

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS For An Authorized Committee

Office Use Only

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

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

2. FEC IDENTIFICATION NUMBER C C00496760
3. IS THIS REPORT NEW (N) OR AMENDED (A) x
STATE DISTRICT NV 02

4. TYPE OF REPORT (Choose One)
(a) Quarterly Reports:
[ ] April 15 Quarterly Report (Q1)
[ ] July 15 Quarterly Report (Q2)
[x] 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 MM/DD/YYYY in the State of
(c) 30-Day POST-Election Report for the:
[ ] General (30G) [ ] Runoff (30R) [ ] Special (30S)
Election on MM/DD/YYYY in the State of

5. Covering Period MM/DD/YYYY through MM/DD/YYYY
07/01/2016 through 09/30/2016

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

Type or Print Name of Treasurer Neilon, Nicola, , ,

Signature of Treasurer Neilon, Nicola, , , [Electronically Filed] Date MM/DD/YYYY 12/08/2016

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

**SUMMARY PAGE**  
of Receipts and Disbursements

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name  
**Amodei for Nevada**

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	140260.00	764067.02
(b) Total Contribution Refunds (from Line 20(d)) .....	300.00	16459.37
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	139960.00	747607.65
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	145459.66	665664.42
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	8993.28
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	145459.66	656671.14
8. Cash on Hand at Close of Reporting Period (from Line 27).....	270485.63	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	9000.00	

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

**Amodei for Nevada**

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

<b>I. RECEIPTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	67450.00	382707.94
(ii) Unitemized .....	375.00	14575.00
(iii) TOTAL of contributions from individuals .....	67825.00	397282.94
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	72435.00	366784.08
(d) The Candidate .....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	140260.00	764067.02
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>	0.00	0.00
<b>13. LOANS:</b>		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....</b>	0.00	8993.28
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.) .....</b>	0.00	0.00
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4).....</b>	140260.00	773060.30

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3 (Revised 05/2016)

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II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	145459.66	665664.42
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	92050.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	300.00	15807.94
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	651.43
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	300.00	16459.37
21. OTHER DISBURSEMENTS .....	5000.00	5000.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	150759.66	779173.79

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	280985.29
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	140260.00
25. SUBTOTAL (add Line 23 and Line 24).....	421245.29
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	150759.66
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	270485.63

**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 97  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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

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

**A.** Full Name (Last, First, Middle Initial)  
**Allen, Dan, , ,**  
 Mailing Address 555 Vista Blvd  
 City Sparks State NV Zip Code 89434  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer ITS Logistics Occupation Principal  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 15 / 2016  
**Transaction ID : SA11AI.14487**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Bader, Daryl, , ,**  
 Mailing Address 555 Vista Blvd  
 City Sparks State NV Zip Code 89434  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer ITS Logistics Occupation Principal  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 15 / 2016  
**Transaction ID : SA11AI.14489**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Barker, Ross, E, ,**  
 Mailing Address 3316 Buckcreek Court  
 City Reno State NV Zip Code 89519-8040  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer e-Quantum, Inc. Occupation CEO  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 2700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 02 / 2016  
**Transaction ID : SA11AI.14503**  
 Amount of Each Receipt this Period  
 2700.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 3700.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 6 OF 97  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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

**A.** Full Name (Last, First, Middle Initial)  
**Barnes, Michael, R, ,**

Mailing Address 7455 Eastwood Drive

City Reno State NV Zip Code 89509-2208

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

Name of Employer Symbio Development Occupation Managing Partner

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 30 / 2016

Transaction ID : SA11AI.14472

Amount of Each Receipt this Period  
2000.00

Memo Item

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

Mailing Address PO Box 255

City Glenbrook State NV Zip Code 89413

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

Name of Employer Lucidity Occupation CEO

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 02 / 2016

Transaction ID : SA11AI.14496

Amount of Each Receipt this Period  
2700.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Brightup, Craig, S, ,**

Mailing Address 215 N Pitt St

City Alexandria State VA Zip Code 22314-2507

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

Name of Employer The Brightup Group Occupation CEO

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 23 / 2016

Transaction ID : SA11AI.14584

Amount of Each Receipt this Period  
250.00

Memo Item  
2016 General

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 4950.00

**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 7 OF 97	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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

**A.** Full Name (Last, First, Middle Initial)  
**Britt, Michael, J, ,**

Mailing Address 1204 Moselle Court

City Las Vegas	State NV	Zip Code 89144
-------------------	-------------	-------------------

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

Name of Employer Zuffa, LLC	Occupation VP Corp Commun and Govt Relations
--------------------------------	-------------------------------------------------

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 / 03 / 2016

**Transaction ID : SA11AI.14518**

Amount of Each Receipt this Period  
250.00

Memo Item

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

Mailing Address 280 Springfield Pkwy

City Spring Creek	State NV	Zip Code 89815
----------------------	-------------	-------------------

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

Name of Employer NDA	Occupation Natural Resources
-------------------------	---------------------------------

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 / 05 / 2016

**Transaction ID : SA11AI.14522**

Amount of Each Receipt this Period  
250.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Cardinal, Court, , ,**

Mailing Address 3800 S Carson

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

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

Name of Employer Fandango Casino	Occupation General manager
-------------------------------------	-------------------------------

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 / 30 / 2016

**Transaction ID : SA11AI.14471**

Amount of Each Receipt this Period  
1500.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	2000.00
<b>TOTAL</b> This Period (last page this line number only)..... ▶	

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

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

FOR LINE NUMBER: PAGE 8 OF 97  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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

**A.** Full Name (Last, First, Middle Initial)  
**Clark, Donald, J, ,**  
 Mailing Address 701 Marsh Ave  
 City Reno State NV Zip Code 89509  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Don J Clark Group Occupation Partner  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 2700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 30 / 2016  
**Transaction ID : SA11AI.14438**  
 Amount of Each Receipt this Period  
 2700.00  
 Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Clark, Patricia, D, ,**  
 Mailing Address PO Box 1923  
 City Minden State NV Zip Code 89423  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Self Occupation Real Estate  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 1950.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 02 / 2016  
**Transaction ID : SA11AI.14501**  
 Amount of Each Receipt this Period  
 1000.00  
 Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Clark, Susan, S, ,**  
 Mailing Address 701 Marsh Ave  
 City Reno State NV Zip Code 89509  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Nevada Venture Accelerator Occupation President  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 25 / 2016  
**Transaction ID : SA11AI.14451**  
 Amount of Each Receipt this Period  
 300.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 4000.00  
**TOTAL** This Period (last page this line number only)..... ▶



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

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

FOR LINE NUMBER: PAGE 9 OF 97  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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

**A.** Full Name (Last, First, Middle Initial)  
**Crosby, Harry, L, ,**  
Mailing Address 667 Madison Ave  
City New York State NY Zip Code 10065  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Cranemere Inc Occupation General Partner  
Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 / 09 / 2016  
Transaction ID : SA11AI.14526  
Amount of Each Receipt this Period  
1000.00  
 Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Damonte, Audrey, , ,**  
Mailing Address 12500 Sage Hill Rd  
City Reno State NV Zip Code 89521  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Holley Driggs Walch Occupation Attorney  
Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
Election Cycle-to-Date ▼  
3000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 / 30 / 2016  
Transaction ID : SA11AI.14460  
Amount of Each Receipt this Period  
1000.00  
 Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Day, Deborah, C., ,**  
Mailing Address 165 W. Liberty Street Suite 100  
City Reno State NV Zip Code 89501  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Dacole Occupation investor  
Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
Election Cycle-to-Date ▼  
4400.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 / 30 / 2016  
Transaction ID : SA11AI.14465  
Amount of Each Receipt this Period  
2700.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 4700.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 10 OF 97  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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

**A.** Full Name (Last, First, Middle Initial)  
**Dillon, Michael, F, , JR**

Mailing Address PO Box 13430

City Reno State NV Zip Code 89507

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

Name of Employer Dillon Health Occupation Owner

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date **1250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 30 2016

Transaction ID : SA11AI.14470

Amount of Each Receipt this Period  
 1000.00

Memo Item

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

Mailing Address 44115 Big Creek Road

City Winnemucca State NV Zip Code 89445

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

Name of Employer Duferrena Sheep Co Occupation Rancher

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 28 2016

Transaction ID : SA11AI.14599

Amount of Each Receipt this Period  
 500.00

Memo Item

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

Mailing Address 61 E Pursel Lane

City Yerington State NV Zip Code 89447

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

Name of Employer Nevada Copper Corp Occupation Vice President - Environmental

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date **1500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 23 2016

Transaction ID : SA11AI.14534

Amount of Each Receipt this Period  
 1500.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **3000.00**

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

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

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

FOR LINE NUMBER: PAGE 11 OF 97  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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

**A.** Full Name (Last, First, Middle Initial)  
**Engleman, Andrea, , ,**  
Mailing Address 500 Mary St

City Carson City State NV Zip Code 89703

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

Name of Employer Self Occupation Writer

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 30 / 2016

Transaction ID : SA11AI.14429

Amount of Each Receipt this Period  
850.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Enos, Ora, M, ,**  
Mailing Address 7351 Granite Ridge Ct

City Washoe Valley State NV Zip Code 89704

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

Name of Employer none Occupation homemaker

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
3850.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 30 / 2016

Transaction ID : SA11AI.14458

Amount of Each Receipt this Period  
300.00

Memo Item  
Reattribute: from Thomas to Ora

**C.** Full Name (Last, First, Middle Initial)  
**Enos, Thomas, , ,**  
Mailing Address 7351 Granite Ridge Ct

City Washoe Valley State NV Zip Code 89704

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

Name of Employer N/A Occupation Retired

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
3500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 30 / 2016

Transaction ID : SA11AI.14442

Amount of Each Receipt this Period  
1500.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 2650.00

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

# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 12 OF 97  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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

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

Mailing Address 7351 Granite Ridge Ct

City Washoe Valley	State NV	Zip Code 89704
-----------------------	-------------	-------------------

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

Name of Employer N/A	Occupation Retired
-------------------------	-----------------------

Receipt For: 2016  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 / 30 / 2016

**Transaction ID : SA11AI.14443**

Amount of Each Receipt this Period  
1500.00

Memo Item

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

Mailing Address 7351 Granite Ridge Ct

City Washoe Valley	State NV	Zip Code 89704
-----------------------	-------------	-------------------

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

Name of Employer N/A	Occupation Retired
-------------------------	-----------------------

Receipt For: 2016  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
4700.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 / 30 / 2016

**Transaction ID : SA11AI.14457**

Amount of Each Receipt this Period  
-300.00

Memo Item  
Reattribute:

**C.** Full Name (Last, First, Middle Initial)  
**Faust, Marcus, G, ,**

Mailing Address 3008 Apple Brook Lane

City Oakton	State VA	Zip Code 22124
----------------	-------------	-------------------

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

Name of Employer self-employed	Occupation attorney
-----------------------------------	------------------------

Receipt For: 2016  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
3000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 15 / 2016

**Transaction ID : SA11AI.14546**

Amount of Each Receipt this Period  
1500.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	2700.00
<b>TOTAL</b> This Period (last page this line number only)..... ▶	

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

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

FOR LINE NUMBER: PAGE 13 OF 97  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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

**A.** Full Name (Last, First, Middle Initial)  
**Giglio, Christopher, , ,**

Mailing Address 366 N. Edison St

City: Arlington State: VA Zip Code: 22203

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

Name of Employer: Capital Edge Occupation: Lobbyist

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date: 500.00

Date of Receipt: 09 / 16 / 2016

Transaction ID : SA11AI.14586

Amount of Each Receipt this Period: 250.00

Memo Item

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

Mailing Address 2205 Plaza del Puerto

City: Las Vegas State: NV Zip Code: 89102

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

Name of Employer: Graves Communications Occupation: Consultant

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date: 1750.00

Date of Receipt: 08 / 30 / 2016

Transaction ID : SA11AI.14437

Amount of Each Receipt this Period: 1000.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Greenwald, E, James, ,**

Mailing Address 10000 Dryden Dr,

City: Reno State: NV Zip Code: 89511

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

Name of Employer: Reno Orthopedic Occupation: Orthopedic Surgeon

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date: 500.00

Date of Receipt: 07 / 15 / 2016

Transaction ID : SA11AI.14484

Amount of Each Receipt this Period: 500.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1750.00

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

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

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

FOR LINE NUMBER: PAGE 14 OF 97  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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

**A.** Full Name (Last, First, Middle Initial)  
**Hendrick, Kirk, D, ,**  
Mailing Address 2557 Red Arrow Dr

City: Las Vegas State: NV Zip Code: 89135-1628

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

Name of Employer: UFC Occupation: Executive VP

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date: 1500.00

Date of Receipt: 08 / 05 / 2016  
**Transaction ID : SA11AI.14514**

Amount of Each Receipt this Period: 1500.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Hitchcock, Frederick, E, ,**  
Mailing Address 9101 Alta Drive #1204

City: Las Vegas State: NV Zip Code: 89145

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

Name of Employer: Hitchcock Automotive Resources Occupation: Auto dealer

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date: 2700.00

Date of Receipt: 07 / 13 / 2016  
**Transaction ID : SA11AI.14483**

Amount of Each Receipt this Period: 2700.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Hoffman, Lee, E, ,**  
Mailing Address 1085 Barrington Ave

City: Elko State: NV Zip Code: 89801

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

Name of Employer: retired Occupation: retired

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date: 2250.00

Date of Receipt: 08 / 21 / 2016  
**Transaction ID : SA11AI.14532**

Amount of Each Receipt this Period: 1500.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 5700.00

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

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

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

FOR LINE NUMBER: PAGE 15 OF 97  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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

**A.** Full Name (Last, First, Middle Initial)  
**HOFFMAN, LYNNE, , ,**  
 Mailing Address 1085 Barrington Ave  
 City Elko State NV Zip Code 89801  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer None Occupation Retired  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 2250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 21 / 2016  
**Transaction ID : SA11AI.14531**  
 Amount of Each Receipt this Period  
 1500.00  
 Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Kassity, Christopher, A., ,**  
 Mailing Address 1844 Wellington West  
 City Carson City State NV Zip Code 89701  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer McDonalds Occupation Franchisee  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 5700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 30 / 2016  
**Transaction ID : SA11AI.14440**  
 Amount of Each Receipt this Period  
 2700.00  
 Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Kassity, Sharon, , ,**  
 Mailing Address 1844 Wellington West  
 City Carson City State NV Zip Code 89703  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Kaia Fit Occupation Owner  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 2800.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 30 / 2016  
**Transaction ID : SA11AI.14447**  
 Amount of Each Receipt this Period  
 2700.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 6900.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 16 OF 97  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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

**A.** Full Name (Last, First, Middle Initial)  
**Khoury, Dassam, , ,**  
 Mailing Address 568 West Spring Valley Court  
 City Spring Creek State NV Zip Code 89815  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Self Occupation Business Owner  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 23 / 2016  
**Transaction ID : SA11AI.14535**  
 Amount of Each Receipt this Period  
 1500.00  
 Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Lee, R, Michael, ,**  
 Mailing Address PO Box 7550  
 City Reno State NV Zip Code 89510-7550  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Lee Bros. Leasing Occupation CEO  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 09 / 2016  
**Transaction ID : SA11AI.14524**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Lepori, Frank, , ,**  
 Mailing Address 1580 Hymar Ave Suite 100  
 City Sparks State NV Zip Code 89431  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Frank Lepori Construction Occupation Owner  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 30 / 2016  
**Transaction ID : SA11AI.14464**  
 Amount of Each Receipt this Period  
 1000.00  
 Memo Item

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



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

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

FOR LINE NUMBER: PAGE 17 OF 97  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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

**A.** Full Name (Last, First, Middle Initial)  
**Maibenco, Thomas, A, ,**  
Mailing Address 10640 North McCarran Blvd F-347

City: Reno State: NV Zip Code: 89502

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

Name of Employer: Self Occupation: Physician

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date: 5300.00

Date of Receipt: 09 / 22 / 2016  
Transaction ID : SA11AI.14556

Amount of Each Receipt this Period: 500.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Maier, Sandra, , ,**  
Mailing Address PO BOX 467

City: Genoa State: NV Zip Code: 89411

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

Name of Employer: Valley Van & Storage Occupation: Owner

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date: 3100.00

Date of Receipt: 08 / 29 / 2016  
Transaction ID : SA11AI.14539

Amount of Each Receipt this Period: 3000.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Merrill, Judd, B, ,**  
Mailing Address 2425 Crooked Canyon Ct

City: Reno State: NV Zip Code: 89521-6213

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

Name of Employer: Comstock Mining Occupation: CFO

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date: 1500.00

Date of Receipt: 08 / 30 / 2016  
Transaction ID : SA11AI.14461

Amount of Each Receipt this Period: 1500.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 5000.00

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

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

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

FOR LINE NUMBER: PAGE 18 OF 97  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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

**A.** Full Name (Last, First, Middle Initial)  
**Miller, Gantt, W, , III**  
 Mailing Address 1088 Wisteria Drive  
 City Minden State NV Zip Code 89423-5111  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Winco Windows Occupation CEO  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 30 / 2016  
**Transaction ID : SA11AI.14435**  
 Amount of Each Receipt this Period  
 300.00  
 Memo Item  
 Reattribute: excess from Korliss to Gantt

**B.** Full Name (Last, First, Middle Initial)  
**Miller, Korliss, , ,**  
 Mailing Address 1088 Wisteria Dr.  
 City Minden State NV Zip Code 89423  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Winco Mfg Co., Inc Occupation Owner  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 5150.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 30 / 2016  
**Transaction ID : SA11AI.14431**  
 Amount of Each Receipt this Period  
 3000.00  
 Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Miller, Korliss, , ,**  
 Mailing Address 1088 Wisteria Dr.  
 City Minden State NV Zip Code 89423  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Winco Mfg Co., Inc Occupation Owner  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 4850.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 30 / 2016  
**Transaction ID : SA11AI.14434**  
 Amount of Each Receipt this Period  
 -300.00  
 Memo Item  
 Reattribute:

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

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

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

FOR LINE NUMBER: PAGE 19 OF 97  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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

**A.** Full Name (Last, First, Middle Initial)  
**Miller, Vergie, , ,**  
 Mailing Address 4895 Convar 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: 2016  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 3700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 30 / 2016  
**Transaction ID : SA11AI.14450**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Miller, William, , ,**  
 Mailing Address 4895 Convar Drive  
 City Carson City State NV Zip Code 89706  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Bill Miller Engineering Occupation Principal  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 30 / 2016  
**Transaction ID : SA11AI.14453**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Mills, Elli, , ,**  
 Mailing Address 14160 Saddlebow Drive  
 City Reno State NV Zip Code 89511  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Self Occupation Business Executive  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 22 / 2016  
**Transaction ID : SA11AI.14537**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1250.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 20 OF 97  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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

**A.** Full Name (Last, First, Middle Initial)  
**Moisio, Lee, , ,**  
 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: 2016  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 5200.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 02 / 2016  
**Transaction ID : SA11AI.14511**  
 Amount of Each Receipt this Period  
 2700.00  
 Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Moisio, Michael, , ,**  
 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: 2016  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 5200.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 02 / 2016  
**Transaction ID : SA11AI.14512**  
 Amount of Each Receipt this Period  
 2700.00  
 Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Nielsen, Robert, F, ,**  
 Mailing Address 380 Linden St  
 City Reno State NV Zip Code 89502  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Shelter Properties Inc Occupation President  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 02 / 2016  
**Transaction ID : SA11AI.14504**  
 Amount of Each Receipt this Period  
 1000.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 6400.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 21 OF 97  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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

**A.** Full Name (Last, First, Middle Initial)  
**Owen, Gregory, , ,**  
 Mailing Address 2011 East Carson St  
 City Carson State CA Zip Code 90810  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Ability-Trimodal Occupation Trucking  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 27 / 2016  
**Transaction ID : SA11AI.14616**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Patrick, Joan, , ,**  
 Mailing Address 2298 Cheshire Village Ct  
 City Henderson State NV Zip Code 89052  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer None Occupation Retired  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date 2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 30 / 2016  
**Transaction ID : SA11AI.14463**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item donation

**C.** Full Name (Last, First, Middle Initial)  
**Reece, Jim, , ,**  
 Mailing Address 132 Weatherstone Drive  
 City Henderson State NV Zip Code 89074  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer retired Occupation retired  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 18 / 2016  
**Transaction ID : SA11AI.14482**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

**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: PAGE 22 OF 97  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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

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

Mailing Address 5375 Kietzke Lane

City Reno State NV Zip Code 89511

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

Name of Employer Circle Bar N Ranch Occupation Manager

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 08 / 2016

Transaction ID : SA11AI.14542

Amount of Each Receipt this Period  
1000.00

Memo Item political donation

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

Mailing Address 766 Prospect Ave

City Winnetka State IL Zip Code 60093

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

Name of Employer Greenleaf Health Occupation President

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 / 30 / 2016

Transaction ID : SA11AI.14448

Amount of Each Receipt this Period  
1000.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Smith, Linda, W, ,**

Mailing Address 930 Tahoe Blvd #802-117

City Incline Village State NV Zip Code 89451

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

Name of Employer ACA Occupation Director

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1450.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 15 / 2016

Transaction ID : SA11AI.14486

Amount of Each Receipt this Period  
500.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 2500.00

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

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

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

FOR LINE NUMBER: PAGE 23 OF 97  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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

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

Mailing Address 4274 Bitterroot Rd

City Reno State NV Zip Code 89519

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

Name of Employer MB Stewart Company Occupation owner

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 02 / 2016

Transaction ID : SA11AI.14498

Amount of Each Receipt this Period  
 1000.00

Memo Item Donation

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

Mailing Address 6151 Lakeside Drive Suite 1000

City Reno State NV Zip Code 89511

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

Name of Employer Symbio Development Occupation Managing Partner

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 30 / 2016

Transaction ID : SA11AI.14474

Amount of Each Receipt this Period  
 2000.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Waters, George, , ,**

Mailing Address 505 Capital Court NE Suite 200

City Washington State DC Zip Code 20002

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

Name of Employer Self Occupation Consultant

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 23 / 2016

Transaction ID : SA11AI.14566

Amount of Each Receipt this Period  
 250.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	3250.00
<b>TOTAL</b> This Period (last page this line number only)..... ▶	67450.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 24 OF 97	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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

**A.** Full Name (Last, First, Middle Initial)  
**ABBVIE POLITICAL ACTION COMMITTEE**

Mailing Address 1 N. WAUKEGAN ROAD

City NORTH CHICAGO	State IL	Zip Code 60064
-----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00536573

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

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 23 / 2016

**Transaction ID : SA11C.14592**

Amount of Each Receipt this Period  
1000.00

Memo Item  
2016 General

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

Mailing Address PALLADIAN 1  
220 LEIGH FARM RD

City DURHAM	State NC	Zip Code 27707
----------------	-------------	-------------------

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

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

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
7500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 16 / 2016

**Transaction ID : SA11C.14547**

Amount of Each Receipt this Period  
2500.00

Memo Item  
2016 General Election

**C.** Full Name (Last, First, Middle Initial)  
**AMERICAN PSYCHOLOGICAL ASSOCIATION PRACTICE ORGANIZATION POLITICAL ACTION COMMITTEE (APAPO)**

Mailing Address 228 S WASHINGTON ST STE 115

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

FEC ID number of contributing federal political committee. **C** C00522094

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

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 30 / 2016

**Transaction ID : SA11C.14614**

Amount of Each Receipt this Period  
1000.00

Memo Item  
General 2016

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	4500.00
<b>TOTAL</b> This Period (last page this line number only)..... ▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 25 OF 97	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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

Full Name (Last, First, Middle Initial)  
AMERICAN QUARTER HORSE ASSOCIATION POLITICAL CMTE AKA AMERICAN QUARTER HORSE PAC (AQHPAC)

**A.** Mailing Address P.O. BOX 200

City AMARILLO	State TX	Zip Code 79168
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00409102

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

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 28 / 2016

**Transaction ID : SA11C.14601**

Amount of Each Receipt this Period  
2000.00

Memo Item

Full Name (Last, First, Middle Initial)  
**AMERICAN SOCIETY OF ASSOCIATION EXECUTIVES APAC**

**B.** Mailing Address 1575 I STREET, NW

City WASHINGTON	State DC	Zip Code 20005
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00041566

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

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 23 / 2016

**Transaction ID : SA11C.14574**

Amount of Each Receipt this Period  
2000.00

Memo Item  
2016 General

Full Name (Last, First, Middle Initial)  
**AUTO CARE ASSOCIATION POLITICAL ACTION COMMITTEE**

**C.** Mailing Address 7101 WISCONSIN AVENUE  
SUITE 1300

City BETHESDA	State MD	Zip Code 20814
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00250753

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

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 30 / 2016

**Transaction ID : SA11C.14611**

Amount of Each Receipt this Period  
1000.00

Memo Item  
General 2016

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	5000.00
<b>TOTAL</b> This Period (last page this line number only)..... ▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 26 OF 97	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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

**A.** Full Name (Last, First, Middle Initial)  
**BOYD GAMING POLITICAL ACTION COMMITTEE**

Mailing Address 6465 S RAINBOW BLVD

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

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

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

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
3500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 23 / 2016

**Transaction ID : SA11C.14568**

Amount of Each Receipt this Period  
2000.00

Memo Item  
General

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

Mailing Address 1201 15TH STREET, NW

City WASHINGTON	State DC	Zip Code 20005
--------------------	-------------	-------------------

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

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

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
7500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 / 02 / 2016

**Transaction ID : SA11C.14509**

Amount of Each Receipt this Period  
2500.00

Memo Item  
2016 General

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

Mailing Address 1201 15TH STREET, NW

City WASHINGTON	State DC	Zip Code 20005
--------------------	-------------	-------------------

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

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

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
10000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 / 30 / 2016

**Transaction ID : SA11C.14468**

Amount of Each Receipt this Period  
2500.00

Memo Item  
2016 General

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 27 OF 97	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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

**A.** Full Name (Last, First, Middle Initial)  
**COMCAST CORPORATION POLITICAL ACTION COMMITTEE- FEDERAL**

Mailing Address 1701 JFK BLVD, 49TH FLOOR

City PHILADELPHIA	State PA	Zip Code 19103
----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00248716

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

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 30 / 2016

**Transaction ID : SA11C.14604**

Amount of Each Receipt this Period  
1000.00

Memo Item  
2016 General Contribution

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

Mailing Address 207 HIGH POINT DRIVE  
BUILDING 100

City VICTOR	State NY	Zip Code 14564
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00304832

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

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 22 / 2016

**Transaction ID : SA11C.14491**

Amount of Each Receipt this Period  
2000.00

Memo Item  
General

**C.** Full Name (Last, First, Middle Initial)  
**CONSUMER BANKERS ASSOCIATION POLITICAL ACTION COMMITTEE, THE**

Mailing Address 1225 EYE STREET, NW, SUITE 550

City WASHINGTON	State DC	Zip Code 20005
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00035535

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

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 23 / 2016

**Transaction ID : SA11C.14563**

Amount of Each Receipt this Period  
2000.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	5000.00
<b>TOTAL</b> This Period (last page this line number only)..... ▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 28 OF 97	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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

**A.** Full Name (Last, First, Middle Initial)  
**EMPLOYEES OF NORTHROP GRUMMAN CORPORATION PAC**

Mailing Address 2980 FAIRVIEW PARK DRIVE

City FALLS CHURCH	State VA	Zip Code 22042
----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00088591

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

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
10000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 16 / 2016

**Transaction ID : SA11C.14550**

Amount of Each Receipt this Period  
1500.00

Memo Item  
2016 General

**B.** Full Name (Last, First, Middle Initial)  
**ENTRUST INC. PAC**

Mailing Address 16633 DALLAS PARKWAY  
SUITE 800

City ADDISON	State TX	Zip Code 75001
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00373787

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

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 23 / 2016

**Transaction ID : SA11C.14588**

Amount of Each Receipt this Period  
500.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**FARM CREDIT COUNCIL POLITICAL ACTION COMMITTEE**

Mailing Address 50 F STREET NW  
SUITE 900

City WASHINGTON	State DC	Zip Code 20001
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00193631

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

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 16 / 2016

**Transaction ID : SA11C.14555**

Amount of Each Receipt this Period  
1000.00

Memo Item  
2016 General

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 29 OF 97	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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

Full Name (Last, First, Middle Initial)  
INTERNATIONAL COUNCIL OF SHOPPING CENTERS INC POLITICAL ACTION COMMITTEE (ICSC PAC)

**A.** Mailing Address 555 12TH STREET, NW  
SUITE 660

City: WASHINGTON State: DC Zip Code: 20004

FEC ID number of contributing federal political committee: **C** C00217638

Name of Employer: Occupation:

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date: 3500.00

Date of Receipt: 09 / 30 / 2016

Transaction ID : SA11C.14606

Amount of Each Receipt this Period: 1000.00

Memo Item

Full Name (Last, First, Middle Initial)  
INTERNATIONAL PREMIUM CIGAR AND PIPE RETAILERS ASSOCIATION PAC

**B.** Mailing Address 4 BRADLEY PARK COURT, SUITE 2H

City: COLUMBUS State: GA Zip Code: 31904

FEC ID number of contributing federal political committee: **C** C00450239

Name of Employer: Occupation:

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date: 1169.20

Date of Receipt: 09 / 23 / 2016

Transaction ID : SA11C.14569

Amount of Each Receipt this Period: 1000.00

Memo Item

Full Name (Last, First, Middle Initial)  
KOCH INDUSTRIES INC POLITICAL ACTION COMMITTEE (KOCHPAC)

**C.** Mailing Address 600 14TH STREET, NW  
SUITE 800

City: WASHINGTON State: DC Zip Code: 20005

FEC ID number of contributing federal political committee: **C** C00236489

Name of Employer: Occupation:

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date: 2500.00

Date of Receipt: 07 / 29 / 2016

Transaction ID : SA11C.14493

Amount of Each Receipt this Period: 2500.00

Memo Item  
2016 General

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 4500.00

**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 30 OF 97	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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

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

Mailing Address **3355 LAS VEGAS BLVD SOUTH**

City <b>LAS VEGAS</b>	State <b>NV</b>	Zip Code <b>89109</b>
--------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee. **C C00399642**

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

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
**5000.00**

Date of Receipt  
**08 / 30 / 2016**

**Transaction ID : SA11C.14467**

Amount of Each Receipt this Period  
**5000.00**

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**LOCKHEED MARTIN CORPORATION EMPLOYEES' POLITICAL ACTION COMMITTEE**

Mailing Address **2121 CRYSTAL DRIVE SUITE 100**

City <b>ARLINGTON</b>	State <b>VA</b>	Zip Code <b>22202</b>
--------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee. **C C00303024**

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

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
**6000.00**

Date of Receipt  
**09 / 30 / 2016**

**Transaction ID : SA11C.14602**

Amount of Each Receipt this Period  
**1000.00**

Memo Item  
2015 US General

**C.** Full Name (Last, First, Middle Initial)  
**NAT'L TELECOMMUNICATIONS COOPERATIVE ASSN RURAL BROADBAND PAC**

Mailing Address **4121 WILSON BLVD. 10TH FLOOR**

City <b>ARLINGTON</b>	State <b>VA</b>	Zip Code <b>22203</b>
--------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee. **C C00004473**

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

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
**2000.00**

Date of Receipt  
**09 / 09 / 2016**

**Transaction ID : SA11C.14551**

Amount of Each Receipt this Period  
**1000.00**

Memo Item  
2016 General Congressional

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 31 OF 97	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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

**A.** Full Name (Last, First, Middle Initial)  
NATIONAL ASSOCIATION OF REALTORS POLITICAL ACTION COMMITTEE

Mailing Address 430 NORTH MICHIGAN AVENUE

City CHICAGO	State IL	Zip Code 60611
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00030718

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

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 11 / 2016

**Transaction ID : SA11C.14479**

Amount of Each Receipt this Period  
1000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
NATIONAL ASSOCIATION OF REALTORS POLITICAL ACTION COMMITTEE

Mailing Address 430 NORTH MICHIGAN AVENUE

City CHICAGO	State IL	Zip Code 60611
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00030718

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

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
8000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 / 17 / 2016

**Transaction ID : SA11C.14530**

Amount of Each Receipt this Period  
3000.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
NATIONAL ASSOCIATION OF SURETY BOND PRODUCERS POLITICAL ACTION COMMITTEE (SURETYPAC)

Mailing Address 1140 19TH STREET NW  
SUITE 800

City WASHINGTON	State DC	Zip Code 20036
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00300525

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

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 23 / 2016

**Transaction ID : SA11C.14581**

Amount of Each Receipt this Period  
1000.00

Memo Item  
General 2016

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	5000.00
<b>TOTAL</b> This Period (last page this line number only)..... ▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 32 OF 97	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 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)  
NATIONAL BEER WHOLESALERS ASSOCIATION POLITICAL ACTION COMMITTEE

Mailing Address 1101 KING STREET  
SUITE 600

City ALEXANDRIA State VA Zip Code 22314

FEC ID number of contributing federal political committee. **C** C00144766

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
7500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 23 / 2016

Transaction ID : SA11C.14589

Amount of Each Receipt this Period  
2500.00

Memo Item  
General 2016

**B.** Full Name (Last, First, Middle Initial)  
NATIONAL ELECTRICAL CONTRACTORS ASSOCIATION POLITICAL ACTION COMMITTEE (NECAPAC)

Mailing Address 3 BETHESDA METRO CENTER  
SUITE 1100

City BETHESDA State MD Zip Code 20814

FEC ID number of contributing federal political committee. **C** C00113811

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 22 / 2016

Transaction ID : SA11C.14607

Amount of Each Receipt this Period  
2500.00

Memo Item  
General 2016

**C.** Full Name (Last, First, Middle Initial)  
NATIONAL PEST CONTROL ASSOCIATION POLITICAL ACTION COMMITTEE

Mailing Address 9300 LEE HIGHWAY  
SUITE 301

City FAIRFAX State VA Zip Code 22031

FEC ID number of contributing federal political committee. **C** C00083915

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 23 / 2016

Transaction ID : SA11C.14573

Amount of Each Receipt this Period  
1000.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	6000.00
<b>TOTAL</b> This Period (last page this line number only)..... ▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 33 OF 97	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 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)  
**NATIONAL SCHOOL TRANSPORTATION ASSOCIATION**

Mailing Address 122 SOUTH ROYAL STREET

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

FEC ID number of contributing federal political committee. **C** C00179275

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

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 23 / 2016

**Transaction ID : SA11C.14576**

Amount of Each Receipt this Period  
1000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**NATIONAL STONE, SAND & GRAVEL ASSOCIATION ROCKPAC**

Mailing Address 1605 KING STREET

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

FEC ID number of contributing federal political committee. **C** C00089458

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

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
7500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 23 / 2016

**Transaction ID : SA11C.14590**

Amount of Each Receipt this Period  
2500.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**NATURAL PRODUCTS ASSOCIATION POLITICAL ACTION COMMITTEE**

Mailing Address 440 1ST STREET, NW  
SUITE 520

City WASHINGTON	State DC	Zip Code 20001
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00297739

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

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
100.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 / 02 / 2016

**Transaction ID : SA11C.14499**

Amount of Each Receipt this Period  
100.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	3600.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 34 OF 97	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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

**A.** Full Name (Last, First, Middle Initial)  
**ORACLE AMERICA, INC. POLITICAL ACTION COMMITTEE (ORACLE PAC)**

Mailing Address 1015 15TH ST. NW SUITE 200

City WASHINGTON	State DC	Zip Code 20005
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00323048

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

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 135.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2016

**Transaction ID : SA11C.14596**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 135.00

Memo Item  
 In-kind - WSWA Reception conference room

**B.** Full Name (Last, First, Middle Initial)  
**RETAIL INDUSTRY LEADERS ASSOCIATION POLITICAL ACTION COMMITTEE AKA RETAIL LEADERS PAC**

Mailing Address 1700 N. MOORE STREET  
SUITE 2250

City ARLINGTON	State VA	Zip Code 22209
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00112763

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

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

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

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2016

**Transaction ID : SA11C.14608**

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

Memo Item  
 General - 2016

**C.** Full Name (Last, First, Middle Initial)  
**THOMPSON COBURN POLITICAL ACTION COMMITTEE**

Mailing Address 1909 K STREET NW  
SUITE 600

City WASHINGTON	State DC	Zip Code 20036
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00550491

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

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 16 / 2016

**Transaction ID : SA11C.14548**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 2000.00

Memo Item  
 2016 General

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	_____ 3135.00
<b>TOTAL</b> This Period (last page this line number only).....▶	_____

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 35 OF 97	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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

Full Name (Last, First, Middle Initial)  
TRUCKING POLITICAL ACTION COMMITTEE OF THE AMERICAN TRUCKING ASSOCIATIONS, INC.

A. Mailing Address 430 FIRST ST. SE

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 29 / 2016

Transaction ID : SA11C.14605

City WASHINGTON	State DC	Zip Code 20003
--------------------	-------------	-------------------

Amount of Each Receipt this Period  
5000.00

FEC ID number of contributing federal political committee.  
C C00002881

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

Memo Item  
General 2016

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
8000.00

B. Full Name (Last, First, Middle Initial)  
**UNION PACIFIC CORP. FUND FOR EFFECTIVE GOVERNMENT**

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 09 / 2016

Transaction ID : SA11C.14543

Mailing Address 600 13TH ST., NW  
SUITE 340

City WASHINGTON	State DC	Zip Code 20005
--------------------	-------------	-------------------

Amount of Each Receipt this Period  
1000.00

FEC ID number of contributing federal political committee.  
C C00010470

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

Memo Item  
2016 US General Election

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5000.00

C. Full Name (Last, First, Middle Initial)  
UNITED MOTORCOACH ASSOCIATION POLITICAL ACTION COMMITTEE: AKA MOTORCOACH TRAVEL PAC

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 23 / 2016

Transaction ID : SA11C.14578

Mailing Address 113 SOUTH WEST STREET FOURTH FLOOR

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

Amount of Each Receipt this Period  
1000.00

FEC ID number of contributing federal political committee.  
C C00437517

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

Memo Item

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

7000.00

**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)		PAGE 36 OF 97	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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

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

Mailing Address 55 GLENLAKE PARKWAY NE

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

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

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

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
6000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 26 / 2016

**Transaction ID : SA11C.14492**

Amount of Each Receipt this Period  
4000.00

Memo Item  
2016 General

**B.** Full Name (Last, First, Middle Initial)  
**WINE AND SPIRITS WHOLESALERS OF AMERICA, INC. POLITICAL ACTION COMMITTEE**

Mailing Address 805 FIFTEENTH ST NW SUITE 430

City WASHINGTON	State DC	Zip Code 20005
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00147173

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

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
3122.06

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 22 / 2016

**Transaction ID : SA11C.14561**

Amount of Each Receipt this Period  
622.06

Memo Item  
In-kind - beverages for event

**C.** Full Name (Last, First, Middle Initial)  
**WINE AND SPIRITS WHOLESALERS OF AMERICA, INC. POLITICAL ACTION COMMITTEE**

Mailing Address 805 FIFTEENTH ST NW SUITE 430

City WASHINGTON	State DC	Zip Code 20005
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00147173

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

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
7500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 23 / 2016

**Transaction ID : SA11C.14580**

Amount of Each Receipt this Period  
4377.94

Memo Item  
2016 General

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	9000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)		PAGE 37 OF 97	
<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
		<input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**ZUFFA POLITICAL ACTION COMMITTEE**

Mailing Address 2350 KERNER BLVD., SUITE 250

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

FEC ID number of contributing federal political committee. **C** C00459693

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

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5200.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 / 05 / 2016

**Transaction ID : SA11C.14517**

Amount of Each Receipt this Period  
2700.00

Memo Item  
G2016

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

Mailing Address

City	State	Zip Code
------	-------	----------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

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

Amount of Each Receipt this Period

Memo Item

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

Mailing Address

City	State	Zip Code
------	-------	----------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

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

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	2700.00
<b>TOTAL</b> This Period (last page this line number only)..... ▶	72435.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 38 OF 97	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. 39 North Downtown</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 20 / 2016	
Mailing Address 1645 D Street			FEC Identification Number C	
City Sparks	State NV	Zip Code 89431	Amount of Each Disbursement this Period 200.00	
Purpose of Disbursement Donation to NV Veteran's Memorial		Category/ Type 012	Transaction ID : SB17.14827	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. A. Litteri, Inc.</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 08 / 2016	
Mailing Address 517-519 Morse Street, NE			FEC Identification Number C	
City Washington	State DC	Zip Code 20002	Amount of Each Disbursement this Period 110.33	
Purpose of Disbursement Contributor relations - meals and entertainment		Category/ Type 003	Transaction ID : SB17.14696	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. Adele's</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 05 / 2016	
Mailing Address 1112 North Carson Street			FEC Identification Number C	
City Carson City	State NV	Zip Code 89701	Amount of Each Disbursement this Period 230.00	
Purpose of Disbursement Contributor relations - meals and entertainment		Category/ Type 003	Transaction ID : SB17.14702	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	540.33
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 39 OF 97	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. Al Kramer for State Assembly Dist 40</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 20 / 2016	
Mailing Address 4640 Old Clear Creek Rd			FEC Identification Number C	
City Carson City	State NV	Zip Code 89705	Amount of Each Disbursement this Period 500.00	
Purpose of Disbursement Contribution		Category/ Type 011	Transaction ID : SB17.14880	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Amador Stage Lines</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 22 / 2016	
Mailing Address PO Box 15707			FEC Identification Number C	
City Sacramento	State CA	Zip Code 95852	Amount of Each Disbursement this Period 548.10	
Purpose of Disbursement Transportation for Staff Dinner		Category/ Type 001	Transaction ID : SB17.14652	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. American Airlines</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 27 / 2016	
Mailing Address 4333 Amon Carter Blvd MD 5675			FEC Identification Number C	
City Fort Worth	State TX	Zip Code 76155	Amount of Each Disbursement this Period 1165.01	
Purpose of Disbursement Airfare - travel expense		Category/ Type 002	Transaction ID : SB17.14749	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	2213.11
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 OF 97			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

Full Name (Last, First, Middle Initial) <b>A. Anadot</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2016		
Mailing Address PO Box 84314			FEC Identification Number <b>C</b>		
City Baton Rouge	State LA	Zip Code 70884	Amount of Each Disbursement this Period 549.45		
Purpose of Disbursement Merchant Fees		Category/ Type 001	Transaction ID : <b>SB17.14922</b>		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. Arco Carson</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 28 / 2016		
Mailing Address 1017 N Carson			FEC Identification Number <b>C</b>		
City Carson City	State NV	Zip Code 89701	Amount of Each Disbursement this Period 31.99		
Purpose of Disbursement Gas in lieu of mileage - travel expense		Category/ Type 002	Transaction ID : <b>SB17.14766</b>		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>c. Authnet Gateway</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 05 / 2016		
Mailing Address P.O. Box 8999			FEC Identification Number <b>C</b>		
City San Francisco	State CA	Zip Code 94128	Amount of Each Disbursement this Period 21.35		
Purpose of Disbursement Merchant fees		Category/ Type 001	Transaction ID : <b>SB17.14826</b>		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	602.79
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 41 OF 97	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. Authnet Gateway</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 02 / 2016	
Mailing Address P.O. Box 8999			FEC Identification Number C	
City San Francisco	State CA	Zip Code 94128	Amount of Each Disbursement this Period 20.70	
Purpose of Disbursement Merchant fees		Category/ Type 001	Transaction ID : SB17.14816	
Candidate Name			<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Authnet Gateway</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 02 / 2016	
Mailing Address P.O. Box 8999			FEC Identification Number C	
City San Francisco	State CA	Zip Code 94128	Amount of Each Disbursement this Period 20.00	
Purpose of Disbursement Merchant fees		Category/ Type 001	Transaction ID : SB17.14804	
Candidate Name			<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>c. Bally's Hotel</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 08 / 2016	
Mailing Address 3655 Las Vegas Blvd			FEC Identification Number C	
City Las Vegas	State NV	Zip Code 89109	Amount of Each Disbursement this Period 54.88	
Purpose of Disbursement Contributor relations - meals and entertainment		Category/ Type 003	Transaction ID : SB17.14695	
Candidate Name			<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	95.58
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 42 OF 97	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. Bally's Hotel</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 25 / 2016	
Mailing Address 3655 Las Vegas Blvd			FEC Identification Number C	
City Las Vegas	State NV	Zip Code 89109	Amount of Each Disbursement this Period 22.75	
Purpose of Disbursement Meals - travel expense		Category/ Type 002	Transaction ID : SB17.14679	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Bally's Hotel</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 26 / 2016	
Mailing Address 3655 Las Vegas Blvd			FEC Identification Number C	
City Las Vegas	State NV	Zip Code 89109	Amount of Each Disbursement this Period 32.48	
Purpose of Disbursement Meals - travel expense		Category/ Type 002	Transaction ID : SB17.14677	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>c. Bauserman Group</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 13 / 2016	
Mailing Address 500 Damonte Ranch Pkwy			FEC Identification Number C	
City Reno	State NV	Zip Code 89521	Amount of Each Disbursement this Period 437.50	
Purpose of Disbursement Design for digital outdoor advertising		Category/ Type 004	Transaction ID : SB17.14874	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	492.73
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 OF 97			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

Full Name (Last, First, Middle Initial) <b>A. Bill.com</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 07 / 2016		
Mailing Address 3200 Ash Street			FEC Identification Number C		
City Palo Alto	State CA	Zip Code 94306	Amount of Each Disbursement this Period 42.12		
Purpose of Disbursement Bank service charges		Category/ Type 001	Transaction ID : SB17.14825		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. Bill.com</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 08 / 2016		
Mailing Address 3200 Ash Street			FEC Identification Number C		
City Palo Alto	State CA	Zip Code 94306	Amount of Each Disbursement this Period 54.02		
Purpose of Disbursement Bank service charges		Category/ Type 001	Transaction ID : SB17.14813		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>C. Bill.com</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 07 / 2016		
Mailing Address 3200 Ash Street			FEC Identification Number C		
City Palo Alto	State CA	Zip Code 94306	Amount of Each Disbursement this Period 45.08		
Purpose of Disbursement Bank service charge		Category/ Type 001	Transaction ID : SB17.14801		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	141.22
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 44 OF 97	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. Boys and Girls Club of Western Nevada</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 21 / 2016	
Mailing Address 1870 Russell Way			FEC Identification Number C	
City Carson City	State NV	Zip Code 89706	Amount of Each Disbursement this Period 500.00	
Purpose of Disbursement Donation		Category/ Type 012	Transaction ID : SB17.14840	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Bullfeathers</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 27 / 2016	
Mailing Address 410 1st Street			FEC Identification Number C	
City Washington	State DC	Zip Code 20003	Amount of Each Disbursement this Period 111.00	
Purpose of Disbursement Contributor relations - meals and entertainment		Category/ Type 003	Transaction ID : SB17.14618	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>c. Bullys Carson City</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 30 / 2016	
Mailing Address 3530 N. Carson Street			FEC Identification Number C	
City Carson City	State NV	Zip Code 89706	Amount of Each Disbursement this Period 80.00	
Purpose of Disbursement Contributor relations - meals and entertainment		Category/ Type 003	Transaction ID : SB17.14672	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	691.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 45 OF 97	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. Camelot Party Rentals</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 15 / 2016	
Mailing Address 152 Coney Island Drive			FEC Identification Number C	
City Sparks	State NV	Zip Code 89431	Amount of Each Disbursement this Period 239.75	
Purpose of Disbursement Table and chair rentals for event - deposit		Category/Type 007	Transaction ID : SB17.14778	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Camelot Party Rentals</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 24 / 2016	
Mailing Address 152 Coney Island Drive			FEC Identification Number C	
City Sparks	State NV	Zip Code 89431	Amount of Each Disbursement this Period 256.24	
Purpose of Disbursement Table and chair rentals for event		Category/Type 007	Transaction ID : SB17.14773	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>c. Capital Grille Washington DC</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 07 / 2016	
Mailing Address 601 Pennsylvania Ave NW			FEC Identification Number C	
City Washington	State DC	Zip Code 20004	Amount of Each Disbursement this Period 720.00	
Purpose of Disbursement Contributor relations - meals and entertainment		Category/Type 003	Transaction ID : SB17.14697	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1215.99
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 46 OF 97	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. Capitol Hill Club</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2016	
Mailing Address 300 First Street SE			FEC Identification Number C	
City Washington	State DC	Zip Code 20003	Amount of Each Disbursement this Period 253.28	
Purpose of Disbursement Contributor relations - meals and entertainment		Category/ Type 003	Transaction ID : SB17.14688	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Capitol Hill Club</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2016	
Mailing Address 300 First Street SE			FEC Identification Number C	
City Washington	State DC	Zip Code 20003	Amount of Each Disbursement this Period 271.24	
Purpose of Disbursement Contributor relations - meals and entertainment		Category/ Type 003	Transaction ID : SB17.14690	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>c. Capitol Hill Club</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 12 / 2016	
Mailing Address 300 First Street SE			FEC Identification Number C	
City Washington	State DC	Zip Code 20003	Amount of Each Disbursement this Period 69.50	
Purpose of Disbursement Contributor relations - meals and entertainment		Category/ Type 003	Transaction ID : SB17.14741	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	594.02
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 47 OF 97	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. Capitol Hill Club</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 12 / 2016	
Mailing Address 300 First Street SE			FEC Identification Number C	
City Washington	State DC	Zip Code 20003	Amount of Each Disbursement this Period 153.27	
Purpose of Disbursement Contributor relations - meals and entertainment		Category/ Type 003	Transaction ID : SB17.14742	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Capitol Hill Club</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2016	
Mailing Address 300 First Street SE			FEC Identification Number C	
City Washington	State DC	Zip Code 20003	Amount of Each Disbursement this Period 69.50	
Purpose of Disbursement Contributor relations - meals and entertainment		Category/ Type 003	Transaction ID : SB17.14627	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>c. Capitol Host</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 22 / 2016	
Mailing Address Rm B-339B Rayburn House			FEC Identification Number C	
City Washington	State DC	Zip Code 20515	Amount of Each Disbursement this Period 130.00	
Purpose of Disbursement Contributor relations - meals and entertainment		Category/ Type 003	Transaction ID : SB17.14623	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	352.77
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 48 OF 97	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. Carson City School District</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 07 / 2016	
Mailing Address PO Box 603			FEC Identification Number C	
City Carson City	State NV	Zip Code 89702	Amount of Each Disbursement this Period 1500.00	
Purpose of Disbursement Donation to refinish Tom Andreason Court		Category/ Type 012	Transaction ID : SB17.14842	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Carson Valley Country Club</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 27 / 2016	
Mailing Address 1029 Riverview Drive			FEC Identification Number C	
City Gardnerville	State NV	Zip Code 89460	Amount of Each Disbursement this Period 225.00	
Purpose of Disbursement Contributor relations - meals and entertainment		Category/ Type 003	Transaction ID : SB17.14642	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>c. Casey Neilon Inc</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 05 / 2016	
Mailing Address 503 N Division St			FEC Identification Number C	
City Carson City	State NV	Zip Code 89703	Amount of Each Disbursement this Period 2000.00	
Purpose of Disbursement Professional fees - accounting		Category/ Type 001	Transaction ID : SB17.14846	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	3725.00
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 49 OF 97	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. Casey Neilon Inc</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 15 / 2016	
Mailing Address 503 N Division St			FEC Identification Number C	
City Carson City	State NV	Zip Code 89703	Amount of Each Disbursement this Period 2000.00	
Purpose of Disbursement Professional fees - accounting		Category/ Type 001	Transaction ID : SB17.14867	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Casey Neilon Inc</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 13 / 2016	
Mailing Address 503 N Division St			FEC Identification Number C	
City Carson City	State NV	Zip Code 89703	Amount of Each Disbursement this Period 2000.00	
Purpose of Disbursement Professional fees - accounting		Category/ Type 001	Transaction ID : SB17.14877	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>c. Casino Fandango</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 10 / 2016	
Mailing Address 3800 South Carson Street			FEC Identification Number C	
City Carson City	State NV	Zip Code 89701	Amount of Each Disbursement this Period 30.07	
Purpose of Disbursement Contributor relations - meals and entertainment		Category/ Type 003	Transaction ID : SB17.14691	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	4030.07
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 OF 97			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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

Full Name (Last, First, Middle Initial) <b>A. Casino Fandango</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 13 / 2016		
Mailing Address 3800 South Carson Street			FEC Identification Number C		
City Carson City	State NV	Zip Code 89701	Amount of Each Disbursement this Period 150.00		
Purpose of Disbursement Contributor relations - meals and entertainment		Category/ Type 003	Transaction ID : SB17.14665		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. Charlie Palmer Steak - DC</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 14 / 2016		
Mailing Address 101 Constitution Ave NW			FEC Identification Number C		
City Washington	State DC	Zip Code 20001	Amount of Each Disbursement this Period 510.00		
Purpose of Disbursement Contributor relations - meals and entertainment		Category/ Type 003	Transaction ID : SB17.14628		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>c. Chart House</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 18 / 2016		
Mailing Address 392 Nevada State Route 207			FEC Identification Number C		
City Stateline	State NV	Zip Code 89449	Amount of Each Disbursement this Period 400.00		
Purpose of Disbursement Contributor relations - meals and entertainment		Category/ Type 003	Transaction ID : SB17.14685		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1060.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 51 OF 97	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. Cherry, Danielle, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 22 / 2016	
Mailing Address 385 Teramo Drive			FEC Identification Number <b>C</b>	
City Reno	State NV	Zip Code 89521	Amount of Each Disbursement this Period 7234.21	
Purpose of Disbursement Campaign consulting for funds raised		Category/ Type 003	Transaction ID : <b>SB17.14863</b>	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Chevron - Carson City</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 27 / 2016	
Mailing Address 1102 North Carson Street			FEC Identification Number <b>C</b>	
City Carson City	State NV	Zip Code 89703	Amount of Each Disbursement this Period 25.22	
Purpose of Disbursement Gas in lieu of mileage - travel expense		Category/ Type 002	Transaction ID : <b>SB17.14772</b>	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>c. Cigars International</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 22 / 2016	
Mailing Address 1911 Spillman Drive			FEC Identification Number <b>C</b>	
City Bethlehem	State PA	Zip Code 18015	Amount of Each Disbursement this Period 327.47	
Purpose of Disbursement Supplies for fund raising event		Category/ Type 007	Transaction ID : <b>SB17.14774</b>	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	7586.90
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 OF 97			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

Full Name (Last, First, Middle Initial) <b>A. Committee to Elect Carol Del Carlo</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 11 / 2016		
Mailing Address 874 Ophir Peak Road			FEC Identification Number C		
City Incline Village	State NV	Zip Code 89451	Amount of Each Disbursement this Period 500.00		
Purpose of Disbursement Contribution		Category/ Type 011	Transaction ID : SB17.14889		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. Constant Contact</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 29 / 2016		
Mailing Address 1601 Trapelo Road			FEC Identification Number C		
City Waltham	State MA	Zip Code 02451	Amount of Each Disbursement this Period 40.00		
Purpose of Disbursement Email newsletter		Category/ Type 004	Transaction ID : SB17.14786		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>C. Constant Contact</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 28 / 2016		
Mailing Address 1601 Trapelo Road			FEC Identification Number C		
City Waltham	State MA	Zip Code 02451	Amount of Each Disbursement this Period 40.00		
Purpose of Disbursement Email newsletter		Category/ Type 004	Transaction ID : SB17.14770		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	580.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 53 OF 97	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. Constant Contact</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 27 / 2016	
Mailing Address 1601 Trapelo Road			FEC Identification Number C	
City Waltham	State MA	Zip Code 02451	Amount of Each Disbursement this Period 40.00	
Purpose of Disbursement Email newsletter		Category/ Type 004	Transaction ID : SB17.14757	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Davis, Maria, C, ,</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 05 / 2016	
Mailing Address 10050 Bronc Court			FEC Identification Number C	
City Reno	State NV	Zip Code 89521	Amount of Each Disbursement this Period 3000.00	
Purpose of Disbursement Consulting - Campaign outreach coordinator		Category/ Type 001	Transaction ID : SB17.14845	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. Davis, Maria, C, ,</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 20 / 2016	
Mailing Address 10050 Bronc Court			FEC Identification Number C	
City Reno	State NV	Zip Code 89521	Amount of Each Disbursement this Period 350.00	
Purpose of Disbursement Purchase giftcards to use as soccer tourney prizes		Category/ Type 012	Transaction ID : SB17.14912	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	3390.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 54 OF 97	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. Ducks Unlimited</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2016	
Mailing Address One Waterfowl Way			FEC Identification Number C	
City Memphis	State TN	Zip Code 38120	Amount of Each Disbursement this Period 1500.00	
Purpose of Disbursement Purchase table for charitable event		Category/ Type 012	Transaction ID : SB17.14795	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Ducks Unlimited</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 25 / 2016	
Mailing Address One Waterfowl Way			FEC Identification Number C	
City Memphis	State TN	Zip Code 38120	Amount of Each Disbursement this Period 100.00	
Purpose of Disbursement Donation		Category/ Type 012	Transaction ID : SB17.14793	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. El Dorado Hotel</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 30 / 2016	
Mailing Address PO Box 3399			FEC Identification Number C	
City Reno	State NV	Zip Code 89505	Amount of Each Disbursement this Period 60.00	
Purpose of Disbursement Contributor relations - meals and entertainment		Category/ Type 003	Transaction ID : SB17.14640	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1660.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 55 OF 97			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

Full Name (Last, First, Middle Initial) <b>A. Four Seasons Hotel Las Vegas</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 21 / 2016		
Mailing Address 3960 S Las Vegas Blvd			FEC Identification Number C		
City Las Vegas	State NV	Zip Code 89119	Amount of Each Disbursement this Period 282.01		
Purpose of Disbursement Lodging - travel expense		Category/ Type 002	Transaction ID : SB17.14657		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. Fumare Fine Cigar Boutique</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 22 / 2016		
Mailing Address 7530 Longley Lane #101			FEC Identification Number C		
City Reno	State NV	Zip Code 89511	Amount of Each Disbursement this Period 679.56		
Purpose of Disbursement Supplies for fund raising event		Category/ Type 007	Transaction ID : SB17.14727		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>C. Garzon, Arturo, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 05 / 2016		
Mailing Address 1011 Ricco Drive			FEC Identification Number C		
City Sparks	State NV	Zip Code 89434	Amount of Each Disbursement this Period 2500.00		
Purpose of Disbursement Consulting - campaign coordinator		Category/ Type 001	Transaction ID : SB17.14844		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	3461.57
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 56 OF 97			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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

Full Name (Last, First, Middle Initial) <b>A. Glen Eagles</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2016
Mailing Address 3700 North Carson Street		FEC Identification Number C
City Carson City	State NV	Zip Code 89706
Purpose of Disbursement Contributor relations - meals and entertainment	Category/ Type 003	
Candidate Name		Amount of Each Disbursement this Period 350.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.14703 <input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Glen Eagles</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 28 / 2016
Mailing Address 3700 North Carson Street		FEC Identification Number C
City Carson City	State NV	Zip Code 89706
Purpose of Disbursement Contributor relations - meals and entertainment	Category/ Type 003	
Candidate Name		Amount of Each Disbursement this Period 250.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.14673 <input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Glen Eagles</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 25 / 2016
Mailing Address 3700 North Carson Street		FEC Identification Number C
City Carson City	State NV	Zip Code 89706
Purpose of Disbursement Contributor relations - meals and entertainment	Category/ Type 003	
Candidate Name		Amount of Each Disbursement this Period 180.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.14619 <input type="checkbox"/> Memo Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	780.00
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 57 OF 97	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. Gold Country Inn</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2016	
Mailing Address 2050 Idaho St			FEC Identification Number C	
City Elko	State NV	Zip Code 89801	Amount of Each Disbursement this Period 34.00	
Purpose of Disbursement Contributor relations - meals and entertainment		Category/ Type 003	Transaction ID : SB17.14704	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Gold Country Inn</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 02 / 2016	
Mailing Address 2050 Idaho St			FEC Identification Number C	
City Elko	State NV	Zip Code 89801	Amount of Each Disbursement this Period 101.19	
Purpose of Disbursement Lodging - travel expense		Category/ Type 002	Transaction ID : SB17.14634	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>c. Hertz Rent-A-Car</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 25 / 2016	
Mailing Address 7200 Sahara Ave			FEC Identification Number C	
City Las Vegas	State NV	Zip Code 89119	Amount of Each Disbursement this Period 92.26	
Purpose of Disbursement Car rental - travel expense		Category/ Type 002	Transaction ID : SB17.14711	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	227.45
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 58 OF 97	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. Hertz Rent-A-Car - Mexico</b>		Date of Disbursement MM / DD / YYYY 08 / 19 / 2016
Mailing Address Guadalajara Int'l Airport 390 Tajomulco de Zuniga Jalisco		FEC Identification Number C
City Guadalajara	State ZZ	Zip Code 45659
Purpose of Disbursement Car rental - travel expense		Amount of Each Disbursement this Period 579.00
Candidate Name		Transaction ID : SB17.14734
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:	Category/Type 002	

Full Name (Last, First, Middle Initial) <b>B. Hotel Hilton Guadalajara</b>		Date of Disbursement MM / DD / YYYY 08 / 19 / 2016
Mailing Address Av. de la Rosas #2933 Rincon del Bosque		FEC Identification Number C
City Guadalajara	State ZZ	Zip Code 44530
Purpose of Disbursement Lodging and meals at hotel - travel expense		Amount of Each Disbursement this Period 1561.38
Candidate Name		Transaction ID : SB17.14730
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:	Category/Type 002	

Full Name (Last, First, Middle Initial) <b>C. Jim Shirk for Ward 4</b>		Date of Disbursement MM / DD / YYYY 09 / 08 / 2016
Mailing Address 5 Arizona Circle		FEC Identification Number C
City Carson City	State NV	Zip Code 89701
Purpose of Disbursement Contribution		Amount of Each Disbursement this Period 500.00
Candidate Name		Transaction ID : SB17.14882
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:	Category/Type 011	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	2640.38
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 59 OF 97			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

Full Name (Last, First, Middle Initial) <b>A. JT Basque Bar</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 23 / 2016		
Mailing Address 1426 Highway 395			FEC Identification Number C		
City Gardnerville	State NV	Zip Code 89410	Amount of Each Disbursement this Period 423.25		
Purpose of Disbursement Staff Dinner		Category/ Type 001	Transaction ID : SB17.14651		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. Kaempfer Crowell</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 12 / 2016		
Mailing Address 1980 Festival Plaza Drive Suite 65			FEC Identification Number C		
City Las Vegas	State NV	Zip Code 89135-2958	Amount of Each Disbursement this Period 82.10		
Purpose of Disbursement Professional services - legal		Category/ Type 001	Transaction ID : SB17.14860		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>c. Kaempfer Crowell</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 15 / 2016		
Mailing Address 1980 Festival Plaza Drive Suite 65			FEC Identification Number C		
City Las Vegas	State NV	Zip Code 89135-2958	Amount of Each Disbursement this Period 197.50		
Purpose of Disbursement Professional fees - legal		Category/ Type 001	Transaction ID : SB17.14868		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	702.85
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 60 OF 97			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

Full Name (Last, First, Middle Initial) <b>A. Kaempfer Crowell</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 13 / 2016		
Mailing Address 1980 Festival Plaza Drive Suite 65			FEC Identification Number C		
City Las Vegas	State NV	Zip Code 89135-2958	Amount of Each Disbursement this Period 197.50		
Purpose of Disbursement Professional fees - legal		Category/ Type 001	Transaction ID : SB17.14876		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. Lamar Advertising Company</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 07 / 2016		
Mailing Address 4945 Joule Street			FEC Identification Number C		
City Reno	State NV	Zip Code 89502	Amount of Each Disbursement this Period 31751.00		
Purpose of Disbursement Billboard advertising		Category/ Type 004	Transaction ID : SB17.14859		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>C. Lisa Krasner for Nevada</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 03 / 2016		
Mailing Address 59 Damonte Ranch Pkwy #B460			FEC Identification Number C		
City Reno	State NV	Zip Code 89521	Amount of Each Disbursement this Period 500.00		
Purpose of Disbursement Contribution		Category/ Type 011	Transaction ID : SB17.14891		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	32448.50
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 61 OF 97	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. Lisa Tolda</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 13 / 2016
Mailing Address PO Box 22563		FEC Identification Number C
City Carson City	State NV	Zip Code 89721
Purpose of Disbursement Portrait photography	Category/ Type 001	
Candidate Name	Amount of Each Disbursement this Period 200.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.14875
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. Mandalay Bay</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 28 / 2016
Mailing Address 3950 S Las Vegas Blvd		FEC Identification Number C
City Las Vegas	State NV	Zip Code 89119
Purpose of Disbursement Lodging - travel expense	Category/ Type 002	
Candidate Name	Amount of Each Disbursement this Period 164.64	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.14707
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>c. Marcus for Ocone Board of Commissioners</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 31 / 2016
Mailing Address PO Box 1012		FEC Identification Number C
City Watkinsville	State GA	Zip Code 30677
Purpose of Disbursement Contribution	Category/ Type 011	
Candidate Name	Amount of Each Disbursement this Period 2000.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.14884
State: District:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	2364.64
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 62 OF 97			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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**

Full Name (Last, First, Middle Initial) <b>A. Maverik - Dayton</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 20 / 2016		
Mailing Address 2445 Riverboat Rd			FEC Identification Number C		
City Dayton	State NV	Zip Code 89403	Amount of Each Disbursement this Period 36.93		
Purpose of Disbursement Gas in lieu of mileage - travel expense		Category/ Type 002	Transaction ID : SB17.14788		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. Maverik - Dayton</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 03 / 2016		
Mailing Address 2445 Riverboat Rd			FEC Identification Number C		
City Dayton	State NV	Zip Code 89403	Amount of Each Disbursement this Period 32.66		
Purpose of Disbursement Gas in lieu of mileage - travel expense		Category/ Type 002	Transaction ID : SB17.14762		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>C. Maverik - Dayton</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 05 / 2016		
Mailing Address 2445 Riverboat Rd			FEC Identification Number C		
City Dayton	State NV	Zip Code 89403	Amount of Each Disbursement this Period 25.85		
Purpose of Disbursement Gas in lieu of mileage - travel expense		Category/ Type 002	Transaction ID : SB17.14761		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	95.44
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 63 OF 97	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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**

Full Name (Last, First, Middle Initial) <b>A. Maverik - Dayton</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2016	
Mailing Address 2445 Riverboat Rd			FEC Identification Number <b>C</b>	
City Dayton	State NV	Zip Code 89403	Amount of Each Disbursement this Period 31.67	
Purpose of Disbursement Gas in lieu of mileage - travel expense		Category/ Type 002	Transaction ID : <b>SB17.14759</b>	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Maverik - Elko</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 02 / 2016	
Mailing Address 2520 Mountain City Hwy			FEC Identification Number <b>C</b>	
City Elko	State NV	Zip Code 89801	Amount of Each Disbursement this Period 48.77	
Purpose of Disbursement Gas in lieu of mileage - travel expense		Category/ Type 002	Transaction ID : <b>SB17.14764</b>	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. Maverik - Winnemucca</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 01 / 2016	
Mailing Address 863 E. Winnemuccas Blvd.			FEC Identification Number <b>C</b>	
City Winnemucca	State NV	Zip Code 89445	Amount of Each Disbursement this Period 31.95	
Purpose of Disbursement Gas in lieu of mileage - travel expense		Category/ Type 002	Transaction ID : <b>SB17.14765</b>	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	112.39
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 64 OF 97			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

Full Name (Last, First, Middle Initial) <b>A. Maverik - Winnemucca</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 03 / 2016		
Mailing Address 863 E. Winnemuccas Blvd.			FEC Identification Number C		
City Winnemucca	State NV	Zip Code 89445	Amount of Each Disbursement this Period 33.62		
Purpose of Disbursement Gas in lieu of mileage - travel expense		Category/ Type 002	Transaction ID : SB17.14763		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. MGM Grand</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 25 / 2016		
Mailing Address 3799 Las Vegas Boulevard South			FEC Identification Number C		
City Las Vegas	State NV	Zip Code 89109	Amount of Each Disbursement this Period 32.43		
Purpose of Disbursement Meals - travel expense		Category/ Type 002	Transaction ID : SB17.14678		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>c. Micasa Too</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2016		
Mailing Address 3809 N. Carson St.			FEC Identification Number C		
City Carson City	State NV	Zip Code 89706	Amount of Each Disbursement this Period 106.00		
Purpose of Disbursement Contributor relations - meals and entertainment		Category/ Type 003	Transaction ID : SB17.14692		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	172.05
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 65 OF 97	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. Mom and Pops Diner</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 04 / 2016	
Mailing Address 224 S. Carson Street #3			FEC Identification Number C	
City Carson City	State NV	Zip Code 89701	Amount of Each Disbursement this Period 49.00	
Purpose of Disbursement Contributor relations - meals and entertainment		Category/ Type 003	Transaction ID : SB17.14700	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Mom and Pops Diner</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 04 / 2016	
Mailing Address 224 S. Carson Street #3			FEC Identification Number C	
City Carson City	State NV	Zip Code 89701	Amount of Each Disbursement this Period 38.00	
Purpose of Disbursement Contributor relations - meals and entertainment		Category/ Type 003	Transaction ID : SB17.14633	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. Nevada Broadcasters Foundation</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2016	
Mailing Address 3900 Paradise Road Ste 279			FEC Identification Number C	
City Las Vegas	State NV	Zip Code 89169	Amount of Each Disbursement this Period 500.00	
Purpose of Disbursement Donation		Category/ Type 012	Transaction ID : SB17.14920	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	587.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 66 OF 97	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. Nevada Day Inc.</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 29 / 2016	
Mailing Address PO Box 999			FEC Identification Number C	
City Carson City	State NV	Zip Code 89702	Amount of Each Disbursement this Period 250.00	
Purpose of Disbursement Parade entry fees		Category/ Type 007	Transaction ID : SB17.14803	
Candidate Name			<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Nevada Republican Party</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 13 / 2016	
Mailing Address 500 S. Rancho Dr, Suite 7			FEC Identification Number C	
City Las Vegas	State NV	Zip Code 89106	Amount of Each Disbursement this Period 2000.00	
Purpose of Disbursement Donation		Category/ Type 012	Transaction ID : SB17.14839	
Candidate Name			<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. Parobek, Stacy, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 05 / 2016	
Mailing Address 4865 Ramcreek Trail			FEC Identification Number C	
City Reno	State NV	Zip Code 89519	Amount of Each Disbursement this Period 2500.00	
Purpose of Disbursement Consulting - campaign coordinator		Category/ Type 001	Transaction ID : SB17.14852	
Candidate Name			<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	4750.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 67 OF 97	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. Peppermill Resort Spa Casino</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2016	
Mailing Address 2707 S. Virginia St.			FEC Identification Number C	
City Reno	State NV	Zip Code 89502	Amount of Each Disbursement this Period 18.30	
Purpose of Disbursement Contributor relations - meals and entertainment		Category/ Type 003	Transaction ID : SB17.14694	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Peppermill Resort Spa Casino</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 21 / 2016	
Mailing Address 2707 S. Virginia St.			FEC Identification Number C	
City Reno	State NV	Zip Code 89502	Amount of Each Disbursement this Period 34.45	
Purpose of Disbursement Contributor relations - meals and entertainment		Category/ Type 003	Transaction ID : SB17.14680	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. Peppermill Resort Spa Casino</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 25 / 2016	
Mailing Address 2707 S. Virginia St.			FEC Identification Number C	
City Reno	State NV	Zip Code 89502	Amount of Each Disbursement this Period 870.95	
Purpose of Disbursement Catering and location - leadership luncheon		Category/ Type 007	Transaction ID : SB17.14645	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	923.70
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 68 OF 97	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. Peppermill Resort Spa Casino</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 28 / 2016	
Mailing Address 2707 S. Virginia St.			FEC Identification Number C	
City Reno	State NV	Zip Code 89502	Amount of Each Disbursement this Period 34.96	
Purpose of Disbursement Contributor relations - meals and entertainment		Category/ Type 003	Transaction ID : SB17.14641	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Pinocchio's Bar &amp; Grill</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 05 / 2016	
Mailing Address 5995 S. Virginia Street			FEC Identification Number C	
City Reno	State NV	Zip Code 89510	Amount of Each Disbursement this Period 60.40	
Purpose of Disbursement Contributor relations - meals and entertainment		Category/ Type 003	Transaction ID : SB17.14670	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>c. Provost, Rachel, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 05 / 2016	
Mailing Address 70 I Street Southeast Apartment 633			FEC Identification Number C	
City Washinton	State DC	Zip Code 20003	Amount of Each Disbursement this Period 2500.00	
Purpose of Disbursement Consulting - campaign coordinator		Category/ Type 001	Transaction ID : SB17.14849	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	2595.36
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 69 OF 97	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. Ramsey, Logan, , ,</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 05 / 2016
Mailing Address 110 D Street SE #510		FEC Identification Number C
City Washington	State DC	Zip Code 20003
Purpose of Disbursement Consulting - campaign coordinator	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 2500.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.14847
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. Rapsallions</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 27 / 2016
Mailing Address 1555 S Wells Ave,		FEC Identification Number C
City Reno	State NV	Zip Code 89509
Purpose of Disbursement Contributor relations - meals and entertainment	Category/ Type 003	
Candidate Name		Amount of Each Disbursement this Period 75.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.14674
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>c. Sam Kumar for Reno City Council</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 03 / 2016
Mailing Address PO Box 20514		FEC Identification Number C
City Reno	State NV	Zip Code 89515
Purpose of Disbursement Contribution	Category/ Type 011	
Candidate Name		Amount of Each Disbursement this Period 500.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.14886
State: District:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	3075.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 70 OF 97	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. Shell - Carson Cty</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 10 / 2016	
Mailing Address Hwy 395			FEC Identification Number C	
City Carson City	State NV	Zip Code 89703	Amount of Each Disbursement this Period 76.71	
Purpose of Disbursement Gas in lieu of mileage - travel expense		Category/ Type 002	Transaction ID : SB17.14791	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Shell - Carson Cty</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 24 / 2016	
Mailing Address Hwy 395			FEC Identification Number C	
City Carson City	State NV	Zip Code 89703	Amount of Each Disbursement this Period 82.74	
Purpose of Disbursement Gas in lieu of mileage - travel expense		Category/ Type 002	Transaction ID : SB17.14787	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>c. Shell - Carson Cty</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 13 / 2016	
Mailing Address Hwy 395			FEC Identification Number C	
City Carson City	State NV	Zip Code 89703	Amount of Each Disbursement this Period 62.00	
Purpose of Disbursement Gas in lieu of mileage - travel expense		Category/ Type 002	Transaction ID : SB17.14779	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	221.45
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 71 OF 97	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. Shell - Carson Cty</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 17 / 2016
Mailing Address Hwy 395		FEC Identification Number C
City Carson City	State NV	Zip Code 89703
Purpose of Disbursement Gas in lieu of mileage - travel expense		002
Candidate Name		Amount of Each Disbursement this Period 49.47
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.14776
State: District:		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>B. Shell - Carson Cty</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 27 / 2016
Mailing Address Hwy 395		FEC Identification Number C
City Carson City	State NV	Zip Code 89703
Purpose of Disbursement Gas in lieu of mileage - travel expense		002
Candidate Name		Amount of Each Disbursement this Period 59.35
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.14771
State: District:		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>c. Shell - Carson Cty</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 17 / 2016
Mailing Address Hwy 395		FEC Identification Number C
City Carson City	State NV	Zip Code 89703
Purpose of Disbursement Gas in lieu of mileage - travel expense		002
Candidate Name		Amount of Each Disbursement this Period 36.12
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.14760
State: District:		<input type="checkbox"/> Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	144.94
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 72 OF 97			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

Full Name (Last, First, Middle Initial) <b>A. Sign Pro</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 15 / 2016
Mailing Address 1501 North Carson		FEC Identification Number C
City Carson City	State NV	Zip Code 89706
Purpose of Disbursement Yard signs and stakes	Category/ Type 006	
Candidate Name	Amount of Each Disbursement this Period 3291.54	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.14865
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. Sign Pro</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 15 / 2016
Mailing Address 1501 North Carson		FEC Identification Number C
City Carson City	State NV	Zip Code 89706
Purpose of Disbursement Logo soccer and footballs	Category/ Type 006	
Candidate Name	Amount of Each Disbursement this Period 1242.72	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.14866
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. Southwest Airlines</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 11 / 2016
Mailing Address P.O. Box 36647-1CR		FEC Identification Number C
City Dallas	State TX	Zip Code 73235
Purpose of Disbursement Airfare - travel expense	Category/ Type 002	
Candidate Name	Amount of Each Disbursement this Period 250.98	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.14755
State: District:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	4785.24
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 73 OF 97			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

Full Name (Last, First, Middle Initial) <b>A. Southwest Airlines</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 04 / 2016		
Mailing Address P.O. Box 36647-1CR			FEC Identification Number C		
City Dallas	State TX	Zip Code 73235	Amount of Each Disbursement this Period 252.10		
Purpose of Disbursement Airfare - travel expense		Category/ Type 002	Transaction ID : SB17.14745		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. Southwest Airlines</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 04 / 2016		
Mailing Address P.O. Box 36647-1CR			FEC Identification Number C		
City Dallas	State TX	Zip Code 73235	Amount of Each Disbursement this Period 252.10		
Purpose of Disbursement Airfare - travel expense		Category/ Type 002	Transaction ID : SB17.14746		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>C. Southwest Airlines</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 25 / 2016		
Mailing Address P.O. Box 36647-1CR			FEC Identification Number C		
City Dallas	State TX	Zip Code 73235	Amount of Each Disbursement this Period 270.98		
Purpose of Disbursement Airfare - travel expense		Category/ Type 002	Transaction ID : SB17.14722		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	775.18
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 74 OF 97			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

Full Name (Last, First, Middle Initial) <b>A. Southwest Airlines</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2016		
Mailing Address P.O. Box 36647-1CR			FEC Identification Number C		
City Dallas	State TX	Zip Code 73235	Amount of Each Disbursement this Period 249.10		
Purpose of Disbursement Airfare - travel expense		Category/ Type 002	Transaction ID : SB17.14714		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. Southwest Airlines</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 21 / 2016		
Mailing Address P.O. Box 36647-1CR			FEC Identification Number C		
City Dallas	State TX	Zip Code 73235	Amount of Each Disbursement this Period 252.10		
Purpose of Disbursement Airfare - travel expense		Category/ Type 002	Transaction ID : SB17.14713		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>C. Southwest Airlines</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 22 / 2016		
Mailing Address P.O. Box 36647-1CR			FEC Identification Number C		
City Dallas	State TX	Zip Code 73235	Amount of Each Disbursement this Period 504.20		
Purpose of Disbursement Airfare - travel expense		Category/ Type 002	Transaction ID : SB17.14712		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1005.40
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 75 OF 97	
	<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) <b>A. Southwest Airlines</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 26 / 2016	
Mailing Address P.O. Box 36647-1CR			FEC Identification Number <b>C</b>	
City Dallas	State TX	Zip Code 73235	Amount of Each Disbursement this Period 253.98	
Purpose of Disbursement Airfare - travel expense		Category/ Type 002	Transaction ID : <b>SB17.14708</b>	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Super Heros LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 05 / 2016	
Mailing Address 3290 Lapwing Lane			FEC Identification Number <b>C</b>	
City Reno	State NV	Zip Code 89509	Amount of Each Disbursement this Period 4500.00	
Purpose of Disbursement Consulting - Administrative Services		Category/ Type 001	Transaction ID : <b>SB17.14857</b>	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>c. Super Heros LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 22 / 2016	
Mailing Address 3290 Lapwing Lane			FEC Identification Number <b>C</b>	
City Reno	State NV	Zip Code 89509	Amount of Each Disbursement this Period 755.03	
Purpose of Disbursement Administrative expense reimbursement - please see memo		Category/ Type 001	Transaction ID : <b>SB17.14907</b>	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	5509.01
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Form/Schedule: SB17

Transaction ID : SB17.14907

AT&T Go Phone PO Box 537104 Atlanta GA 30353 \$426.17 Phone and monthly service for May - September 2016.  
Mileage reimbursement 609 miles at .54 per mile, total \$328.86.

Form/Schedule:

Transaction ID:

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 77 OF 97	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. Swag Web &amp; Graphics</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 30 / 2016	
Mailing Address 1375 Greg Pkwy #105			FEC Identification Number C	
City Sparks	State NV	Zip Code 89431	Amount of Each Disbursement this Period 499.15	
Purpose of Disbursement Custom bumper stickers		Category/Type 006	Transaction ID : SB17.14871	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Tamarack Junction</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 16 / 2016	
Mailing Address 13101 S Virginia St			FEC Identification Number C	
City Reno	State NV	Zip Code 89521	Amount of Each Disbursement this Period 60.00	
Purpose of Disbursement Contributor relations - meals and entertainment		Category/Type 003	Transaction ID : SB17.14626	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>c. Team Sports Ink</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 06 / 2016	
Mailing Address 5111 Grumman Dr, Ste 1b			FEC Identification Number C	
City Carson City	State NV	Zip Code 89706	Amount of Each Disbursement this Period 1077.42	
Purpose of Disbursement Custom hats for campaign		Category/Type 006	Transaction ID : SB17.14832	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1636.57
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 78 OF 97	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. The Abbi Agency</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 13 / 2016	
Mailing Address 1385 Haskell Street			FEC Identification Number C	
City Reno	State NV	Zip Code 89509	Amount of Each Disbursement this Period 2017.77	
Purpose of Disbursement Design and printing of rack cards		Category/ Type 006	Transaction ID : SB17.14878	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. The Children's Cabinet</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 20 / 2016	
Mailing Address 1090 South Rock Blvd			FEC Identification Number C	
City Reno	State NV	Zip Code 89502	Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement Donation		Category/ Type 012	Transaction ID : SB17.14913	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. THE EYE OF THE TIGER POLITICAL ACTION COMMITTEE</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 17 / 2016	
Mailing Address PO BOX 2485			FEC Identification Number C C00467431	
City SPRINGFIELD	State VA	Zip Code 22152	Amount of Each Disbursement this Period 516.99	
Purpose of Disbursement In-kind contribution - wine for event		Category/ Type 011	Transaction ID : SB17.14716	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	3534.76
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 79 OF 97	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. The Martin Hotel</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 02 / 2016	
Mailing Address 94 W Railroad S			FEC Identification Number C	
City Winnemucca	State NV	Zip Code 89445	Amount of Each Disbursement this Period 230.00	
Purpose of Disbursement Contributor relations - meals and entertainment		Category/ Type 003	Transaction ID : SB17.14635	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. The M Group</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 22 / 2016	
Mailing Address 100 Luna Park #156			FEC Identification Number C	
City Alexandria	State VA	Zip Code 22305	Amount of Each Disbursement this Period 6669.06	
Purpose of Disbursement Fundraising consulting and expense reimbursements - please see memo		Category/ Type 003	Transaction ID : SB17.14864	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>c. The M Group</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 30 / 2016	
Mailing Address 100 Luna Park #156			FEC Identification Number C	
City Alexandria	State VA	Zip Code 22305	Amount of Each Disbursement this Period 3920.00	
Purpose of Disbursement Campaign consulting and expense reimbursements - please see memo		Category/ Type 003	Transaction ID : SB17.14870	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	10819.06
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Form/Schedule: SB17

Transaction ID : SB17.14864

Campaign consulting for funds raised \$3,875.00. Fundraising expense total \$2,794.06; W.Curtsi Draper Tobacconist 699 15th St NW Washington DC 20005 \$1,339.75 Room rental, staffing and cigars for campaign event. Occasions Caterers 655 Taylor St NE Washington DC 20017 \$1398.03 Catering for campaign event. Uber Washington DC \$56.28 Transportation for campaign event.

Form/Schedule: SB17

Transaction ID: SB17.14870

Campaign consulting for funds raised \$3,470.00. Fundraising expense reimbursements total \$450; Porter Group 11 D St SE Washington DC 20003 \$200.00 Property rental fee for campaign event. Runyun Holdings LLC 8 E St SE Washington DC 20003 \$250.00 Space and table rent for campaign event.



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 81 OF 97			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

Full Name (Last, First, Middle Initial) <b>A. The Winnemucca Inn</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 27 / 2016
Mailing Address 7410 West Winnemucca Blvd			FEC Identification Number C
City Winnemucca	State NV	Zip Code 89445	Amount of Each Disbursement this Period 133.28
Purpose of Disbursement Contributor relations - meals and entertainment		Category/ Type 003	Transaction ID : SB17.14644
Candidate Name			<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

Full Name (Last, First, Middle Initial) <b>B. The Winnemucca Inn</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 03 / 2016
Mailing Address 7410 West Winnemucca Blvd			FEC Identification Number C
City Winnemucca	State NV	Zip Code 89445	Amount of Each Disbursement this Period 99.68
Purpose of Disbursement Lodging - travel expense		Category/ Type 002	Transaction ID : SB17.14636
Candidate Name			<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Tito's Restaurant</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2016
Mailing Address 444 E. William St.			FEC Identification Number C
City Carson City	State NV	Zip Code 89701	Amount of Each Disbursement this Period 130.00
Purpose of Disbursement Contributor relations - meals and entertainment		Category/ Type 003	Transaction ID : SB17.14701
Candidate Name			<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	362.96
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 82 OF 97	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. Twisted Fork</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2016	
Mailing Address 1911 Steamboat Pkwy			FEC Identification Number C	
City Reno	State NV	Zip Code 89521	Amount of Each Disbursement this Period 42.00	
Purpose of Disbursement Contributor relations - meals and entertainment		Category/ Type 003	Transaction ID : SB17.14693	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Twisted Fork</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 16 / 2016	
Mailing Address 1911 Steamboat Pkwy			FEC Identification Number C	
City Reno	State NV	Zip Code 89521	Amount of Each Disbursement this Period 80.00	
Purpose of Disbursement Contributor relations - meals and entertainment		Category/ Type 003	Transaction ID : SB17.14664	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>c. United Airlines</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 16 / 2016	
Mailing Address 900 Grand Plaza Drive NHCCR			FEC Identification Number C	
City Houston	State TX	Zip Code 77067	Amount of Each Disbursement this Period 655.20	
Purpose of Disbursement Airfare - travel expense		Category/ Type 002	Transaction ID : SB17.14740	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	777.20
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 83 OF 97	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. United Airlines</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 23 / 2016
Mailing Address 900 Grand Plaza Drive NHCCR		FEC Identification Number C
City Houston	State TX	Zip Code 77067
Purpose of Disbursement Airfare - travel expense	Category/ Type 002	
Candidate Name		Amount of Each Disbursement this Period 200.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Transaction ID : SB17.14723 <input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. United Airlines</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 23 / 2016
Mailing Address 900 Grand Plaza Drive NHCCR		FEC Identification Number C
City Houston	State TX	Zip Code 77067
Purpose of Disbursement Airfare - travel expense	Category/ Type 002	
Candidate Name		Amount of Each Disbursement this Period 105.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Transaction ID : SB17.14724 <input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>c. US Postal Service</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 06 / 2016
Mailing Address 75 McCabe Drive		FEC Identification Number C
City Reno	State NV	Zip Code 89511
Purpose of Disbursement PO Box yearly renewal	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 130.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Transaction ID : SB17.14800 <input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	435.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 84 OF 97	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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**

Full Name (Last, First, Middle Initial) <b>A. Villa basque Deli</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 24 / 2016	
Mailing Address 730 Basque Way			FEC Identification Number C	
City Carson City	State NV	Zip Code 89701	Amount of Each Disbursement this Period 55.35	
Purpose of Disbursement Contributor relations - meals and entertainment		Category/ Type 003	Transaction ID : SB17.14648	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Volaris</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 27 / 2016	
Mailing Address Av. Antonio Dovali Jaime No 70 Torre B, piso 13 Samara Shops			FEC Identification Number C	
City Santa Fe, Mexico City	State ZZ	Zip Code 01210	Amount of Each Disbursement this Period 1164.19	
Purpose of Disbursement Airfare - travel expense		Category/ Type 002	Transaction ID : SB17.14750	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>c. Volaris</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 28 / 2016	
Mailing Address Av. Antonio Dovali Jaime No 70 Torre B, piso 13 Samara Shops			FEC Identification Number C	
City Santa Fe, Mexico City	State ZZ	Zip Code 01210	Amount of Each Disbursement this Period 441.80	
Purpose of Disbursement Airfare - travel expense		Category/ Type 002	Transaction ID : SB17.14747	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1661.34
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 85 OF 97			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

Full Name (Last, First, Middle Initial) <b>A. Volaris</b>		Date of Disbursement MM / DD / YYYY 08 / 19 / 2016
Mailing Address Av. Antonio Dovali Jaime No 70 Torre B, piso 13 Samara Shops		FEC Identification Number C
City Santa Fe, Mexico City	State ZZ	Zip Code 01210
Purpose of Disbursement Meals - travel expense	Category/Type 002	
Candidate Name	Amount of Each Disbursement this Period 7.52	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.14901
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. Volaris</b>		Date of Disbursement MM / DD / YYYY 08 / 19 / 2016
Mailing Address Av. Antonio Dovali Jaime No 70 Torre B, piso 13 Samara Shops		FEC Identification Number C
City Santa Fe, Mexico City	State ZZ	Zip Code 01210
Purpose of Disbursement Meals - travel expense	Category/Type 002	
Candidate Name	Amount of Each Disbursement this Period 12.44	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.14902
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>c. Walmart</b>		Date of Disbursement MM / DD / YYYY 09 / 04 / 2016
Mailing Address 3200 Market St		FEC Identification Number C
City Carson City	State NV	Zip Code 89701
Purpose of Disbursement Candy for Labor Day Parade	Category/Type 007	
Candidate Name	Amount of Each Disbursement this Period 279.09	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.14717
State: District:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	299.05
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 86 OF 97	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. Wells Fargo</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 11 / 2016	
Mailing Address PO Box 6995			FEC Identification Number C	
City Portland	State OR	Zip Code 97228	Amount of Each Disbursement this Period 14.95	
Purpose of Disbursement Quickbooks banking fee		Category/ Type 001	Transaction ID : SB17.14824	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Wells Fargo</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 14 / 2016	
Mailing Address PO Box 6995			FEC Identification Number C	
City Portland	State OR	Zip Code 97228	Amount of Each Disbursement this Period 61.74	
Purpose of Disbursement Merchant fees		Category/ Type 001	Transaction ID : SB17.14821	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>c. Wells Fargo</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 14 / 2016	
Mailing Address PO Box 6995			FEC Identification Number C	
City Portland	State OR	Zip Code 97228	Amount of Each Disbursement this Period 52.43	
Purpose of Disbursement Merchant fees		Category/ Type 001	Transaction ID : SB17.14822	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	129.12
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 87 OF 97	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. Wells Fargo</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 14 / 2016
Mailing Address PO Box 6995		FEC Identification Number C
City Portland	State OR	Zip Code 97228
Purpose of Disbursement Merchant fees	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 51.02
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Transaction ID : SB17.14823 <input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. Wells Fargo</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 28 / 2016
Mailing Address PO Box 6995		FEC Identification Number C
City Portland	State OR	Zip Code 97228
Purpose of Disbursement International purchase transaction fee	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 34.92
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Transaction ID : SB17.14819 <input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>c. Wells Fargo</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 29 / 2016
Mailing Address PO Box 6995		FEC Identification Number C
City Portland	State OR	Zip Code 97228
Purpose of Disbursement International purchase transaction fee	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 13.25
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Transaction ID : SB17.14817 <input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	99.19
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 88 OF 97			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

Full Name (Last, First, Middle Initial) <b>A. Wells Fargo</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 08 / 2016		
Mailing Address PO Box 6995			FEC Identification Number C		
City Portland	State OR	Zip Code 97228	Amount of Each Disbursement this Period 14.95		
Purpose of Disbursement Quickbooks banking fee		Category/ Type 001	Transaction ID : SB17.14815		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. Wells Fargo</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 11 / 2016		
Mailing Address PO Box 6995			FEC Identification Number C		
City Portland	State OR	Zip Code 97228	Amount of Each Disbursement this Period 80.92		
Purpose of Disbursement Merchant fees		Category/ Type 001	Transaction ID : SB17.14809		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>c. Wells Fargo</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 11 / 2016		
Mailing Address PO Box 6995			FEC Identification Number C		
City Portland	State OR	Zip Code 97228	Amount of Each Disbursement this Period 74.84		
Purpose of Disbursement Merchant Fees		Category/ Type 001	Transaction ID : SB17.14810		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	170.71
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 89 OF 97			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

Full Name (Last, First, Middle Initial) <b>A. Wells Fargo</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 11 / 2016		
Mailing Address PO Box 6995			FEC Identification Number C		
City Portland	State OR	Zip Code 97228	Amount of Each Disbursement this Period 46.64		
Purpose of Disbursement Merchant fees		Category/ Type 001	Transaction ID : SB17.14811		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. Wells Fargo</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 19 / 2016		
Mailing Address PO Box 6995			FEC Identification Number C		
City Portland	State OR	Zip Code 97228	Amount of Each Disbursement this Period 1.97		
Purpose of Disbursement International purchase transaction fee		Category/ Type 001	Transaction ID : SB17.14808		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>c. Wells Fargo</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 22 / 2016		
Mailing Address PO Box 6995			FEC Identification Number C		
City Portland	State OR	Zip Code 97228	Amount of Each Disbursement this Period 46.84		
Purpose of Disbursement International purchase transaction fee		Category/ Type 001	Transaction ID : SB17.14805		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	95.45
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 90 OF 97	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. Wells Fargo</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 22 / 2016	
Mailing Address PO Box 6995			FEC Identification Number C	
City Portland	State OR	Zip Code 97228	Amount of Each Disbursement this Period 0.51	
Purpose of Disbursement International purchase transaction fee		Category/ Type 001	Transaction ID : SB17.14806	
Candidate Name			<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Wells Fargo</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 22 / 2016	
Mailing Address PO Box 6995			FEC Identification Number C	
City Portland	State OR	Zip Code 97228	Amount of Each Disbursement this Period 17.37	
Purpose of Disbursement International purchase transaction fee		Category/ Type 001	Transaction ID : SB17.14807	
Candidate Name			<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>c. Wells Fargo</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 09 / 2016	
Mailing Address PO Box 6995			FEC Identification Number C	
City Portland	State OR	Zip Code 97228	Amount of Each Disbursement this Period 14.95	
Purpose of Disbursement Quickbooks banking fee		Category/ Type 001	Transaction ID : SB17.14797	
Candidate Name			<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	32.83
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 91 OF 97			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

Full Name (Last, First, Middle Initial) <b>A. Wells Fargo</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 14 / 2016		
Mailing Address PO Box 6995			FEC Identification Number C		
City Portland	State OR	Zip Code 97228	Amount of Each Disbursement this Period 52.00		
Purpose of Disbursement Merchant bankcard fee		Category/ Type 001	Transaction ID : SB17.14796		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. Whispering Vine</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 25 / 2016		
Mailing Address 85 Foothill Rd			FEC Identification Number C		
City Reno	State NV	Zip Code 89511	Amount of Each Disbursement this Period 2152.32		
Purpose of Disbursement Supplies for fund raising event		Category/ Type 007	Transaction ID : SB17.14646		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>C. WINE AND SPIRITS WHOLESALERS OF AMERICA, INC. POLITICAL ACTION COMMITTEE</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 22 / 2016		
Mailing Address 805 FIFTEENTH ST NW SUITE 430			FEC Identification Number C C00147173		
City WASHINGTON	State DC	Zip Code 20005	Amount of Each Disbursement this Period 622.06		
Purpose of Disbursement In-kind - beverages for event		Category/ Type	Transaction ID : SB17.14562		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	2826.38
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 92 OF 97	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. Wyman &amp; Associates</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 30 / 2016	
Mailing Address 1941 Radcliffe Drive			FEC Identification Number C	
City Carson City	State NV	Zip Code 89703	Amount of Each Disbursement this Period 22865.00	
Purpose of Disbursement Radio advertising		Category/ Type 004	Transaction ID : SB17.14873	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

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

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

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	22865.00
<b>TOTAL</b> This Period (last page this line number only).....▶	142093.68

# 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)  
 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) <b>A. Maier, Sandra, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2016		
Mailing Address PO BOX 467			FEC Identification Number C		
City Genoa	State NV	Zip Code 89411	Amount of Each Disbursement this Period 300.00		
Purpose of Disbursement Refund excess contribution		Category/ Type 010	Transaction ID : SB20A.14553		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State:    District:					

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

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

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	300.00
<b>TOTAL</b> This Period (last page this line number only).....▶	300.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 94 OF 97	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. DOLD FOR CONGRESS</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 27 / 2016
Mailing Address PO BOX 6312		FEC Identification Number C C00465971
City LIBERTYVILLE	State IL	Zip Code 60048
Purpose of Disbursement Political contribution	<input type="checkbox"/> 010 <input type="checkbox"/> 011 <input type="checkbox"/> 012	Amount of Each Disbursement this Period 500.00
Candidate Name <b>DOLD FOR CONGRESS</b>	Category/ Type	Transaction ID : SB21.15233
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: IL District: 10		

Full Name (Last, First, Middle Initial) <b>B. FRIENDS OF TODD YOUNG, INC.</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 27 / 2016
Mailing Address PO BOX 1053		FEC Identification Number C C00459255
City BLOOMINGTON	State IN	Zip Code 47402
Purpose of Disbursement Political Contribution	<input type="checkbox"/> 010 <input type="checkbox"/> 011 <input type="checkbox"/> 012	Amount of Each Disbursement this Period 1000.00
Candidate Name <b>FRIENDS OF TODD YOUNG, INC.</b>	Category/ Type	Transaction ID : SB21.15235
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: IN District: 00		

Full Name (Last, First, Middle Initial) <b>C. LOBIONDO FOR CONGRESS</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 27 / 2016
Mailing Address P. O. BOX 550		FEC Identification Number C C00269340
City VINELAND	State NJ	Zip Code 08362
Purpose of Disbursement Political Contribution	<input type="checkbox"/> 010 <input type="checkbox"/> 011 <input type="checkbox"/> 012	Amount of Each Disbursement this Period 500.00
Candidate Name <b>LOBIONDO FOR CONGRESS</b>	Category/ Type	Transaction ID : SB21.15237
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: NJ District: 02		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	2000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 95 OF 97
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21	

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

Full Name (Last, First, Middle Initial) <b>A. RICK KOZELL FOR CONGRESS</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2016
Mailing Address PO BOX 2172		FEC Identification Number C C00579102
City JUPITER	State FL	Zip Code 33468
Purpose of Disbursement Political Contribution	Category/ Type 011	Amount of Each Disbursement this Period 1000.00
Candidate Name <b>RICK KOZELL FOR CONGRESS</b>	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB21.15239
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: FL District: 18	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>B. TARKANIAN FOR CONGRESS</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 21 / 2016
Mailing Address 3008 CAMPBELL CIRCLE		FEC Identification Number C C00582320
City LAS VEGAS	State NV	Zip Code 89107
Purpose of Disbursement Political Contribution	Category/ Type 011	Amount of Each Disbursement this Period 2000.00
Candidate Name <b>TARKANIAN FOR CONGRESS</b>	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB21.15241
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: NV District: 00	<input type="checkbox"/> Memo Item

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

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	3000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	5000.00

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

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

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

Outstanding Balance Beginning This Period 4500.00		<b>Transaction ID : SD10.7593</b>	
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 <b>Stutzman Public Affairs</b>			Nature of Debt (Purpose): Professional Fees
Mailing Address 1415 L Street			
City Sacramento	State CA	Zip Code 95814	

Outstanding Balance Beginning This Period 1500.00		<b>Transaction ID : SD10.7279</b>	
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 <b>Stutzman Public Affairs</b>			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		<b>Transaction ID : SD10.7284</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 3000.00	

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



: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHŽG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SD10

Transaction ID : SD10.7593

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

Form/Schedule:

Transaction ID: