

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type over the lines.

12FE4M5

Amodei for Nevada

ADDRESS (number and street)

503 N Division St

Check if different than previously reported. (ACC)

Carson City

NV

89703

2. FEC IDENTIFICATION NUMBER ▼

C C00496760

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

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

NV

02

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

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

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

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

Election on / / in the State of

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

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

Election on / / in the State of

5. Covering Period

/ /

through

/ /

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

Type or Print Name of Treasurer Nicola Neilon

Signature of Treasurer Nicola Neilon

[Electronically Filed]

Date

/ /

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								
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SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
Amodei for Nevada

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	24650.00	26500.00
(b) Total Contribution Refunds (from Line 20(d))	0.00	500.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	24650.00	26000.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	42995.78	100310.33
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	42995.78	100310.33
8. Cash on Hand at Close of Reporting Period (from Line 27).....	170205.47	
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).....	19000.00	

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

Amodei for Nevada

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).....	500.00	1000.00
(ii) Unitemized.....	100.00	450.00
(iii) TOTAL of contributions from individuals ▶	600.00	1450.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	24050.00	25050.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	24650.00	26500.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES.....		
	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.).....		
	0.00	0.00
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)..... ▶	24650.00	26500.00

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	42995.78	100310.33
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	0.00	500.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	500.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	42995.78	100810.33

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	188551.25
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	24650.00
25. SUBTOTAL (add Line 23 and Line 24).....	213201.25
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	42995.78
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	170205.47

**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 5 OF 38
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)
Amodei for Nevada

A. Full Name (Last, First, Middle Initial)
George Peek

Mailing Address 4485 Mountaingate Drive

City Reno State NV Zip Code 89519-7938

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

Name of Employer ERGS, Inc Occupation President

Receipt For: 2013
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 18 / 2013

Transaction ID : SA11AI.9220

Amount of Each Receipt this Period
 500.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

500.00

500.00

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

Form/Schedule: SA11AI

Transaction ID : SA11AI.9220

Earmarked contribution through Votesane PAC as the conduit

Form/Schedule:

Transaction ID:

**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 38
	<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)
AMERICAN PRINCIPLES

Mailing Address **20533 BISCAYNE BLVD**
#250

City **MIAMI** State **FL** Zip Code **33180**

FEC ID number of contributing federal political committee. **C C00492579**

Name of Employer _____ Occupation _____

Receipt For: 2014
 Primary General
 Other (specify) _____

Election Cycle-to-Date
 _____ **300.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
03 / 31 / 2013

Transaction ID : SA11C.9067

Amount of Each Receipt this Period
 _____ **300.00**

B. Full Name (Last, First, Middle Initial)
ASSOCIATED BUILDERS AND CONTRACTORS POLITICAL ACTION COMMITTEE (ABC PAC)

Mailing Address **4250 NORTH FAIRFAX DRIVE 9TH FLOOR**

City **ARLINGTON** State **VA** Zip Code **22203**

FEC ID number of contributing federal political committee. **C C00010421**

Name of Employer _____ Occupation _____

Receipt For: 2014
 Primary General
 Other (specify) _____

Election Cycle-to-Date
 _____ **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
03 / 31 / 2013

Transaction ID : SA11C.9069

Amount of Each Receipt this Period
 _____ **1000.00**

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

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

City **SALT LAKE CITY** State **UT** Zip Code **84111**

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

Name of Employer _____ Occupation _____

Receipt For: 2014
 Primary General
 Other (specify) _____

Election Cycle-to-Date
 _____ **2500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
03 / 18 / 2013

Transaction ID : SA11C.9050

Amount of Each Receipt this Period
 _____ **2500.00**

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

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

_____ **3800.00**

**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 38
	<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)
J. Scott Bensing

Mailing Address 3475 South Hampton Dr

City State Zip Code
Reno NV 89509

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

Name of Employer Occupation
SB Strategic President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 18 / 2013

Transaction ID : SA11C.9055

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
BEST BUY CO., INC EMPLOYEE POLITICAL FORUM

Mailing Address 7601 PENN AVENUE SOUTH

City State Zip Code
RICHFIELD MN 55423

FEC ID number of contributing federal political committee. **C** C00405076

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 27 / 2013

Transaction ID : SA11C.9065

Amount of Each Receipt this Period
1000.00

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

Mailing Address 3421 Shepherd Street

City State Zip Code
Chevy Chase MD 20815

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

Name of Employer Occupation
The Furman Group Government Relations

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 18 / 2013

Transaction ID : SA11C.9053

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 9 OF 38
	<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. Caesars Entertainment Political Action Committee

Full Name (Last, First, Middle Initial)
Mailing Address One Caesars Palace Drive

City Las Vegas	State NV	Zip Code 89109
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00239947

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

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 03 / 18 / 2013

Transaction ID : SA11C.9048

Amount of Each Receipt this Period
 2500.00

B. Christopher Cox

Full Name (Last, First, Middle Initial)
Mailing Address 2205 Windsor Rd

City Alexandria	State VA	Zip Code 22307
--------------------	-------------	-------------------

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

Name of Employer Navigators Global	Occupation Principal
---------------------------------------	-------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 03 / 27 / 2013

Transaction ID : SA11C.9060

Amount of Each Receipt this Period
 1000.00

C. CTIA - THE WIRELESS ASSOCIATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)
Mailing Address 1400 16TH STREET NW
SUITE 600

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

FEC ID number of contributing federal political committee. **C** C00262295

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

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 03 / 27 / 2013

Transaction ID : SA11C.9062

Amount of Each Receipt this Period
 1000.00

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

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

4500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 38
	<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. DIRECTV GROUP, INC. FUND - FEDERAL (DIRECTV PAC)

Full Name (Last, First, Middle Initial)
Mailing Address 901 F STREET, NW
SUITE 600

City WASHINGTON State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00331991

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 27 / 2013

Transaction ID : SA11C.9063

Amount of Each Receipt this Period
2000.00

B. Harold Furman

Full Name (Last, First, Middle Initial)
Mailing Address 1750 H Street NW Suite 600

City Washington State DC Zip Code 20006

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

Name of Employer Occupation
The Furman Group President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 18 / 2013

Transaction ID : SA11C.9051

Amount of Each Receipt this Period
500.00

C. Stephen Hartman

Full Name (Last, First, Middle Initial)
Mailing Address 150 Plantation Dr

City Carson City State NV Zip Code 89703

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

Name of Employer Occupation
Hartman & Hartman Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 18 / 2013

Transaction ID : SA11C.9047

Amount of Each Receipt this Period
1000.00

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 11 OF 38
	<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)
INTERNATIONAL FRANCHISE ASSOCIATION FRANCHISING POLITICAL ACTION COMMITTEE INC

Mailing Address 1501 K STREET NW

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00084491

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2013

Transaction ID : SA11C.9071

Amount of Each Receipt this Period
 1000.00

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

Mailing Address 1127 4th St NE

City Washington State DC Zip Code 20002

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

Name of Employer Occupation
Self Employed Management Consultant

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 27 / 2013

Transaction ID : SA11C.9061

Amount of Each Receipt this Period
 500.00

C. Full Name (Last, First, Middle Initial)
NATIONAL ASSOCIATION OF BROADCASTERS POLITICAL ACTION COMMITTEE (NABPAC)

Mailing Address 1771 N STREET NW

City WASHINGTON State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00009985

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2013

Transaction ID : SA11C.9073

Amount of Each Receipt this Period
 1000.00

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

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

2500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 38
	<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. NATIONAL COMMUNITY PHARMACISTS ASSOCIATION - PAC

Full Name (Last, First, Middle Initial)
Mailing Address 100 DAINGERFIELD ROAD

City ALEXANDRIA State VA Zip Code 22314

FEC ID number of contributing federal political committee. **C C00030809**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 25 / 2013

Transaction ID : SA11C.9066

Amount of Each Receipt this Period
 1000.00

B. NATIONAL STONE, SAND & GRAVEL ASSOCIATION ROCKPAC

Full Name (Last, First, Middle Initial)
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: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2013

Transaction ID : SA11C.9070

Amount of Each Receipt this Period
 1000.00

C. NV ENERGY POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)
Mailing Address P.O. BOX 81500
ATTN: JOHN J. VINSKI, TREASURER

City LAS VEGAS State NV Zip Code 89180

FEC ID number of contributing federal political committee. **C C00153379**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 18 / 2013

Transaction ID : SA11C.9046

Amount of Each Receipt this Period
 2500.00

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

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

4500.00

**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 38
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

Full Name (Last, First, Middle Initial)
SALEM COMMUNICATIONS CORPORATION POLITICAL ACTION COMMITTEE

Mailing Address **4880 SANTA ROSA ROAD**

City State Zip Code
CAMARILLO CA 93012

FEC ID number of contributing federal political committee. **C C00321158**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
03 27 2013

Transaction ID : SA11C.9058

Amount of Each Receipt this Period
500.00

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

Mailing Address **P.O. BOX 50193**

City State Zip Code
SPARKS NV 89434

FEC ID number of contributing federal political committee. **C C00367995**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date **2500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
02 21 2013

Transaction ID : SA11C.9049

Amount of Each Receipt this Period
2500.00

Full Name (Last, First, Middle Initial)
Paul Thomsen

Mailing Address **6368 Copper Creek Ct**

City State Zip Code
Reno NV 89519

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

Name of Employer Occupation
Ormat Technologies Director

Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
03 28 2013

Transaction ID : SA11C.9056

Amount of Each Receipt this Period
250.00

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

3250.00
24050.00

**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 14 OF 38			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

Full Name (Last, First, Middle Initial) A. Mark Eugene Amodei		Date of Disbursement M M / D D / Y Y Y Y 02 / 07 / 2013
Mailing Address 503 W Sunset		Amount of Each Disbursement this Period 748.47 Transaction ID : SB17.9125
City Carson City State NV Zip Code 89703	Purpose of Disbursement Reimbursement for expenses incurred for fuel and fundraising expenses	
Candidate Name	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NV District: 02		

Full Name (Last, First, Middle Initial) B. Arco		Date of Disbursement M M / D D / Y Y Y Y 01 / 29 / 2013
Mailing Address 4340 N Carson St		Amount of Each Disbursement this Period 53.36 Transaction ID : SB17.9159
City Carson City State NV Zip Code 89703	Purpose of Disbursement Fuel in lieu fo mileage for campaign travel	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Arco		Date of Disbursement M M / D D / Y Y Y Y 02 / 11 / 2013
Mailing Address 4340 N Carson St		Amount of Each Disbursement this Period 66.50 Transaction ID : SB17.9128
City Carson City State NV Zip Code 89703	Purpose of Disbursement Fuel in lieu fo mileage for campaign travel	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	868.33
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 38		
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

Full Name (Last, First, Middle Initial) A. Aristotle		Date of Disbursement M M / D D / Y Y Y Y 01 / 10 / 2013
Mailing Address 205 Pennsylvania Avenue SE		Amount of Each Disbursement this Period 1625.00
City Washington State DC Zip Code 20003	Category/ Type	
Purpose of Disbursement FEC reporting software		Transaction ID : SB17.9199
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Biltoki		Date of Disbursement M M / D D / Y Y Y Y 01 / 07 / 2013
Mailing Address 405 Silver St		Amount of Each Disbursement this Period 215.00
City Elko State NV Zip Code 89801	Category/ Type	
Purpose of Disbursement Fundraising expense - meals		Transaction ID : SB17.9190
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Biltoki		Date of Disbursement M M / D D / Y Y Y Y 03 / 29 / 2013
Mailing Address 405 Silver St		Amount of Each Disbursement this Period 70.00
City Elko State NV Zip Code 89801	Category/ Type	
Purpose of Disbursement Fundraising expenses - meals		Transaction ID : SB17.9221
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1910.00
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 16 OF 38			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

Full Name (Last, First, Middle Initial) A. Bull Feathers		Date of Disbursement M M / D D / Y Y Y Y 01 / 02 / 2013
Mailing Address 410 1st Street		Amount of Each Disbursement this Period 100.00
City Washington	State DC	
Zip Code 20003	Purpose of Disbursement Fundraising expenses - meals	Transaction ID : SB17.9189
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Carson Cigar Bar		Date of Disbursement M M / D D / Y Y Y Y 02 / 04 / 2013
Mailing Address 301 N Carson st		Amount of Each Disbursement this Period 350.00
City Carson City	State NV	
Zip Code 89071	Purpose of Disbursement Fundraising expenses - meals	Transaction ID : SB17.9144
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Carson City Republican Central Committee		Date of Disbursement M M / D D / Y Y Y Y 02 / 08 / 2013
Mailing Address 1931 California Street, Suite B		Amount of Each Disbursement this Period 500.00
City Carson City	State NV	
Zip Code 89701	Purpose of Disbursement Local contribution	Transaction ID : SB17.9204
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	950.00
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 17 OF 38	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

Full Name (Last, First, Middle Initial) A. Casey Neilon & Associates, LLC		Date of Disbursement M M / D D / Y Y Y Y 01 / 10 / 2013
Mailing Address 503 N Division St		Amount of Each Disbursement this Period 79.69
City Carson City	State NV Zip Code 89703	
Purpose of Disbursement Postage	Category/Type	Transaction ID : SB17.9192
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Casey Neilon & Associates, LLC		Date of Disbursement M M / D D / Y Y Y Y 01 / 29 / 2013
Mailing Address 503 N Division St		Amount of Each Disbursement this Period 3113.75
City Carson City	State NV Zip Code 89703	
Purpose of Disbursement Accounting fees	Category/Type	Transaction ID : SB17.9201
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Casey Neilon & Associates, LLC		Date of Disbursement M M / D D / Y Y Y Y 03 / 14 / 2013
Mailing Address 503 N Division St		Amount of Each Disbursement this Period 2567.50
City Carson City	State NV Zip Code 89703	
Purpose of Disbursement Accounting fees	Category/Type	Transaction ID : SB17.9212
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	5760.94
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 18 OF 38	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

Full Name (Last, First, Middle Initial) A. Churchill County Republican Central Committee		Date of Disbursement M M / D D / Y Y Y Y 02 / 16 / 2013
Mailing Address PO Box 1404		Amount of Each Disbursement this Period 500.00 Transaction ID : SB17.9209
City Fallon State NV Zip Code 89407	Purpose of Disbursement Local Contribution	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Delta Air		Date of Disbursement M M / D D / Y Y Y Y 02 / 01 / 2013
Mailing Address P.O. Box 20706		Amount of Each Disbursement this Period 488.40 Transaction ID : SB17.9148
City Atlanta State GA Zip Code 30320	Purpose of Disbursement Campaign travel - airfare	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Douglas County Republican Central Committee		Date of Disbursement M M / D D / Y Y Y Y 02 / 08 / 2013
Mailing Address 1609 Hwy 395		Amount of Each Disbursement this Period 500.00 Transaction ID : SB17.9225
City Minden State NV Zip Code 89423	Purpose of Disbursement Local Contribution	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1488.40
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 19 OF 38	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

Full Name (Last, First, Middle Initial) A. El Dorado Hotel		Date of Disbursement M M / D D / Y Y Y Y 03 / 25 / 2013
Mailing Address PO Box 3399		Amount of Each Disbursement this Period 260.00
City Reno State NV Zip Code 89505	Category/Type	
Purpose of Disbursement Fundraising expenses - meals		Transaction ID : SB17.9077
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

Full Name (Last, First, Middle Initial) B. Elko County Republican Central Committee		Date of Disbursement M M / D D / Y Y Y Y 01 / 12 / 2013
Mailing Address P. O. Box 326		Amount of Each Disbursement this Period 1000.00
City Elko State NV Zip Code 89803	Category/Type	
Purpose of Disbursement Local Contribution		Transaction ID : SB17.9142
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

Full Name (Last, First, Middle Initial) c. Fishmarket		Date of Disbursement M M / D D / Y Y Y Y 03 / 08 / 2013
Mailing Address 105 King St, Alexandria		Amount of Each Disbursement this Period 232.00
City Alexandria State VA Zip Code 22314	Category/Type	
Purpose of Disbursement		Transaction ID : SB17.9096
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1492.00
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 20 OF 38			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

Full Name (Last, First, Middle Initial) A. Fishmarket		Date of Disbursement M M / D D / Y Y Y Y 03 / 20 / 2013
Mailing Address 105 King St, Alexandria		Amount of Each Disbursement this Period 84.90
City Alexandria	State VA	
Zip Code 22314	Purpose of Disbursement Fundraising expenses - meals	Transaction ID : SB17.9084
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Richard Goddard		Date of Disbursement M M / D D / Y Y Y Y 01 / 10 / 2013
Mailing Address 215 Prince St		Amount of Each Disbursement this Period 591.76
City Alexandria	State VA	
Zip Code 22314	Purpose of Disbursement Reimbursement for travel expenses	Transaction ID : SB17.9198
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Richard Goddard		Date of Disbursement M M / D D / Y Y Y Y 03 / 14 / 2013
Mailing Address 215 Prince St		Amount of Each Disbursement this Period 1357.22
City Alexandria	State VA	
Zip Code 22314	Purpose of Disbursement Reimbursement for campaign travel	Transaction ID : SB17.9215
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2033.88
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 21 OF 38		
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

Full Name (Last, First, Middle Initial) A. Harrah's		Date of Disbursement M M / D D / Y Y Y Y 02 / 26 / 2013
Mailing Address 15 Highway 50		Amount of Each Disbursement this Period 999.95 Transaction ID : SB17.9105
City Stateline	State NV Zip Code 89449	
Purpose of Disbursement Campaign lodging	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

Full Name (Last, First, Middle Initial) B. Harveys		Date of Disbursement M M / D D / Y Y Y Y 02 / 25 / 2013
Mailing Address 18 Highway 50,		Amount of Each Disbursement this Period 2023.87 Transaction ID : SB17.9113
City Stateline	State NV Zip Code 89449	
Purpose of Disbursement Fundraising expenses - meals and lodging	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

Full Name (Last, First, Middle Initial) c. Heavenly		Date of Disbursement M M / D D / Y Y Y Y 02 / 25 / 2013
Mailing Address 3860 Saddle Rd,		Amount of Each Disbursement this Period 212.00 Transaction ID : SB17.9111
City South Lake Tahoe	State NV Zip Code 96150	
Purpose of Disbursement Fundraising expenses	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	3235.82
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 22 OF 38	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

Full Name (Last, First, Middle Initial) A. Humboldt County Republican Central Committee		Date of Disbursement M M / D D / Y Y Y Y 01 / 23 / 2013
Mailing Address PO Box 963		Amount of Each Disbursement this Period 500.00 Transaction ID : SB17.9152
City Winnemucca	State NV Zip Code 89446	
Purpose of Disbursement Local Contribution	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Hunan Dynasty Restaurant		Date of Disbursement M M / D D / Y Y Y Y 01 / 17 / 2013
Mailing Address 215 PENNSYLVANIA AVE SE		Amount of Each Disbursement this Period 320.00 Transaction ID : SB17.9173
City Washington	State DC Zip Code 20003	
Purpose of Disbursement Fundraising expenses - meals	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Hunan Dynasty Restaurant		Date of Disbursement M M / D D / Y Y Y Y 03 / 14 / 2013
Mailing Address 215 PENNSYLVANIA AVE SE		Amount of Each Disbursement this Period 40.00 Transaction ID : SB17.9090
City Washington	State DC Zip Code 20003	
Purpose of Disbursement Fundraising expenses - meals	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	860.00
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 23 OF 38	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

Full Name (Last, First, Middle Initial) A. John Ascuaga's Nugget		Date of Disbursement M M / D D / Y Y Y Y 02 / 07 / 2013
Mailing Address 1100 Nugget Ave		Amount of Each Disbursement this Period 377.18 Transaction ID : SB17.9134
City Sparks	State NV Zip Code 89431	
Purpose of Disbursement Fundraising expenses - meals	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Kaempfer Crowell Renshaw Gronauer & Fiore		Date of Disbursement M M / D D / Y Y Y Y 01 / 10 / 2013
Mailing Address 8345 West Sunset Road Suite 250		Amount of Each Disbursement this Period 97.50 Transaction ID : SB17.9193
City Las Vegas	State NV Zip Code 89113	
Purpose of Disbursement Legal fees	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Kaempfer Crowell Renshaw Gronauer & Fiore		Date of Disbursement M M / D D / Y Y Y Y 03 / 14 / 2013
Mailing Address 8345 West Sunset Road Suite 250		Amount of Each Disbursement this Period 1408.00 Transaction ID : SB17.9214
City Las Vegas	State NV Zip Code 89113	
Purpose of Disbursement Legal fees	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1882.68
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 24 OF 38	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

Full Name (Last, First, Middle Initial) A. King Strategic Communications		Date of Disbursement M M / D D / Y Y Y Y 01 / 30 / 2013
Mailing Address 4605 Morse Road		Amount of Each Disbursement this Period 331.60
City Gahanna State OH Zip Code 43230	Purpose of Disbursement Postage charges for mailer	
Candidate Name	Category/Type	Transaction ID : SB17.9203
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Lander County Republican Central Committee		Date of Disbursement M M / D D / Y Y Y Y 01 / 23 / 2013
Mailing Address PO Box 1522		Amount of Each Disbursement this Period 500.00
City Battle Mountain State NV Zip Code 89820	Purpose of Disbursement Local contribution	
Candidate Name	Category/Type	Transaction ID : SB17.9088
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Landini Brothers		Date of Disbursement M M / D D / Y Y Y Y 03 / 08 / 2013
Mailing Address 115 King St		Amount of Each Disbursement this Period 100.00
City Alexandria State VA Zip Code 22314	Purpose of Disbursement Fundraising expenses - meals	
Candidate Name	Category/Type	Transaction ID : SB17.9097
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	931.60
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 25 OF 38	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

Full Name (Last, First, Middle Initial) A. Lyon County Republican Central Committee		Date of Disbursement M M / D D / Y Y Y Y 01 / 31 / 2013
Mailing Address PO Box 619		Amount of Each Disbursement this Period 500.00 Transaction ID : SB17.9228
City Yerington	State NV	
Zip Code 89447	Purpose of Disbursement Local Contribution	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Maverick		Date of Disbursement M M / D D / Y Y Y Y 01 / 14 / 2013
Mailing Address 2445 Riverboat Rd		Amount of Each Disbursement this Period 65.63 Transaction ID : SB17.9177
City Dayton	State NV	
Zip Code 89403	Purpose of Disbursement Fuel in lieu fo mileage for campaign travel	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. Maverick		Date of Disbursement M M / D D / Y Y Y Y 01 / 28 / 2013
Mailing Address 2445 Riverboat Rd		Amount of Each Disbursement this Period 63.26 Transaction ID : SB17.9165
City Dayton	State NV	
Zip Code 89403	Purpose of Disbursement Fuel in lieu fo mileage for campaign travel	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	628.89
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 38			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

Full Name (Last, First, Middle Initial) A. Maverick		Date of Disbursement M M / D D / Y Y Y Y 01 / 29 / 2013
Mailing Address 2445 Riverboat Rd		Amount of Each Disbursement this Period 48.71
City Dayton	State NV	
Zip Code 89403	Purpose of Disbursement Fuel in lieu fo mileage for campaign travel	Transaction ID : SB17.9162
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Maverick		Date of Disbursement M M / D D / Y Y Y Y 02 / 19 / 2013
Mailing Address 2445 Riverboat Rd		Amount of Each Disbursement this Period 53.65
City Dayton	State NV	
Zip Code 89403	Purpose of Disbursement Fuel in lieu fo mileage for campaign travel	Transaction ID : SB17.9119
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Nevada Republican Party		Date of Disbursement M M / D D / Y Y Y Y 01 / 23 / 2013
Mailing Address 500 S. Rancho Dr, Suite 7		Amount of Each Disbursement this Period 1000.00
City Las Vegas	State NV	
Zip Code 89106	Purpose of Disbursement Local Contribution	Transaction ID : SB17.9150
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1102.36
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 27 OF 38	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

Full Name (Last, First, Middle Initial) A. Stacy Parobek		Date of Disbursement M M / D D / Y Y Y Y 01 / 10 / 2013
Mailing Address 4565 Ramcreek Trail		Amount of Each Disbursement this Period 408.26 Transaction ID : SB17.9196
City Reno	State NV	
Zip Code 89519	Purpose of Disbursement Reimbursement	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Pershing County Republican Central Committee		Date of Disbursement M M / D D / Y Y Y Y 01 / 23 / 2013
Mailing Address 1775 Looz Rd.,		Amount of Each Disbursement this Period 500.00 Transaction ID : SB17.9135
City Lovelock	State NV	
Zip Code 89419	Purpose of Disbursement Local contribution	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. Ruths Palm Desert		Date of Disbursement M M / D D / Y Y Y Y 02 / 20 / 2013
Mailing Address 74740 Hwy 111		Amount of Each Disbursement this Period 460.00 Transaction ID : SB17.9117
City Palm Desert	State CA	
Zip Code 92260	Purpose of Disbursement Fundraising expenses - meals	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	1368.26
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 38			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

Full Name (Last, First, Middle Initial) A. Shell Carson Cty		Date of Disbursement M M / D D / Y Y Y Y 02 / 19 / 2013
Mailing Address Hwy 395		Amount of Each Disbursement this Period 64.43
City Carson City	State NV	
Zip Code 89703	Purpose of Disbursement Fuel reimbursement in lieu of mileage	Transaction ID : SB17.9120
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Shell Carson Cty		Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2013
Mailing Address Hwy 395		Amount of Each Disbursement this Period 95.00
City Carson City	State NV	
Zip Code 89703	Purpose of Disbursement Fuel in lieu fo mileage for campaign travel	Transaction ID : SB17.9094
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Shell Carson Cty		Date of Disbursement M M / D D / Y Y Y Y 03 / 20 / 2013
Mailing Address Hwy 395		Amount of Each Disbursement this Period 64.27
City Carson City	State NV	
Zip Code 89703	Purpose of Disbursement Fuel in lieu fo mileage for campaign travel	Transaction ID : SB17.9083
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	223.70
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 38		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

Full Name (Last, First, Middle Initial) A. Shell Carson Cty		Date of Disbursement M M / D D / Y Y Y Y 03 / 27 / 2013
Mailing Address Hwy 395		Amount of Each Disbursement this Period 95.00 Transaction ID : SB17.9074
City Carson City	State NV	
Zip Code 89703	Purpose of Disbursement Fuel in lieu fo mileage for campaign travel	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Shell Carson Cty		Date of Disbursement M M / D D / Y Y Y Y 03 / 27 / 2013
Mailing Address Hwy 395		Amount of Each Disbursement this Period 95.00 Transaction ID : SB17.9075
City Carson City	State NV	
Zip Code 89703	Purpose of Disbursement Fuel in lieu fo mileage for campaign travel	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Southwest Airlines		Date of Disbursement M M / D D / Y Y Y Y 02 / 19 / 2013
Mailing Address P.O. Box 36647-1CR		Amount of Each Disbursement this Period 462.20 Transaction ID : SB17.9122
City Dallas	State TX	
Zip Code 73235	Purpose of Disbursement Campaign airfare	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	652.20
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 30 OF 38	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

Full Name (Last, First, Middle Initial) A. Storey County Republican Central Committee		Date of Disbursement M M / D D / Y Y Y Y 02 / 08 / 2013
Mailing Address PO Box 767		Amount of Each Disbursement this Period 250.00 Transaction ID : SB17.9206
City Virginia City State NV Zip Code 89440	Purpose of Disbursement Local Contribution	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Tamarack Junction		Date of Disbursement M M / D D / Y Y Y Y 02 / 25 / 2013
Mailing Address 13101 S Virginia St		Amount of Each Disbursement this Period 36.56 Transaction ID : SB17.9116
City Reno State NV Zip Code 89521	Purpose of Disbursement Fundraising expenses - meals	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. The Capital Hill Club		Date of Disbursement M M / D D / Y Y Y Y 02 / 15 / 2013
Mailing Address 300 First St SE		Amount of Each Disbursement this Period 997.06 Transaction ID : SB17.9123
City Washington State DC Zip Code 20003	Purpose of Disbursement Dues	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1283.62
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 38		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

Full Name (Last, First, Middle Initial) A. The Capital Hill Club		Date of Disbursement M M / D D / Y Y Y Y 02 / 19 / 2013
Mailing Address 300 First St SE		Amount of Each Disbursement this Period 997.06 Transaction ID : SB17.9121
City Washington State DC Zip Code 20003	Purpose of Disbursement Dues	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. The Capital Lounge		Date of Disbursement M M / D D / Y Y Y Y 03 / 18 / 2013
Mailing Address 231 Pennsylvania Ave Se		Amount of Each Disbursement this Period 1181.86 Transaction ID : SB17.9086
City Washington State DC Zip Code 20003	Purpose of Disbursement Fundraising expenses - meals	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. The Firehouse		Date of Disbursement M M / D D / Y Y Y Y 02 / 11 / 2013
Mailing Address 1112 2nd St		Amount of Each Disbursement this Period 425.00 Transaction ID : SB17.9129
City Sacramento State CA Zip Code 95814	Purpose of Disbursement Fundraising expenses - meals	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2603.92
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 38		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

Full Name (Last, First, Middle Initial) A. The M Group		Date of Disbursement M M / D D / Y Y Y Y 01 / 11 / 2013
Mailing Address 100 Luna Park #156		Amount of Each Disbursement this Period 2580.04 Transaction ID : SB17.9200
City Alexandria	State VA	
Zip Code 22305	Purpose of Disbursement Fundraising expenses and commissions	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. The M Group		Date of Disbursement M M / D D / Y Y Y Y 03 / 14 / 2013
Mailing Address 100 Luna Park #156		Amount of Each Disbursement this Period 4932.82 Transaction ID : SB17.9211
City Alexandria	State VA	
Zip Code 22305	Purpose of Disbursement Fundraising expenses and commissions	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Tortilla Coast		Date of Disbursement M M / D D / Y Y Y Y 02 / 06 / 2013
Mailing Address 400 First Street SE		Amount of Each Disbursement this Period 439.26 Transaction ID : SB17.9137
City Washington	State DC	
Zip Code 20003	Purpose of Disbursement Fundraising expenses - meals	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	7952.12
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 38		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

Full Name (Last, First, Middle Initial) A. Tortilla Coast		Date of Disbursement M M / D D / Y Y Y Y 03 / 06 / 2013
Mailing Address 400 First Street SE		Amount of Each Disbursement this Period 160.00 Transaction ID : SB17.9100
City Washington State DC Zip Code 20003	Category/Type	
Purpose of Disbursement Fundraising expenses - meals	Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. United Airlines		Date of Disbursement M M / D D / Y Y Y Y 02 / 06 / 2013
Mailing Address 900 Grand Plaza Drive NHCCR		Amount of Each Disbursement this Period 1311.12 Transaction ID : SB17.9138
City Houston State TX Zip Code 77067	Category/Type	
Purpose of Disbursement Campaign travel	Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. USAirways		Date of Disbursement M M / D D / Y Y Y Y 01 / 17 / 2013
Mailing Address 4000 E. Sky Harbor Blvd.		Amount of Each Disbursement this Period 389.30 Transaction ID : SB17.9174
City Phoenix State AZ Zip Code 85034	Category/Type	
Purpose of Disbursement Campaign Travel airfare	Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1860.42
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 34 OF 38	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

Full Name (Last, First, Middle Initial) A. Washoe county Republican Party		Date of Disbursement M M / D D / Y Y Y Y 02 / 28 / 2013
Mailing Address 3652 South Virginia Street		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB17.9227
City Reno State NV Zip Code 89502	Purpose of Disbursement Local Contribution	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Wells Fargo		Date of Disbursement M M / D D / Y Y Y Y 01 / 09 / 2013
Mailing Address PO Box 6995		Amount of Each Disbursement this Period 3.00 Transaction ID : SB17.9182
City Portland State OR Zip Code 97228	Purpose of Disbursement Bank charges	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Wells Fargo		Date of Disbursement M M / D D / Y Y Y Y 01 / 14 / 2013
Mailing Address PO Box 6995		Amount of Each Disbursement this Period 50.00 Transaction ID : SB17.9175
City Portland State OR Zip Code 97228	Purpose of Disbursement Merchant Fee	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1053.00
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 35 OF 38			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

Full Name (Last, First, Middle Initial) A. Wells Fargo		Date of Disbursement M M / D D / Y Y Y Y 02 / 13 / 2013
Mailing Address PO Box 6995		Amount of Each Disbursement this Period 45.27 Transaction ID : SB17.9124
City Portland State OR Zip Code 97228	Purpose of Disbursement Merchant fees	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Wells Fargo		Date of Disbursement M M / D D / Y Y Y Y 03 / 08 / 2013
Mailing Address PO Box 6995		Amount of Each Disbursement this Period 3.00 Transaction ID : SB17.9098
City Portland State OR Zip Code 97228	Purpose of Disbursement Bank Charges	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Wells Fargo		Date of Disbursement M M / D D / Y Y Y Y 03 / 13 / 2013
Mailing Address PO Box 6995		Amount of Each Disbursement this Period 45.00 Transaction ID : SB17.9091
City Portland State OR Zip Code 97228	Purpose of Disbursement Merchant bankcard Fee	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	93.27
TOTAL This Period (last page this line number only).....	40235.41

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 Redrock Strategies	Nature of Debt (Purpose): Special Election Win Bonus
Mailing Address 9500 W Flamingo Rd #203	
City State Zip Code Las Vegas NV 89147	

Outstanding Balance Beginning This Period 2000.00	Transaction ID : SD10.7597	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 2000.00

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

Outstanding Balance Beginning This Period 4500.00	Transaction ID : SD10.7593	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 4500.00

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

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

1) SUBTOTALS This Period This Page (optional)	8000.00
2) TOTALS This Period (last page this line number only)	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	

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

Form/Schedule: SD10

Transaction ID : SD10.7593

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

Form/Schedule:

Transaction ID:

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

NAME OF COMMITTEE (In Full)
Amodei for Nevada

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

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

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

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

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

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

1) SUBTOTALS This Period This Page (optional)	11000.00
2) TOTALS This Period (last page this line number only)	19000.00
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	0.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	19000.00