WASHINGTON	DC	20005

FEC ID number of contributing
federal political committee.

C C00000901

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

7500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		27		2014

Transaction ID : SA11C.10469

Amount of Each Receipt this Period

2500.00

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

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

7500.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 52 OF 87

<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 NevadaFull Name (Last, First, Middle Initial)
A. CANTOR FOR CONGRESS

Mailing Address PO BOX 17813

City	State	Zip Code
RICHMOND	VA	23226

FEC ID number of contributing
federal political committee.**C** C00355461

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03	/	18	/	2014

Transaction ID : SA11C.10466

Amount of Each Receipt this Period

2000.00

In-kind - air fare fund raising event

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

Mailing Address 604 PENNSYLVANIA AVENUE, NW

City	State	Zip Code
WASHINGTON	DC	20004-2601

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

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

4000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03	/	27	/	2014

Transaction ID : SA11C.10028

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)
C. DEALERS ELECTION ACTION COMMITTEE OF THE NATIONAL AUTOMOTIVE DEALERS ASSOCIATION

Mailing Address 8400 WESTPARK DRIVE

City	State	Zip Code
MCLEAN	VA	22102

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

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
01	/	29	/	2014

Transaction ID : SA11C.10022

Amount of Each Receipt this Period

5000.00

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

8000.00

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)

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

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

Full Name (Last, First, Middle Initial)
EVERY REPUBLICAN IS CRUCIAL (ERICPAC)

Mailing Address **25 EAST MAIN STREET, SUITE 200**

City	State	Zip Code
RICHMOND	VA	23219

FEC ID number of contributing federal political committee.

C C00384701

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

10000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		27		2014

Transaction ID : SA11C.10027

Amount of Each Receipt this Period

5000.00

B. Full Name (Last, First, Middle Initial)
FREEDOM PROJECT; THE

Mailing Address **320 1ST STREET SE**

City	State	Zip Code
WASHINGTON	DC	20003

FEC ID number of contributing federal political committee.

C C00305805

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
01		17		2014

Transaction ID : SA11C.10114

Amount of Each Receipt this Period

5000.00

C. Full Name (Last, First, Middle Initial)
INDEPENDENT INSURANCE AGENTS & BROKERS OF AMERICA, INC. POLITICAL ACTION COMMITTEE (INSURP)

Mailing Address **412 FIRST STREET, SE, SUITE 300**

City	State	Zip Code
WASHINGTON	DC	20003

FEC ID number of contributing federal political committee.

C C00022343

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
01		29		2014

Transaction ID : SA11C.10033

Amount of Each Receipt this Period

1000.00

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

11000.00

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 54 OF 87

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

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

A. Full Name (Last, First, Middle Initial)
LAS VEGAS SANDS CORP. POLITICAL ACTION COMMITTEE (SANDS PAC)

Mailing Address 3355 LAS VEGAS BLVD SOUTH

City	State	Zip Code
LAS VEGAS	NV	89109

FEC ID number of contributing federal political committee.

C C00399642

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
03		27		2014

Transaction ID : SA11C.10030

Amount of Each Receipt this Period

5000.00

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

Mailing Address 11250 WAPLES MILL ROAD

City	State	Zip Code
FAIRFAX	VA	22030

FEC ID number of contributing federal political committee.

C C00053553

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
03		28		2014

Transaction ID : SA11C.10031

Amount of Each Receipt this Period

2500.00

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

Mailing Address P.O. BOX 50193

City	State	Zip Code
SPARKS	NV	89434

FEC ID number of contributing federal political committee.

C C00367995

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

7000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
03		24		2014

Transaction ID : SA11C.10024

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

36500.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 55 OF 87

(check only one)

<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input checked="" 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) Congressional Institute		Date of Receipt <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>01</td> <td></td> <td>24</td> <td></td> <td>2014</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	01		24		2014
M M	/	D D	/	Y Y Y Y									
01		24		2014									
Mailing Address 1700 Diagonal Road		Transaction ID : SA14.10463											
City Alexandria	State VA	Zip Code 22314	Amount of Each Receipt this Period <table border="1"> <tr> <td>890.00</td> </tr> </table> Educational seminars/research materials	890.00									
890.00													
FEC ID number of contributing federal political committee. C													
Name of Employer	Occupation												
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <table border="1"> <tr> <td>890.00</td> </tr> </table>			890.00									
890.00													

B. Full Name (Last, First, Middle Initial)		Date of Receipt <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </table>		M M	/	D D	/	Y Y Y Y					
M M	/	D D	/	Y Y Y Y									
Mailing Address													
City	State	Zip Code	Amount of Each Receipt this Period <table border="1"> <tr> <td></td> </tr> </table>										
FEC ID number of contributing federal political committee. C													
Name of Employer	Occupation												
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <table border="1"> <tr> <td></td> </tr> </table>												

C. Full Name (Last, First, Middle Initial)		Date of Receipt <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </table>		M M	/	D D	/	Y Y Y Y					
M M	/	D D	/	Y Y Y Y									
Mailing Address													
City	State	Zip Code	Amount of Each Receipt this Period <table border="1"> <tr> <td></td> </tr> </table>										
FEC ID number of contributing federal political committee. C													
Name of Employer	Occupation												
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <table border="1"> <tr> <td></td> </tr> </table>												

SUBTOTAL of Receipts This Page (optional).....		<table border="1"> <tr> <td>890.00</td> </tr> </table>	890.00
890.00			
TOTAL This Period (last page this line number only).....		<table border="1"> <tr> <td>890.00</td> </tr> </table>	890.00
890.00			

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 56 OF 87

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

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NAME OF COMMITTEE (In Full)

Amodei for Nevada

Full Name (Last, First, Middle Initial)

A. Adeles

Mailing Address 1112 N Carson St

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		10		2014

City	State	Zip Code
Carson City	NV	89701

Purpose of Disbursement
meals & entertainment - campaign expenses

003

Category/
Type

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Amount of Each Disbursement this Period

310.00

Transaction ID : SB17.10253

B. Adeles

Full Name (Last, First, Middle Initial)

Mailing Address 1112 N Carson St

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		24		2014

City	State	Zip Code
Carson City	NV	89701

Purpose of Disbursement
Meals - contributor relations

003

Category/
Type

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Amount of Each Disbursement this Period

250.00

Transaction ID : SB17.10094

C. Adeles

Full Name (Last, First, Middle Initial)

Mailing Address 1112 N Carson St

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		24		2014

City	State	Zip Code
Carson City	NV	89701

Purpose of Disbursement
meals & entertainment - campaign expenses

003

Category/
Type

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Amount of Each Disbursement this Period

380.00

Transaction ID : SB17.10277

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

940.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 57 OF 87

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

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

Full Name (Last, First, Middle Initial)

A. American Express Collections

Mailing Address P.O. Box 981540

City	State	Zip Code
El Paso	TX	79998

Purpose of Disbursement
merchant fees

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		06		2014

Amount of Each Disbursement this Period

14.60

Transaction ID : SB17.10319

B. American Express Collections

Mailing Address P.O. Box 981540

City	State	Zip Code
El Paso	TX	79998

Purpose of Disbursement
merchant fees

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		03		2014

Amount of Each Disbursement this Period

7.95

Transaction ID : SB17.10320

C. American Express Collections

Mailing Address P.O. Box 981540

City	State	Zip Code
El Paso	TX	79998

Purpose of Disbursement
merchant fees

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		05		2014

Amount of Each Disbursement this Period

14.60

Transaction ID : SB17.10321

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

37.15

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

Full Name (Last, First, Middle Initial)

A. Mark Eugene Amodei

Mailing Address 503 W Sunset

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		21		2014

City	State	Zip Code
Carson City	NV	89703

Amount of Each Disbursement this Period

742.00

Purpose of Disbursement
travel reimbursements - see memo

002

Transaction ID : SB17.10388

Candidate Name

Category/
Type

Office Sought:	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
----------------	--	--

State: NV District: 02

Full Name (Last, First, Middle Initial)

B. Arco

Mailing Address 4340 N Carson St

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		04		2014

City	State	Zip Code
Carson City	NV	89703

Amount of Each Disbursement this Period

60.10

Purpose of Disbursement
travel expense - fuel in lieu of mileage

002

Transaction ID : SB17.10298

Candidate Name

Category/
Type

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
----------------	---	--

State: District:

Full Name (Last, First, Middle Initial)

C. Arco

Mailing Address 4340 N Carson St

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		03		2014

City	State	Zip Code
Carson City	NV	89703

Amount of Each Disbursement this Period

91.15

Purpose of Disbursement
travel expense - fuel in lieu of mileage

002

Transaction ID : SB17.10311

Candidate Name

Category/
Type

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
----------------	---	--

State: District:

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

893.25

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

Form/Schedule: SB17

Transaction ID : SB17.10388

Meals and entertainment - campaign expenses: 8/31/13 Torino's restaurant \$140.00, 2/22/13 Sierra Gold \$42.00, 4/6/12 Lone Eagle Grille \$300.00, 12/6/13 Prospectors' \$40.00. Travel-Cab Fare: 10/11/13 Western Cab Las Vegas \$38.00, 11/19/13 ANLV Cab \$29.00, 10/13 VIP Cab \$35.00, 11/14/13 Yellow-Checker-Star \$27.00, 10/24/13 Yellow-Checker-Star \$21.00, 9/18/13 \$32.00, 10/12 Cab Taxi \$38.00

Form/Schedule:

Transaction ID:

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

Full Name (Last, First, Middle Initial)

A. AT & T

Mailing Address PO Box 5025

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		31		2014

City	State	Zip Code
Carol Stream	IL	60197

Amount of Each Disbursement this Period

0.56

Purpose of Disbursement
telephone expense

001

Transaction ID : SB17.10348

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

B. AT & T

Mailing Address PO Box 5025

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		25		2014

City	State	Zip Code
Carol Stream	IL	60197

Amount of Each Disbursement this Period

26.12

Purpose of Disbursement
telephone expnese

001

Transaction ID : SB17.10360

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

c. Authnet Gateway

Mailing Address P.O. Box 8999

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		03		2014

City	State	Zip Code
San Francisco	CA	94128

Amount of Each Disbursement this Period

21.70

Purpose of Disbursement
bank fees

001

Transaction ID : SB17.10322

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

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

48.38

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Amodei for Nevada

Full Name (Last, First, Middle Initial)

A. Authnet Gateway

Mailing Address P.O. Box 8999

City	State	Zip Code
San Francisco	CA	94128

Purpose of Disbursement
bank fees

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		04		2014

Amount of Each Disbursement this Period

23.05

Transaction ID : SB17.10325

B. Authnet Gateway

Mailing Address P.O. Box 8999

City	State	Zip Code
San Francisco	CA	94128

Purpose of Disbursement
bank fees

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		04		2014

Amount of Each Disbursement this Period

20.35

Transaction ID : SB17.10326

C. Bill.com

Mailing Address 3200 Ash Street

City	State	Zip Code
Palo Alto	CA	94306

Purpose of Disbursement
bank fees

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		07		2014

Amount of Each Disbursement this Period

28.89

Transaction ID : SB17.10324

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

72.29

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 62 OF 87

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

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

Full Name (Last, First, Middle Initial)

A. Bill.com

Mailing Address 3200 Ash Street

City	State	Zip Code
Palo Alto	CA	94306

Purpose of Disbursement
bank fees

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		07		2014

Amount of Each Disbursement this Period

24.76

Transaction ID : SB17.10333

B. Bill.com

Mailing Address 3200 Ash Street

City	State	Zip Code
Palo Alto	CA	94306

Purpose of Disbursement
bank fees

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		07		2014

Amount of Each Disbursement this Period

29.54

Transaction ID : SB17.10338

c. BLT Steak

Mailing Address 1625 I Street NW

City	State	Zip Code
Washington	DC	20006

Purpose of Disbursement
meals & entertainment - campaign expenses

003

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		13		2014

Amount of Each Disbursement this Period

500.00

Transaction ID : SB17.10237

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

554.30

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)

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☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

Full Name (Last, First, Middle Initial)

A. Bonanza Casino

Mailing Address 4720 N. Virginia Street

City State Zip Code
 Reno NV 89506

Purpose of Disbursement
 meals & entertainment - campaign expenses

Candidate Name

Office Sought: ☐ House ☐ Senate ☐ President
 Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
 02 / 07 / 2014

Amount of Each Disbursement this Period

270.00

Transaction ID : SB17.10250

B. Boys and Girls Club of Western Nevada

Mailing Address 1870 Russell Way

City State Zip Code
 Carson City NV 89706

Purpose of Disbursement
 donation - crab feed

Candidate Name

Office Sought: ☐ House ☐ Senate ☐ President
 Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
 02 / 20 / 2014

Amount of Each Disbursement this Period

500.00

Transaction ID : SB17.10398

C. Kenneth Brooke

Mailing Address 6920 Calusa Court

City State Zip Code
 Reno NV 89523

Purpose of Disbursement
 intern stipend

Candidate Name

Office Sought: ☐ House ☐ Senate ☐ President
 Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
 01 / 05 / 2014

Amount of Each Disbursement this Period

500.00

Transaction ID : SB17.10375

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

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

1270.00

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Amodei for Nevada

Full Name (Last, First, Middle Initial)

A. Bull Feathers

Mailing Address 410 1st Street

City	State	Zip Code
Washington	DC	20003

Purpose of Disbursement
meals & entertainment - campaign expenses

003

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		27		2014

Amount of Each Disbursement this Period

46.00

Transaction ID : SB17.10262

B. Bull Feathers

Mailing Address 410 1st Street

City	State	Zip Code
Washington	DC	20003

Purpose of Disbursement
meals & entertainment - campaign expenses

003

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		05		2014

Amount of Each Disbursement this Period

36.00

Transaction ID : SB17.10266

C. CANTOR FOR CONGRESS

Mailing Address PO BOX 17813

City	State	Zip Code
RICHMOND	VA	23226

Purpose of Disbursement
In-kind - air fare fund raising eventCategory/
Type

Candidate Name

CANTOR FOR CONGRESS

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: VA

District: 07

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		18		2014

Amount of Each Disbursement this Period

2000.00

Transaction ID : SB17.10467

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

2082.00

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Amodei for Nevada

Full Name (Last, First, Middle Initial)

A. Capital Grille Las Vegas

Mailing Address 3200 Las Vegas Blvd South, Space 3

City	State	Zip Code
Las Vegas	NV	89109

Purpose of Disbursement
meals & entertainment - campaign expenses

003

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		31		2014

Amount of Each Disbursement this Period

475.00

Transaction ID : SB17.10285

B. Carson City Republican Club

Mailing Address 1931 California Street

City	State	Zip Code
Carson City	NV	89702

Purpose of Disbursement
contribution

011

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		16		2014

Amount of Each Disbursement this Period

500.00

Transaction ID : SB17.10411

C. Carson Valley Country Club

Mailing Address 1029 Riverview Drive

City	State	Zip Code
Gardnerville	NV	89460

Purpose of Disbursement
meals & entertainment - campaign expenses

003

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		24		2014

Amount of Each Disbursement this Period

155.00

Transaction ID : SB17.10257

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

1130.00

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 PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

Full Name (Last, First, Middle Initial)

A. Casey Neilon & Associates, LLC

Mailing Address 503 N Division St

City	State	Zip Code
Carson City	NV	89703

Purpose of Disbursement
accounting fees

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		07		2014

Amount of Each Disbursement this Period

4000.00

Transaction ID : SB17.10356

B. Casey Neilon & Associates, LLC

Mailing Address 503 N Division St

City	State	Zip Code
Carson City	NV	89703

Purpose of Disbursement
accounting fees

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		07		2014

Amount of Each Disbursement this Period

341.25

Transaction ID : SB17.10357

C. Casino Fandango

Mailing Address 3800 South Carson Street

City	State	Zip Code
Carson City	NV	89701

Purpose of Disbursement
meals & entertainment - campaign expenses

003

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		04		2014

Amount of Each Disbursement this Period

80.00

Transaction ID : SB17.10264

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

4421.25

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 67 OF 87

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

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NAME OF COMMITTEE (In Full)

Amodei for Nevada

Full Name (Last, First, Middle Initial)

A. Danielle Cherry

Mailing Address 345 Sondrio Way

City	State	Zip Code
Reno	NV	89521

Purpose of Disbursement
Fundraising commissions and reimbursment of expenses

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		31		2014

Amount of Each Disbursement this Period

691.19

Transaction ID : SB17.10352

B. Danielle Cherry

Mailing Address 345 Sondrio Way

City	State	Zip Code
Reno	NV	89521

Purpose of Disbursement
Fundraising commissions and reimbursment of expenses

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		25		2014

Amount of Each Disbursement this Period

4462.00

Transaction ID : SB17.10353

c. Churchill County Republican Central Committee

Mailing Address PO Box 1404

City	State	Zip Code
Fallon	NV	89407

Purpose of Disbursement
contribution

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		16		2014

Amount of Each Disbursement this Period

500.00

Transaction ID : SB17.10422

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

5653.19

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Amodei for Nevada

Full Name (Last, First, Middle Initial)

A. Ashley Corcoran

Mailing Address 210 Bartlett St.

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		05		2014

City	State	Zip Code
Reno	NV	89513

Purpose of Disbursement
Intern Stipend

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Amount of Each Disbursement this Period

500.00

Transaction ID : SB17.10429

B. Delta Air

Full Name (Last, First, Middle Initial)

Mailing Address P.O. Box 20706

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		24		2014

City	State	Zip Code
Atlanta	GA	30320

Purpose of Disbursement
airfare - campaign travel expense

002

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Amount of Each Disbursement this Period

1018.00

Transaction ID : SB17.10343

c. Douglas County Republican Central Committee

Full Name (Last, First, Middle Initial)

Mailing Address 1609 Hwy 395

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		18		2014

City	State	Zip Code
Minden	NV	89423

Purpose of Disbursement
contribution

011

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Amount of Each Disbursement this Period

500.00

Transaction ID : SB17.10425

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

2018.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

Full Name (Last, First, Middle Initial)

A. Douglas County Republican Central Committee

Mailing Address 1609 Hwy 395

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		04		2014

City	State	Zip Code
Minden	NV	89423

Amount of Each Disbursement this Period

5784.67

Purpose of Disbursement
contribution: Ad - Lincoln Day Program

011

Transaction ID : SB17.10424

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

B. El Dorado Hotel

Mailing Address PO Box 3399

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		07		2014

City	State	Zip Code
Reno	NV	89505

Amount of Each Disbursement this Period

5134.67

Purpose of Disbursement
meals & entertainment - fund raising event on 1/23/14

003

Transaction ID : SB17.10359

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

C. Elko County Republican Central Committee

Mailing Address P. O. Box 326

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		16		2014

City	State	Zip Code
Elko	NV	89803

Amount of Each Disbursement this Period

500.00

Purpose of Disbursement
contribution

011

Transaction ID : SB17.10416

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

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

5784.67

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Amodei for Nevada

Full Name (Last, First, Middle Initial)

A. Eureka County Republican Club

Mailing Address PO Box 816

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		16		2014

City	State	Zip Code
Eureka	NV	89316

Amount of Each Disbursement this Period

500.00

Purpose of Disbursement
contribution

011

Transaction ID : SB17.10409

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

B. Fig Tree Catering

Mailing Address 1401 W. 2nd Street

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		15		2014

City	State	Zip Code
Reno	NV	89503

Amount of Each Disbursement this Period

448.50

Purpose of Disbursement
meals & entertainment - campaign expense

003

Transaction ID : SB17.10346

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

c. Flag Store Sign

Mailing Address 155 Glendale Ave

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		03		2014

City	State	Zip Code
Sparks	NV	89431

Amount of Each Disbursement this Period

180.64

Purpose of Disbursement
flags

001

Transaction ID : SB17.10385

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

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

1129.14

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 PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

Full Name (Last, First, Middle Initial)

A. Friends in Service Helping

Mailing Address 138 E. Long Street

Date of Disbursement

M M / D D / Y Y Y Y
03 / 27 / 2014

City	State	Zip Code
Carson City	NV	89706

Amount of Each Disbursement this Period

400.00

Purpose of Disbursement
donation

012

Transaction ID : SB17.10403

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
	<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Full Name (Last, First, Middle Initial)

B. Humboldt County Republican Central Committee

Mailing Address PO Box 963

Date of Disbursement

M M / D D / Y Y Y Y
01 / 16 / 2014

City	State	Zip Code
Winnemucca	NV	89446

Amount of Each Disbursement this Period

500.00

Purpose of Disbursement
contribution

011

Transaction ID : SB17.10418

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
	<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Full Name (Last, First, Middle Initial)

C. John Ascuaga's Nugget

Mailing Address 1100 Nugget Ave

Date of Disbursement

M M / D D / Y Y Y Y
03 / 04 / 2014

City	State	Zip Code
Sparks	NV	89431

Amount of Each Disbursement this Period

54.00

Purpose of Disbursement
meals & entertainment - campaign expenses

003

Transaction ID : SB17.10265

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
	<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

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

954.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

A. La Famiglia Restaurante Full Name (Last, First, Middle Initial) Mailing Address 170 S. Virginia St. City Reno State NV Zip Code 89501 Purpose of Disbursement meals & entertainment - campaign expenses Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) State: District:			Date of Disbursement M M / D D / Y Y Y Y 02 / 13 / 2014 Amount of Each Disbursement this Period 207.91 Transaction ID : SB17.10254
B. Lander County Republican Central Committee Full Name (Last, First, Middle Initial) Mailing Address PO Box 1522 City Battle Mountain State NV Zip Code 89820 Purpose of Disbursement contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) State: District:			Date of Disbursement M M / D D / Y Y Y Y 01 / 16 / 2014 Amount of Each Disbursement this Period 500.00 Transaction ID : SB17.10417
c. Lincoln County Republican Club Full Name (Last, First, Middle Initial) Mailing Address PO Box 1005 City Caliente State NV Zip Code 89008 Purpose of Disbursement contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) State: District:			Date of Disbursement M M / D D / Y Y Y Y 01 / 16 / 2014 Amount of Each Disbursement this Period 500.00 Transaction ID : SB17.10407
SUBTOTAL of Disbursements This Page (optional).....			1207.91
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 PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

Full Name (Last, First, Middle Initial)

A. Lyon County GOP

Mailing Address PO Box 619

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		16		2014

City	State	Zip Code
Yerington	NV	89447

Amount of Each Disbursement this Period

500.00

Purpose of Disbursement
contribution

011

Transaction ID : SB17.10413

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
	<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Full Name (Last, First, Middle Initial)

B. National Capital Flag Company

Mailing Address 100 S Quaker Ln

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		21		2014

City	State	Zip Code
Alexandria	VA	22314

Amount of Each Disbursement this Period

95.60

Purpose of Disbursement
flags

001

Transaction ID : SB17.10386

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
	<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Full Name (Last, First, Middle Initial)

C. Pershing County Republican Central Committee

Mailing Address 1775 Looz Rd.,

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		16		2014

City	State	Zip Code
Lovelock	NV	89419

Amount of Each Disbursement this Period

500.00

Purpose of Disbursement
contribution

011

Transaction ID : SB17.10419

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
	<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

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

1095.60

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Amodei for Nevada

Full Name (Last, First, Middle Initial)

A. PJ Clarke's Washington DC

Mailing Address 1600 K Street NW

City	State	Zip Code
Washington	DC	20006

Purpose of Disbursement
meals & entertainment - campaign expenses

003

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		13		2014

Amount of Each Disbursement this Period

210.00

Transaction ID : SB17.10235

B. Shell Carson Cty

Mailing Address Hwy 395

City	State	Zip Code
Carson City	NV	89703

Purpose of Disbursement
travel expense - fuel in lieu of mileage

002

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		06		2014

Amount of Each Disbursement this Period

86.01

Transaction ID : SB17.10316

c. Shell Carson Cty

Mailing Address Hwy 395

City	State	Zip Code
Carson City	NV	89703

Purpose of Disbursement
travel expense - fuel in lieu of mileage

003

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		21		2014

Amount of Each Disbursement this Period

95.00

Transaction ID : SB17.10297

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

391.01

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

Full Name (Last, First, Middle Initial)

A. Shell Carson Cty

Mailing Address Hwy 395

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		06		2014

City	State	Zip Code
Carson City	NV	89703

Amount of Each Disbursement this Period

57.93

Purpose of Disbursement
travel expense - fuel in lieu of mileage

002

Transaction ID : SB17.10299

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

B. Shell Carson Cty

Mailing Address Hwy 395

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		18		2014

City	State	Zip Code
Carson City	NV	89703

Amount of Each Disbursement this Period

57.62

Purpose of Disbursement
travel expense - fuel in lieu of mileage

002

Transaction ID : SB17.10312

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

C. Shell Carson Cty

Mailing Address Hwy 395

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		24		2014

City	State	Zip Code
Carson City	NV	89703

Amount of Each Disbursement this Period

99.00

Purpose of Disbursement
Fuel in lieu of mileage

002

Transaction ID : SB17.10096

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

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

214.55

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Amodei for Nevada

Full Name (Last, First, Middle Initial)

A. Southwest Airlines

Mailing Address P.O. Box 36647-1CR

City	State	Zip Code
Dallas	TX	73235

Purpose of Disbursement
Airfare - campaign travel

002

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		26		2014

Amount of Each Disbursement this Period

225.00

Transaction ID : SB17.10093

B. Special Olympics

Mailing Address 5670 Wynn Road, Suite H

City	State	Zip Code
Las Vegas	NV	89118

Purpose of Disbursement
donation

012

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		26		2014

Amount of Each Disbursement this Period

350.00

Transaction ID : SB17.10401

c. Storey County Republican Central Committee

Mailing Address PO Box 767

City	State	Zip Code
Virginia City	NV	89440

Purpose of Disbursement
contribution

011

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		18		2014

Amount of Each Disbursement this Period

500.00

Transaction ID : SB17.10426

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

1075.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

Full Name (Last, First, Middle Initial)

A. The M Group

Mailing Address 100 Luna Park #156

City	State	Zip Code
Alexandria	VA	22305

Purpose of Disbursement
Fundraising commissions and reimbursement of expenses

003

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		31		2014

Amount of Each Disbursement this Period

922.95

Transaction ID : SB17.10349

B. The M Group

Mailing Address 100 Luna Park #156

City	State	Zip Code
Alexandria	VA	22305

Purpose of Disbursement
Fundraising commissions and reimbursement of expenses

003

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		25		2014

Amount of Each Disbursement this Period

2100.00

Transaction ID : SB17.10350

c. The Olive Garden

Mailing Address 4253 S. Carson Street

City	State	Zip Code
Carson City	NV	89701

Purpose of Disbursement
meals & entertainment - campaign expenses

003

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		18		2014

Amount of Each Disbursement this Period

120.00

Transaction ID : SB17.10269

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

3142.95

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

Full Name (Last, First, Middle Initial)

A. Thunder Canyon

Mailing Address 19 Lightning W Ranch Road

City	State	Zip Code
New Washoe City	NV	89704

Purpose of Disbursement
meals & entertainment - campaign expenses - fundraising event

003

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		20		2014

Amount of Each Disbursement this Period

1250.00

Transaction ID : SB17.10271

B. Venetian and Palazzo Hotel Casino

Mailing Address 3325 S. Las Vegas Blvd.

City	State	Zip Code
Las Vegas	NV	89109

Purpose of Disbursement
meals & entertainment - campaign expenses

003

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		31		2014

Amount of Each Disbursement this Period

150.00

Transaction ID : SB17.10283

C. Veterans in Politics International, Inc.

Mailing Address PO Box 28211

City	State	Zip Code
Las Vegas	NV	89126

Purpose of Disbursement
sponsorship contribution - ball & gala

012

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		05		2014

Amount of Each Disbursement this Period

500.00

Transaction ID : SB17.10393

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

1900.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 79 OF 87

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

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NAME OF COMMITTEE (In Full)

Amodei for Nevada

Full Name (Last, First, Middle Initial)

A. Vickys of Santa Fe

Mailing Address 45-100 Club Dr,

City	State	Zip Code
Indian Wells	CA	92210

Purpose of Disbursement
Meals and entertainment - fundraising expenses

003

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		02		2014

Amount of Each Disbursement this Period

300.00

Transaction ID : SB17.10230

B. Washoe county Republican Party

Mailing Address 3652 South Virginia Street

City	State	Zip Code
Reno	NV	89502

Purpose of Disbursement
contribution

011

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		16		2014

Amount of Each Disbursement this Period

500.00

Transaction ID : SB17.10420

C. Washoe county Republican Party

Mailing Address 3652 South Virginia Street

City	State	Zip Code
Reno	NV	89502

Purpose of Disbursement
Contribution - Lincoln Day Dinner

011

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		04		2014

Amount of Each Disbursement this Period

520.00

Transaction ID : SB17.10423

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

1320.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Amodei for Nevada

Full Name (Last, First, Middle Initial)

A. Wells Fargo

Mailing Address PO Box 6995

City	State	Zip Code
Portland	OR	97228

Purpose of Disbursement
merchant fees

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		14		2014

Amount of Each Disbursement this Period

28.07

Transaction ID : SB17.10328

B. Wells Fargo

Mailing Address PO Box 6995

City	State	Zip Code
Portland	OR	97228

Purpose of Disbursement
merchant fees

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		14		2014

Amount of Each Disbursement this Period

47.04

Transaction ID : SB17.10329

C. Wells Fargo

Mailing Address PO Box 6995

City	State	Zip Code
Portland	OR	97228

Purpose of Disbursement
merchant fees

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		14		2014

Amount of Each Disbursement this Period

48.48

Transaction ID : SB17.10330

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

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

123.59

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

Full Name (Last, First, Middle Initial)

A. Wells Fargo

Mailing Address PO Box 6995

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		13		2014

City	State	Zip Code
Portland	OR	97228

Purpose of Disbursement
merchant fees

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Amount of Each Disbursement this Period

12.97

Transaction ID : SB17.10335

B. Wells Fargo

Mailing Address PO Box 6995

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		13		2014

City	State	Zip Code
Portland	OR	97228

Purpose of Disbursement
merchant fees

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Amount of Each Disbursement this Period

22.52

Transaction ID : SB17.10336

C. Wells Fargo

Mailing Address PO Box 6995

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		13		2014

City	State	Zip Code
Portland	OR	97228

Purpose of Disbursement
merchant fees

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Amount of Each Disbursement this Period

56.48

Transaction ID : SB17.10337

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

91.97

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Amodei for Nevada

Full Name (Last, First, Middle Initial)

A. Wells Fargo

Mailing Address PO Box 6995

City	State	Zip Code
Portland	OR	97228

Purpose of Disbursement
bank fees

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		10		2014

Amount of Each Disbursement this Period

24.62

Transaction ID : SB17.10339

B. Wells Fargo

Mailing Address PO Box 6995

City	State	Zip Code
Portland	OR	97228

Purpose of Disbursement
merchant fees

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		13		2014

Amount of Each Disbursement this Period

8.97

Transaction ID : SB17.10340

C. Wells Fargo

Mailing Address PO Box 6995

City	State	Zip Code
Portland	OR	97228

Purpose of Disbursement
merchant fees

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		13		2014

Amount of Each Disbursement this Period

12.65

Transaction ID : SB17.10341

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

24.62

SCHEDULE D (FEC Form 3)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 86 OF 87

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

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 State

Alexandria

Zip Code

VA

22314

Outstanding Balance Beginning This Period

4500.00

Transaction ID : SD10.7593

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

4500.00

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 State

Sacramento

Zip Code

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

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 @G B9CI G`H9LH`F9 @G H98 `HC`5 `F9DCFHŽG7 <98I @G `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: