

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

C00496760

CITY

STATE

ZIP CODE

STATE DISTRICT

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

NV

02

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

January 31 Year-End Report (YE)

Termination Report (TER)

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

Primary (12P)

General (12G)

Runoff (12R)

Convention (12C)

Special (12S)

Election on

MM / DD / YYYY

in the State of

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

General (30G)

Runoff (30R)

Special (30S)

Election on

MM / DD / YYYY

in the State of

5. Covering Period

MM / DD / YYYY 05 / 22 / 2014

through

MM / DD / YYYY 06 / 30 / 2014

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

MM / DD / YYYY 07 / 15 / 2014

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

Office Use Only

FEC FORM 3 (Revised 02/2003)

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
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))....	63000.00	436672.00
(b) Total Contribution Refunds (from Line 20(d))	0.00	500.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	63000.00	436172.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	28530.80	325042.92
(b) Total Offsets to Operating Expenditures (from Line 14).....	36.76	2118.66
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	28494.04	322924.26
8. Cash on Hand at Close of Reporting Period (from Line 27).....	273163.54	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	12383.07	

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: M M / D D / Y Y Y Y 05 / 22 / 2014 To: M M / D D / Y Y Y Y 06 / 30 / 2014

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).....	19500.00	216575.00
(ii) Unitemized.....	2500.00	11297.00
(iii) TOTAL of contributions from individuals ▶	22000.00	227872.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	41000.00	208800.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	63000.00	436672.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	36.76	2118.66
15. OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	63036.76	438790.66

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	28530.80	325042.92
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	5000.00	84600.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	500.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	500.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	33530.80	410142.92

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	243657.58
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	63036.76
25. SUBTOTAL (add Line 23 and Line 24).....	306694.34
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	33530.80
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	273163.54

**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 34
	<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 J Black Jr.

Mailing Address **PO Box 970**

City **Genoa** State **NV** Zip Code **89411-0970**

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

Name of Employer Information requested
Information requested

Occupation Information requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
06 / 11 / 2014

Transaction ID : SA11AI.10824

Amount of Each Receipt this Period
500.00

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

Mailing Address **2620 Spinnaker Dr**

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

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

Name of Employer Information requested
Patricia Cafferata Esquire

Occupation Information requested
Lawyer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
950.00

Date of Receipt
 M M / D D / Y Y Y Y
06 / 04 / 2014

Transaction ID : SA11AI.10776

Amount of Each Receipt this Period
150.00

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

Mailing Address **7470 Ullom Dr**

City **Las Vegas** State **NV** Zip Code **89139**

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

Name of Employer Information requested
AA Cassaro Plumbing

Occupation Information requested
Contractor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
750.00

Date of Receipt
 M M / D D / Y Y Y Y
05 / 29 / 2014

Transaction ID : SA11AI.10702

Amount of Each Receipt this Period
500.00

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 6 OF 34
	<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)
Aaron K Cohen

Mailing Address 1007 W. Braddock Road

City State Zip Code
Alexandria VA 22302

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

Name of Employer Occupation
Capital Counsel LLC principal

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 19 / 2014

Transaction ID : SA11AI.10822

Amount of Each Receipt this Period
500.00

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

Mailing Address 2205 Windsor Rd

City State Zip Code
Alexandria VA 22307

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

Name of Employer Occupation
Navigators Global Principal

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2250.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 30 / 2014

Transaction ID : SA11AI.10915

Amount of Each Receipt this Period
250.00

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

Mailing Address 2750 Holcomb Ranch Lane

City State Zip Code
Reno NV 89511

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

Name of Employer Occupation
None Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 04 / 2014

Transaction ID : SA11AI.10787

Amount of Each Receipt this Period
250.00

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

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

1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 34
	<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 R Gibson

Mailing Address 7409 Doe Avenue

City Las Vegas State NV Zip Code 89117

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

Name of Employer retired Occupation retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 04 / 2014

Transaction ID : SA11Al.10742

Amount of Each Receipt this Period
 2600.00

Congress- Amodei

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

Mailing Address 2205 Plaza del Puerto

City Las Vegas State NV Zip Code 89102

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

Name of Employer Graves Communications Occupation Consultant

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 04 / 2014

Transaction ID : SA11Al.10752

Amount of Each Receipt this Period
 500.00

C. Full Name (Last, First, Middle Initial)
Frederick E Hitchcock

Mailing Address 9101 Alta Drive #1204

City Las Vegas State NV Zip Code 89145

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

Name of Employer Hitchcock Automotive Resources Occupation Auto dealer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 28 / 2014

Transaction ID : SA11Al.10699

Amount of Each Receipt this Period
 2600.00

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

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

5700.00

**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 34
	<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)
Christopher A. Kassity

Mailing Address 1844 Wellington West

City Carson City State NV Zip Code 89701

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

Name of Employer McDonalds Occupation Franchisee

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y
06 / 02 / 2014

Transaction ID : SA11AI.10728

Amount of Each Receipt this Period
500.00

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

Mailing Address 4435 Starwood Ct

City REno State NV Zip Code 89519

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

Name of Employer None Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1550.00**

Date of Receipt
 M M / D D / Y Y Y Y
06 / 25 / 2014

Transaction ID : SA11AI.10920

Amount of Each Receipt this Period
1550.00

In-kind - food and beverage costs fundraising event

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

Mailing Address 1527 Kestrel Ct

City Reno State NV Zip Code 89509

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

Name of Employer Mancini Properties, Inc. Occupation Executive

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **450.00**

Date of Receipt
 M M / D D / Y Y Y Y
06 / 04 / 2014

Transaction ID : SA11AI.10771

Amount of Each Receipt this Period
150.00

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

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

2200.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 34
	<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)
Edwin Meyer

Mailing Address **PO Box 7378**

City **Reno** State **NV** Zip Code **89510**

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

Name of Employer **Nevcal Trucking** Occupation **Owner**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
06 / 13 / 2014

Transaction ID : SA11AI.10827

Amount of Each Receipt this Period
500.00

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

Mailing Address **2279 Rainwood Ct.**

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

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

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

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y
05 / 29 / 2014

Transaction ID : SA11AI.10701

Amount of Each Receipt this Period
1000.00

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

Mailing Address **6612 Maugh Road**

City **McLean** State **VA** Zip Code **22101**

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

Name of Employer **The O Team** Occupation **owner**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
06 / 04 / 2014

Transaction ID : SA11AI.10751

Amount of Each Receipt this Period
250.00

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

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

1750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 34
	<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)
William A Richardson

Mailing Address 395 E Sunset Rd

City Las Vegas State NV Zip Code 89119

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

Name of Employer WA Richardson Builders Occupation owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 19 / 2014

Transaction ID : SA11AI.10809

Amount of Each Receipt this Period
2500.00

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

Mailing Address 11847 Oakland Hills Dr.

City Las Vegas State NV Zip Code 89141

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

Name of Employer Rogich Law Firm Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 19 / 2014

Transaction ID : SA11AI.10813

Amount of Each Receipt this Period
2600.00

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

Mailing Address 11920 Southern Highlands Pkwy Suite 301

City Las Vegas State NV Zip Code 89141

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

Name of Employer Rogich Communications Group Occupation CEO/President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 19 / 2014

Transaction ID : SA11AI.10811

Amount of Each Receipt this Period
2600.00

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

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

7700.00

19500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 34
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

A. Full Name (Last, First, Middle Initial)
AMERICAN ACADEMY OF FAMILY PHYSICIANS POLITICAL ACTION COMMITTEE

Mailing Address **1133 CONNECTICUT AVE NW**
SUITE 1100

City **WASHINGTON** State **DC** Zip Code **20036**

FEC ID number of contributing federal political committee. **C C00411553**

Name of Employer _____ Occupation _____

Receipt For: 2014
 Primary General
 Other (specify) _____

Election Cycle-to-Date
 _____ 2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 04 / 2014

Transaction ID : SA11C.10757

Amount of Each Receipt this Period
 _____ 2500.00

Federal Primary

B. Full Name (Last, First, Middle Initial)
AMERICAN ASSOCIATION OF AIRPORT EXECUTIVES

Mailing Address **601 MADISON ST.**
SUITE 400

City **ALEXANDRIA** State **VA** Zip Code **22314**

FEC ID number of contributing federal political committee. **C C00176727**

Name of Employer _____ Occupation _____

Receipt For: 2014
 Primary General
 Other (specify) _____

Election Cycle-to-Date
 _____ 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 01 / 2014

Transaction ID : SA11C.10819

Amount of Each Receipt this Period
 _____ 500.00

June 1 event

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

Mailing Address **PALLADIAN 1**
220 LEIGH FARM RD

City **DURHAM** State **NC** Zip Code **27707**

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

Name of Employer _____ Occupation _____

Receipt For: 2014
 Primary General
 Other (specify) _____

Election Cycle-to-Date
 _____ 2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 30 / 2014

Transaction ID : SA11C.10914

Amount of Each Receipt this Period
 _____ 2000.00

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

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

_____ 5000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 34
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

A. Full Name (Last, First, Middle Initial)
ANHEUSER-BUSCH COMPANIES INC. POLITICAL ACTION COMMITTEE

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

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

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 10 / 2014

Transaction ID : SA11C.10765

Amount of Each Receipt this Period
2500.00

Primary 2014

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

Mailing Address **One Caesars Palace Drive**

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

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 04 / 2014

Transaction ID : SA11C.10753

Amount of Each Receipt this Period
2500.00

2014 Primary

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

Mailing Address **One Caesars Palace Drive**

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

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **10000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 04 / 2014

Transaction ID : SA11C.10754

Amount of Each Receipt this Period
5000.00

2014 General

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

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

10000.00

**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 34
	<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)
CALPORTLAND COMPANY POLITICAL ACTION COMMITTEE (CPCC-PAC)

Mailing Address 2025 E. FINANCIAL WAY
SUITE 200

City State Zip Code
GLENDDORA CA 91741

FEC ID number of contributing federal political committee. **C C00389429**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 04 / 2014

Transaction ID : SA11C.10739

Amount of Each Receipt this Period
1500.00

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

Mailing Address 1701 JFK BLVD, 49TH FLOOR

City State Zip Code
PHILADELPHIA PA 19103

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 02 / 2014

Transaction ID : SA11C.10732

Amount of Each Receipt this Period
1000.00

2014 Primary Contribution

C. Full Name (Last, First, Middle Initial)
LIONEL SAWYER & COLLINS PAC

Mailing Address 300 SOUTH FOURTH STREET SUITE 1700

City State Zip Code
LAS VEGAS NV 89101

FEC ID number of contributing federal political committee. **C C00266460**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 04 / 2014

Transaction ID : SA11C.10737

Amount of Each Receipt this Period
1000.00

election to US Congress

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 14 OF 34
	<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)
MICROSOFT CORPORATION POLITICAL ACTION COMMITTEE

Mailing Address 16011 NE 36TH WAY
BOX 97017

City REDMOND State WA Zip Code 98073

FEC ID number of contributing federal political committee. **C** C00227546

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
4500.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 21 / 2014

Transaction ID : SA11C.10911

Amount of Each Receipt this Period
2500.00

B. Full Name (Last, First, Middle Initial)
NATIONAL BEER WHOLESALERS ASSOCIATION POLITICAL ACTION COMMITTEE

Mailing Address 1101 KING STREET
SUITE 600

City ALEXANDRIA State VA Zip Code 22314

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 02 / 2014

Transaction ID : SA11C.10725

Amount of Each Receipt this Period
5000.00

primary 2014

C. Full Name (Last, First, Middle Initial)
NATIONAL EMERGENCY MEDICINE POLITICAL ACTION COMMITTEE

Mailing Address 1125 EXECUTIVE CIRCLE

City IRVING State TX Zip Code 75038

FEC ID number of contributing federal political committee. **C** C00140061

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 23 / 2014

Transaction ID : SA11C.10698

Amount of Each Receipt this Period
2500.00

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

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

10000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 34
	<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 RURAL LETTER CARRIERS' ASSOCIATION POLITICAL ACTION COMMITTEE

Mailing Address **1630 DUKE STREET
2ND FLOOR**

City **ALEXANDRIA** State **VA** Zip Code **22314**

FEC ID number of contributing federal political committee. **C C00072025**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
06 / 02 / 2014

Transaction ID : SA11C.10729

Amount of Each Receipt this Period

1000.00

B. Full Name (Last, First, Middle Initial)
NV ENERGY POLITICAL ACTION COMMITTEE

Mailing Address **P.O. BOX 81500
ATTN: JOHN J. VINSKI, TREASURER**

City **LAS VEGAS** State **NV** Zip Code **89180**

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
06 / 04 / 2014

Transaction ID : SA11C.10740

Amount of Each Receipt this Period

2000.00

2014 General

C. Full Name (Last, First, Middle Initial)
A Jonathan Schwartz

Mailing Address **2293 Duneville Street**

City **Las Vegas** State **NV** Zip Code **89146**

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

Name of Employer Occupation
**Nevada Yellow Cab Corporation
Director**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
06 / 04 / 2014

Transaction ID : SA11C.10755

Amount of Each Receipt this Period

1500.00

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 16 OF 34
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

Full Name (Last, First, Middle Initial)
A. SOUTHWEST GAS CORPORATION POLITICAL ACTION COMMITTEE

Mailing Address 5241 SPRING MOUNTAIN ROAD

City	State	Zip Code
LAS VEGAS	NV	89150

FEC ID number of contributing federal political committee. **C C00076737**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 04 / 2014

Transaction ID : SA11C.10741

Amount of Each Receipt this Period
 2500.00
 SWG Multicandidate PAC

Full Name (Last, First, Middle Initial)
B. THE HOME DEPOT INC. POLITICAL ACTION COMMITTEE

Mailing Address 1155 F STREET, NW
SUITE 400

City	State	Zip Code
WASHINGTON	DC	20004

FEC ID number of contributing federal political committee. **C C00284885**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 03 / 2014

Transaction ID : SA11C.10736

Amount of Each Receipt this Period
 1000.00
 2014 Primary

Full Name (Last, First, Middle Initial)
C. TIME WARNER INC. PAC

Mailing Address 800 CONNECTICUT AVE., NW
SUITE 1200

City	State	Zip Code
WASHINGTON	DC	20006

FEC ID number of contributing federal political committee. **C C00339291**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 29 / 2014

Transaction ID : SA11C.10720

Amount of Each Receipt this Period
 1000.00

SUBTOTAL of Receipts This Page (optional).....	4500.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 34
	<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)
UNITED PARCEL SERVICE INC. PAC

Mailing Address 55 GLENLAKE PARKWAY NE

City ATLANTA State GA Zip Code 30328

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 21 / 2014

Transaction ID : SA11C.10912

Amount of Each Receipt this Period
 2000.00
 general 2014

B. Full Name (Last, First, Middle Initial)
UNITED TECHNOLOGIES CORPORATION

Mailing Address ONE FINANCIAL PLAZA

City HARTFORD State CT Zip Code 06101

FEC ID number of contributing federal political committee. **C C70004544**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 02 / 2014

Transaction ID : SA11C.10723

Amount of Each Receipt this Period
 1000.00
 2014 Primary

C. Full Name (Last, First, Middle Initial)
VIACOM INTERNATIONAL, INC. POLITICAL ACTION COMMITTEE

Mailing Address 1501 M STREET
SUITE 1100

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C C00167759**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 19 / 2014

Transaction ID : SA11C.10821

Amount of Each Receipt this Period
 500.00
 2014 general

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

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

3500.00

41000.00

**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 18 OF 34			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

Full Name (Last, First, Middle Initial) A. American Airlines		Date of Disbursement M M / D D / Y Y Y Y 06 / 20 / 2014
Mailing Address 4333 Amon Carter Blvd MD 5675		Amount of Each Disbursement this Period 598.50 Transaction ID : SB17.10880
City Fort Worth	State TX Zip Code 76155	
Purpose of Disbursement travel expense - airfare	Category/Type 002	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. American Express Collections		Date of Disbursement M M / D D / Y Y Y Y 06 / 05 / 2014
Mailing Address P.O. Box 981540		Amount of Each Disbursement this Period 3.04 Transaction ID : SB17.10887
City El Paso	State TX Zip Code 79998	
Purpose of Disbursement merchant fees	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Arco		Date of Disbursement M M / D D / Y Y Y Y 05 / 27 / 2014
Mailing Address 4340 N Carson St		Amount of Each Disbursement this Period 41.95 Transaction ID : SB17.10841
City Carson City	State NV Zip Code 89703	
Purpose of Disbursement travel expense - fuel in lieu of mileage	Category/Type 002	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	643.49
TOTAL This Period (last page this line number only).....	

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

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

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

Full Name (Last, First, Middle Initial) A. AT & T		Date of Disbursement M M / D D / Y Y Y Y 06 / 10 / 2014
Mailing Address PO Box 5025		Amount of Each Disbursement this Period 28.81 Transaction ID : SB17.10902
City Carol Stream	State IL	
Zip Code 60197	Purpose of Disbursement telephone expense	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. AT & T		Date of Disbursement M M / D D / Y Y Y Y 06 / 10 / 2014
Mailing Address PO Box 5025		Amount of Each Disbursement this Period 28.91 Transaction ID : SB17.10903
City Carol Stream	State IL	
Zip Code 60197	Purpose of Disbursement telephone expense	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Authnet Gateway		Date of Disbursement M M / D D / Y Y Y Y 06 / 03 / 2014
Mailing Address P.O. Box 8999		Amount of Each Disbursement this Period 21.05 Transaction ID : SB17.10888
City San Francisco	State CA	
Zip Code 94128	Purpose of Disbursement merchant fees	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	78.77
TOTAL This Period (last page this line number only).....	

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

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

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

Full Name (Last, First, Middle Initial) A. Bill.com		Date of Disbursement M M / D D / Y Y Y Y 06 / 09 / 2014
Mailing Address 3200 Ash Street		Amount of Each Disbursement this Period 28.00 Transaction ID : SB17.10886
City Palo Alto State CA Zip Code 94306	Purpose of Disbursement bank service charge Category/Type 001	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: District:		

Full Name (Last, First, Middle Initial) B. Caesars Palace		Date of Disbursement M M / D D / Y Y Y Y 06 / 10 / 2014
Mailing Address 3570 S. Las Vegas Blvd.		Amount of Each Disbursement this Period 2500.00 Transaction ID : SB17.10852
City Las Vegas State NV Zip Code 89109	Purpose of Disbursement campaign expense - fundraising party Category/Type 007	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: District:		

Full Name (Last, First, Middle Initial) c. Capitol Hill Club		Date of Disbursement M M / D D / Y Y Y Y 06 / 18 / 2014
Mailing Address 300 First Street SE		Amount of Each Disbursement this Period 92.16 Transaction ID : SB17.10846
City Washington State DC Zip Code 20003	Purpose of Disbursement Campaign expense - meals & entertainment Category/Type 003	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2620.16
TOTAL This Period (last page this line number only).....	

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

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

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

Full Name (Last, First, Middle Initial) A. Capitol Hill Club		Date of Disbursement M M / D D / Y Y Y Y 06 / 18 / 2014
Mailing Address 300 First Street SE		Amount of Each Disbursement this Period 108.72 Transaction ID : SB17.10848
City Washington State DC Zip Code 20003	Purpose of Disbursement Campaign expense - meals & entertainment Category/Type 003	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Casey Neilon & Associates, LLC		Date of Disbursement M M / D D / Y Y Y Y 06 / 10 / 2014
Mailing Address 503 N Division St		Amount of Each Disbursement this Period 2000.00 Transaction ID : SB17.10908
City Carson City State NV Zip Code 89703	Purpose of Disbursement accounting expense Category/Type 001	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Casey Neilon & Associates, LLC		Date of Disbursement M M / D D / Y Y Y Y 06 / 10 / 2014
Mailing Address 503 N Division St		Amount of Each Disbursement this Period 2500.00 Transaction ID : SB17.10909
City Carson City State NV Zip Code 89703	Purpose of Disbursement accounting expense Category/Type 001	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	4608.72
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 22 OF 34	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

Full Name (Last, First, Middle Initial) A. Danielle Cherry		Date of Disbursement MM / DD / YYYY 06 / 10 / 2014
Mailing Address 345 Sondrio Way		Amount of Each Disbursement this Period 9523.60 Transaction ID : SB17.10904
City Reno	State NV	
Zip Code 89521	Purpose of Disbursement Fundraising commissions and reimbursment of expenses	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Danielle Cherry		Date of Disbursement MM / DD / YYYY 06 / 10 / 2014
Mailing Address 345 Sondrio Way		Amount of Each Disbursement this Period 564.71 Transaction ID : SB17.10905
City Reno	State NV	
Zip Code 89521	Purpose of Disbursement Fundraising commissions and reimbursment of expenses	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Delta Air		Date of Disbursement MM / DD / YYYY 06 / 19 / 2014
Mailing Address P.O. Box 20706		Amount of Each Disbursement this Period 482.50 Transaction ID : SB17.10881
City Atlanta	State GA	
Zip Code 30320	Purpose of Disbursement travel expense - airfare	Category/ Type 002
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	10570.81
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 23 OF 34	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

Full Name (Last, First, Middle Initial) A. Flag Store Sign		Date of Disbursement M M / D D / Y Y Y Y 06 / 27 / 2014
Mailing Address 155 Glendale Ave		Amount of Each Disbursement this Period 30.95 Transaction ID : SB17.10872
City Sparks	State NV Zip Code 89431	
Purpose of Disbursement flags	001 Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Humboldt County 4-H - Univeristy of Nevada Cooperative Extension		Date of Disbursement M M / D D / Y Y Y Y 06 / 01 / 2014
Mailing Address 1085 Fairgrounds Road		Amount of Each Disbursement this Period 250.00 Transaction ID : SB17.10898
City Winnemucca	State NV Zip Code 89445-2927	
Purpose of Disbursement 4-H lego club donation	012 Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Hunan Dynasty Restaurant		Date of Disbursement M M / D D / Y Y Y Y 05 / 30 / 2014
Mailing Address 215 PENNSYLVANIA AVE SE		Amount of Each Disbursement this Period 43.00 Transaction ID : SB17.10864
City Washington	State DC Zip Code 20003	
Purpose of Disbursement Campaign expense - meals & entertainment	003 Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	323.95
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 24 OF 34	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

Full Name (Last, First, Middle Initial) A. Hunan Dynasty Restaurant		Date of Disbursement M M / D D / Y Y Y Y 06 / 23 / 2014
Mailing Address 215 PENNSYLVANIA AVE SE		Amount of Each Disbursement this Period 60.00 Transaction ID : SB17.10843
City Washington State DC Zip Code 20003	Purpose of Disbursement Campaign expense - meals & entertainment Category/Type 003	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Amount of Each Disbursement this Period 460.78 Transaction ID : SB17.10910
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Kaempfer Crowell Renshaw Gronauer & Fiore		Date of Disbursement M M / D D / Y Y Y Y 06 / 10 / 2014
Mailing Address 8345 West Sunset Road Suire 250		Amount of Each Disbursement this Period 460.78 Transaction ID : SB17.10910
City Las Vegas State NV Zip Code 89113	Purpose of Disbursement campaign expense - legal fees Category/Type 001	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Amount of Each Disbursement this Period 1550.00 Transaction ID : SB17.10921
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. Michael Licciardello		Date of Disbursement M M / D D / Y Y Y Y 06 / 25 / 2014
Mailing Address 4435 Starwood Ct		Amount of Each Disbursement this Period 1550.00 Transaction ID : SB17.10921
City REno State NV Zip Code 89519	Purpose of Disbursement In-kind - food and beverage costs fundraising event Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Amount of Each Disbursement this Period 2070.78
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	2070.78
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 34			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

Full Name (Last, First, Middle Initial) A. McCormick & Schmick's		Date of Disbursement M M / D D / Y Y Y Y 06 / 05 / 2014
Mailing Address 335 Hughes Center Drive		Amount of Each Disbursement this Period 219.00
City Las Vegas	State NV	
Zip Code 89169	Purpose of Disbursement Campaign expense - meals & entertainment	Transaction ID : SB17.10859
Candidate Name	Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Paul Schat's Bakery		Date of Disbursement M M / D D / Y Y Y Y 06 / 18 / 2014
Mailing Address 1212 S. Stewart Street		Amount of Each Disbursement this Period 193.13
City Carson City	State NV	
Zip Code 89701	Purpose of Disbursement Campaign expense - meals & entertainment	Transaction ID : SB17.10845
Candidate Name	Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Paul Schat's Bakery		Date of Disbursement M M / D D / Y Y Y Y 06 / 19 / 2014
Mailing Address 1212 S. Stewart Street		Amount of Each Disbursement this Period 24.00
City Carson City	State NV	
Zip Code 89701	Purpose of Disbursement Campaign expense - meals & entertainment	Transaction ID : SB17.10844
Candidate Name	Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	436.13
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 26 OF 34	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

Full Name (Last, First, Middle Initial) A. Rayburn House Office Building			Date of Disbursement M M / D D / Y Y Y Y 06 / 11 / 2014	
Mailing Address 45 Independence Ave SW			Amount of Each Disbursement this Period 82.00	
City Washington	State DC	Zip Code 20515	Transaction ID : SB17.10854	
Purpose of Disbursement Campaign expense - meals & entertainment		Category/Type 003		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. Ron Wood Family Resource Center			Date of Disbursement M M / D D / Y Y Y Y 05 / 22 / 2014	
Mailing Address 2621 Northgate Lane			Amount of Each Disbursement this Period 1000.00	
City Carson City	State NV	Zip Code 89706	Transaction ID : SB17.10900	
Purpose of Disbursement donation		Category/Type 012		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) c. San Marcos Grill			Date of Disbursement M M / D D / Y Y Y Y 06 / 06 / 2014	
Mailing Address 260 E Winnie Ln			Amount of Each Disbursement this Period 90.00	
City Carson City	State NV	Zip Code 89706	Transaction ID : SB17.10857	
Purpose of Disbursement Campaign expense - meals & entertainment		Category/Type 003		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	1172.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 27 OF 34	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

Full Name (Last, First, Middle Initial) A. Shell Carson Cty		Date of Disbursement M M / D D / Y Y Y Y 05 / 27 / 2014
Mailing Address Hwy 395		Amount of Each Disbursement this Period 66.00 Transaction ID : SB17.10838
City Carson City	State NV	
Zip Code 89703	Purpose of Disbursement travel expense - fuel in lieu of mileage	Category/ Type 002
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Shell Carson Cty		Date of Disbursement M M / D D / Y Y Y Y 05 / 27 / 2014
Mailing Address Hwy 395		Amount of Each Disbursement this Period 54.06 Transaction ID : SB17.10839
City Carson City	State NV	
Zip Code 89703	Purpose of Disbursement travel expense - fuel in lieu of mileage	Category/ Type 002
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Shell Carson Cty		Date of Disbursement M M / D D / Y Y Y Y 05 / 28 / 2014
Mailing Address Hwy 395		Amount of Each Disbursement this Period 95.00 Transaction ID : SB17.10837
City Carson City	State NV	
Zip Code 89703	Purpose of Disbursement travel expense - fuel in lieu of mileage	Category/ Type 002
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	215.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 28 OF 34	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

Full Name (Last, First, Middle Initial) A. Shell Carson Cty		Date of Disbursement M M / D D / Y Y Y Y 06 / 02 / 2014
Mailing Address Hwy 395		Amount of Each Disbursement this Period 44.04
City Carson City	State NV	
Zip Code 89703	Purpose of Disbursement travel expense - fuel in lieu of mileage	Transaction ID : SB17.10835
Candidate Name	Category/ Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Shell Carson Cty		Date of Disbursement M M / D D / Y Y Y Y 06 / 09 / 2014
Mailing Address Hwy 395		Amount of Each Disbursement this Period 95.00
City Carson City	State NV	
Zip Code 89703	Purpose of Disbursement travel expense - fuel in lieu of mileage	Transaction ID : SB17.10831
Candidate Name	Category/ Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Shell Carson Cty		Date of Disbursement M M / D D / Y Y Y Y 06 / 30 / 2014
Mailing Address Hwy 395		Amount of Each Disbursement this Period 95.00
City Carson City	State NV	
Zip Code 89703	Purpose of Disbursement travel expense - fuel in lieu of mileage	Transaction ID : SB17.10829
Candidate Name	Category/ Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	234.04
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 34			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

Full Name (Last, First, Middle Initial) A. The M Group		Date of Disbursement MM / DD / YYYY 06 / 10 / 2014
Mailing Address 100 Luna Park #156		Amount of Each Disbursement this Period 990.00 Transaction ID : SB17.10906
City Alexandria	State VA	
Zip Code 22305	Purpose of Disbursement Fundraising commissions and reimbursement of expenses	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. The M Group		Date of Disbursement MM / DD / YYYY 06 / 10 / 2014
Mailing Address 100 Luna Park #156		Amount of Each Disbursement this Period 2980.66 Transaction ID : SB17.10907
City Alexandria	State VA	
Zip Code 22305	Purpose of Disbursement Fundraising commissions and reimbursement of expenses	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Washington Nationals		Date of Disbursement MM / DD / YYYY 05 / 22 / 2014
Mailing Address 1500 South Capitol Street, SE		Amount of Each Disbursement this Period 115.00 Transaction ID : SB17.10866
City Washington	State DC	
Zip Code 20003	Purpose of Disbursement campaign expense - entertainment	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	4085.66
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 34			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

Full Name (Last, First, Middle Initial) A. Wells Fargo		Date of Disbursement M M / D D / Y Y Y Y 06 / 12 / 2014
Mailing Address PO Box 6995		Amount of Each Disbursement this Period 72.53 Transaction ID : SB17.10883
City Portland	State OR	
Zip Code 97228	Purpose of Disbursement merchant fees	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) B. Wells Fargo		Date of Disbursement M M / D D / Y Y Y Y 06 / 12 / 2014
Mailing Address PO Box 6995		Amount of Each Disbursement this Period 49.51 Transaction ID : SB17.10884
City Portland	State OR	
Zip Code 97228	Purpose of Disbursement merchant fees	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) c. Wells Fargo		Date of Disbursement M M / D D / Y Y Y Y 06 / 12 / 2014
Mailing Address PO Box 6995		Amount of Each Disbursement this Period 45.41 Transaction ID : SB17.10885
City Portland	State OR	
Zip Code 97228	Purpose of Disbursement merchant fees	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	167.45
TOTAL This Period (last page this line number only).....	27227.02

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 31 OF 34	
	<input type="checkbox"/> 17 20a	<input checked="" type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

A. NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)
Mailing Address 320 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement transfer to authorized committee

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement 06 / 20 / 2014

Amount of Each Disbursement this Period 5000.00

Transaction ID : SB18.10894

Category/Type 008

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement

Amount of Each Disbursement this Period

Category/Type

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement

Amount of Each Disbursement this Period

Category/Type

SUBTOTAL of Disbursements This Page (optional)..... 5000.00

TOTAL This Period (last page this line number only)..... 5000.00

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

NAME OF COMMITTEE (In Full)
Amodei for Nevada

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Casey Neilon & Associates, LLC	Nature of Debt (Purpose): Professional fees - accounting and reporting
Mailing Address 503 N Division St	
City State Zip Code Carson City NV 89703	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.10917	
Amount Incurred This Period 2850.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 2850.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Grand Sierra Resort	Nature of Debt (Purpose): Catering - fundraising event
Mailing Address 2500 E Second St	
City State Zip Code Reno NV 89595	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.10916	
Amount Incurred This Period 533.07	Payment This Period 0.00	Outstanding Balance at Close of This Period 533.07

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

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

1) SUBTOTALS This Period This Page (optional)	7883.07
2) TOTALS This Period (last page this line number only)	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	

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

Form/Schedule: SD10

Transaction ID : SD10.7593

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

Form/Schedule:

Transaction ID:

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

NAME OF COMMITTEE (In Full)

Amodei for Nevada

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

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

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

Outstanding Balance Beginning This Period	Transaction ID : SD10.7284	
3000.00		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	0.00	3000.00

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) SUBTOTALS This Period This Page (optional)	4500.00
2) TOTALS This Period (last page this line number only)	12383.07
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	0.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	12383.07