

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

Jesse Sbaih for Congress

ADDRESS (number and street) 1000 North Green Valley Parkway

#440-551

Check if different than previously reported. (ACC)

Henderson

NV

89074

2. FEC IDENTIFICATION NUMBER ▼

C C00583005

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT NEW (N) OR AMENDED (A)

NV

03

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)

Termination Report (TER)

(b) 12-Day PRE-Election Report for the:

- Primary (12P) General (12G) Runoff (12R)
- Convention (12C) Special (12S)

Election on M M / D D / Y Y Y Y in the State of

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

- General (30G) Runoff (30R) Special (30S)

Election on M M / D D / Y Y Y Y in the State of

5. Covering Period

M M / D D / Y Y Y Y 10 / 01 / 2015

through

M M / D D / Y Y Y Y 12 / 31 / 2015

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 Jay Petterson

Signature of Treasurer Jay Petterson

[Electronically Filed]

Date

M M / D D / Y Y Y Y 01 / 12 / 2016

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office Use Only

FEC FORM 3 (Revised 02/2003)

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name

Jesse Sbah for Congress

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))....	40972.09	139404.09
(b) Total Contribution Refunds (from Line 20(d))	50.00	50.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	40922.09	139354.09
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	33212.08	47584.90
(b) Total Offsets to Operating Expenditures (from Line 14).....	26.82	2526.82
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	33185.26	45058.08
8. Cash on Hand at Close of Reporting Period (from Line 27).....	493996.01	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	400000.00	

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

Jesse Sbaih for Congress

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

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	39000.00	135700.00
(ii) Unitemized.....	1972.09	3704.09
(iii) TOTAL of contributions from individuals ▶	40972.09	139404.09
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	40972.09	139404.09
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	200000.00	400000.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	200000.00	400000.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	26.82	2526.82
15. OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	240998.91	541930.91

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	33212.08	47584.90
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
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	50.00	50.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	50.00	50.00
21. OTHER DISBURSEMENTS	0.00	300.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	33262.08	47934.90

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	286259.18
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	240998.91
25. SUBTOTAL (add Line 23 and Line 24).....	527258.09
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	33262.08
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	493996.01

**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 40
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Jesse Sbaih for Congress

A. Full Name (Last, First, Middle Initial)
Robert Adams

Mailing Address 6516 Lyon Estates Ave

City State Zip Code
Las Vegas NV 89131-2106

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

Name of Employer Occupation
Eglet Prince Attorney

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
 11 / 17 / 2015

Transaction ID : VR09GECK5E2

Amount of Each Receipt this Period
1000.00

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

Mailing Address 513 Hamilton St

City State Zip Code
Somerset NJ 08873-2601

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

Name of Employer Occupation
Walmart Pharmacist

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
 10 / 29 / 2015

Transaction ID : VR09GE8HXX0

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Maysoon S. Ali

Mailing Address 806 E Main St
PO Box 786

City State Zip Code
Waverly TN 37185-1814

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

Name of Employer Occupation
Self Employed Physician

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 13 / 2015

Transaction ID : VR09GCGKCY9

Amount of Each Receipt this Period
250.00

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

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

1750.00

**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 6 OF 40
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Jesse Sbaih for Congress

A. Full Name (Last, First, Middle Initial)
Subhi D. Ali

Mailing Address 806 E Main St
P.O. Box 786

City Waverly State TN Zip Code 37185-1814

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

Name of Employer Self Employed Occupation Physician

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 13 / 2015

Transaction ID : VR09GCGKC44

Amount of Each Receipt this Period
250.00

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

Mailing Address 322 Karen Ave
Unit 3307

City Las Vegas State NV Zip Code 89109-0448

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

Name of Employer Self-Employed Occupation Physician

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
11 / 13 / 2015

Transaction ID : VR09GEC6J48

Amount of Each Receipt this Period
1000.00

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

Mailing Address 1823 Cavendish Way

City Henderson State NV Zip Code 89012-3130

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
300.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 22 / 2015

Transaction ID : VR09GE7DZX2

Amount of Each Receipt this Period
300.00

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

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

1550.00

**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 7 OF 40
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Jesse Sbaih for Congress

A. Full Name (Last, First, Middle Initial)
Joseph L Benson

Mailing Address 2195 Alcova Ridge Dr

City	State	Zip Code
Las Vegas	NV	89135-1571

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

Name of Employer	Occupation
Benson Bertoldo Baker & Carter	Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 13 / 2015

Transaction ID : VR09GEC6P63

Amount of Each Receipt this Period

1000.00

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

Mailing Address 8751 W Charleston Blvd
Ste 220

City	State	Zip Code
Las Vegas	NV	89117-5482

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

Name of Employer	Occupation
Claggett & Sykes	Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 13 / 2015

Transaction ID : VR09GEC6RJ1

Amount of Each Receipt this Period

1500.00

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

Mailing Address 10001 Park Run Dr

City	State	Zip Code
Las Vegas	NV	89145-8857

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

Name of Employer	Occupation
Self Employed	Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 05 / 2015

Transaction ID : VR09GE9PYB4

Amount of Each Receipt this Period

250.00

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

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

2750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 40
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Jesse Sbaih for Congress

A. Full Name (Last, First, Middle Initial)
Robert Cottle

Mailing Address 8635 S Eastern Ave

City Las Vegas State NV Zip Code 89123-2839

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

Name of Employer The Cottle Firm 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
 12 / 16 / 2015

Transaction ID : VR09GEJNRG8

Amount of Each Receipt this Period
2700.00

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

Mailing Address 8635 S Eastern Ave

City Las Vegas State NV Zip Code 89123-2839

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

Name of Employer The Cottle Firm 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
 12 / 16 / 2015

Transaction ID : VR09GEJNRH6

Amount of Each Receipt this Period
300.00

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

Mailing Address 2199 Stage Stop Dr

City Henderson State NV Zip Code 89052-5825

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

Name of Employer Self Employed Occupation Oral Surgeon

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
 11 / 02 / 2015

Transaction ID : VR09GE959F6

Amount of Each Receipt this Period
500.00

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

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

3500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 40
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Jesse Sbaih for Congress

A. Full Name (Last, First, Middle Initial)
Nasim Dil

Mailing Address 2137 Hanston Ct

City Henderson State NV Zip Code 89044-0177

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

Name of Employer University of Nevada Occupation Professor

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **2700.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 13 / 2015

Transaction ID : VR09GCEDPR9

Amount of Each Receipt this Period
1000.00

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

Mailing Address 2137 Hanston Ct

City Henderson State NV Zip Code 89044-0177

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

Name of Employer University of Nevada Occupation Professor

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
 12 / 29 / 2015

Transaction ID : VR09GEN9MG3

Amount of Each Receipt this Period
1200.00

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

Mailing Address 7764 Blue Meadow Ave

City Las Vegas State NV Zip Code 89178-8408

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

Name of Employer Self-Employed Occupation Physician

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
 11 / 09 / 2015

Transaction ID : VR09GEBBY6

Amount of Each Receipt this Period
500.00

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

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

2700.00

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

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

FOR LINE NUMBER: PAGE 10 OF 40
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Jesse Sbaih for Congress

A. Full Name (Last, First, Middle Initial)
Omar Elawam

Mailing Address 1800 Paprika Way

City Henderson State NV Zip Code 89014-5135

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

Name of Employer Islamic Foundation of Nevada Occupation President

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
 12 / 16 / 2015

Transaction ID : VR09GEJNS13

Amount of Each Receipt this Period
250.00

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

Mailing Address 1800 Paprika Way

City Henderson State NV Zip Code 89014-5135

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

Name of Employer Islamic Foundation of Nevada Occupation President

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
 12 / 16 / 2015

Transaction ID : VR09GEJNS38

Amount of Each Receipt this Period
250.00

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

Mailing Address PO Box 4428

City Ocala State FL Zip Code 34478-4428

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

Name of Employer ORMC Occupation Pharmacist

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
 12 / 15 / 2015

Transaction ID : VR09GEJFYE8

Amount of Each Receipt this Period
1000.00

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

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

1500.00

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

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

FOR LINE NUMBER: PAGE 11 OF 40
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Jesse Sbaih for Congress

A. Full Name (Last, First, Middle Initial)
Soulhil Faranesh

Mailing Address 2029 Troon Dr

City Henderson State NV Zip Code 89074-0669

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

Name of Employer Self Employed Occupation Information Requested

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 10 / 2015

Transaction ID : VR09GEBPAH9

Amount of Each Receipt this Period
 400.00

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

Mailing Address 751 Harmony Ridge Way

City Henderson State NV Zip Code 89052-5841

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

Name of Employer Black and Cherry Real Estate Occupation Realtor

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 10 / 2015

Transaction ID : VR09GEBPB89

Amount of Each Receipt this Period
 250.00

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

Mailing Address 340 W Butterfield Rd Ste 2A

City Elmhurst State IL Zip Code 60126-5042

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

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 26 / 2015

Transaction ID : VR09GE7NW25

Amount of Each Receipt this Period
 1000.00

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

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

1650.00

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

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

FOR LINE NUMBER: PAGE 12 OF 40
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Jesse Sbaih for Congress

A. Full Name (Last, First, Middle Initial)
Saed Gheith

Mailing Address 323 9th St

City State Zip Code
Brooklyn NY 11215-8132

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

Name of Employer Occupation
Self Employed Realtor

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
 11 / 17 / 2015

Transaction ID : VR09GECKBJ6

Amount of Each Receipt this Period
500.00

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

Mailing Address 2965 S Jones Blvd
Ste E4

City State Zip Code
Las Vegas NV 89146-5606

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

Name of Employer Occupation
Leon Greenberg Prof Corp Attorney

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
 11 / 12 / 2015

Transaction ID : VR09GEBWRV6

Amount of Each Receipt this Period
300.00

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

Mailing Address 910 Blue Rosalie Pl

City State Zip Code
Henderson NV 89052-8621

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

Name of Employer Occupation
Self Employed Attorney

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
 11 / 05 / 2015

Transaction ID : VR09GE9QNB2

Amount of Each Receipt this Period
250.00

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

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

1050.00

**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 13 OF 40
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Jesse Sbaih for Congress

A. Full Name (Last, First, Middle Initial)
Anise Hamdan

Mailing Address 36 Harrison St

City State Zip Code
Nutley NJ 07110-3257

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

Name of Employer Occupation
Not Employed Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 11 / 2015

Transaction ID : VR09GEBW230

Amount of Each Receipt this Period
 1000.00

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

Mailing Address 7 Plateau Cir W

City State Zip Code
Bronxville NY 10708-2227

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

Name of Employer Occupation
Barclay Banker

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 08 / 2015

Transaction ID : VR09GEG3MY6

Amount of Each Receipt this Period
 2700.00

C. Full Name (Last, First, Middle Initial)
Patrick H. Hicks

Mailing Address 182 Inberaray Court

City State Zip Code
Costa Mesa CA 89071

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

Name of Employer Occupation
Self Employed Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 27 / 2015

Transaction ID : VR09GE887E3

Amount of Each Receipt this Period
 250.00

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

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

3950.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 40
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Jesse Sbaih for Congress

A. Full Name (Last, First, Middle Initial)
Bishr Hijazi

Mailing Address **7785 W Sahara Ave**
Ste 102

City **Las Vegas** State **NV** Zip Code **89117-2789**

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

Name of Employer **Self Employed** Occupation **Physician**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 / 23 / 2015

Transaction ID : VR09GE7HQQ8

Amount of Each Receipt this Period
250.00

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

Mailing Address **1111 Garden Laurel Dr**

City **Murphy** State **TX** Zip Code **75094-4161**

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

Name of Employer **Self Employed** Occupation **Physician**

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
11 / 12 / 2015

Transaction ID : VR09GEBWRX2

Amount of Each Receipt this Period
500.00

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

Mailing Address **3879 N Painted Trl**

City **Kingman** State **AZ** Zip Code **86409-1244**

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

Name of Employer **Self-Employed** Occupation **Physician**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 / 30 / 2015

Transaction ID : VR09GEB9A35

Amount of Each Receipt this Period
1000.00

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

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

1750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 40
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Jesse Sbaih for Congress

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

Mailing Address 9130 W Russell Rd
Ste 200

City Las Vegas State NV Zip Code 89148-1358

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
500.00

Date of Receipt
M M / D D / Y Y Y Y Y
10 / 27 / 2015

Transaction ID : VR09GE8AM7

Amount of Each Receipt this Period
500.00

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

Mailing Address 7619 Victory Gallup St

City Las Vegas State NV Zip Code 89131-4125

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

Name of Employer Nevada Heart & Vascular Center Occupation Physician

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
11 / 04 / 2015

Transaction ID : VR09GE9BZ43

Amount of Each Receipt this Period
250.00

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

Mailing Address 4646 McDonald Rd

City Apison State TN Zip Code 37302-9549

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

Name of Employer Rite Aid Occupation Pharmacist

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
11 / 10 / 2015

Transaction ID : VR09GEBRF01

Amount of Each Receipt this Period
500.00

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

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

1250.00

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

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

FOR LINE NUMBER: PAGE 16 OF 40
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Jesse Sbaih for Congress

A. Full Name (Last, First, Middle Initial)
Taisser Kiswani

Mailing Address 3900 Wimbledon Dr

City State Zip Code
Lake Mary FL 32746-4024

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

Name of Employer Occupation
Self Employed Tile/Flooring

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
 12 16 2015

Transaction ID : VR09GEJNSA2

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Ramzy Ladah Esq

Mailing Address 517 S 3rd St

City State Zip Code
Las Vegas NV 89101-6501

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

Name of Employer Occupation
Ladah Law Firm PLLC Attorney

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
 10 27 2015

Transaction ID : VR09GE87BF5

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Raja A. Majid

Mailing Address 5000 Red Rock St
Apt 262

City State Zip Code
Las Vegas NV 89118-1283

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

Name of Employer Occupation
Origin India Restaurant Owner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1400.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 30 2015

Transaction ID : VR09GE93H41

Amount of Each Receipt this Period
100.00

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

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

1350.00

**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 17 OF 40
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Jesse Sbaih for Congress

A. Full Name (Last, First, Middle Initial)
Raja A. Majid

Mailing Address 5000 Red Rock St
Apt 262

City Las Vegas State NV Zip Code 89118-1283

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

Name of Employer Origin India Restaurant Occupation Owner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1400.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 30 / 2015

Transaction ID : VR09GEEMEP8

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Raja A. Majid

Mailing Address 5000 Red Rock St
Apt 262

City Las Vegas State NV Zip Code 89118-1283

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

Name of Employer Origin India Restaurant Occupation Owner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1400.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 30 / 2015

Transaction ID : VR09GEN7YS8

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Eid B. Mustafa

Mailing Address 2418 Brentwood Dr

City Wichita Falls State TX Zip Code 76308-3911

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

Name of Employer Self-Employed Occupation Physician

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
 10 / 13 / 2015

Transaction ID : VR09GCEWJQ0

Amount of Each Receipt this Period
500.00

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

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

700.00

**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 40
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Jesse Sbaih for Congress

A. Full Name (Last, First, Middle Initial)
Benjamin Naprstek

Mailing Address 7701 Micklewaithe Ct

City State Zip Code
Wake Forest NC 27587-5319

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

Name of Employer Occupation
Local Government Representative

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
 11 / 03 / 2015

Transaction ID : VR09GE99BN8

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Steven J Parsons

Mailing Address 8204 Turtle Creek Cir

City State Zip Code
Las Vegas NV 89113-0129

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

Name of Employer Occupation
Law Offices Steven J Parsons Attorney

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
 11 / 03 / 2015

Transaction ID : VR09GE99BR2

Amount of Each Receipt this Period
250.00

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

Mailing Address 170 S Green Valley Pkwy
Ste 130

City State Zip Code
Henderson NV 89012-3133

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

Name of Employer Occupation
Ninush Interior Designer

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
 10 / 30 / 2015

Transaction ID : VR09GEBR603

Amount of Each Receipt this Period
500.00

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

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

1000.00

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

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

FOR LINE NUMBER: PAGE 19 OF 40
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Jesse Sbaih for Congress

A. Full Name (Last, First, Middle Initial)
Dennis Prince

Mailing Address 10404 Mansion Hills Ave

City State Zip Code
Las Vegas NV 89144-4327

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

Name of Employer Occupation
Self-Employed Attorney

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
 11 / 04 / 2015

Transaction ID : VR09GE9DHF6

Amount of Each Receipt this Period
1000.00

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

Mailing Address 2607 Grey Stone Rd

City State Zip Code
Henderson NV 89074-3345

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

Name of Employer Occupation
Not Employed Retired

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
 11 / 05 / 2015

Transaction ID : VR09GEB7292

Amount of Each Receipt this Period
500.00

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

Mailing Address 3043 Red Arrow Dr

City State Zip Code
Las Vegas NV 89135-1625

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

Name of Employer Occupation
Nevada Anesthesia Consultant Physician

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
 10 / 27 / 2015

Transaction ID : VR09GE88A82

Amount of Each Receipt this Period
500.00

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

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

2000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 40
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Jesse Sbaih for Congress

A. Full Name (Last, First, Middle Initial)
Luay Sbaih

Mailing Address 1808 Safford Pl

City Henderson State NV Zip Code 89074-1087

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

Name of Employer International Foods Occupation Member

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
4300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 28 / 2015

Transaction ID : VR09GE897G8

Amount of Each Receipt this Period
2700.00

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

Mailing Address 1808 Safford Pl

City Henderson State NV Zip Code 89074-1087

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

Name of Employer International Foods Occupation Member

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
4300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 28 / 2015

Transaction ID : VR09GEN4YQ9

Amount of Each Receipt this Period
1600.00

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

Mailing Address 1439 Dewberry Ct

City Mc Lean State VA Zip Code 22101-5628

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

Name of Employer Not Employed Occupation Retired

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
 11 / 11 / 2015

Transaction ID : VR09GEBVZ18

Amount of Each Receipt this Period
1000.00

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

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

5300.00

**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 40
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Jesse Sbaih for Congress

A. Full Name (Last, First, Middle Initial)
Mohamed Sbeih

Mailing Address 8825 Palomino Ct

City State Zip Code
Granite Bay CA 95746-9303

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

Name of Employer Occupation
Not Employed Retired

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
 11 / 13 / 2015

Transaction ID : VR09GEC6QQ0

Amount of Each Receipt this Period
1000.00

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

Mailing Address 520 S 4th St

City State Zip Code
Las Vegas NV 89101-6520

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

Name of Employer Occupation
Self Employed Attorney

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
 10 / 26 / 2015

Transaction ID : VR09GE7NWR9

Amount of Each Receipt this Period
500.00

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

Mailing Address 530 Surryse Rd

City State Zip Code
Lake Zurich IL 60047-2650

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

Name of Employer Occupation
Self Employed Physician

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
 12 / 16 / 2015

Transaction ID : VR09GEJNRZ7

Amount of Each Receipt this Period
500.00

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

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

2000.00

**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 22 OF 40
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Jesse Sbaih for Congress

A. Full Name (Last, First, Middle Initial)
Matt Smith

Mailing Address 9533 Orient Express Ct

City Las Vegas State NV Zip Code 89145-8700

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

Name of Employer ATI Physical Therapy Occupation Physical Therapist

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 23 / 2015

Transaction ID : VR09GE7HQ24

Amount of Each Receipt this Period
 500.00

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

Mailing Address 3084 Baseo Mountain

City Henderson State NV Zip Code 89052

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

Name of Employer Nevada Kidney & Hypertension Center Occupation Physician

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 12 / 2015

Transaction ID : VR09GEC5P09

Amount of Each Receipt this Period
 500.00

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

Mailing Address 10234 Renae Nicole Ct

City Las Vegas State NV Zip Code 89183-4132

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

Name of Employer Self Employed Occupation Realtor

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 27 / 2015

Transaction ID : VR09GE88839

Amount of Each Receipt this Period
 250.00

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

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

1250.00

**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 40
(check only one)
 11a 12
 11b 13a
 11c 13b
 11d 14
 15

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NAME OF COMMITTEE (In Full)
Jesse Sbaih for Congress

A. Full Name (Last, First, Middle Initial)
Mufeed Zaidan

Mailing Address 33014 Shrewsbury Dr

City State Zip Code
Sterling Heights MI 48310-6416

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

Name of Employer Occupation
Not Employed Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 16 / 2015

Transaction ID : VR09GEJNRW3

Amount of Each Receipt this Period
2000.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

2000.00

39000.00

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

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

FOR LINE NUMBER: PAGE 24 OF 40
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Jesse Sbaih for Congress

A. Full Name (Last, First, Middle Initial)
Jesse Sbaih

Mailing Address 1000 N Green Valley Pkwy
440-551

City Henderson State NV Zip Code 89074-6170

FEC ID number of contributing federal political committee. **C** H6NV03089

Name of Employer: Jesse Sbaih and Associates Occupation: Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date: 400000.00

Date of Receipt: 12 / 29 / 2015

Transaction ID : VR09GEN9JZ5

Amount of Each Receipt this Period: 200000.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt

Amount of Each Receipt this Period

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

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

200000.00

200000.00

**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 25 OF 40			
	<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)
Jesse Sbaih for Congress

Full Name (Last, First, Middle Initial) A. Anastasia Apa Firm, Inc.		Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2015
Mailing Address 7900 Harbor Island Dr Apt 1207		Amount of Each Disbursement this Period 5500.00 Transaction ID : VQZA8A121M4
City North Bay Village	State FL Zip Code 33141-4297	
Purpose of Disbursement Campaign Management Consulting	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Anastasia Apa Firm, Inc.		Date of Disbursement M M / D D / Y Y Y Y 10 / 15 / 2015
Mailing Address 7900 Harbor Island Dr Apt 1207		Amount of Each Disbursement this Period 5500.00 Transaction ID : VQZA8A121P0
City North Bay Village	State FL Zip Code 33141-4297	
Purpose of Disbursement Campaign Management Consulting	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Anastasia Apa Firm, Inc.		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2015
Mailing Address 7900 Harbor Island Dr Apt 1207		Amount of Each Disbursement this Period 5500.00 Transaction ID : VQZA8A1FZV6
City North Bay Village	State FL Zip Code 33141-4297	
Purpose of Disbursement Campaign Management Consulting	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	16500.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 40			
	<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)
Jesse Sbaih for Congress

Full Name (Last, First, Middle Initial) A. Anastasia Apa Firm, Inc.		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2015
Mailing Address 7900 Harbor Island Dr Apt 1207		Amount of Each Disbursement this Period 1933.24
City North Bay Village	State FL Zip Code 33141-4297	
Purpose of Disbursement Consultant Travel Reimbursement	Category/Type	Transaction ID : VQZA8A1FZW4
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Bank of America		Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2015
Mailing Address 1411 S Boulder Hwy		Amount of Each Disbursement this Period 25.00
City Henderson	State NV Zip Code 89015-6993	
Purpose of Disbursement Bank Fee	Category/Type	Transaction ID : VQZA8A121Q8
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Bank of America		Date of Disbursement M M / D D / Y Y Y Y 10 / 15 / 2015
Mailing Address 1411 S Boulder Hwy		Amount of Each Disbursement this Period 25.00
City Henderson	State NV Zip Code 89015-6993	
Purpose of Disbursement Bank Fee	Category/Type	Transaction ID : VQZA8A121R6
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1983.24
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 40			
	<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)
Jesse Sbaih for Congress

Full Name (Last, First, Middle Initial) A. Bank of America		Date of Disbursement M M / D D / Y Y Y Y 10 / 29 / 2015
Mailing Address 1411 S Boulder Hwy		Amount of Each Disbursement this Period 24.00 Transaction ID : VQZA8A1FZX2
City Henderson	State NV	
Zip Code 89015-6993	Purpose of Disbursement Bank Fee	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
State: District:	<input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. Bank of America		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2015
Mailing Address 1411 S Boulder Hwy		Amount of Each Disbursement this Period 25.00 Transaction ID : VQZA8A4NVD3
City Henderson	State NV	
Zip Code 89015-6993	Purpose of Disbursement Bank Fee	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
State: District:	<input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) c. Bank of America		Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2015
Mailing Address 1411 S Boulder Hwy		Amount of Each Disbursement this Period 52.00 Transaction ID : VQZA8A21YT7
City Henderson	State NV	
Zip Code 89015-6993	Purpose of Disbursement Bank Fee	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
State: District:	<input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	101.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 40			
	<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)
Jesse Sbaih for Congress

Full Name (Last, First, Middle Initial) A. Bank of America		Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2015
Mailing Address 1411 S Boulder Hwy		Amount of Each Disbursement this Period 38.00
City Henderson	State NV	
Zip Code 89015-6993	Purpose of Disbursement Bank Fee	Transaction ID : VQZA8A21YV5
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Blue Wave Political Partners, LLC		Date of Disbursement M M / D D / Y Y Y Y 10 / 12 / 2015
Mailing Address 119 1st Ave S Ste 320		Amount of Each Disbursement this Period 1250.00
City Seattle	State WA	
Zip Code 98104-3424	Purpose of Disbursement Compliance Consulting	Transaction ID : VQZA8A121W7
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Blue Wave Political Partners, LLC		Date of Disbursement M M / D D / Y Y Y Y 11 / 18 / 2015
Mailing Address 119 1st Ave S Ste 320		Amount of Each Disbursement this Period 1250.00
City Seattle	State WA	
Zip Code 98104-3424	Purpose of Disbursement Compliance Consulting	Transaction ID : VQZA8A4NVQ2
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2538.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 40			
	<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)
Jesse Sbaih for Congress

Full Name (Last, First, Middle Initial) A. Blue Wave Political Partners, LLC		Date of Disbursement M M / D D / Y Y Y Y 12 / 14 / 2015
Mailing Address 119 1st Ave S Ste 320		Amount of Each Disbursement this Period 1250.00
City Seattle	State WA	
Zip Code 98104-3424	Purpose of Disbursement Compliance Consulting	Transaction ID : VQZA8A4NWT8
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. D&P Printing & Graphics, Inc.		Date of Disbursement M M / D D / Y Y Y Y 11 / 18 / 2015
Mailing Address 5641 General Washington Dr # 1		Amount of Each Disbursement this Period 908.10
City Alexandria	State VA	
Zip Code 22312-2403	Purpose of Disbursement Printing	Transaction ID : VQZA8A4NVM8
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. DataPHD, LLC		Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2015
Mailing Address 18090 SE Ave Suite 103		Amount of Each Disbursement this Period 556.58
City Henderson	State NV	
Zip Code 89052	Purpose of Disbursement Office Supplies	Transaction ID : VQZA8A21YN8
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2714.68
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 40		
	<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)
Jesse Sbaih for Congress

Full Name (Last, First, Middle Initial) A. Delta Airlines			Date of Disbursement M M / D D / Y Y Y Y 11 / 23 / 2015
Mailing Address 1030 Delta Blvd			Amount of Each Disbursement this Period 477.20 Transaction ID : VQZA8A4NW03
City Atlanta	State GA	Zip Code 30354-1989	
Purpose of Disbursement Air Travel		Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		State: District:	

Full Name (Last, First, Middle Initial) B. Delta Airlines			Date of Disbursement M M / D D / Y Y Y Y 11 / 23 / 2015
Mailing Address 1030 Delta Blvd			Amount of Each Disbursement this Period 45.00 Transaction ID : VQZA8A4NW29
City Atlanta	State GA	Zip Code 30354-1989	
Purpose of Disbursement Air Travel Fee		Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		State: District:	

Full Name (Last, First, Middle Initial) C. Delta Airlines			Date of Disbursement M M / D D / Y Y Y Y 11 / 23 / 2015
Mailing Address 1030 Delta Blvd			Amount of Each Disbursement this Period 29.00 Transaction ID : VQZA8A4NW36
City Atlanta	State GA	Zip Code 30354-1989	
Purpose of Disbursement Air Travel Fee		Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		State: District:	

SUBTOTAL of Disbursements This Page (optional).....	551.20
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 40			
	<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)
Jesse Sbaih for Congress

A. First Data

Full Name (Last, First, Middle Initial)

Mailing Address 5565 Glenridge Dr
2000

City Atlanta State GA Zip Code 30342-1335

Purpose of Disbursement
Credit Card Fees

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify)

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
10 / 05 / 2015

Amount of Each Disbursement this Period
401.55

Transaction ID : VQZA8A121S4

Category/Type

B. First Data

Full Name (Last, First, Middle Initial)

Mailing Address 5565 Glenridge Dr
2000

City Atlanta State GA Zip Code 30342-1335

Purpose of Disbursement
Credit Card Fees

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify)

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
11 / 03 / 2015

Amount of Each Disbursement this Period
294.54

Transaction ID : VQZA8A21YR2

Category/Type

C. First Data

Full Name (Last, First, Middle Initial)

Mailing Address 5565 Glenridge Dr
2000

City Atlanta State GA Zip Code 30342-1335

Purpose of Disbursement
Credit Card Fees

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify)

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
12 / 03 / 2015

Amount of Each Disbursement this Period
403.27

Transaction ID : VQZA8A4NWE3

Category/Type

SUBTOTAL of Disbursements This Page (optional)..... 1099.36

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 32 OF 40	
	<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)
Jesse Sbaih for Congress

Full Name (Last, First, Middle Initial) A. Fonebee, LLC		Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2015
Mailing Address 911 NW 209th Ave Suite 111		Amount of Each Disbursement this Period 693.00
City Pembroke Pines	State FL	Zip Code 33082
Purpose of Disbursement Telephone	Category/ Type	
Candidate Name	Transaction ID : VQZA8A12209	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. GoDaddy		Date of Disbursement M M / D D / Y Y Y Y 10 / 13 / 2015
Mailing Address 1020 Enterprise Way		Amount of Each Disbursement this Period 13.17
City Sunnyvale	State CA	Zip Code 94089-1411
Purpose of Disbursement Webhosting	Category/ Type	
Candidate Name	Transaction ID : VQZA8A121X5	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. GoDaddy		Date of Disbursement M M / D D / Y Y Y Y 10 / 13 / 2015
Mailing Address 1020 Enterprise Way		Amount of Each Disbursement this Period 59.88
City Sunnyvale	State CA	Zip Code 94089-1411
Purpose of Disbursement Webhosting	Category/ Type	
Candidate Name	Transaction ID : VQZA8A121Y3	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	766.05
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 33 OF 40	
	<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)
Jesse Sbaih for Congress

Full Name (Last, First, Middle Initial) A. GoDaddy		Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2015
Mailing Address 1020 Enterprise Way		Amount of Each Disbursement this Period 95.88
City Sunnyvale	State CA Zip Code 94089-1411	
Purpose of Disbursement Webhosting	Candidate Name	Transaction ID : VQZA8A21YM0
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. In & Out Printing		Date of Disbursement M M / D D / Y Y Y Y 11 / 18 / 2015
Mailing Address 14628 Wicks Blvd		Amount of Each Disbursement this Period 357.93
City San Leandro	State CA Zip Code 94577-6716	
Purpose of Disbursement Printing	Candidate Name	Transaction ID : VQZA8A4NVP4
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. NGP Van, Inc.		Date of Disbursement M M / D D / Y Y Y Y 10 / 21 / 2015
Mailing Address 1101 15th St NW Ste 500		Amount of Each Disbursement this Period 2700.00
City Washington	State DC Zip Code 20005-5006	
Purpose of Disbursement Software Rental	Candidate Name	Transaction ID : VQZA8A121Z1
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	3153.81
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 40			
	<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)
Jesse Sbaih for Congress

Full Name (Last, First, Middle Initial) A. Office Depot		Date of Disbursement M M / D D / Y Y Y Y 10 / 26 / 2015
Mailing Address 520 Marks St		Amount of Each Disbursement this Period 289.14 Transaction ID : VQZA8A16PW5
City Henderson	State NV Zip Code 89014-6769	
Purpose of Disbursement Office Supplies	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Angie Renfro		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2015
Mailing Address 1821 W Hubbard St Ste 304		Amount of Each Disbursement this Period 350.00 Transaction ID : VQZA8A1G006
City Chicago	State IL Zip Code 60622-6273	
Purpose of Disbursement Graphic Design	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Jesse Sbaih		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2015
Mailing Address 1000 N Green Valley Pkwy # 440-551		Amount of Each Disbursement this Period 180.17 Transaction ID : VQZA8A1FZY0
City Henderson	State NV Zip Code 89074-6170	
Purpose of Disbursement Office Supplies Reimbursement	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	819.31
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 40			
	<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)
Jesse Sbaih for Congress

Full Name (Last, First, Middle Initial) A. Office Depot		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2015
Mailing Address 520 Marks St		Amount of Each Disbursement this Period 180.17
City Henderson	State NV Zip Code 89014-6769	
Purpose of Disbursement Office Supplies	Category/Type	Transaction ID : VQZA8A4NWB0
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:		

Full Name (Last, First, Middle Initial) B. Jesse Sbaih		Date of Disbursement M M / D D / Y Y Y Y 11 / 23 / 2015
Mailing Address 1000 N Green Valley Pkwy # 440-551		Amount of Each Disbursement this Period 1271.28
City Henderson	State NV Zip Code 89074-6170	
Purpose of Disbursement Office Furniture Rental Reimbursement	Category/Type	Transaction ID : VQZA8A4NWC8
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Cort Furniture		Date of Disbursement M M / D D / Y Y Y Y 11 / 23 / 2015
Mailing Address 3455 W Sunset Rd Ste B		Amount of Each Disbursement this Period 1271.28
City Las Vegas	State NV Zip Code 89118-3920	
Purpose of Disbursement Office Furniture Rental	Category/Type	Transaction ID : VQZA8A4NWD5
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1271.28
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 36 OF 40	
	<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)
Jesse Sbaih for Congress

Full Name (Last, First, Middle Initial) A. Sky Vista Consulting, LLC		Date of Disbursement M M / D D / Y Y Y Y 10 / 06 / 2015
Mailing Address 2011 Cutlass Dr		Amount of Each Disbursement this Period 763.75
City Henderson	State NV Zip Code 89014-2039	
Purpose of Disbursement Web Development	Candidate Name	Transaction ID : VQZA8A121V9
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Sky Vista Consulting, LLC		Date of Disbursement M M / D D / Y Y Y Y 11 / 18 / 2015
Mailing Address 2011 Cutlass Dr		Amount of Each Disbursement this Period 411.25
City Henderson	State NV Zip Code 89014-2039	
Purpose of Disbursement Web Development	Candidate Name	Transaction ID : VQZA8A4NVV3
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

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

SUBTOTAL of Disbursements This Page (optional).....	1175.00
TOTAL This Period (last page this line number only).....	32672.93

**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 37 OF 40			
	<input type="checkbox"/> 17 <input checked="" 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				

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)
Jesse Sbaih for Congress

Full Name (Last, First, Middle Initial) A. Mofid Tamam		Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2015
Mailing Address 10234 Renae Nicole Ct		Amount of Each Disbursement this Period 50.00
City Las Vegas	State NV	
Zip Code 89183-4132	Purpose of Disbursement Contribution Refund	Transaction ID : VQZA8A4NTX8
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

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

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

SUBTOTAL of Disbursements This Page (optional).....	50.00
TOTAL This Period (last page this line number only).....	50.00

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **Jesse Sbaih for Congress** Transaction ID : **VR09GBPDA71L**

LOAN SOURCE Full Name (Last, First, Middle Initial) **Jesse Sbaih** *[PERSONAL FUNDS]* Election: 2016
 Primary
 General
 Other (specify) ▼

Mailing Address
 1000 N Green Valley Pkwy
 # 440-551

City	State	ZIP Code
Henderson	NV	89074-6170

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
25000.00	0.00	25000.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
M 07 / D 23 / Y 2015	M / D / Y none	none % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional).....	▶	25000.00
TOTALS This Period (last page in this line only).....	▶	[]

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3) LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : VR09GCD62D3L

Jesse Sbaih for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2016

Jesse Sbaih

Primary
 General
 Other (specify) ▼

Mailing Address

1000 N Green Valley Pkwy
440-551

City State ZIP Code
Henderson NV 89074-6170

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
175000.00	0.00	175000.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M 09 / D 08 / Y 2015 M M / D D / Y none % (apr) Yes No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional).....	▶	175000.00
TOTALS This Period (last page in this line only).....	▶	[]

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : VR09GEN9JZ5L

Jesse Sbaih for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2016

Jesse Sbaih

Primary
 General
 Other (specify) ▼

Mailing Address

1000 N Green Valley Pkwy
440-551

City State ZIP Code
Henderson NV 89074-6170

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
200000.00 0.00 200000.00

TERMS

Date Incurred Date Due Interest Rate Secured:
M 12 / D 29 / Y 2015 M M / D D / Y none % (apr) Yes No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional)..... 200000.00
TOTALS This Period (last page in this line only)..... 400000.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.