

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS For An Authorized Committee

Office Use Only

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

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

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

4. TYPE OF REPORT (Choose One)
(a) Quarterly Reports:
April 15 Quarterly Report (Q1)
July 15 Quarterly Report (Q2)
October 15 Quarterly Report (Q3)
January 31 Year-End Report (YE)
Termination Report (TER)
(b) 12-Day PRE-Election Report for the:
Primary (12P) General (12G) Runoff (12R)
Convention (12C) Special (12S)
Election on M M / D D / Y Y Y Y in the State of
(c) 30-Day POST-Election Report for the:
General (30G) Runoff (30R) Special (30S)
Election on M M / D D / Y Y Y Y in the State of

5. Covering Period 04 / 01 / 2015 through 06 / 30 / 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 Nicola Neilon

Signature of Treasurer Nicola Neilon [Electronically Filed] Date 07 / 15 / 2015

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

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))....	119700.00	176418.55
(b) Total Contribution Refunds (from Line 20(d))	2400.00	11100.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	117300.00	165318.55
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	45769.30	144109.40
(b) Total Offsets to Operating Expenditures (from Line 14).....	499.96	5977.70
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	45269.34	138131.70
8. Cash on Hand at Close of Reporting Period (from Line 27).....	270835.97	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	9000.00	

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

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).....	64900.00	96950.00
(ii) Unitemized.....	7600.00	8900.00
(iii) TOTAL of contributions from individuals ▶	72500.00	105850.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	47200.00	70568.55
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	119700.00	176418.55
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.)	499.96	5977.70
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)..... ▶	120199.96	182396.25

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	45769.30	144109.40
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	32950.00
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	2400.00	11100.00
(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)).....	2400.00	11100.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	48169.30	188159.40

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	198805.31
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	120199.96
25. SUBTOTAL (add Line 23 and Line 24).....	319005.27
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	48169.30
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	270835.97

**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 89
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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

NAME OF COMMITTEE (In Full)
Amodei for Nevada

A. Full Name (Last, First, Middle Initial)
Deane A Albright

Mailing Address 1025 Ridgeview Dr Suite 300

City Reno State NV Zip Code 89519-6325

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

Name of Employer Albright & Associates Occupation CPA

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 04 / 02 / 2015

Transaction ID : SA11AI.12243

Amount of Each Receipt this Period
 250.00

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

Mailing Address 2614 Bohr Rd

City Carson City State NV Zip Code 89706

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

Name of Employer Self Occupation Broker

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 04 / 02 / 2015

Transaction ID : SA11AI.12265

Amount of Each Receipt this Period
 1000.00

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

Mailing Address 2614 Bohr Rd

City Carson City State NV Zip Code 89706

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

Name of Employer Self Occupation Broker

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 06 / 24 / 2015

Transaction ID : SA11AI.12393

Amount of Each Receipt this Period
 200.00
 Donation to Luncheon

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

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

1450.00

**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 89
	<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)
Amodei for Nevada

A. Full Name (Last, First, Middle Initial)
Alfredo T Alonso

Mailing Address 7701 Kevin Cir

City Reno State NV Zip Code 89511

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

Name of Employer Lewis Roca Rothgerber Occupation Government Relations

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 19 / 2015

Transaction ID : SA11AI.12485

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Kosta M Arger

Mailing Address 2685 Spinnaker Drive

City Reno State NV Zip Code 89519

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

Name of Employer Sierra Nevada Cardiology Assoc Occupation Cardiologist

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
 04 / 02 / 2015

Transaction ID : SA11AI.12277

Amount of Each Receipt this Period
500.00

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

Mailing Address 1750 Skyline Blvd.

City Reno State NV Zip Code 89509

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

Name of Employer McDonald, Carano & Wilson Occupation 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
 04 / 02 / 2015

Transaction ID : SA11AI.12293

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: PAGE 7 OF 89
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

A. Full Name (Last, First, Middle Initial)
Whitaker Lee Askew

Mailing Address 1809 Stirrup Lane

City Alexandria State VA Zip Code 22308

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

Name of Employer American Gaming Association Occupation government affairs

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 14 / 2015

Transaction ID : SA11AI.12312

Amount of Each Receipt this Period
 1000.00

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

Mailing Address 165 W Liberty St STE 200

City Reno State NV Zip Code 89501

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

Name of Employer EL Wiegand Foundation Occupation Executive Director

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 15 / 2015

Transaction ID : SA11AI.12325

Amount of Each Receipt this Period
 2000.00

Contribution

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

Mailing Address 2702 Lakeridge Shores East

City Reno State NV Zip Code 89519

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

Name of Employer retired Occupation retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 02 / 2015

Transaction ID : SA11AI.12252

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

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

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

FOR LINE NUMBER: PAGE 8 OF 89
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

A. Full Name (Last, First, Middle Initial)
Kim Bacchus

Mailing Address 2702 Lakeridge Shores East

City Reno State NV Zip Code 89519

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

Name of Employer retired Occupation retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 07 / 2015

Transaction ID : SA11AI.12364

Amount of Each Receipt this Period
150.00

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

Mailing Address 100 Sawbuck Road

City Reno State NV Zip Code 89519

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

Name of Employer Dennis Banks Construction Occupation Owner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 26 / 2015

Transaction ID : SA11AI.12558

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Ronald J Bath

Mailing Address 3307 Kingfisher Dr

City Reno State NV Zip Code 89509

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

Name of Employer RJBath Group Occupation owner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 03 / 2015

Transaction ID : SA11AI.12295

Amount of Each Receipt this Period
400.00

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 9 OF 89
	<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)
Amodei for Nevada

A. Full Name (Last, First, Middle Initial)
Jeffrey Scott Bensing

Mailing Address 3475 Southampton Dr

City	State	Zip Code
Reno	NV	89509-3867

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

Name of Employer	Occupation
SB Strategic	Executive

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
 04 / 02 / 2015

Transaction ID : SA11AI.12253

Amount of Each Receipt this Period
1000.00

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

Mailing Address 3539 CHEROKEE DR

City	State	Zip Code
CARSON CITY	NV	89705

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

Name of Employer	Occupation
Blomstrom Consulting	President

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
 06 / 24 / 2015

Transaction ID : SA11AI.12389

Amount of Each Receipt this Period
250.00

Women for Amodei

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

Mailing Address 2333 Fairview Dr

City	State	Zip Code
Carson city	NV	89701

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

Name of Employer	Occupation
Capital beverage	Owner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 19 / 2015

Transaction ID : SA11AI.12349

Amount of Each Receipt this Period
1000.00

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

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

2250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 89
	<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)
Amodei for Nevada

A. Full Name (Last, First, Middle Initial)
James Buell

Mailing Address 4790 Caughtlin Parkway #518

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

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

Name of Employer Self	Occupation Rancher
--------------------------	-----------------------

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
 04 / 02 / 2015

Transaction ID : SA11AI.12282

Amount of Each Receipt this Period
2700.00

B. Full Name (Last, First, Middle Initial)
Patricia D Cafferata

Mailing Address 2636 Edgerock Rd

City Reno	State NV	Zip Code 89519
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FEC ID number of contributing federal political committee. **C**

Name of Employer State of Nevada	Occupation Communications Director
-------------------------------------	---------------------------------------

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
 04 / 02 / 2015

Transaction ID : SA11AI.12289

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Patricia D Cafferata

Mailing Address 2636 Edgerock Rd

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

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

Name of Employer State of Nevada	Occupation Communications Director
-------------------------------------	---------------------------------------

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
550.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 24 / 2015

Transaction ID : SA11AI.12394

Amount of Each Receipt this Period
50.00

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

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

3000.00

**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 89
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

A. Full Name (Last, First, Middle Initial)
Malinda Campbell

Mailing Address 3120 Fairlands Drive

City State Zip Code
Reno NV 89523

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

Name of Employer Occupation
Dynonemic Diesel Owner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1200.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 02 / 2015

Transaction ID : SA11AI.12291

Amount of Each Receipt this Period
1200.00

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

Mailing Address 550 W. Plumb Ln Ste. B436

City State Zip Code
Reno NV 89509

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

Name of Employer Occupation
El Dorado Hotel Casino Executive Director

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
 06 / 19 / 2015

Transaction ID : SA11AI.12509

Amount of Each Receipt this Period
1000.00

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

Mailing Address PO Box 3920

City State Zip Code
Reno NV 89505

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

Name of Employer Occupation
Silver Legacy Resort General Manager

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 02 / 2015

Transaction ID : SA11AI.12273

Amount of Each Receipt this Period
1000.00

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

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

3200.00

**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 89
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

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

Mailing Address 2551 Lakeridge Shores E

City Reno State NV Zip Code 89519

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

Name of Employer Silver Legacy Occupation Director of Marketing

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 02 / 2015

Transaction ID : SA11AI.12259

Amount of Each Receipt this Period
 250.00

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

Mailing Address PO Box 2540

City Reno State NV Zip Code 89505

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

Name of Employer None Occupation Housewife

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 02 / 2015

Transaction ID : SA11AI.12247

Amount of Each Receipt this Period
 1000.00

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

Mailing Address 1200 Financial Blvd. Suite 101

City Reno State NV Zip Code 89502

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

Name of Employer City of Reno Occupation Mayor

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 02 / 2015

Transaction ID : SA11AI.12271

Amount of Each Receipt this Period
 1000.00

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

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

2250.00

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

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

FOR LINE NUMBER: PAGE 13 OF 89
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

A. Full Name (Last, First, Middle Initial)
Michael Cate

Mailing Address 9185 Mile Circle

City State Zip Code
Reno NV 89511

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

Name of Employer Occupation
Pavers Plus Owner

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
 04 / 02 / 2015

Transaction ID : SA11AI.12228

Amount of Each Receipt this Period
500.00

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

Mailing Address 9185 Mile Circle Dr.

City State Zip Code
Reno NV 89511

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

Name of Employer Occupation
J&J Mechanical Owner

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
 04 / 02 / 2015

Transaction ID : SA11AI.12230

Amount of Each Receipt this Period
500.00

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

Mailing Address PO Box 5596

City State Zip Code
Incline Village NV 89450

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

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

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 02 / 2015

Transaction ID : SA11AI.12235

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 14 OF 89
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

A. Full Name (Last, First, Middle Initial)
Aaron K Cohen

Mailing Address 1007 W. Braddock Road

City State Zip Code
Alexandria VA 22302

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

Name of Employer Occupation
Capital Counsel LLC principal

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
 05 / 29 / 2015

Transaction ID : SA11AI.12361

Amount of Each Receipt this Period
 Contribution 250.00

B. Full Name (Last, First, Middle Initial)
Allen R Copeland

Mailing Address 355 Clydesdale Drive

City State Zip Code
Reno NV 89508

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

Name of Employer Occupation
need info need info

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
 06 / 19 / 2015

Transaction ID : SA11AI.12826

Amount of Each Receipt this Period
 Contribution 1000.00

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

Mailing Address 2200 E Long St #212

City State Zip Code
Carson City NV 89706

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

Name of Employer Occupation
None Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 02 / 2015

Transaction ID : SA11AI.12306

Amount of Each Receipt this Period
 Contribution 250.00

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

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

1500.00

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

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FOR LINE NUMBER: PAGE 15 OF 89
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

A. Full Name (Last, First, Middle Initial)
Audrey Damonte

Mailing Address 730 Sandhill Rd Ste 250

City Reno State NV Zip Code 89521

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

Name of Employer Damonte Law Offices 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
 06 / 19 / 2015

Transaction ID : SA11AI.12444

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
Deborah C. Day

Mailing Address 165 W. Liberty Street Suite 100

City Reno State NV Zip Code 89501

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

Name of Employer Dacole Occupation investor

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 04 / 02 / 2015

Transaction ID : SA11AI.12234

Amount of Each Receipt this Period
 1000.00

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

Mailing Address 165 W. Liberty Street Suite 100

City Reno State NV Zip Code 89501

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

Name of Employer Dacole Occupation investor

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 06 / 19 / 2015

Transaction ID : SA11AI.12837

Amount of Each Receipt this Period
 700.00

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 16 OF 89
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

A. Full Name (Last, First, Middle Initial)
MIKE DILLON JR

Mailing Address **PO Box 13430**

City **Reno** State **NV** Zip Code **89507**

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

Name of Employer **Dillon Insurance Services** Occupation **Owner**

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
04 / 30 / 2015

Transaction ID : SA11AI.12344

Amount of Each Receipt this Period
250.00
 Mike Dillon Host Commitie

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

Mailing Address **985 Damonte Ranch Pkwy Ste. 310**

City **Reno** State **NV** Zip Code **89521**

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

Name of Employer **DiLoreto Construction** Occupation **Owner**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 02 / 2015

Transaction ID : SA11AI.12225

Amount of Each Receipt this Period
1000.00

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

Mailing Address **4171 Autumn Hills Drive**

City **Winnemucca** State **NV** Zip Code **89445**

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

Name of Employer **Dolan Law** Occupation **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
04 / 02 / 2015

Transaction ID : SA11AI.12280

Amount of Each Receipt this Period
1000.00

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

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

2250.00

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

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

FOR LINE NUMBER: PAGE 17 OF 89
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

A. Full Name (Last, First, Middle Initial)
Marcel Dubois

Mailing Address 2107 Windsor Road

City State Zip Code
Alexandria VA 22307

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

Name of Employer Occupation
UPS Executive

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 28 / 2015

Transaction ID : SA11AI.12342

Amount of Each Receipt this Period
 1000.00

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

Mailing Address 45 Sharps Drive

City State Zip Code
Reno NV 89519

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

Name of Employer Occupation
self private investor

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 03 / 2015

Transaction ID : SA11AI.12217

Amount of Each Receipt this Period
 300.00

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

Mailing Address 500 Mary St

City State Zip Code
Carson City NV 89703

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

Name of Employer Occupation
Self Self

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 03 / 2015

Transaction ID : SA11AI.12581

Amount of Each Receipt this Period
 250.00

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)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 18 OF 89
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

A. Full Name (Last, First, Middle Initial)
Andrea Engleman

Mailing Address 500 Mary St

City Carson City State NV Zip Code 89703

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

Name of Employer Self Occupation Self

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 06 / 03 / 2015

Transaction ID : SA11AI.12839

Amount of Each Receipt this Period
 -150.00

Redesignate:

[MEMO ITEM]

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

Mailing Address 500 Mary St

City Carson City State NV Zip Code 89703

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

Name of Employer Self Occupation Self

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 06 / 03 / 2015

Transaction ID : SA11AI.12840

Amount of Each Receipt this Period
 150.00

Redesignate: to General

[MEMO ITEM]

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

Mailing Address 633 Saint Lawrence Ave.

City Reno State NV Zip Code 89509-1441

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

Name of Employer Sierra Nevada Corporation Occupation Director of Corporate Communications

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 04 / 01 / 2015

Transaction ID : SA11AI.12211

Amount of Each Receipt this Period
 250.00

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

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

250.00

**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 89
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

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

Mailing Address 633 Saint Lawrence Ave.

City Reno State NV Zip Code 89509-1441

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

Name of Employer Sierra Nevada Corporation Occupation Director of Corporate Communications

Receipt For: 2015
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2015

Transaction ID : SA11AI.12825

Amount of Each Receipt this Period
 _____ 150.00

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

Mailing Address PO Box 320

City Gerlach State NV Zip Code 89412

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

Name of Employer Self Occupation Rancher

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 02 / 2015

Transaction ID : SA11AI.12297

Amount of Each Receipt this Period
 _____ 500.00

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

Mailing Address 2750 Holcomb Ranch Lane

City Reno State NV Zip Code 89511

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

Name of Employer None Occupation Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 750.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 19 / 2015

Transaction ID : SA11AI.12446

Amount of Each Receipt this Period
 _____ 250.00
 Donation

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

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

_____ 900.00

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

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

FOR LINE NUMBER: PAGE 20 OF 89
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

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

Mailing Address 4545 Mountaingate Dr

City State Zip Code
RENO NV 89519

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

Name of Employer Occupation
MCDONALD CARANO 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
 04 / 02 / 2015

Transaction ID : SA11AI.12262

Amount of Each Receipt this Period
500.00

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

Mailing Address 610 Sierra Rose Drive

City State Zip Code
Reno NV 89511

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

Name of Employer Occupation
NEvada Retina 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
 04 / 02 / 2015

Transaction ID : SA11AI.12212

Amount of Each Receipt this Period
1000.00

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

Mailing Address 5405 mae Anne Ave

City State Zip Code
Reno NV 89523

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

Name of Employer Occupation
Summit Engineering Engineer

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
 04 / 02 / 2015

Transaction ID : SA11AI.12301

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**

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FOR LINE NUMBER: PAGE 21 OF 89
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

A. Full Name (Last, First, Middle Initial)
Christie Gescheider

Mailing Address 14250 Sorrel Lane

City State Zip Code
Reno NV 89511

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

Name of Employer Occupation
Moana Nursery Business Owner

Receipt For: 2015
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 02 / 2015

Transaction ID : SA11AI.12260

Amount of Each Receipt this Period
500.00

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

Mailing Address 14250 Sorrel Lane

City State Zip Code
Reno NV 89511

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

Name of Employer Occupation
Moana Nursery Business Owner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
550.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 04 / 2015

Transaction ID : SA11AI.12582

Amount of Each Receipt this Period
50.00

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

Mailing Address 366 N. Edison St

City State Zip Code
Arlington VA 22203

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

Name of Employer Occupation
Capital Edge Lobbyist

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
 06 / 29 / 2015

Transaction ID : SA11AI.12625

Amount of Each Receipt this Period
250.00

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

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

800.00

**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 89
	<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)
Amodei for Nevada

A. Full Name (Last, First, Middle Initial)
Harry Gleen

Mailing Address 1540 Gulf Blvd #404

City Clearwater State FL Zip Code 33767

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

Name of Employer Van Scoyoc Associates Occupation Vice President

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 23 / 2015

Transaction ID : SA11AI.12598

Amount of Each Receipt this Period
 500.00

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

Mailing Address 4100 Inwood Lane

City Reno State NV Zip Code 89502

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

Name of Employer retired Occupation retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 02 / 2015

Transaction ID : SA11AI.12302

Amount of Each Receipt this Period
 300.00

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

Mailing Address 2205 Plaza del Puerto

City Las Vegas State NV Zip Code 89102

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

Name of Employer Graves Communications Occupation Consultant

Receipt For: 2015
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 02 / 2015

Transaction ID : SA11AI.12251

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: PAGE 23 OF 89
(check only one)
 11a 12
 11b 13a
 11c 13b
 11d 14
 15

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

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

Mailing Address 240 Glen Way

City Incline Village State NV Zip Code 89451

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

Name of Employer retired Occupation retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 02 / 2015

Transaction ID : SA11AI.12263

Amount of Each Receipt this Period
 250.00

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

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 Hartman & Hartman 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 Y
 04 / 02 / 2015

Transaction ID : SA11AI.12258

Amount of Each Receipt this Period
 1000.00

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

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 Hartman & Hartman 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 Y
 06 / 19 / 2015

Transaction ID : SA11AI.12510

Amount of Each Receipt this Period
 1000.00

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

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

2250.00

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

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

FOR LINE NUMBER: PAGE 24 OF 89
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

A. Full Name (Last, First, Middle Initial)
Kristy Hawke

Mailing Address 725 California Ave

City State Zip Code
Reno NV 89509

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

Name of Employer Occupation
Nevada Women's Expo Producer

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
 04 / 02 / 2015

Transaction ID : SA11AI.12287

Amount of Each Receipt this Period
250.00

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

Mailing Address 1085 Barrington Ave

City State Zip Code
Elko NV 89801

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

Name of Employer Occupation
retired retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 02 / 2015

Transaction ID : SA11AI.12213

Amount of Each Receipt this Period
250.00

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

Mailing Address 1085 Barrington Ave

City State Zip Code
Elko NV 89801

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

Name of Employer Occupation
Self Lactation Consultant

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 02 / 2015

Transaction ID : SA11AI.12215

Amount of Each Receipt this Period
250.00

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

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

750.00

**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 25 OF 89
	<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)
Amodei for Nevada

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

Mailing Address 11650 Meadowood Lane

City State Zip Code
Reno NV 89506

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

Name of Employer Information requested Occupation Information requested

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
04 / 02 / 2015

Transaction ID : SA11AI.12286

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Lorriane T Hunt

Mailing Address 2970 Augusta Drive

City State Zip Code
Las Vegas NV 89109-1546

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

Name of Employer Information requested Occupation Information requested
Self Self-Employed

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
04 / 02 / 2015

Transaction ID : SA11AI.12305

Amount of Each Receipt this Period
300.00

C. Full Name (Last, First, Middle Initial)
Daniel W Kappes

Mailing Address 13045 Welcome Way

City State Zip Code
Reno NV 89511

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

Name of Employer Information requested Occupation Information requested
Capples, Cassdy & Associates President

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
04 / 24 / 2015

Transaction ID : SA11AI.12334

Amount of Each Receipt this Period
1000.00
Donation

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 26 OF 89
	<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)
Amodei for Nevada

A. Full Name (Last, First, Middle Initial)
Mary Lau

Mailing Address 410 S Minnesota St

City Carson City State NV Zip Code 89703

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

Name of Employer Retail Association of Nevada Occupation Executive Director

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
550.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 19 / 2015

Transaction ID : SA11AI.12493

Amount of Each Receipt this Period
50.00

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

Mailing Address 1941 Rolling Brook Lane

City Reno State NV Zip Code 89519

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

Name of Employer Law Offices of Keith Lee Occupation Attorney

Receipt For: 2015
 Primary General
 Other (specify)

Election Cycle-to-Date
750.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 02 / 2015

Transaction ID : SA11AI.12238

Amount of Each Receipt this Period
250.00

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

Mailing Address 1580 Hymar Ave Suite 100

City Sparks State NV Zip Code 89431

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

Name of Employer Frank Lepori Construction Occupation Owner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 02 / 2015

Transaction ID : SA11AI.12227

Amount of Each Receipt this Period
2000.00

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

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

2300.00

**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 27 OF 89
	<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)
Amodei for Nevada

A. Full Name (Last, First, Middle Initial)
Craig A Madole

Mailing Address 5490 Moonshadow Ct

City Reno State NV Zip Code 89253

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

Name of Employer Nevad Chapter AGC Occupation Executive Director

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 02 / 2015

Transaction ID : SA11AI.12619

Amount of Each Receipt this Period
 250.00

B. Full Name (Last, First, Middle Initial)
John D Madole Jr.

Mailing Address 3983 S McCarran Blvd #553

City Reno State NV Zip Code 89502

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

Name of Employer Associated General Contractors Occupation trade association

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 02 / 2015

Transaction ID : SA11AI.12248

Amount of Each Receipt this Period
 250.00

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

Mailing Address 1394 Amado Ct

City Reno State NV Zip Code 89511

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

Name of Employer Self Occupation Physician

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 02 / 2015

Transaction ID : SA11AI.12294

Amount of Each Receipt this Period
 250.00

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

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

750.00

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

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

FOR LINE NUMBER: PAGE 28 OF 89
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

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

Mailing Address 1394 Amado Ct

City Reno State NV Zip Code 89511

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

Name of Employer Self Occupation Physician

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 19 / 2015

Transaction ID : SA11AI.12470

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Melissa A Meredith

Mailing Address 130 Juniper Hill Rd

City Reno State NV Zip Code 89519-7951

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

Name of Employer Mt Rose Development Company Occupation Accountant

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 19 / 2015

Transaction ID : SA11AI.12495

Amount of Each Receipt this Period
100.00

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

Mailing Address 10250 Donnay Court

City Reno State NV Zip Code 89521

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

Name of Employer CORE Construction Occupation VP

Receipt For: 2015
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 02 / 2015

Transaction ID : SA11AI.12231

Amount of Each Receipt this Period
250.00

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

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

450.00

**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 29 OF 89
	<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)
Amodei for Nevada

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

Mailing Address 4895 Convair Dr

City Carson City State NV Zip Code 89706

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

Name of Employer None Occupation Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **700.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 22 / 2015

Transaction ID : SA11AI.12384

Amount of Each Receipt this Period
100.00

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

Mailing Address PO Box 12458

City Zephyr Cove State NV Zip Code 89448

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

Name of Employer Retired Occupation Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 19 / 2015

Transaction ID : SA11AI.12512

Amount of Each Receipt this Period
250.00
 Luncheon Amodei

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

Mailing Address PO Box 12458

City Zephyr Cove State NV Zip Code 89448

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

Name of Employer Vertex Chemical Occupation Executive

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 19 / 2015

Transaction ID : SA11AI.12511

Amount of Each Receipt this Period
250.00
 Luncheon 6/19/2015

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

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

600.00

**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 30 OF 89
	<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)
Amodei for Nevada

A. Full Name (Last, First, Middle Initial)
Paul J Moradkhan

Mailing Address **PO Box 400305**

City **Las Vegas** State **NV** Zip Code **89140**

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

Name of Employer **Las Vegas Metro Chamber of Com** Occupation **Vice President**

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
04 / 17 / 2015

Transaction ID : SA11AI.12328

Amount of Each Receipt this Period
250.00

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

Mailing Address **170 S Virginia St Suite 202**

City **Reno** State **NV** Zip Code **89501-1903**

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

Name of Employer **Innerwest Advertising** Occupation **President/CEO**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 02 / 2015

Transaction ID : SA11AI.12237

Amount of Each Receipt this Period
250.00

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

Mailing Address **2279 Rainwood Ct.**

City **Reno** State **NV** Zip Code **89509**

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

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

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 02 / 2015

Transaction ID : SA11AI.12299

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: (check only one)	PAGE 31 OF 89
	<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)
Amodei for Nevada

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

Mailing Address 2996 Halleck Dr.

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

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

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

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 02 / 2015

Transaction ID : SA11AI.12274

Amount of Each Receipt this Period
500.00

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

Mailing Address 1105 Ivy Court

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

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

Name of Employer Wells Fargo Bank	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 Y
 04 / 02 / 2015

Transaction ID : SA11AI.12279

Amount of Each Receipt this Period
500.00

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

Mailing Address 444 Salomon Ct.

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

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

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

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 15 / 2015

Transaction ID : SA11AI.12319

Amount of Each Receipt this Period
2700.00
Primary 2016

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

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

3700.00

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

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

FOR LINE NUMBER: PAGE 32 OF 89
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

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

Mailing Address 444 Salomon Ct.

City Sparks State NV Zip Code 89434-9651

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

Name of Employer Sierra Nevada Corporation Occupation President

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 15 / 2015

Transaction ID : SA11AI.12320

Amount of Each Receipt this Period
2700.00

Primary 2016

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

Mailing Address 444 Salomon Ct.

City Sparks State NV Zip Code 89434-9651

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

Name of Employer Sierra Nevada Corporation Occupation President

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 15 / 2015

Transaction ID : SA11AI.12322

Amount of Each Receipt this Period
-2700.00

Reattribute: Primary 2016

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

Mailing Address 444 Salomon Circle

City Sparks State NV Zip Code 89434

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

Name of Employer Sierra Nevada Corporation Occupation CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 15 / 2015

Transaction ID : SA11AI.12323

Amount of Each Receipt this Period
2700.00

Reattribute: From Eren Ozmen to Fatih Ozmen

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 33 OF 89
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

A. Full Name (Last, First, Middle Initial)
Janet S Parker

Mailing Address 1390 Creek Drive

City State Zip Code
Gardnerville NV 89410

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

Name of Employer Occupation
self emp - aviation/aerospace president

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
 04 / 02 / 2015

Transaction ID : SA11AI.12304

Amount of Each Receipt this Period
250.00

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

Mailing Address 2355 Lois Ct

City State Zip Code
Sparks NV 89434

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

Name of Employer Occupation
Retired None

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
 04 / 02 / 2015

Transaction ID : SA11AI.12300

Amount of Each Receipt this Period
250.00

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

Mailing Address 2355 Lois Ct

City State Zip Code
Sparks NV 89434

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

Name of Employer Occupation
Retired None

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
 06 / 24 / 2015

Transaction ID : SA11AI.12395

Amount of Each Receipt this Period
50.00

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

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

550.00

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 34 OF 89
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

A. Full Name (Last, First, Middle Initial)
Michael Pegram

Mailing Address 2118 Riverside Dr Ste 209

City State Zip Code
Mount Vernon WA 98273-5466

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

Name of Employer Occupation
Bodines Casino Owner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2850.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 02 / 2015

Transaction ID : SA11AI.12224

Amount of Each Receipt this Period
2850.00

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

Mailing Address 2118 Riverside Dr Ste 209

City State Zip Code
Mount Vernon WA 98273-5466

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

Name of Employer Occupation
Bodines Casino Owner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 02 / 2015

Transaction ID : SA11AI.12314

Amount of Each Receipt this Period
-150.00

Redesignate:
[MEMO ITEM]

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

Mailing Address 2118 Riverside Dr Ste 209

City State Zip Code
Mount Vernon WA 98273-5466

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

Name of Employer Occupation
Bodines Casino Owner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 02 / 2015

Transaction ID : SA11AI.12315

Amount of Each Receipt this Period
150.00

Redesignate: to genera
[MEMO ITEM]

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

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

2850.00

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

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

FOR LINE NUMBER: PAGE 35 OF 89
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

A. Full Name (Last, First, Middle Initial)
Timothy Pegram

Mailing Address 123 Five Creek Rd

City State Zip Code
Gardnerville NV 89460

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

Name of Employer Occupation
Bodines Casino Marketing Executive

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 02 / 2015

Transaction ID : SA11AI.12222

Amount of Each Receipt this Period
 2850.00

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

Mailing Address 123 Five Creek Rd

City State Zip Code
Gardnerville NV 89460

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

Name of Employer Occupation
Bodines Casino Marketing Executive

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 02 / 2015

Transaction ID : SA11AI.12317

Amount of Each Receipt this Period
 -150.00

Redesignate:
[MEMO ITEM]

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

Mailing Address 123 Five Creek Rd

City State Zip Code
Gardnerville NV 89460

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

Name of Employer Occupation
Bodines Casino Marketing Executive

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 02 / 2015

Transaction ID : SA11AI.12318

Amount of Each Receipt this Period
 150.00

Redesignate: to general
[MEMO ITEM]

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

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

2850.00

**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 36 OF 89
	<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)
Amodei for Nevada

A. Full Name (Last, First, Middle Initial)
MARY PIERCZYNSKI

Mailing Address 7040 Franktown Road

City Carson City State NV Zip Code 89704

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

Name of Employer self Occupation lobbyist

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 15 / 2015

Transaction ID : SA11AI.12327

Amount of Each Receipt this Period
 250.00

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

Mailing Address 7040 Franktown Road

City Carson City State NV Zip Code 89704

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

Name of Employer self Occupation lobbyist

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 19 / 2015

Transaction ID : SA11AI.12460

Amount of Each Receipt this Period
 50.00

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

Mailing Address 1135 Central Avenue

City Lovelock State NV Zip Code 89419

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

Name of Employer Self 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 Y
 06 / 30 / 2015

Transaction ID : SA11AI.12631

Amount of Each Receipt this Period
 250.00

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

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

550.00

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

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

FOR LINE NUMBER: PAGE 37 OF 89
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

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

Mailing Address 950 S Rock Blvd

City Sparks State NV Zip Code 89431

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

Name of Employer Western Nevada Supply Occupation General Manager

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 02 / 2015

Transaction ID : SA11AI.12584

Amount of Each Receipt this Period
 1000.00

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

Mailing Address 3455 Cliff Shadows Pkwy

City Las Vegas State NV Zip Code 89129

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

Name of Employer Focus Property Group Occupation CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 21 / 2015

Transaction ID : SA11AI.12339

Amount of Each Receipt this Period
 2000.00

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

Mailing Address 3541 Mont Blanc Court

City Carson City State NV Zip Code 89705

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

Name of Employer RAMAC Industries Occupation Business owner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 02 / 2015

Transaction ID : SA11AI.12275

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

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

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

FOR LINE NUMBER: PAGE 38 OF 89
(check only one)
 11a 12
 11b 13a
 11c 13b
 11d 14
 15

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

A. Full Name (Last, First, Middle Initial)
Brenda Robertson

Mailing Address 3541 Mont Blanc Court

City Carson City State NV Zip Code 89705

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

Name of Employer RAMAC Industries Occupation Business owner

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
06 / 19 / 2015

Transaction ID : SA11AI.12453

Amount of Each Receipt this Period
50.00

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

Mailing Address 2527 Aviation Way

City MInden State NV Zip Code 89423

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

Name of Employer RAMAC Industries Occupation Owner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **750.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 02 / 2015

Transaction ID : SA11AI.12276

Amount of Each Receipt this Period
750.00

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

Mailing Address 11920 Southern Highlands Pkwy Suite 301

City Las Vegas State NV Zip Code 89141

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

Name of Employer Rogich Communications Group Occupation CEO/President

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **2300.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 22 / 2015

Transaction ID : SA11AI.12354

Amount of Each Receipt this Period
2300.00

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

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

3100.00

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

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

FOR LINE NUMBER: PAGE 39 OF 89
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

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

Mailing Address 3555 Southampton Dr.

City Reno State NV Zip Code 89509

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

Name of Employer Lucini Pariol Insurance Occupation Insurance Broker

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 02 / 2015

Transaction ID : SA11AI.12285

Amount of Each Receipt this Period
 _____ 250.00

B. Full Name (Last, First, Middle Initial)
Gail A. Sande

Mailing Address 85 Hawken Road

City Reno State NV Zip Code 89509

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

Name of Employer retired Occupation retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 02 / 2015

Transaction ID : SA11AI.12303

Amount of Each Receipt this Period
 _____ 500.00

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

Mailing Address 3427 Goni Road Suite 109

City Carson City State NV Zip Code 89706

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

Name of Employer Shaheen Beauchamp Builders Occupation Owner

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
 04 / 02 / 2015

Transaction ID : SA11AI.12242

Amount of Each Receipt this Period
 _____ 250.00

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 40 OF 89
(check only one)
 11a 12
 11b 13a
 11c 13b
 11d 14
 15

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

A. Full Name (Last, First, Middle Initial)
Jeffrey A Shapiro

Mailing Address 1325 13th St NW #26

City Washington State DC Zip Code 20005

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

Name of Employer Peck Madison Jones Occupation lobbyist

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 29 / 2015

Transaction ID : SA11AI.12363

Amount of Each Receipt this Period
 1000.00

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

Mailing Address 1 East Liberty St Suite 444

City RENO State NV Zip Code 89511

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

Name of Employer Somerset Development Co Occupation Managing Partner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 02 / 2015

Transaction ID : SA11AI.12284

Amount of Each Receipt this Period
 500.00

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

Mailing Address 930 Tahoe Blvd #802-117

City Incline Village State NV Zip Code 89451

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

Name of Employer ACA Occupation Director

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 24 / 2015

Transaction ID : SA11AI.12338

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: PAGE 41 OF 89
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

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

Mailing Address 930 Tahoe Blvd #802-117

City State Zip Code
Incline Village NV 89451

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

Name of Employer Occupation
ACA Director

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
450.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 19 / 2015

Transaction ID : SA11AI.12494

Amount of Each Receipt this Period
200.00

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

Mailing Address 3610 Big Bend Lane

City State Zip Code
Reno NV 89509

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

Name of Employer Occupation
Struhsacker Consulting owner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
550.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 19 / 2015

Transaction ID : SA11AI.12478

Amount of Each Receipt this Period
50.00

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

Mailing Address 4785 Caughlin Pkwy

City State Zip Code
Reno NV 89519

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

Name of Employer Occupation
Maupin Cox & Legoy 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
 04 / 02 / 2015

Transaction ID : SA11AI.12250

Amount of Each Receipt this Period
250.00

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

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

500.00

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

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

FOR LINE NUMBER: PAGE 42 OF 89
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

A. Full Name (Last, First, Middle Initial)
Dusty Wunderlich

Mailing Address **255 N Sierra St #608**

City **Reno** State **NV** Zip Code **89501**

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

Name of Employer **Bristlecone Inc** Occupation **CEO**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 02 / 2015

Transaction ID : SA11Al.12268

Amount of Each Receipt this Period
250.00

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).....

250.00

64900.00

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

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

FOR LINE NUMBER: PAGE 43 OF 89
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

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

Mailing Address 1701 CLARENDON BLVD

City State Zip Code
ARLINGTON VA 22209

FEC ID number of contributing federal political committee. **C C00102764**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 02 / 2015

Transaction ID : SA11C.12240

Amount of Each Receipt this Period
 1000.00

Primary 2016

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

Mailing Address PALLADIAN 1
220 LEIGH FARM RD

City State Zip Code
DURHAM NC 27707

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 17 / 2015

Transaction ID : SA11C.12578

Amount of Each Receipt this Period
 2500.00

2016 Primary Election

C. Full Name (Last, First, Middle Initial)
AMERICAN PHYSICAL THERAPY ASSOCIATION PHYSICAL THERAPY POLITICAL ACTION COMMITTEE (PT-PAC)

Mailing Address 1111 NORTH FAIRFAX ST.

City State Zip Code
ALEXANDRIA VA 22314

FEC ID number of contributing federal political committee. **C C00012880**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2015

Transaction ID : SA11C.12567

Amount of Each Receipt this Period
 1000.00

2016 US Primary

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 44 OF 89
	<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)
ANHEUSER-BUSCH COMPANIES INC. POLITICAL ACTION COMMITTEE

Mailing Address **ONE BUSCH PLACE 202-7**

City **ST. LOUIS** State **MO** Zip Code **63118**

FEC ID number of contributing federal political committee. **C C00034488**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 29 / 2015

Transaction ID : SA11C.12362

Amount of Each Receipt this Period
 Primary 2016
1000.00

B. Full Name (Last, First, Middle Initial)
Association of United States Postal Lessors PAC

Mailing Address **8283 North Hayden Road suite 295**

City **Scottsdale** State **AZ** Zip Code **89258**

FEC ID number of contributing federal political committee. **C C00579573**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 23 / 2015

Transaction ID : SA11C.12572

Amount of Each Receipt this Period
 2016 Primary
2000.00

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: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 26 / 2015

Transaction ID : SA11C.12374

Amount of Each Receipt this Period
 Primary 2016
2500.00

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

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

5500.00

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

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

FOR LINE NUMBER: PAGE 45 OF 89
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

A. Full Name (Last, First, Middle Initial)
BNSF RAILWAY COMPANY RAILPAC (BNSF RAILPAC)

Mailing Address P.O. BOX 961039

City State Zip Code
FORT WORTH TX 76161

FEC ID number of contributing federal political committee. **C** C00235739

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 02 / 2015

Transaction ID : SA11C.12370

Amount of Each Receipt this Period
2500.00

Primary 2016

B. Full Name (Last, First, Middle Initial)
CHARTER COMMUNICATIONS INC. POLITICAL ACTION COMMITTEE

Mailing Address 1919 PENNSYLVANIA AVE. N.W.
STE. 750

City State Zip Code
WASHINGTON DC 20006

FEC ID number of contributing federal political committee. **C** C00426775

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 06 / 2015

Transaction ID : SA11C.12367

Amount of Each Receipt this Period
2500.00

2016 Primary

C. Full Name (Last, First, Middle Initial)
CIGAR-PAC

Mailing Address 818 CONNECTICUT AVENUE, NW
SUITE 200

City State Zip Code
WASHINGTON DC 20006

FEC ID number of contributing federal political committee. **C** C00121350

Name of Employer Occupation

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
05 / 29 / 2015

Transaction ID : SA11C.12359

Amount of Each Receipt this Period
500.00

Reception April 28, 2015

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

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

5500.00

**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 46 OF 89
	<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. CIGAR-PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 818 CONNECTICUT AVENUE, NW
 SUITE 200
 City State Zip Code
 WASHINGTON DC 20006
 FEC ID number of contributing federal political committee. **C C00121350**
 Name of Employer Occupation
 Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date
 700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 24 / 2015
Transaction ID : SA11C.12823
 Amount of Each Receipt this Period
 200.00
 In-kind - Cigars for event

B. CLOROX COMPANY POLITICAL ACTION COMMITTEE; THE (CLORPAC)
 Full Name (Last, First, Middle Initial)
 Mailing Address 1221 BROADWAY
 City State Zip Code
 OAKLAND CA 94612
 FEC ID number of contributing federal political committee. **C C00062224**
 Name of Employer Occupation
 Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date
 1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 12 / 2015
Transaction ID : SA11C.12345
 Amount of Each Receipt this Period
 1500.00
 Qualified as a Multi-Candidate Committee

C. COEUR MINING INC PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 104 S MICHIGAN AVENUE
 City State Zip Code
 CHICAGO IL 60603
 FEC ID number of contributing federal political committee. **C C00563072**
 Name of Employer Occupation
 Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date
 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2015
Transaction ID : SA11C.12828
 Amount of Each Receipt this Period
 1000.00
 Primary 2016

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 47 OF 89
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

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

Mailing Address 604 PENNSYLVANIA AVENUE, NW

City State Zip Code
WASHINGTON DC 20004-2601

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 11 / 2015

Transaction ID : SA11C.12369

Amount of Each Receipt this Period
1000.00

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

Mailing Address 604 PENNSYLVANIA AVENUE, NW

City State Zip Code
WASHINGTON DC 20004-2601

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2015

Transaction ID : SA11C.12568

Amount of Each Receipt this Period
2000.00

2016 Primary

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

Mailing Address 8400 WESTPARK DRIVE

City State Zip Code
MCLEAN VA 22102

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 15 / 2015

Transaction ID : SA11C.12324

Amount of Each Receipt this Period
1000.00

2016 US Primary Election

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

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

4000.00

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

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

FOR LINE NUMBER: PAGE 48 OF 89
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

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

Mailing Address 2980 FAIRVIEW PARK DRIVE

City State Zip Code
FALLS CHURCH VA 22042

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
4000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 22 / 2015

Transaction ID : SA11C.12580

Amount of Each Receipt this Period
 2000.00

2016 Primary

B. Full Name (Last, First, Middle Initial)
GENERAL DYNAMICS VOLUNTARY POLITICAL CONTRIBUTION PLAN (GDVPCP)

Mailing Address 2941 FAIRVIEW PARK DR.
SUITE 100

City State Zip Code
FALLS CHURCH VA 22042

FEC ID number of contributing federal political committee. **C C00078451**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 14 / 2015

Transaction ID : SA11C.12310

Amount of Each Receipt this Period
 1000.00

2016 Primary

C. Full Name (Last, First, Middle Initial)
INDEPENDENT COMMUNITY BANKERS OF AMERICA POLITICAL ACTION COMMITTEE

Mailing Address 1615 L STREET, NW
SUITE 900

City State Zip Code
WASHINGTON DC 20036

FEC ID number of contributing federal political committee. **C C00032698**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 18 / 2015

Transaction ID : SA11C.12372

Amount of Each Receipt this Period
 1000.00

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

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

4000.00

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

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

FOR LINE NUMBER: PAGE 49 OF 89
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

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

Mailing Address **2121 CRYSTAL DRIVE
SUITE 100**

City State Zip Code
ARLINGTON VA 22202

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 30 2015

Transaction ID : SA11C.12343

Amount of Each Receipt this Period
1000.00

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

Mailing Address **2121 CRYSTAL DRIVE
SUITE 100**

City State Zip Code
ARLINGTON VA 22202

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date **2000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 19 2015

Transaction ID : SA11C.12351

Amount of Each Receipt this Period
1000.00

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

Mailing Address **2121 CRYSTAL DRIVE
SUITE 100**

City State Zip Code
ARLINGTON VA 22202

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date **3000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 19 2015

Transaction ID : SA11C.12539

Amount of Each Receipt this Period
1000.00

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

3000.00

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

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

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

FOR LINE NUMBER: PAGE 50 OF 89
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

A. MICROSOFT CORPORATION POLITICAL ACTION COMMITTEE
 Full Name (Last, First, Middle Initial)
 Mailing Address 16011 NE 36TH WAY
 BOX 97017
 City REDMOND State WA Zip Code 98073
 FEC ID number of contributing federal political committee. **C C00227546**
 Name of Employer Occupation
 Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 22 / 2015
Transaction ID : SA11C.12577
 Amount of Each Receipt this Period
 2000.00
 2016 Primary

B. MILLERCOORS LLC PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 1501 M STREET NW
 SUITE 330
 City WASHINGTON State DC Zip Code 20005
 FEC ID number of contributing federal political committee. **C C00457697**
 Name of Employer Occupation
 Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 12 / 2015
Transaction ID : SA11C.12347
 Amount of Each Receipt this Period
 1000.00
 2016 Primary

C. MINEPAC, A POLITICAL ACTION COMMITTEE OF THE NATIONAL MINING ASSOCIATION
 Full Name (Last, First, Middle Initial)
 Mailing Address 101 CONSTITUION AVE, NW
 SUITE 500 EAST
 City WASHINGTON State DC Zip Code 20001
 FEC ID number of contributing federal political committee. **C C00304634**
 Name of Employer Occupation
 Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 22 / 2015
Transaction ID : SA11C.12576
 Amount of Each Receipt this Period
 5000.00
 Primary 2016 Mark Amodei

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

8000.00

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

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

FOR LINE NUMBER: PAGE 51 OF 89
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

A. Full Name (Last, First, Middle Initial)
NATIONAL COMMUNITY PHARMACISTS ASSOCIATION - PAC

Mailing Address 100 DAINGERFIELD ROAD

City State Zip Code
ALEXANDRIA VA 22314

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 11 / 2015

Transaction ID : SA11C.12368

Amount of Each Receipt this Period
 1000.00

2016 Primary

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

Mailing Address 300 New Jersey Ave NW

City State Zip Code
WASHINGTON DC 20001

FEC ID number of contributing federal political committee. **C C00507053**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 19 / 2015

Transaction ID : SA11C.12352

Amount of Each Receipt this Period
 1000.00

NV US House Primary ; 2016

C. Full Name (Last, First, Middle Initial)
REAL ESTATE ROUNDTABLE POLITICAL ACTION COMMITTEE (REALPAC)

Mailing Address 801 PENNSYLVANIA AVENUE
SUITE 720

City State Zip Code
WASHINGTON DC 20004

FEC ID number of contributing federal political committee. **C C00033779**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 29 / 2015

Transaction ID : SA11C.12357

Amount of Each Receipt this Period
 1000.00

Primary 2016

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

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

3000.00

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

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

FOR LINE NUMBER: PAGE 52 OF 89
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

A. Full Name (Last, First, Middle Initial)
SAFARI CLUB INTERNATIONAL PAC (SCI-PAC)

Mailing Address 4800 W. GATES PASS ROAD

City State Zip Code
TUCSON AZ 85745

FEC ID number of contributing federal political committee. **C** C00122101

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 22 / 2015

Transaction ID : SA11C.12579

Amount of Each Receipt this Period
 2000.00

B. Full Name (Last, First, Middle Initial)
STATE FARM MUTUAL AUTOMOBILE INSURANCE COMPANY FEDERAL POLITICAL ACTION COMMITTEE

Mailing Address ONE STATE FARM PLAZA
C/O MARK SCHWAMBERGER, TREASURER,

City State Zip Code
BLOOMINGTON IL 61710

FEC ID number of contributing federal political committee. **C** C00544817

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 06 / 2015

Transaction ID : SA11C.12365

Amount of Each Receipt this Period
 1000.00

Rep. Amodei Federal Race NV 2016 Primary

C. Full Name (Last, First, Middle Initial)
THE BOEING COMPANY POLITICAL ACTION COMMITTEE

Mailing Address 1200 WILSON BLVD

City State Zip Code
ARLINGTON VA 22209

FEC ID number of contributing federal political committee. **C** C00142711

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 19 / 2015

Transaction ID : SA11C.12353

Amount of Each Receipt this Period
 1000.00

2016 Primary

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

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

4000.00

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

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

FOR LINE NUMBER: PAGE 53 OF 89
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

A. Full Name (Last, First, Middle Initial)
THE BOEING COMPANY POLITICAL ACTION COMMITTEE

Mailing Address 1200 WILSON BLVD

City ARLINGTON State VA Zip Code 22209

FEC ID number of contributing federal political committee. **C** C00142711

Name of Employer Occupation

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
 06 / 24 / 2015

Transaction ID : SA11C.12515

Amount of Each Receipt this Period
 1000.00

2016 Primary

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

Mailing Address 55 GLENLAKE PARKWAY NE

City ATLANTA State GA Zip Code 30328

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 22 / 2015

Transaction ID : SA11C.12419

Amount of Each Receipt this Period
 2000.00

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).....

3000.00

47200.00

**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 54 OF 89
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input checked="" type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

Full Name (Last, First, Middle Initial) Harveys		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 22 / 2015
Mailing Address 18 Highway 50,		Transaction ID : SA14.12830
City Stalene	State NV	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 224.84 refund of meals & entertainment
Name of Employer	Occupation	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 224.87	

Full Name (Last, First, Middle Initial) Venetian and Palazzo Hotel Casino		Date of Receipt M M / D D / Y Y Y Y Y Y 04 / 24 / 2015
Mailing Address 3325 S. Las Vegas Blvd.		Transaction ID : SA14.12833
City Las Vages	State NV	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 256.09 refund of hotel - travel expense
Name of Employer	Occupation	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 256.09	

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

SUBTOTAL of Receipts This Page (optional).....	480.93
TOTAL This Period (last page this line number only).....	480.93

**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 55 OF 89			
	<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

A. Adele's

Full Name (Last, First, Middle Initial)
Adele's

Mailing Address 1112 North Carson Street

City Carson City State NV Zip Code 89701

Purpose of Disbursement meals & entertainment - campaign expense

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify)

State: District:

Date of Disbursement: 04 / 13 / 2015

Amount of Each Disbursement this Period: 360.00

Transaction ID : SB17.12684

Category/Type: 003

B. Adeles

Full Name (Last, First, Middle Initial)
Adeles

Mailing Address 1112 N Carson St

City Carson City State NV Zip Code 89701

Purpose of Disbursement meals & entertainment - campaign expense

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify)

State: District:

Date of Disbursement: 06 / 23 / 2015

Amount of Each Disbursement this Period: 300.00

Transaction ID : SB17.12640

Category/Type: 003

C. Bill.com

Full Name (Last, First, Middle Initial)
Bill.com

Mailing Address 3200 Ash Street

City Palo Alto State CA Zip Code 94306

Purpose of Disbursement Bank Service Charges

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify)

State: District:

Date of Disbursement: 05 / 07 / 2015

Amount of Each Disbursement this Period: 23.78

Transaction ID : SB17.12786

Category/Type: 001

SUBTOTAL of Disbursements This Page (optional) 683.78

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 56 OF 89		
	<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. Bill.com		Date of Disbursement M M / D D / Y Y Y Y 06 / 08 / 2015
Mailing Address 3200 Ash Street		Amount of Each Disbursement this Period 29.12 Transaction ID : SB17.12787
City Palo Alto	State CA Zip Code 94306	
Purpose of Disbursement Bank Service Charges	Category/Type 001	
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. Capital Grille Washington DC		Date of Disbursement M M / D D / Y Y Y Y 06 / 08 / 2015
Mailing Address 601 Pennsylvania Ave NW		Amount of Each Disbursement this Period 252.00 Transaction ID : SB17.12649
City Washington	State DC Zip Code 20004	
Purpose of Disbursement meals & entertainment - campaign expense	Category/Type 003	
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. Capitol Hill Club		Date of Disbursement M M / D D / Y Y Y Y 04 / 17 / 2015
Mailing Address 300 First Street SE		Amount of Each Disbursement this Period 848.95 Transaction ID : SB17.12682
City Washington	State DC Zip Code 20003	
Purpose of Disbursement meals & entertainment - campaign expense	Category/Type 003	
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).....	1130.07
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 57 OF 89		
	<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. Capitol Hill Club		Date of Disbursement M M / D D / Y Y Y Y 05 / 18 / 2015
Mailing Address 300 First Street SE		Amount of Each Disbursement this Period 286.95 Transaction ID : SB17.12661
City Washington State DC Zip Code 20003	Purpose of Disbursement meals & entertainment - campaign expense Candidate Name Category/Type 003	
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. Capitol Hill Club		Date of Disbursement M M / D D / Y Y Y Y 05 / 18 / 2015
Mailing Address 300 First Street SE		Amount of Each Disbursement this Period 367.50 Transaction ID : SB17.12665
City Washington State DC Zip Code 20003	Purpose of Disbursement meals & entertainment - campaign expense Candidate Name Category/Type 003	
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. Capitol Hill Club		Date of Disbursement M M / D D / Y Y Y Y 06 / 17 / 2015
Mailing Address 300 First Street SE		Amount of Each Disbursement this Period 67.50 Transaction ID : SB17.12643
City Washington State DC Zip Code 20003	Purpose of Disbursement meals & entertainment - campaign expense Candidate Name Category/Type 003	
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).....	721.95
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 58 OF 89			
	<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 04 / 06 / 2015
Mailing Address 503 N Division St		Amount of Each Disbursement this Period 800.00 Transaction ID : SB17.12712
City Carson City	State NV Zip Code 89703	
Purpose of Disbursement Professional Fees - Accounting	Category/Type 001	
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. Danielle Cherry		Date of Disbursement M M / D D / Y Y Y Y 05 / 07 / 2015
Mailing Address 345 Sondrio Way		Amount of Each Disbursement this Period 3352.17 Transaction ID : SB17.12705
City Reno	State NV Zip Code 89521	
Purpose of Disbursement Fundraising Expenses - See Memo	Category/Type 003	
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. Constant Contact		Date of Disbursement M M / D D / Y Y Y Y 06 / 03 / 2015
Mailing Address 1601 Trapelo Road		Amount of Each Disbursement this Period 35.00 Transaction ID : SB17.12719
City Waltham	State MA Zip Code 02451	
Purpose of Disbursement newsletter - advertising expense	Category/Type 004	
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).....	4187.17
TOTAL This Period (last page this line number only).....	

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

Form/Schedule: SB17

Transaction ID : SB17.12705

Invites and postage \$807.17, Commissions 1st Quarter \$2,545

Form/Schedule:

Transaction ID:

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 60 OF 89			
	<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. Delta Air			Date of Disbursement M M / D D / Y Y Y Y 05 / 26 / 2015	
Mailing Address P.O. Box 20706			Amount of Each Disbursement this Period 812.20	
City Atlanda	State GA	Zip Code 30320	Transaction ID : SB17.12799	
Purpose of Disbursement Airfare - Travel Expense		Category/ Type 002		
Candidate Name				
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	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 Air			Date of Disbursement M M / D D / Y Y Y Y 05 / 26 / 2015	
Mailing Address P.O. Box 20706			Amount of Each Disbursement this Period 991.20	
City Atlanda	State GA	Zip Code 30320	Transaction ID : SB17.12800	
Purpose of Disbursement Airfare - Travel Expense		Category/ Type 002		
Candidate Name				
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	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 Air			Date of Disbursement M M / D D / Y Y Y Y 05 / 26 / 2015	
Mailing Address P.O. Box 20706			Amount of Each Disbursement this Period 19.00	
City Atlanda	State GA	Zip Code 30320	Transaction ID : SB17.12801	
Purpose of Disbursement Airfare - Travel Expense		Category/ Type 002		
Candidate Name				
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	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).....	1822.40
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 61 OF 89			
	<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. Delta Air		Date of Disbursement M M / D D / Y Y Y Y 05 / 26 / 2015
Mailing Address P.O. Box 20706		Amount of Each Disbursement this Period 19.00 Transaction ID : SB17.12802
City Atlanta	State GA	
Zip Code 30320	Purpose of Disbursement Airfare - Travel Expense	Category/ Type 002
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. Delta Air		Date of Disbursement M M / D D / Y Y Y Y 05 / 26 / 2015
Mailing Address P.O. Box 20706		Amount of Each Disbursement this Period 19.00 Transaction ID : SB17.12803
City Atlanta	State GA	
Zip Code 30320	Purpose of Disbursement Airfare - Travel Expense	Category/ Type 002
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. Delta Air		Date of Disbursement M M / D D / Y Y Y Y 05 / 26 / 2015
Mailing Address P.O. Box 20706		Amount of Each Disbursement this Period 29.00 Transaction ID : SB17.12804
City Atlanta	State GA	
Zip Code 30320	Purpose of Disbursement Airfare - Travel Expense	Category/ Type 002
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).....	67.00
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 62 OF 89			
	<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. Delta Air		Date of Disbursement M M / D D / Y Y Y Y 05 / 26 / 2015
Mailing Address P.O. Box 20706		Amount of Each Disbursement this Period 49.00
City Atlanta	State GA	
Zip Code 30320	Purpose of Disbursement Airfare - Travel Expense	Transaction ID : SB17.12805
Candidate Name	Category/Type 002	
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. El Dorado Hotel		Date of Disbursement M M / D D / Y Y Y Y 05 / 07 / 2015
Mailing Address PO Box 3399		Amount of Each Disbursement this Period 3372.07
City Reno	State NV	
Zip Code 89505	Purpose of Disbursement Fundraising Expenses - contributor reception 4/2/15	Transaction ID : SB17.12708
Candidate Name	Category/Type 007	
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. Friends in Service Helping		Date of Disbursement M M / D D / Y Y Y Y 05 / 11 / 2015
Mailing Address 138 E. Long Street		Amount of Each Disbursement this Period 500.00
City Carson City	State NV	
Zip Code 89706	Purpose of Disbursement Donation - Have-a-heart celebration June 16	Transaction ID : SB17.12769
Candidate Name	Category/Type 012	
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).....	3921.07
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 63 OF 89			
	<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. FRIENDS OF JOE HECK		Date of Disbursement M M / D D / Y Y Y Y 06 / 29 / 2015
Mailing Address PO BOX 750114		Amount of Each Disbursement this Period 1000.00
City LAS VEGAS	State NV	Zip Code 89136
Purpose of Disbursement Contribution	Category/Type 011	
Candidate Name		Transaction ID : SB17.12822
Office Sought: <input checked="" 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: NV	District: 03	

Full Name (Last, First, Middle Initial) B. FTD.com		Date of Disbursement M M / D D / Y Y Y Y 04 / 23 / 2015
Mailing Address 3113 Woodcreek Drive		Amount of Each Disbursement this Period 120.97
City Downers Grove	State IL	Zip Code 60515
Purpose of Disbursement Thank you flowers - overhead	Category/Type 001	
Candidate Name		Transaction ID : SB17.12781
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. Arturo Garzon		Date of Disbursement M M / D D / Y Y Y Y 05 / 07 / 2015
Mailing Address 1011 Ricco Drive		Amount of Each Disbursement this Period 750.00
City Sparks	State NV	Zip Code 89434
Purpose of Disbursement Consulting - Campaign Coordinator	Category/Type 001	
Candidate Name		Transaction ID : SB17.12812
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).....	1870.97
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 64 OF 89			
	<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. Glen Eagles		Date of Disbursement M M / D D / Y Y Y Y 05 / 11 / 2015
Mailing Address 3700 North Carson Street		Amount of Each Disbursement this Period 60.00
City Carson City	State NV	
Zip Code 89706	Purpose of Disbursement meals & entertainment - campaign expense	Transaction ID : SB17.12669
Candidate Name	Category/ Type 003	
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. Glen Eagles		Date of Disbursement M M / D D / Y Y Y Y 06 / 01 / 2015
Mailing Address 3700 North Carson Street		Amount of Each Disbursement this Period 100.00
City Carson City	State NV	
Zip Code 89706	Purpose of Disbursement meals & entertainment - campaign expense	Transaction ID : SB17.12654
Candidate Name	Category/ Type 003	
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. Gold Country Inn		Date of Disbursement M M / D D / Y Y Y Y 04 / 16 / 2015
Mailing Address 2050 Idaho St		Amount of Each Disbursement this Period 40.00
City Elko	State NV	
Zip Code 89801	Purpose of Disbursement meals & entertainment - contributor relations	Transaction ID : SB17.12791
Candidate Name	Category/ Type 003	
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).....	200.00
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 65 OF 89
	<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. Grand Sierra Resort		Date of Disbursement M M / D D / Y Y Y Y 05 / 28 / 2015
Mailing Address 2500 E Second St		Amount of Each Disbursement this Period 1850.00 Transaction ID : SB17.12657
City Reno	State NV	
Zip Code 89595	Purpose of Disbursement meals & entertainment - campaign expense	Category/ Type 003
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. Harveys		Date of Disbursement M M / D D / Y Y Y Y 06 / 16 / 2015
Mailing Address 18 Highway 50,		Amount of Each Disbursement this Period 224.87 Transaction ID : SB17.12646
City Stateline	State NV	
Zip Code 89449	Purpose of Disbursement meals & entertainment - campaign expense	Category/ Type 003
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. Hawk N Dove		Date of Disbursement M M / D D / Y Y Y Y 06 / 04 / 2015
Mailing Address 329 Pennsylvania Ave SE		Amount of Each Disbursement this Period 135.00 Transaction ID : SB17.12653
City Washington	State DC	
Zip Code 20003	Purpose of Disbursement meals & entertainment - campaign expense	Category/ Type 003
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).....	2209.87
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 66 OF 89			
	<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. Hawk N Dove		Date of Disbursement M M / D D / Y Y Y Y 06 / 09 / 2015
Mailing Address 329 Pennsylvania Ave SE		Amount of Each Disbursement this Period 50.00 Transaction ID : SB17.12647
City Washington State DC Zip Code 20003	Purpose of Disbursement meals & entertainment - campaign expense Category/Type 003	
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. Incline Village GID		Date of Disbursement M M / D D / Y Y Y Y 05 / 29 / 2015
Mailing Address 893 Southwood Blvd		Amount of Each Disbursement this Period 252.80 Transaction ID : SB17.12778
City Incline Village State NV Zip Code 89451	Purpose of Disbursement Promotion - Drink Tahoe tap water bottles Category/Type 004	
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. Kaempfer Crowell Renshaw Gronauer & Fiore		Date of Disbursement M M / D D / Y Y Y Y 05 / 07 / 2015
Mailing Address 8345 West Sunset Road Suite 250		Amount of Each Disbursement this Period 79.00 Transaction ID : SB17.12783
City Las Vegas State NV Zip Code 89113	Purpose of Disbursement Legal Services Category/Type 001	
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).....	381.80
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 67 OF 89		
	<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. Maverik - Carson City		Date of Disbursement M M / D D / Y Y Y Y 04 / 21 / 2015
Mailing Address 1451 College Parkway		Amount of Each Disbursement this Period 51.02
City Carson City	State NV	Zip Code 89706
Purpose of Disbursement gas in lieu of mileage - travel expense	Category/Type 002	
Candidate Name		Transaction ID : SB17.12735
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. Maverik - Carson City		Date of Disbursement M M / D D / Y Y Y Y 05 / 26 / 2015
Mailing Address 1451 College Parkway		Amount of Each Disbursement this Period 39.78
City Carson City	State NV	Zip Code 89706
Purpose of Disbursement gas in lieu of mileage - travel expense	Category/Type 002	
Candidate Name		Transaction ID : SB17.12743
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. Maverik - Dayton		Date of Disbursement M M / D D / Y Y Y Y 06 / 01 / 2015
Mailing Address 2445 Riverboat Rd		Amount of Each Disbursement this Period 93.15
City Dayton	State NV	Zip Code 89403
Purpose of Disbursement gas in lieu of mileage - travel expense	Category/Type 002	
Candidate Name		Transaction ID : SB17.12746
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).....	183.95
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 68 OF 89		
	<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. Maverik - Fallon		Date of Disbursement M M / D D / Y Y Y Y 06 / 01 / 2015
Mailing Address 850 W. Williams Ave.		Amount of Each Disbursement this Period 49.28
City Fallon State NV Zip Code 89406	Purpose of Disbursement gas in lieu of mileage - travel expense	Transaction ID : SB17.12745
Candidate Name	Category/Type 002	
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. Nevada Honor Flight		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2015
Mailing Address PO Box 21123		Amount of Each Disbursement this Period 250.00
City Reno State NV Zip Code 89515	Purpose of Disbursement Donation	Transaction ID : SB17.12771
Candidate Name	Category/Type 012	
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. Nevada Military Support Alliance		Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2015
Mailing Address 985 Damonte Ranch Pkwy		Amount of Each Disbursement this Period 2500.00
City Reno State NV Zip Code 89521	Purpose of Disbursement table of 10 - 4th annual gala	Transaction ID : SB17.12819
Candidate Name	Category/Type 012	
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).....	2799.28
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 69 OF 89			
	<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. Nevada Women in Mining		Date of Disbursement M M / D D / Y Y Y Y 04 / 09 / 2015
Mailing Address PO Box 260246		Amount of Each Disbursement this Period 250.00 Transaction ID : SB17.12766
City Lakewood	State CO	
Zip Code 80226	Purpose of Disbursement Contribution	Category/ Type 011
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. Stacy Parobek		Date of Disbursement M M / D D / Y Y Y Y 05 / 07 / 2015
Mailing Address 4865 Ramcreek Trail		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB17.12813
City Reno	State NV	
Zip Code 89519	Purpose of Disbursement Consulting - Campaign Coordinator	Category/ Type 001
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. Peppermill Resort Spa Casino		Date of Disbursement M M / D D / Y Y Y Y 05 / 18 / 2015
Mailing Address 2707 S. Virginia St.		Amount of Each Disbursement this Period 300.00 Transaction ID : SB17.12666
City Reno	State NV	
Zip Code 89502	Purpose of Disbursement Event Expense - Women for Amodei deposit	Category/ Type 007
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).....	1550.00
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 70 OF 89	
	<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. Peppermill Resort Spa Casino		Date of Disbursement M M / D D / Y Y Y Y 06 / 22 / 2015
Mailing Address 2707 S. Virginia St.		Amount of Each Disbursement this Period 3909.93 Transaction ID : SB17.12777
City Reno State NV Zip Code 89502	Purpose of Disbursement Event Costs - Women for Amodei event Category/Type 007	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. Peppermill Resort Spa Casino		Date of Disbursement M M / D D / Y Y Y Y 06 / 29 / 2015
Mailing Address 2707 S. Virginia St.		Amount of Each Disbursement this Period 227.10 Transaction ID : SB17.12635
City Reno State NV Zip Code 89502	Purpose of Disbursement Event Expense - Women for Amodei Hotel Category/Type 007	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) c. Pinocchio's Bar & Grill		Date of Disbursement M M / D D / Y Y Y Y 05 / 07 / 2015
Mailing Address 5995 S. Virginia Street		Amount of Each Disbursement this Period 75.00 Transaction ID : SB17.12670
City Reno State NV Zip Code 89510	Purpose of Disbursement meals & entertainment - campaign expense Category/Type 003	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	4212.03
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 71 OF 89			
	<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. Senart's Oyster		Date of Disbursement M M / D D / Y Y Y Y 05 / 20 / 2015
Mailing Address 520 8th St SE		Amount of Each Disbursement this Period 1300.00 Transaction ID : SB17.12659
City Washington	State DC Zip Code 20003	
Purpose of Disbursement meals & entertainment - campaign expense		Category/ Type 003
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. Shell - Carson Cty		Date of Disbursement M M / D D / Y Y Y Y 04 / 10 / 2015
Mailing Address Hwy 395		Amount of Each Disbursement this Period 32.28 Transaction ID : SB17.12726
City Carson City	State NV Zip Code 89703	
Purpose of Disbursement gas in lieu of mileage - travel expense		Category/ Type 002
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. Shell - Carson Cty		Date of Disbursement M M / D D / Y Y Y Y 04 / 13 / 2015
Mailing Address Hwy 395		Amount of Each Disbursement this Period 57.94 Transaction ID : SB17.12728
City Carson City	State NV Zip Code 89703	
Purpose of Disbursement gas in lieu of mileage - travel expense		Category/ Type 002
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).....	1390.22
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 72 OF 89			
	<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 04 / 20 / 2015
Mailing Address Hwy 395		Amount of Each Disbursement this Period 35.88
City Carson City	State NV	Zip Code 89703
Purpose of Disbursement gas in lieu of mileage - travel expense	Category/ Type 002	
Candidate Name	Transaction ID : SB17.12733	
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. Shell - Carson Cty		Date of Disbursement M M / D D / Y Y Y Y 04 / 20 / 2015
Mailing Address Hwy 395		Amount of Each Disbursement this Period 40.62
City Carson City	State NV	Zip Code 89703
Purpose of Disbursement gas in lieu of mileage - travel expense	Category/ Type 002	
Candidate Name	Transaction ID : SB17.12734	
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. Shell - Carson Cty		Date of Disbursement M M / D D / Y Y Y Y 05 / 04 / 2015
Mailing Address Hwy 395		Amount of Each Disbursement this Period 79.23
City Carson City	State NV	Zip Code 89703
Purpose of Disbursement gas in lieu of mileage - travel expense	Category/ Type 002	
Candidate Name	Transaction ID : SB17.12739	
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).....	155.73
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 73 OF 89			
	<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 05 / 06 / 2015
Mailing Address Hwy 395		Amount of Each Disbursement this Period 41.28
City Carson City	State NV	Zip Code 89703
Purpose of Disbursement gas in lieu of mileage - travel expense	Category/Type 002	
Candidate Name		Transaction ID : SB17.12738
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. Southwest Airlines		Date of Disbursement M M / D D / Y Y Y Y 04 / 13 / 2015
Mailing Address P.O. Box 36647-1CR		Amount of Each Disbursement this Period 234.00
City Dallas	State TX	Zip Code 73235
Purpose of Disbursement Airfare - Travel Expense	Category/Type 002	
Candidate Name		Transaction ID : SB17.12790
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. Southwest Airlines		Date of Disbursement M M / D D / Y Y Y Y 04 / 22 / 2015
Mailing Address P.O. Box 36647-1CR		Amount of Each Disbursement this Period 234.00
City Dallas	State TX	Zip Code 73235
Purpose of Disbursement Airfare - Travel Expense	Category/Type 002	
Candidate Name		Transaction ID : SB17.12792
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).....	509.28
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 74 OF 89			
	<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. Southwest Airlines		Date of Disbursement M M / D D / Y Y Y Y 04 / 24 / 2015
Mailing Address P.O. Box 36647-1CR		Amount of Each Disbursement this Period 234.00 Transaction ID : SB17.12793
City Dallas	State TX	
Zip Code 73235	Purpose of Disbursement Airfair - Travel Expense	Category/ Type 002
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. Southwest Airlines		Date of Disbursement M M / D D / Y Y Y Y 06 / 15 / 2015
Mailing Address P.O. Box 36647-1CR		Amount of Each Disbursement this Period 191.10 Transaction ID : SB17.12807
City Dallas	State TX	
Zip Code 73235	Purpose of Disbursement Airfare - Travel Expenses	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. Southwest Airlines		Date of Disbursement M M / D D / Y Y Y Y 06 / 19 / 2015
Mailing Address P.O. Box 36647-1CR		Amount of Each Disbursement this Period 252.00 Transaction ID : SB17.12808
City Dallas	State TX	
Zip Code 73235	Purpose of Disbursement Airfair - Travel Expense	Category/ Type 002
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).....	677.10
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 75 OF 89			
	<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. Team Sports Ink			Date of Disbursement M M / D D / Y Y Y Y 04 / 14 / 2015		
Mailing Address 5111 Grumman Dr, Ste 1b			Amount of Each Disbursement this Period 659.65		
City Carson City	State NV	Zip Code 89706	Transaction ID : SB17.12714		
Purpose of Disbursement Customized half-zip jackets		004 Category/ Type			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	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. Team Sports Ink			Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2015		
Mailing Address 5111 Grumman Dr, Ste 1b			Amount of Each Disbursement this Period 3025.82		
City Carson City	State NV	Zip Code 89706	Transaction ID : SB17.12718		
Purpose of Disbursement customized half-zip jackets and softball jerseys		004 Category/ Type			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	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. Team Sports Ink			Date of Disbursement M M / D D / Y Y Y Y 06 / 10 / 2015		
Mailing Address 5111 Grumman Dr, Ste 1b			Amount of Each Disbursement this Period 88.32		
City Carson City	State NV	Zip Code 89706	Transaction ID : SB17.12782		
Purpose of Disbursement Customized Baseball Jersey		004 Category/ Type			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	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).....	3773.79
TOTAL This Period (last page this line number only).....	

: 97 `A-G79 @C B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFHZG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: **SB17**

Transaction ID : **SB17.12817**

Remainder of invoice #3253 for reimbursements from Q1 2014 report, a math error was made on billing. Please see 3/26/15 transaction totalling \$8498.93

Form/Schedule: **SB17**

Transaction ID: **SB17.12702**

Contribution commissions \$1,950.00. Reimbursements -Event Expenses: Food truck DC Slices M St SE Washington DC 20003 \$1104, Glassware rental Just Ask Rental 1323 E St SE Washington DC 20003 \$20.30. Reimbursments - meals & entertainment: Capitol Hill Club 300 First St SE Washington DC 20003 \$45.37. Reimbursements - postage: USPS \$53.00.

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

Form/Schedule: SB17

Transaction ID : SB17.12707

Fundraising commission \$1,125.00. Reimbursement: Cigar reception event expenses - Catering Occasions Caterers 655 Taylor St NE Washington DC 20017 \$1381.70, Event location and staffing W Curtis Draper Tobacconist 699 15th St NW Washington DC 20005 \$1816.26.

Form/Schedule:

Transaction ID:

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 79 OF 89			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

Full Name (Last, First, Middle Initial) A. Twisted Fork			Date of Disbursement MM / DD / YYYY 06 / 23 / 2015	
Mailing Address 1911 Steamboat Pkwy			Amount of Each Disbursement this Period 56.00	
City Reno	State NV	Zip Code 89521	Transaction ID : SB17.12641	
Purpose of Disbursement meals & entertainment - campaign expense		Category/ Type 003		
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. Uber Technologies			Date of Disbursement MM / DD / YYYY 04 / 03 / 2015	
Mailing Address 800 Market St			Amount of Each Disbursement this Period 374.00	
City San Francisco	State CA	Zip Code 94102	Transaction ID : SB17.12789	
Purpose of Disbursement Car Ride - Travel Expense		Category/ Type 002		
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. Uber Technologies			Date of Disbursement MM / DD / YYYY 05 / 04 / 2015	
Mailing Address 800 Market St			Amount of Each Disbursement this Period 10.13	
City San Francisco	State CA	Zip Code 94102	Transaction ID : SB17.12796	
Purpose of Disbursement Car Ride - Travel Expense		Category/ Type 002		
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).....	440.13
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 80 OF 89			
	<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. Uber Technologies		Date of Disbursement M M / D D / Y Y Y Y 06 / 10 / 2015
Mailing Address 800 Market St		Amount of Each Disbursement this Period 9.96 Transaction ID : SB17.12806
City San Francisco	State CA Zip Code 94102	
Purpose of Disbursement Car Ride - Travel Expense	Category/Type 002	
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. Uber Technologies		Date of Disbursement M M / D D / Y Y Y Y 06 / 22 / 2015
Mailing Address 800 Market St		Amount of Each Disbursement this Period 9.93 Transaction ID : SB17.12809
City San Francisco	State CA Zip Code 94102	
Purpose of Disbursement Car Ride - Travel Expense	Category/Type 002	
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. Uber Technologies		Date of Disbursement M M / D D / Y Y Y Y 06 / 29 / 2015
Mailing Address 800 Market St		Amount of Each Disbursement this Period 10.10 Transaction ID : SB17.12810
City San Francisco	State CA Zip Code 94102	
Purpose of Disbursement Car Ride - Travel Expense	Category/Type 002	
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).....	29.99
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 81 OF 89			
	<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. Venetian and Palazzo Hotel Casino			Date of Disbursement M M / D D / Y Y Y Y 04 / 24 / 2015
Mailing Address 3325 S. Las Vegas Blvd.			Amount of Each Disbursement this Period 256.09
City Las Vegas	State NV	Zip Code 89109	Transaction ID : SB17.12794
Purpose of Disbursement Hotel - Travel Expense		Category/ Type 002	
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. Vic Stewart's			Date of Disbursement M M / D D / Y Y Y Y 05 / 04 / 2015
Mailing Address 850 South Broadway			Amount of Each Disbursement this Period 450.00
City Walnut Creek	State CA	Zip Code 94596	Transaction ID : SB17.12673
Purpose of Disbursement meals & entertainment - campaign expense		Category/ Type 003	
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. W. Curtis Draper Fine Tobacconist			Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 2015
Mailing Address 699 15th Street NW			Amount of Each Disbursement this Period 425.12
City Washington	State DC	Zip Code 20005	Transaction ID : SB17.12775
Purpose of Disbursement Event expenses - cigars for reception		Category/ Type 007	
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).....	1131.12
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 82 OF 89	
	<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 05 / 06 / 2015
Mailing Address 3652 South Virginia Street		Amount of Each Disbursement this Period 150.00 Transaction ID : SB17.12773
City Reno State NV Zip Code 89502	Purpose of Disbursement Donation Category/Type 012	
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. Wells Fargo		Date of Disbursement M M / D D / Y Y Y Y 04 / 13 / 2015
Mailing Address PO Box 6995		Amount of Each Disbursement this Period 86.10 Transaction ID : SB17.12749
City Portland State OR Zip Code 97228	Purpose of Disbursement Merchant Fees Category/Type 001	
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. Wells Fargo		Date of Disbursement M M / D D / Y Y Y Y 04 / 13 / 2015
Mailing Address PO Box 6995		Amount of Each Disbursement this Period 81.87 Transaction ID : SB17.12751
City Portland State OR Zip Code 97228	Purpose of Disbursement Merchant Fees Category/Type 001	
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).....	317.97
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 83 OF 89			
	<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 04 / 13 / 2015
Mailing Address PO Box 6995		Amount of Each Disbursement this Period 45.42 Transaction ID : SB17.12752
City Portland	State OR Zip Code 97228	
Purpose of Disbursement Merchant Fees	001	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. Wells Fargo		Date of Disbursement M M / D D / Y Y Y Y 05 / 08 / 2015
Mailing Address PO Box 6995		Amount of Each Disbursement this Period 3.00 Transaction ID : SB17.12756
City Portland	State OR Zip Code 97228	
Purpose of Disbursement Merchant Fees	001	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. Wells Fargo		Date of Disbursement M M / D D / Y Y Y Y 05 / 13 / 2015
Mailing Address PO Box 6995		Amount of Each Disbursement this Period 54.82 Transaction ID : SB17.12757
City Portland	State OR Zip Code 97228	
Purpose of Disbursement Merchant Fees		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).....	103.24
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 84 OF 89			
	<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 05 / 13 / 2015
Mailing Address PO Box 6995		Amount of Each Disbursement this Period 60.92 Transaction ID : SB17.12758
City Portland	State OR	
Zip Code 97228	Purpose of Disbursement Merchant Fees	Category/ Type 001
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. Wells Fargo		Date of Disbursement M M / D D / Y Y Y Y 05 / 13 / 2015
Mailing Address PO Box 6995		Amount of Each Disbursement this Period 53.40 Transaction ID : SB17.12759
City Portland	State OR	
Zip Code 97228	Purpose of Disbursement Merchant Fees	Category/ Type 001
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. Wells Fargo		Date of Disbursement M M / D D / Y Y Y Y 06 / 11 / 2015
Mailing Address PO Box 6995		Amount of Each Disbursement this Period 23.32 Transaction ID : SB17.12761
City Portland	State OR	
Zip Code 97228	Purpose of Disbursement Merchant Fees	Category/ Type 001
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).....	137.64
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 85 OF 89		
	<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 06 / 11 / 2015
Mailing Address PO Box 6995		Amount of Each Disbursement this Period 23.55 Transaction ID : SB17.12762
City Portland State OR Zip Code 97228	Purpose of Disbursement Merchant Fees 001 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. Wells Fargo		Date of Disbursement M M / D D / Y Y Y Y 06 / 11 / 2015
Mailing Address PO Box 6995		Amount of Each Disbursement this Period 52.24 Transaction ID : SB17.12763
City Portland State OR Zip Code 97228	Purpose of Disbursement Merchant Fees 001 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.		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 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	75.79
TOTAL This Period (last page this line number only).....	42349.71

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 86 OF 89			
	<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				

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

Full Name (Last, First, Middle Initial) A. Thomas A Maibenco		Date of Disbursement M M / D D / Y Y Y Y 05 / 22 / 2015
Mailing Address 170 Second St PO Box 140097		Amount of Each Disbursement this Period 2400.00 Transaction ID : SB20A.12815
City Duckwater	State NV	
Zip Code 89314		Category/ Type 010
Purpose of Disbursement refund of contribution		
Candidate Name		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	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		Category/ Type
Purpose of Disbursement		
Candidate Name		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	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		Category/ Type
Purpose of Disbursement		
Candidate Name		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	2400.00
TOTAL This Period (last page this line number only).....	2400.00

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

Form/Schedule: SB20A

Transaction ID : SB20A.12815

Returned contributions as requested by individual: 1/26/15 \$900 and 3/5/15 \$1500. These contributions were reported with Q1 2014.

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 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	Transaction ID : SD10.7593	
<input type="text" value="4500.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="4500.00"/>

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

Outstanding Balance Beginning This Period	Transaction ID : SD10.7279	
<input type="text" value="1500.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="1500.00"/>

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

Outstanding Balance Beginning This Period	Transaction ID : SD10.7284	
<input type="text" value="3000.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="3000.00"/>

1) SUBTOTALS This Period This Page (optional)	<input type="text" value="9000.00"/>
2) TOTALS This Period (last page this line number only)	<input type="text" value="9000.00"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text" value="0.00"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text" value="9000.00"/>

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHZG7 <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: