

# FEC FORM 3

# REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

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

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

2. **FEC IDENTIFICATION NUMBER** ▼ C C00496760 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 M M / D D / Y Y Y Y 05 / 30 / 2011 through M M / D D / Y Y Y Y 06 / 30 / 2011

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.  
Type or Print Name of Treasurer Nicola Neilon  
Signature of Treasurer Nicola Neilon *[Electronically Filed]* Date M M / D D / Y Y Y Y 04 / 15 / 2012

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))....	115691.35	138751.35
(b) Total Contribution Refunds (from Line 20(d)) .....	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	115691.35	138751.35
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	38347.54	40378.34
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	38347.54	40378.34
8. Cash on Hand at Close of Reporting Period (from Line 27).....	99328.66	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	39872.88	

**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).....	77321.35	100121.35
(ii) Unitemized.....	5670.00	5930.00
(iii) TOTAL of contributions from individuals ▶	82991.35	106051.35
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	32700.00	32700.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	115691.35	138751.35
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....	0.00	955.65
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	0.00	0.00
16. <b>TOTAL RECEIPTS</b> (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	115691.35	139707.00

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	38347.54	40378.34
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS .....	0.00	0.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	38347.54	40378.34

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	21984.85
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	115691.35
25. SUBTOTAL (add Line 23 and Line 24).....	137676.20
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	38347.54
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	99328.66

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 OF 48
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

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

**A.** Full Name (Last, First, Middle Initial)  
**Leon Aberasturi**

Mailing Address 1710 Short Oak Ct

City Fernley State NV Zip Code 89408

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

Name of Employer State of Nevada Occupation District Court Judge

Receipt For: 2011  
 Primary  General  
 Other (specify) Special-Primary

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 06 / 2011

**Transaction ID : SA11AI.4331**

Amount of Each Receipt this Period  
 500.00

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

Mailing Address 2961 Conte Dr

City Carson City State NV Zip Code 89701

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

Name of Employer Sierra Veterinary Hospital Occupation Veterinarian

Receipt For: 2011  
 Primary  General  
 Other (specify) Special-General

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 21 / 2011

**Transaction ID : SA11AI.4364**

Amount of Each Receipt this Period  
 500.00

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

Mailing Address 13340 Damonte View

City Reno State NV Zip Code 89511

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

Name of Employer Ed Allison Inc Occupation President

Receipt For: 2011  
 Primary  General  
 Other (specify) Special-Primary

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 18 / 2011

**Transaction ID : SA11AI.4368**

Amount of Each Receipt this Period  
 400.00

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

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

1400.00

**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 48
	<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)  
**Martin Anderson**

Mailing Address 893 MICA DR SUITE 201

City Carson City State NV Zip Code 89705

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

Name of Employer Tahoe Fracture Occupation Orthopedic Surgeon

Receipt For: 2011  
 Primary  General  
 Other (specify) Special-Primary

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 15 / 2011

**Transaction ID : SA11AI.4218**

Amount of Each Receipt this Period  
 1000.00

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

Mailing Address PO Box 2294

City Minden State NV Zip Code 89423

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

Name of Employer RO Anderson Occupation Engineer

Receipt For: 2011  
 Primary  General  
 Other (specify) Special-General

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 27 / 2011

**Transaction ID : SA11AI.4406**

Amount of Each Receipt this Period  
 2500.00

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

Mailing Address 2330 Greensboro Dr

City Reno State NV Zip Code 89509

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

Name of Employer UNR Occupation Adjunct Professor

Receipt For: 2011  
 Primary  General  
 Other (specify) Special-General

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 24 / 2011

**Transaction ID : SA11AI.4432**

Amount of Each Receipt this Period  
 250.00

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

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

3750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 48
	<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)  
**Kathleen Bennett**

Mailing Address **PO Box 311**

City **Silver Springs** State **NV** Zip Code **89429**

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

Name of Employer **Self** Occupation **Airport Manager**

Receipt For: 2011  
 Primary  General  
 Other (specify) **Special-Primary**

Election Cycle-to-Date  
**250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 15 / 2011**

**Transaction ID : SA11AI.4336**

Amount of Each Receipt this Period  
**250.00**

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

Mailing Address **1265 Old Foothill Rd,**

City **Gardnerville** State **NV** Zip Code **89460**

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

Name of Employer **None** Occupation **Retired**

Receipt For: 2011  
 Primary  General  
 Other (specify) **Special-General**

Election Cycle-to-Date  
**250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 14 / 2011**

**Transaction ID : SA11AI.4474**

Amount of Each Receipt this Period  
**50.00**

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

Mailing Address **3440 Cranbrook Way**

City **Reno** State **NV** Zip Code **89519**

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

Name of Employer **Drs Hall and Wrye** Occupation **Nurse**

Receipt For: 2011  
 Primary  General  
 Other (specify) **Special-General**

Election Cycle-to-Date  
**2500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 30 / 2011**

**Transaction ID : SA11AI.4442**

Amount of Each Receipt this Period  
**2500.00**

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

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

**2800.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 48
	<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)  
**John Boyden**

Mailing Address 3440 Cranbrook Way

City State Zip Code  
reno NV 89519

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

Name of Employer Self Occupation Attorney

Receipt For: 2011  
 Primary  General  
 Other (specify) Special-General

Election Cycle-to-Date  
854.70

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 27 / 2011

**Transaction ID : SA11AI.4465**

Amount of Each Receipt this Period  
854.70

In-kind - T shirts

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

Mailing Address 784 Palace Pkwy

City State Zip Code  
Spring Creek NV 89815

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

Name of Employer Elko FCU Occupation CEO

Receipt For: 2011  
 Primary  General  
 Other (specify) Special-General

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 28 / 2011

**Transaction ID : SA11AI.4391**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 7280 Cheltenham Way

City State Zip Code  
Reno NV 89502

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

Name of Employer Dynonemic Diesel Occupation Owner

Receipt For: 2011  
 Primary  General  
 Other (specify) Special-Primary

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 01 / 2011

**Transaction ID : SA11AI.4189**

Amount of Each Receipt this Period  
1000.00

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

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

2104.70



**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 48
	<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)  
**Richard Capurro**

Mailing Address 30 Promontory Pointe

City Reno State NV Zip Code 89519

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

Name of Employer None Occupation Retired

Receipt For: 2011  
 Primary  General  
 Other (specify) Special-Primary

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 16 / 2011

**Transaction ID : SA11AI.4374**

Amount of Each Receipt this Period  
 400.00

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

Mailing Address 550 W. Plumb Ln Ste. B436

City Reno State NV Zip Code 89509

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

Name of Employer El Dorado Hotel Casino Occupation Executive Director

Receipt For: 2011  
 Primary  General  
 Other (specify) Special-Primary

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 06 / 2011

**Transaction ID : SA11AI.4178**

Amount of Each Receipt this Period  
 2400.00

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

Mailing Address PO Box 2540

City Reno State NV Zip Code 89505

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

Name of Employer McDonald Carano and Wilson Occupation Attorney

Receipt For: 2011  
 Primary  General  
 Other (specify) Special-Primary

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 06 / 2011

**Transaction ID : SA11AI.4185**

Amount of Each Receipt this Period  
 2400.00

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

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

5200.00

**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 48
	<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)  
**Gary Carano**

Mailing Address **PO Box 3920**

City **Reno** State **NV** Zip Code **89505**

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

Name of Employer **Silver Legacy Resort** Occupation **General Manager**

Receipt For: 2011  
 Primary  General  
 Other (specify)  Special-Primary

Election Cycle-to-Date  
**1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 06 / 2011**

**Transaction ID : SA11AI.4179**

Amount of Each Receipt this Period  
**1000.00**

**B.** 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: 2011  
 Primary  General  
 Other (specify)  Special-Primary

Election Cycle-to-Date  
**1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 06 / 2011**

**Transaction ID : SA11AI.4180**

Amount of Each Receipt this Period  
**1000.00**

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

Mailing Address **4355 Mountaingate Drive**

City **Reno** State **NV** Zip Code **89519**

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

Name of Employer **El Dorado Hotel and Casino** Occupation **Food and Beverage Manager**

Receipt For: 2011  
 Primary  General  
 Other (specify)  Special-Primary

Election Cycle-to-Date  
**1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 06 / 2011**

**Transaction ID : SA11AI.4181**

Amount of Each Receipt this Period  
**1000.00**

**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 48  
(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)  
**Mary Ellen Cardoza**

Mailing Address 11843 N 91st Way

City State Zip Code  
Scottsdale AZ 85260

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

Name of Employer Occupation  
None Housewife

Receipt For: 2011  
 Primary  General  
 Other (specify) Special-Primary

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 06 / 2011

**Transaction ID : SA11AI.4168**

Amount of Each Receipt this Period  
 2500.00

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

Mailing Address 500 Damonte Ranch Pkwy Ste 980

City State Zip Code  
Reno NV 89521

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

Name of Employer Occupation  
City of Reno Mayor

Receipt For: 2011  
 Primary  General  
 Other (specify) Special-General

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 24 / 2011

**Transaction ID : SA11AI.4452**

Amount of Each Receipt this Period  
 2500.00

**C.** 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: 2011  
 Primary  General  
 Other (specify) Special-General

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2011

**Transaction ID : SA11AI.4440**

Amount of Each Receipt this Period  
 500.00

**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 12 OF 48  
(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)  
**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: 2011  
 Primary  General  
 Other (specify) Special-General

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 28 2011

**Transaction ID : SA11AI.4438**

Amount of Each Receipt this Period  
1000.00

**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: 2011  
 Primary  General  
 Other (specify) Special-General

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 29 2011

**Transaction ID : SA11AI.4439**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**Committee to Elect Pete Livermore**

Mailing Address 4 Raglan Circle,

City State Zip Code  
Carson City NV 89701

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

Name of Employer Occupation

Receipt For: 2011  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 10 2011

**Transaction ID : SA11AI.4354**

Amount of Each Receipt this Period  
500.00

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

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

2000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 48
	<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)  
**David Cox**

Mailing Address 1281 Terminal Way #222

City Reno State NV Zip Code 89502

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

Name of Employer None Occupation Retired

Receipt For: 2011  
 Primary  General  
 Other (specify) Special-General

Election Cycle-to-Date  
 \_\_\_\_\_ 300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 24 / 2011

**Transaction ID : SA11AI.4362**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 200.00

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

Mailing Address 4 E Sunset Wa

City Carson City State NV Zip Code 89730

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

Name of Employer City of Carson City Occupation Mayor

Receipt For: 2011  
 Primary  General  
 Other (specify) Special-Primary

Election Cycle-to-Date  
 \_\_\_\_\_ 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 08 / 2011

**Transaction ID : SA11AI.4349**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 500.00

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

Mailing Address 12500 Sage Hill Rd

City Reno State NV Zip Code 89521

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

Name of Employer D&S Ranches Occupation Ranch Manager

Receipt For: 2011  
 Primary  General  
 Other (specify) Special-Primary

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

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 06 / 2011

**Transaction ID : SA11AI.4175**

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

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

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

\_\_\_\_\_ 1700.00

\_\_\_\_\_

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 48
	<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**

Full Name (Last, First, Middle Initial) <b>A. Perry DiLoreto</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 22 / 2011
Mailing Address 985 Damonte Ranch Pkwy Ste. 310		<b>Transaction ID : SA11AI.4355</b>
City Reno	State NV	
Zip Code 89521	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 716.65
Name of Employer DiLoreto Construction	Occupation Owner	Election Cycle-to-Date 716.65
Receipt For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-General		

Full Name (Last, First, Middle Initial) <b>B. Tom Duncan</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 15 / 2011
Mailing Address 1400 Wolfrun Rd		<b>Transaction ID : SA11AI.4373</b>
City Reno	State NV	
Zip Code 89511	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 400.00
Name of Employer Self Employed	Occupation Business Owner	Election Cycle-to-Date 400.00
Receipt For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-Primary		

Full Name (Last, First, Middle Initial) <b>C. Steve Friedlander</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 30 / 2011
Mailing Address 610 Sierra Rose Drive		<b>Transaction ID : SA11AI.4420</b>
City Reno	State NV	
Zip Code 89511	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 1000.00
Name of Employer NEvada Retina	Occupation Physician	Election Cycle-to-Date 1000.00
Receipt For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-General		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2116.65
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 48
	<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)  
**Bruce Gescheider**

Mailing Address 14250 Sorrel Lane

City Reno State NV Zip Code 89511

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

Name of Employer Moana Nursery Occupation Business Owner

Receipt For: 2011  
 Primary  General  
 Other (specify) Special-General

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2011

**Transaction ID : SA11AI.4415**

Amount of Each Receipt this Period  
 1000.00

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

Mailing Address 14250 Sorrel Lane

City Reno State NV Zip Code 89511

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

Name of Employer Moana Nursery Occupation Business Owner

Receipt For: 2011  
 Primary  General  
 Other (specify) Special-General

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2011

**Transaction ID : SA11AI.4419**

Amount of Each Receipt this Period  
 1000.00

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

Mailing Address 2915 Granite Pointe Dr

City Reno State NV Zip Code 89511

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

Name of Employer Hartman and Hartman Occupation Attorney

Receipt For: 2011  
 Primary  General  
 Other (specify) Special-Primary

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 21 / 2011

**Transaction ID : SA11AI.4363**

Amount of Each Receipt this Period  
 2400.00

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

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

4400.00

**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 16 OF 48
	<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 Hartman**

Mailing Address 2915 Granite Pointe Dr

City Reno State NV Zip Code 89511

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

Name of Employer Hartman and Hartman Occupation Attorney

Receipt For: 2011  
 Primary  General  
 Other (specify) Special-General

Election Cycle-to-Date  
2600.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 21 / 2011

**Transaction ID : SA11AI.4376**

Amount of Each Receipt this Period  
200.00

**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: 2011  
 Primary  General  
 Other (specify) Special-General

Election Cycle-to-Date  
3500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 06 / 2011

**Transaction ID : SA11AI.4170**

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: 2011  
 Primary  General  
 Other (specify) Special-General

Election Cycle-to-Date  
3700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 21 / 2011

**Transaction ID : SA11AI.4365**

Amount of Each Receipt this Period  
200.00

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

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

1400.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 48
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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

**A.** 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: 2011  
 Primary  General  
 Other (specify) Special-General

Election Cycle-to-Date  
4700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 27 / 2011

**Transaction ID : SA11AI.4447**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address PO Box 97413

City Las Vegas State NV Zip Code 89193

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

Name of Employer The Gun Store Occupation Retail

Receipt For: 2011  
 Primary  General  
 Other (specify) Special-Primary

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 06 / 2011

**Transaction ID : SA11AI.4187**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 393 Bret Harte Ave

City Reno State NV Zip Code 89509

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

Name of Employer Farmers Occupation Insurance

Receipt For: 2011  
 Primary  General  
 Other (specify) Special-General

Election Cycle-to-Date  
400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 21 / 2011

**Transaction ID : SA11AI.4370**

Amount of Each Receipt this Period  
400.00

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

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

1900.00

**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 18 OF 48
	<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)  
**John LaGatta**

Mailing Address 50 West Liberty St. Suite 1080

City	State	Zip Code
Reno	NV	89501

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

Name of Employer	Occupation
Self	Investments

Receipt For: 2011  
 Primary  General  
 Other (specify) Special-General

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 28 / 2011

**Transaction ID : SA11AI.4453**

Amount of Each Receipt this Period

2500.00

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

Mailing Address 1475 Hymer Avenue

City	State	Zip Code
Sparks	NV	89431

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

Name of Employer	Occupation
Frank Lepori Construction	Owner

Receipt For: 2011  
 Primary  General  
 Other (specify) Special-General

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2011

**Transaction ID : SA11AI.4443**

Amount of Each Receipt this Period

2500.00

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

Mailing Address 1550 Circle Dr

City	State	Zip Code
Reno	NV	89509

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

Name of Employer	Occupation
EIDorado Hotel	ED of Admin

Receipt For: 2011  
 Primary  General  
 Other (specify) Special-General

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 29 / 2011

**Transaction ID : SA11AI.4444**

Amount of Each Receipt this Period

500.00

**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: (check only one)	PAGE 19 OF 48
	<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)  
**Andy Mackenzie**

Mailing Address **PO Box 646**

City **Carson City** State **NV** Zip Code **89702**

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

Name of Employer **Allison Mackenzie** Occupation **Attorney**

Receipt For: 2011  
 Primary  General  
 Other (specify) **Special-General**

Election Cycle-to-Date  
**333.33**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 21 / 2011**

**Transaction ID : SA11AI.4384**

Amount of Each Receipt this Period  
**333.33**

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

Mailing Address **PO Box 646**

City **Carson City** State **NV** Zip Code **89702**

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

Name of Employer **Allison Mackenzie** Occupation **Attorney**

Receipt For: 2011  
 Primary  General  
 Other (specify) **Special-General**

Election Cycle-to-Date  
**333.34**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 21 / 2011**

**Transaction ID : SA11AI.4385**

Amount of Each Receipt this Period  
**333.34**

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

Mailing Address **245 Sierra Country Circle**

City **Gardnerville** State **NV** Zip Code **89460**

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

Name of Employer **EIDorado Hospitality LLC** Occupation **Owner**

Receipt For: 2011  
 Primary  General  
 Other (specify) **Special-Primary**

Election Cycle-to-Date  
**500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 14 / 2011**

**Transaction ID : SA11AI.4393**

Amount of Each Receipt this Period  
**500.00**

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

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

**1166.67**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 48
	<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)  
**John McLaughlin**

Mailing Address 566 Rt 303

City State Zip Code  
Blauvelt NY 10913

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

Name of Employer Occupation  
McLaughlin and Associates Consultant

Receipt For: 2011  
 Primary  General  
 Other (specify) Special-General

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 22 / 2011

**Transaction ID : SA11AI.4358**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 2527 Aviation Way

City State Zip Code  
Minden NV 89423

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

Name of Employer Occupation  
RAMAC Industries Owner

Receipt For: 2011  
 Primary  General  
 Other (specify) Special-Primary

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 07 / 2011

**Transaction ID : SA11AI.4334**

Amount of Each Receipt this Period  
500.00

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

Mailing Address PO Box 7042

City State Zip Code  
Reno NV 89510

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

Name of Employer Occupation  
Fundis Company Owner

Receipt For: 2011  
 Primary  General  
 Other (specify) Special-General

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 27 / 2011

**Transaction ID : SA11AI.4449**

Amount of Each Receipt this Period  
500.00

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

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

1500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 48
	<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)  
**Robert Mouchou**

Mailing Address **PO Box 3399**

City **Reno** State **NV** Zip Code **89505**

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

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

Receipt For: 2011  
 Primary  General  
 Other (specify) **Special-Primary**

Election Cycle-to-Date  
**250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 06 / 2011**

**Transaction ID : SA11AI.4182**

Amount of Each Receipt this Period  
**250.00**

**B.** 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: 2011  
 Primary  General  
 Other (specify) **Special-General**

Election Cycle-to-Date  
**1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 23 / 2011**

**Transaction ID : SA11AI.4430**

Amount of Each Receipt this Period  
**1000.00**

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

Mailing Address **2298 Cheshire Village Ct**

City **Henderson** State **NV** Zip Code **89052**

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

Name of Employer **None** Occupation **retired**

Receipt For: 2011  
 Primary  General  
 Other (specify) **Special-General**

Election Cycle-to-Date  
**1500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 27 / 2011**

**Transaction ID : SA11AI.4434**

Amount of Each Receipt this Period  
**1500.00**

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

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

**2750.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 48
	<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)  
**Joan Patrick**

Mailing Address 2298 Cheshire Village Ct

City Henderson State NV Zip Code 89052

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

Name of Employer None Occupation Retired

Receipt For: 2011  
 Primary  General  
 Other (specify) Special-General

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 27 / 2011

**Transaction ID : SA11AI.4435**

Amount of Each Receipt this Period  
 1500.00

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

Mailing Address 2150 Candlerock Ct

City Reno State NV Zip Code 89523

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

Name of Employer ERGS Inc Occupation RE Developer

Receipt For: 2011  
 Primary  General  
 Other (specify) Special-General

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 28 / 2011

**Transaction ID : SA11AI.4448**

Amount of Each Receipt this Period  
 500.00

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

Mailing Address 60 Sheldon Pl

City Washoe Valley State NV Zip Code 89704

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

Name of Employer Bodines Casino Occupation Owner

Receipt For: 2011  
 Primary  General  
 Other (specify) Special-Primary

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 06 / 2011

**Transaction ID : SA11AI.4174**

Amount of Each Receipt this Period  
 2500.00

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

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

4500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 48
	<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)  
**Timothy Pegram**

Mailing Address 10645 Blue Moon Ct

City Reno State NV Zip Code 89521

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

Name of Employer Bodines Casino Occupation Marketing Executive

Receipt For: 2011  
 Primary  General  
 Other (specify) Special-Primary

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 06 / 2011

**Transaction ID : SA11AI.4169**

Amount of Each Receipt this Period  
2500.00

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

Mailing Address PO Box 1710

City Gardnerville State NV Zip Code 89410

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

Name of Employer Moore McIennan Occupation Attorney

Receipt For: 2011  
 Primary  General  
 Other (specify) Special-Primary

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 13 / 2011

**Transaction ID : SA11AI.4410**

Amount of Each Receipt this Period  
500.00

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

Mailing Address PO Box 1710

City Gardnerville State NV Zip Code 89410

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

Name of Employer None Occupation Self Employed

Receipt For: 2011  
 Primary  General  
 Other (specify) Special-Primary

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 13 / 2011

**Transaction ID : SA11AI.4481**

Amount of Each Receipt this Period  
500.00

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

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

3500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 48
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

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

**A.** Full Name (Last, First, Middle Initial)  
**Rachel Primm**

Mailing Address 5100 Franktown Rd.

City Reno	State NV	Zip Code 89704
--------------	-------------	-------------------

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

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

Receipt For: 2011  
 Primary  General  
 Other (specify) Special-Primary

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 06 / 2011

**Transaction ID : SA11AI.4184**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 5100 Franktown Rd.

City Carson City	State NV	Zip Code 89704
---------------------	-------------	-------------------

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

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

Receipt For: 2011  
 Primary  General  
 Other (specify) Special-Primary

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 06 / 2011

**Transaction ID : SA11AI.4183**

Amount of Each Receipt this Period  
2000.00

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

Mailing Address 3205 Sonia Dr.

City Las Vegas	State NV	Zip Code 89107
-------------------	-------------	-------------------

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

Name of Employer Puliz	Occupation Owner
---------------------------	---------------------

Receipt For: 1000  
 Primary  General  
 Other (specify) Special-General

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2011

**Transaction ID : SA11AI.4416**

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: (check only one)	PAGE 25 OF 48
	<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**

Full Name (Last, First, Middle Initial) <b>A. Bob Quilici</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 16 / 2011
Mailing Address 7810 Lakeside Dr		<b>Transaction ID : SA11AI.4371</b>
City Reno	State NV	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 400.00
Name of Employer Retired	Occupation None	
Receipt For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-Primary	Election Cycle-to-Date 400.00	

Full Name (Last, First, Middle Initial) <b>B. Richard Reviglio</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 06 / 2011
Mailing Address 950 S Rock Blvd		<b>Transaction ID : SA11AI.4176</b>
City Sparks	State NV	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Western Nevada Supply	Occupation General Manager	
Receipt For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-Primary	Election Cycle-to-Date 1000.00	

Full Name (Last, First, Middle Initial) <b>C. Thomas Reviglio</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 01 / 2011
Mailing Address PO Box 18768		<b>Transaction ID : SA11AI.4186</b>
City Sparks	State NV	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer None	Occupation Retired	
Receipt For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-Primary	Election Cycle-to-Date 1000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2400.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 48
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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

**A.** 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: 2011  
 Primary  General  
 Other (specify) Special-Primary

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 07 / 2011

**Transaction ID : SA11AI.4333**

Amount of Each Receipt this Period  
 500.00

**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: 2011  
 Primary  General  
 Other (specify) Special-Primary

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 14 / 2011

**Transaction ID : SA11AI.4345**

Amount of Each Receipt this Period  
 500.00

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

Mailing Address PO Box 646

City Carson City State NV Zip Code 89702

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

Name of Employer Allison Mackenzie Occupation Attorney

Receipt For: 2011  
 Primary  General  
 Other (specify) Special-General

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 21 / 2011

**Transaction ID : SA11AI.4383**

Amount of Each Receipt this Period  
 333.33

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

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

1333.33

**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 48
	<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)  
**Ann Searles**

Mailing Address 2310 West Windsong

City Pahrump State NV Zip Code 89048

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

Name of Employer: Armor Inc Occupation: Property Management

Receipt For: 2011  
 Primary  General  
 Other (specify) Special-General

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 28 / 2011

**Transaction ID : SA11AI.4386**

Amount of Each Receipt this Period  
 1000.00

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

Mailing Address 2460 W. Marlin Dr

City Chandler State AZ Zip Code 85286

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

Name of Employer: none Occupation: none

Receipt For: 2011  
 Primary  General  
 Other (specify) Special-Primary

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 06 / 2011

**Transaction ID : SA11AI.4171**

Amount of Each Receipt this Period  
 2500.00

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

Mailing Address 1554 W. Yellowstone Wy

City Chandler State AZ Zip Code 85248

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

Name of Employer: Slaypeg, LLC Occupation: Member

Receipt For: 2011  
 Primary  General  
 Other (specify) Special-Primary

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 06 / 2011

**Transaction ID : SA11AI.4172**

Amount of Each Receipt this Period  
 2500.00

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

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

6000.00

**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 28 OF 48
	<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)  
**Yolanda Smith**

Mailing Address 2101 Twin Falls Dr.

City Henderson State NV Zip Code 89044

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

Name of Employer Retired Occupation Retired

Receipt For: 2011  
 Primary  General  
 Other (specify) Special-Primary

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 06 / 2011

**Transaction ID : SA11AI.4188**

Amount of Each Receipt this Period  
 500.00

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

Mailing Address 12785 Silver Wolf Rd

City Reno State NV Zip Code 89511

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

Name of Employer Chamion Chevrolet Occupation Auto Dealer

Receipt For: 2011  
 Primary  General  
 Other (specify) Special-General

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 27 / 2011

**Transaction ID : SA11AI.4450**

Amount of Each Receipt this Period  
 2500.00

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

Mailing Address 2485 Deer Valley Dr.

City REno State NV Zip Code 89511

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

Name of Employer El Dorado Hotel Casino Occupation Director of Player Development

Receipt For: 2011  
 Primary  General  
 Other (specify) Special-Primary

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 06 / 2011

**Transaction ID : SA11AI.4177**

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: (check only one)	PAGE 29 OF 48
	<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)  
**Ken Tedford**

Mailing Address **PO Box 1330**

City **Fallon** State **NV** Zip Code **89407**

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

Name of Employer **Tedford Tire** Occupation **Owner**

Receipt For: 2011  
 Primary  General  
 Other (specify) **Special-General**

Election Cycle-to-Date  
**500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 28 / 2011**

**Transaction ID : SA11AI.4426**

Amount of Each Receipt this Period  
**500.00**

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

Mailing Address **2072 Ruby View Drive**

City **Elko** State **NV** Zip Code **89801**

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

Name of Employer **McMullen Insurance Agency** Occupation **Insurnace**

Receipt For: 2011  
 Primary  General  
 Other (specify) **Special-General**

Election Cycle-to-Date  
**250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 28 / 2011**

**Transaction ID : SA11AI.4388**

Amount of Each Receipt this Period  
**250.00**

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

Mailing Address **800 Redfield Pkwy Apt 147**

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

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

Name of Employer **Bronco Billys Saloon** Occupation **Owner**

Receipt For: 2011  
 Primary  General  
 Other (specify) **Special-General**

Election Cycle-to-Date  
**400.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 21 / 2011**

**Transaction ID : SA11AI.4378**

Amount of Each Receipt this Period  
**400.00**

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

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

**1150.00**

**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 48
	<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)  
**Jeff Waufle**

Mailing Address 6029 Daisy Run Ct

City Las Vegas State NV Zip Code 89120

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

Name of Employer Las Vegas Valley Water Distric Occupation IT Technicla Supervisor

Receipt For: 2011  
 Primary  General  
 Other (specify) Special-Primary

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 16 / 2011

**Transaction ID : SA11AI.4339**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 2857 La Mirada Ct

City Minden State NV Zip Code 89423

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

Name of Employer Carson Valley Inn Occupation Carson Valley Inn

Receipt For: 2500  
 Primary  General  
 Other (specify) Special-Primary

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 06 / 2011

**Transaction ID : SA11AI.4165**

Amount of Each Receipt this Period  
2500.00

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

Mailing Address 550 W. Plumb Lane B436

City Reno State NV Zip Code 89509

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

Name of Employer None Occupation Student

Receipt For: 2011  
 Primary  General  
 Other (specify) Special-General

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2011

**Transaction ID : SA11AI.4417**

Amount of Each Receipt this Period  
250.00

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

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

3000.00

77321.35

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

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

FOR LINE NUMBER: PAGE 31 OF 48  
(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)  
**BARRICK GOLD OF NORTH AMERICA INC. EMPLOYEES PAF**

Mailing Address 136 E. SOUTH TEMPLE ST.  
SUITE 1300

City State Zip Code  
SALT LAKE CITY UT 84111

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

Name of Employer Occupation

Receipt For: 2011  
 Primary  General  
 Other (specify) Special-General

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 28 / 2011

**Transaction ID : SA11C.4400**

Amount of Each Receipt this Period  
 5000.00

**B.** Full Name (Last, First, Middle Initial)  
**Caesars Entertainment Political Action Committee**

Mailing Address One Caesars Palace Drive

City State Zip Code  
Las Vegas NV 89109

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

Name of Employer Occupation

Receipt For: 2011  
 Primary  General  
 Other (specify) Special-General

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 22 / 2011

**Transaction ID : SA11C.4424**

Amount of Each Receipt this Period  
 2500.00

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

Mailing Address PO BOX 365

City State Zip Code  
MCLEAN VA 22101

FEC ID number of contributing federal political committee. **C C00461145**

Name of Employer Occupation

Receipt For: 2011  
 Primary  General  
 Other (specify) Special-General

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 24 / 2011

**Transaction ID : SA11C.4427**

Amount of Each Receipt this Period  
 200.00

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

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

7700.00

**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 32 OF 48
	<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)  
**EVERY REPUBLICAN IS CRUCIAL (ERICPAC)**

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

City **RICHMOND** State **VA** Zip Code **23219**

FEC ID number of contributing federal political committee. **C C00384701**

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For: 2011  
 Primary  General  
 Other (specify) **Special-General**

Election Cycle-to-Date  
 \_\_\_\_\_ **5000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 28 / 2011**

**Transaction ID : SA11C.4390**

Amount of Each Receipt this Period  
 \_\_\_\_\_ **5000.00**

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

Mailing Address **3355 LAS VEGAS BLVD SOUTH**

City **LAS VEGAS** State **NV** Zip Code **89109**

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

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For: 2011  
 Primary  General  
 Other (specify) **Special-General**

Election Cycle-to-Date  
 \_\_\_\_\_ **5000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 29 / 2011**

**Transaction ID : SA11C.4428**

Amount of Each Receipt this Period  
 \_\_\_\_\_ **5000.00**

**C.** Full Name (Last, First, Middle Initial)  
**MAJORITY COMMITTEE PAC--MC PAC**

Mailing Address **P.O. BOX 10134**

City **BAKERSFIELD** State **CA** Zip Code **93389**

FEC ID number of contributing federal political committee. **C C00428052**

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For: 5000  
 Primary  General  
 Other (specify) **Special-General**

Election Cycle-to-Date  
 \_\_\_\_\_ **5000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 30 / 2011**

**Transaction ID : SA11C.4401**

Amount of Each Receipt this Period  
 \_\_\_\_\_ **5000.00**

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

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

\_\_\_\_\_ **15000.00**

\_\_\_\_\_



**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 33 OF 48
	<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)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

Mailing Address 320 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

FEC ID number of contributing federal political committee. **C** C00075820

Name of Employer Occupation

Receipt For: 2011  
 Primary  General  
 Other (specify) Special-General

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2011

**Transaction ID : SA11C.4403**

Amount of Each Receipt this Period  
 5000.00

**B.** Full Name (Last, First, Middle Initial)  
**PEOPLE FOR ENTERPRISE TRADE AND ECONOMIC GROWTH (PETE PAC)**

Mailing Address 7804 EVENING LANE

City ALEXANDRIA State VA Zip Code 22306

FEC ID number of contributing federal political committee. **C** C00363770

Name of Employer Occupation

Receipt For: 2011  
 Primary  General  
 Other (specify) Special-General

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 28 / 2011

**Transaction ID : SA11C.4402**

Amount of Each Receipt this Period  
 5000.00

**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).....

10000.00

32700.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 34 OF 48	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. Allegra Print and Imaging</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2011
Mailing Address 5301 Longley Lane		Amount of Each Disbursement this Period 3277.95 <b>Transaction ID : SB17.4517</b>
City Reno	State NV	
Zip Code 89511	Purpose of Disbursement Printing - business cards, letterhead, stickers and envelopes	Category/ Type 006
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2011	<input type="checkbox"/> Primary <input type="checkbox"/> General	
<input checked="" type="checkbox"/> Other (specify) Special-Primary	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Mark Eugene Amodei</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 07 / 2011
Mailing Address 503 W Sunset		Amount of Each Disbursement this Period 909.62 <b>Transaction ID : SB17.4525</b>
City Carson City	State NV	
Zip Code 89703	Purpose of Disbursement Reimbursement for campaign travel expenses	Category/ Type 002
Candidate Name	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2011	<input type="checkbox"/> Primary <input type="checkbox"/> General	
<input checked="" type="checkbox"/> Other (specify) Special-Primary	State: NV District: 02	

Full Name (Last, First, Middle Initial) <b>c. Biggest Little Investments</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 21 / 2011
Mailing Address 3702 S Virginia		Amount of Each Disbursement this Period 1062.50 <b>Transaction ID : SB17.4509</b>
City Reno	State NV	
Zip Code 89502	Purpose of Disbursement Rent - campaign office	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2011	<input type="checkbox"/> Primary <input type="checkbox"/> General	
<input checked="" type="checkbox"/> Other (specify) Special-General	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3277.95
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 35 OF 48	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. John Boyden</b>		Date of Disbursement M M / D D / Y Y Y Y <b>06 / 27 / 2011</b>
Mailing Address <b>3440 Cranbrook Way</b>		Amount of Each Disbursement this Period <b>854.70</b>
City <b>reno</b> State <b>NV</b> Zip Code <b>89519</b>	Purpose of Disbursement <b>In-kind - T shirts</b>	<b>Transaction ID : SB17.4466</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <b>Special-General</b>	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Christopher Blanton Productions</b>		Date of Disbursement M M / D D / Y Y Y Y <b>06 / 01 / 2011</b>
Mailing Address <b>7305 Lakeside Drive</b>		Amount of Each Disbursement this Period <b>790.00</b>
City <b>Reni</b> State <b>NV</b> Zip Code <b>89511</b>	Purpose of Disbursement <b>Video shoot and editing for web based video</b>	<b>Transaction ID : SB17.4523</b>
Candidate Name	Category/Type <b>004</b>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <b>Special-Primary</b>	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Digiprint</b>		Date of Disbursement M M / D D / Y Y Y Y <b>06 / 06 / 2011</b>
Mailing Address <b>4865 L Ongley Lane</b>		Amount of Each Disbursement this Period <b>312.41</b>
City <b>Reno</b> State <b>NV</b> Zip Code <b>89502</b>	Purpose of Disbursement <b>Brochure printing</b>	<b>Transaction ID : SB17.4527</b>
Candidate Name	Category/Type <b>006</b>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <b>Special-Primary</b>	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>1957.11</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 48			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

Full Name (Last, First, Middle Initial) <b>A. El Dorado Hotel</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 06 / 2011	
Mailing Address PO Box 3399			Amount of Each Disbursement this Period 437.04	
City Reno	State NV	Zip Code 89505	Transaction ID : SB17.4519	
Purpose of Disbursement Hotel charges		Category/ Type 002		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-Primary			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. El Dorado Hotel</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 08 / 2011	
Mailing Address PO Box 3399			Amount of Each Disbursement this Period 471.06	
City Reno	State NV	Zip Code 89505	Transaction ID : SB17.4526	
Purpose of Disbursement Hotel charges		Category/ Type 002		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-Primary			
State: District:				

Full Name (Last, First, Middle Initial) <b>c. Grass Roots 2.0</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 01 / 2011	
Mailing Address PO Box 19553			Amount of Each Disbursement this Period 245.39	
City Reno	State NV	Zip Code 89511	Transaction ID : SB17.4521	
Purpose of Disbursement Automated calling costs		Category/ Type 003		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-Primary			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1153.49
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 48			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

Full Name (Last, First, Middle Initial) <b>A. John Ascuaga's Nugget</b>		Date of Disbursement M M / D D / Y Y Y Y <b>06 / 23 / 2011</b>
Mailing Address 1100 Nugget Ave		Amount of Each Disbursement this Period <b>2130.46</b>
City Sparks State NV Zip Code 89431	Purpose of Disbursement Hotel costs	<b>007</b> Category/Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-Primary
State: District:		

Transaction ID : SB17.4544

Full Name (Last, First, Middle Initial) <b>B. Las Vegas Color graphics</b>		Date of Disbursement M M / D D / Y Y Y Y <b>06 / 13 / 2011</b>
Mailing Address 4265 West Sunset		Amount of Each Disbursement this Period <b>217.36</b>
City Las Vegas State NV Zip Code 89118	Purpose of Disbursement Postage for campaign mailing	<b>006</b> Category/Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-Primary
State: District:		

Transaction ID : SB17.4532

Full Name (Last, First, Middle Initial) <b>c. Marketing Communications Services Inc</b>		Date of Disbursement M M / D D / Y Y Y Y <b>06 / 29 / 2011</b>
Mailing Address 58 Maiden Lane		Amount of Each Disbursement this Period <b>13000.00</b>
City San Francisco State CA Zip Code 94108	Purpose of Disbursement TV Broadcast Production	<b>004</b> Category/Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-General
State: District:		

Transaction ID : SB17.4555

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>15347.82</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 48		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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

Full Name (Last, First, Middle Initial) <b>A. McLaughlin and Associates</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 16 / 2011
Mailing Address 566 South Route 303		Amount of Each Disbursement this Period 3000.00 <b>Transaction ID : SB17.4539</b>
City Blauvelt	State NY	
Zip Code 10913	Purpose of Disbursement Media Buy	Category/ Type 004
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2011	State: District:	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input checked="" type="checkbox"/> Other (specify) Special-General	

Full Name (Last, First, Middle Initial) <b>B. McLaughlin and Associates</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 24 / 2011
Mailing Address 566 South Route 303		Amount of Each Disbursement this Period 3000.00 <b>Transaction ID : SB17.4548</b>
City Blauvelt	State NY	
Zip Code 10913	Purpose of Disbursement Media Buy	Category/ Type 004
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2011	State: District:	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input checked="" type="checkbox"/> Other (specify) Special-General	

Full Name (Last, First, Middle Initial) <b>c. Panevino</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 02 / 2011
Mailing Address 246 Via Antonio		Amount of Each Disbursement this Period 969.38 <b>Transaction ID : SB17.4511</b>
City Las Vegas	State NV	
Zip Code 89119	Purpose of Disbursement Restaurant charges - fundraising event	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2011	State: District:	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input checked="" type="checkbox"/> Other (specify) Special-Primary	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	6969.38
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 48			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

Full Name (Last, First, Middle Initial) <b>A. September Inc</b>		Date of Disbursement M M / D D / Y Y Y Y <b>06 / 06 / 2011</b>
Mailing Address <b>5940 S Rainbow Blvd</b>		Amount of Each Disbursement this Period <b>667.00</b>
City <b>Las Vegas</b>	State <b>NV</b>	Zip Code <b>89118</b>
Purpose of Disbursement <b>Voter calls</b>	Category/Type <b>005</b>	
Candidate Name	Transaction ID : <b>SB17.4530</b>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <b>2011</b> <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <b>Special-Primary</b>	
State: _____ District: _____		

Full Name (Last, First, Middle Initial) <b>B. September Inc</b>		Date of Disbursement M M / D D / Y Y Y Y <b>06 / 06 / 2011</b>
Mailing Address <b>5940 S Rainbow Blvd</b>		Amount of Each Disbursement this Period <b>2900.00</b>
City <b>Las Vegas</b>	State <b>NV</b>	Zip Code <b>89118</b>
Purpose of Disbursement <b>Retainer - Political consultant</b>	Category/Type <b>001</b>	
Candidate Name	Transaction ID : <b>SB17.4531</b>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <b>2011</b> <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <b>Special-Primary</b>	
State: _____ District: _____		

Full Name (Last, First, Middle Initial) <b>c. September Inc</b>		Date of Disbursement M M / D D / Y Y Y Y <b>06 / 10 / 2011</b>
Mailing Address <b>5940 S Rainbow Blvd</b>		Amount of Each Disbursement this Period <b>2484.00</b>
City <b>Las Vegas</b>	State <b>NV</b>	Zip Code <b>89118</b>
Purpose of Disbursement <b>Voter calls</b>	Category/Type <b>001</b>	
Candidate Name	Transaction ID : <b>SB17.4533</b>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <b>2011</b> <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <b>Special-Primary</b>	
State: _____ District: _____		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>6051.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 40 OF 48	
	<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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

Full Name (Last, First, Middle Initial) <b>A. Silver Bullet Group Inc</b>		Date of Disbursement MM / DD / YYYY 06 / 06 / 2011
Mailing Address 101 Convention Center Drive Suite 700		Amount of Each Disbursement this Period 381.40 <b>Transaction ID : SB17.4529</b>
City Las Vegas	State NV Zip Code 89109	
Purpose of Disbursement Airfare - S Wark	Category/Type 002	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-Primary	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Silver Bullet Group Inc</b>		Date of Disbursement MM / DD / YYYY 06 / 09 / 2011
Mailing Address 101 Convention Center Drive Suite 700		Amount of Each Disbursement this Period 500.00 <b>Transaction ID : SB17.4536</b>
City Las Vegas	State NV Zip Code 89109	
Purpose of Disbursement Reimburse for deposit on Panevino (catering for fundraising event)	Category/Type 007	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-Primary	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Southwest Airlines</b>		Date of Disbursement MM / DD / YYYY 06 / 03 / 2011
Mailing Address P.O. Box 36647-1CR		Amount of Each Disbursement this Period 381.40 <b>Transaction ID : SB17.4515</b>
City Dallas	State TX Zip Code 73235	
Purpose of Disbursement Travel costs - campaign activity	Category/Type 002	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-Primary	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1262.80
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 OF 48			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

Full Name (Last, First, Middle Initial) <b>A. Southwest Airlines</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 16 / 2011
Mailing Address P.O. Box 36647-1CR		Amount of Each Disbursement this Period 401.40 <b>Transaction ID : SB17.4538</b>
City Dallas	State TX	
Zip Code 73235	Purpose of Disbursement Travel costs - campaign activity	Category/ Type 002
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2011	State: District:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-Primary

Full Name (Last, First, Middle Initial) <b>B. Southwest Airlines</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 23 / 2011
Mailing Address P.O. Box 36647-1CR		Amount of Each Disbursement this Period 401.40 <b>Transaction ID : SB17.4546</b>
City Dallas	State TX	
Zip Code 73235	Purpose of Disbursement Travel costs - campaign activity	Category/ Type 002
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2011	State: District:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-General

Full Name (Last, First, Middle Initial) <b>c. Springs Cafe</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 20 / 2011
Mailing Address P.O. Box 98947		Amount of Each Disbursement this Period 326.14 <b>Transaction ID : SB17.4541</b>
City Las Vegas	State NV	
Zip Code 89193	Purpose of Disbursement Catering - fundraising event	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2011	State: District:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-General

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1128.94
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 OF 48			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

Full Name (Last, First, Middle Initial) <b>A. USAirways</b>		Date of Disbursement M M / D D / Y Y Y Y <b>06 / 30 / 2011</b>
Mailing Address <b>4000 E. Sky Harbor Blvd.</b>		Amount of Each Disbursement this Period <b>822.80</b> <b>Transaction ID : SB17.4549</b>
City <b>Phoeniz</b> State <b>AZ</b> Zip Code <b>85034</b>	Purpose of Disbursement <b>Travel costs - campaign activity</b> Category/Type <b>002</b>	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <b>2011</b> <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <b>Special-General</b>
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Wells Fargo</b>		Date of Disbursement M M / D D / Y Y Y Y <b>06 / 16 / 2011</b>
Mailing Address <b>PO Box 6995</b>		Amount of Each Disbursement this Period <b>20.00</b> <b>Transaction ID : SB17.4537</b>
City <b>POrtland</b> State <b>OR</b> Zip Code <b>97228</b>	Purpose of Disbursement <b>Wire fee</b> Category/Type <b>001</b>	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <b>2011</b> <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <b>Special-Primary</b>
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Wells Fargo</b>		Date of Disbursement M M / D D / Y Y Y Y <b>06 / 24 / 2011</b>
Mailing Address <b>PO Box 6995</b>		Amount of Each Disbursement this Period <b>20.00</b> <b>Transaction ID : SB17.4547</b>
City <b>POrtland</b> State <b>OR</b> Zip Code <b>97228</b>	Purpose of Disbursement <b>Wire fee</b> Category/Type <b>001</b>	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <b>2011</b> <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <b>Special-General</b>
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>862.80</b>
<b>TOTAL</b> This Period (last page this line number only).....	<b>38011.29</b>

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

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

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>All American Lock and Safe</b>	Nature of Debt (Purpose): Change locks on headquarters
Mailing Address PO Box 51869	
City State Zip Code Sparks NV 89435	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID : SD10.4494</b>	
Amount Incurred This Period 54.09	Payment This Period 0.00	Outstanding Balance at Close of This Period 54.09

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Mark Eugene Amodei</b>	Nature of Debt (Purpose): Travel Expenses
Mailing Address 503 W Sunset	
City State Zip Code Carson City NV 89703	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID : SD10.4492</b>	
Amount Incurred This Period 2106.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 2106.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Kim Bacchus</b>	Nature of Debt (Purpose): Miscellaneous volunteer expenses
Mailing Address 2702 lakeridge SHores East	
City State Zip Code Reno NV 89519	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID : SD10.4499</b>	
Amount Incurred This Period 685.75	Payment This Period 0.00	Outstanding Balance at Close of This Period 685.75

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	2845.84
2) <b>TOTALS</b> This Period (last page this line number only) .....	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	0.00
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	0.00

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

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

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Casey Neilon &amp; Associates, LLC</b>	Nature of Debt (Purpose): Accountin fees
Mailing Address 503 N Division St	
City State Zip Code Carson City NV 89703	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID : SD10.4559</b>	
Amount Incurred This Period 2018.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 2018.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Christopher Blanton Productions</b>	Nature of Debt (Purpose): Advertising
Mailing Address 7305 Lakeside Drive	
City State Zip Code Reni NV 89511	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID : SD10.4558</b>	
Amount Incurred This Period 4317.50	Payment This Period 0.00	Outstanding Balance at Close of This Period 4317.50

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Digiprint</b>	Nature of Debt (Purpose): Marketing materials
Mailing Address 4865 L Ongley Lane	
City State Zip Code Reno NV 89502	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID : SD10.4556</b>	
Amount Incurred This Period 51.94	Payment This Period 0.00	Outstanding Balance at Close of This Period 51.94

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	6387.44
2) <b>TOTALS</b> This Period (last page this line number only) .....	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	0.00
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	0.00

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

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

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>EI Dorado Hotel</b>		Nature of Debt (Purpose): Event expenses
Mailing Address PO Box 3399		
City	State	Zip Code
Reno	NV	89505

Outstanding Balance Beginning This Period	<b>Transaction ID : SD10.4557</b>	
<input type="text" value="0.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="296.56"/>	<input type="text" value="0.00"/>	<input type="text" value="296.56"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Mendy Elliott</b>		Nature of Debt (Purpose): Table at event
Mailing Address 5520 Rue St. Tropez		
City	State	Zip Code
Reno	NV	89511

Outstanding Balance Beginning This Period	<b>Transaction ID : SD10.4497</b>	
<input type="text" value="0.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="350.00"/>	<input type="text" value="0.00"/>	<input type="text" value="350.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Robert Gastonguay</b>		Nature of Debt (Purpose): Miscellaneous volunteer expenses
Mailing Address 2210 Sugar		
City	State	Zip Code
Reno	NV	89511

Outstanding Balance Beginning This Period	<b>Transaction ID : SD10.4498</b>	
<input type="text" value="0.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="169.61"/>	<input type="text" value="0.00"/>	<input type="text" value="169.61"/>

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	<input type="text" value="816.17"/>
2) <b>TOTALS</b> This Period (last page this line number only) .....	<input type="text"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	<input type="text" value="0.00"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text" value="0.00"/>

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

NAME OF COMMITTEE (In Full)

**Amodei for Nevada**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Las Vegas Color graphics</b>		Nature of Debt (Purpose): Mailers
Mailing Address 4265 West Sunset		
City	State	Zip Code
Las Vegas	NV	89118

Outstanding Balance Beginning This Period	<b>Transaction ID : SD10.4488</b>	
<input type="text" value="0.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="523.07"/>	<input type="text" value="0.00"/>	<input type="text" value="523.07"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Marketing Communications Services Inc</b>		Nature of Debt (Purpose): Advertising
Mailing Address 58 Maiden Lane		
City	State	Zip Code
San Francisco	CA	94108

Outstanding Balance Beginning This Period	<b>Transaction ID : SD10.4553</b>	
<input type="text" value="0.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="10563.07"/>	<input type="text" value="0.00"/>	<input type="text" value="10563.07"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Sage Hill Clay Sports</b>		Nature of Debt (Purpose): Fundraising expenses
Mailing Address 7370 Desert Way		
City	State	Zip Code
Reno	NV	89521

Outstanding Balance Beginning This Period	<b>Transaction ID : SD10.4496</b>	
<input type="text" value="0.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="1000.00"/>	<input type="text" value="0.00"/>	<input type="text" value="1000.00"/>

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	<input type="text" value="12086.14"/>
2) <b>TOTALS</b> This Period (last page this line number only) .....	<input type="text"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	<input type="text" value="0.00"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text" value="0.00"/>

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

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

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>September Inc</b>		Nature of Debt (Purpose): Calling
Mailing Address 5940 S Rainbow Blvd		
City	State	Zip Code
Las Vegas	NV	89118

Outstanding Balance Beginning This Period	<b>Transaction ID : SD10.4505</b>	
<input type="text" value="0.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="7268.00"/>	<input type="text" value="0.00"/>	<input type="text" value="7268.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>September Inc</b>		Nature of Debt (Purpose): Calling
Mailing Address 5940 S Rainbow Blvd		
City	State	Zip Code
Las Vegas	NV	89118

Outstanding Balance Beginning This Period	<b>Transaction ID : SD10.4507</b>	
<input type="text" value="0.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="2139.00"/>	<input type="text" value="0.00"/>	<input type="text" value="2139.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>September Inc</b>		Nature of Debt (Purpose): Campaign Materials
Mailing Address 5940 S Rainbow Blvd		
City	State	Zip Code
Las Vegas	NV	89118

Outstanding Balance Beginning This Period	<b>Transaction ID : SD10.4554</b>	
<input type="text" value="0.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="1825.00"/>	<input type="text" value="0.00"/>	<input type="text" value="1825.00"/>

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	<input type="text" value="11232.00"/>
2) <b>TOTALS</b> This Period (last page this line number only) .....	<input type="text"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	<input type="text" value="0.00"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text" value="0.00"/>

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

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

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Silver Bullet Group Inc</b>	Nature of Debt (Purpose): Retainer
Mailing Address 101 Convention Center Drive Suite 700	
City State Zip Code Las Vegas NV 89109	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID : SD10.4493</b>	
Amount Incurred This Period 4900.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 4900.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>The Image Group</b>	Nature of Debt (Purpose): Graphic Design
Mailing Address 10701 Sprucedale Ave	
City State Zip Code Las Vegas NV 89144	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID : SD10.4501</b>	
Amount Incurred This Period 1605.29	Payment This Period 0.00	Outstanding Balance at Close of This Period 1605.29

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

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

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	6505.29
2) <b>TOTALS</b> This Period (last page this line number only) .....	39872.88
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	0.00
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	39872.88