

# 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

Cegavske for Congress

ADDRESS (number and street)

50 S. Jones Blvd.

Suite 202

Check if different than previously reported. (ACC)

Las Vegas

NV

89107

2. FEC IDENTIFICATION NUMBER ▼

C C00505834

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

NV

04

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 /

05

D D /

24

Y Y Y Y

2012

through

M M /

06

D D /

30

Y Y Y Y

2012

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 Robert Beers

Signature of Treasurer Robert Beers

[Electronically Filed]

Date

M M /

07

D D /

15

Y Y Y Y

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.

Office Use Only

FEC FORM 3 (Revised 02/2003)

**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name  
**Cegavske for Congress**

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	18175.00	236823.97
(b) Total Contribution Refunds (from Line 20(d)) .....	0.00	2500.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	18175.00	234323.97
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	48140.54	224795.09
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	136.23
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	48140.54	224658.86
8. Cash on Hand at Close of Reporting Period (from Line 27).....	6288.42	
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).....	39472.74	

**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

**Cegavske for Congress**

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

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	16000.00	192921.97
(ii) Unitemized.....	1175.00	16355.00
(iii) TOTAL of contributions from individuals ▶	17175.00	209276.97
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	1000.00	27547.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	18175.00	236823.97
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....		
	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....		
	0.00	136.23
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)..... ▶	18175.00	236960.20

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	48140.54	224795.09
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	2500.00
(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	2500.00
21. OTHER DISBURSEMENTS .....	3376.69	3376.69
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	51517.23	230671.78

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	39630.65
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	18175.00
25. SUBTOTAL (add Line 23 and Line 24).....	57805.65
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	51517.23
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	6288.42

**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 24
	<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)  
**Cegavske for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Judith A Albertelli**

Mailing Address 11651 Olde Mandarin Road

City Jacksonville State FL Zip Code 32223

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 30 / 2012

**Transaction ID : SA11AI.5239**

Amount of Each Receipt this Period  
 1000.00  
 donation

Election Cycle-to-Date  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Jamie Burton**

Mailing Address 4405 Bowman Dr.

City Colleyville State TX Zip Code 76034

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 08 / 2012

**Transaction ID : SA11AI.5299**

Amount of Each Receipt this Period  
 250.00  
 Donation

Election Cycle-to-Date  
 250.00

**C.** Full Name (Last, First, Middle Initial)  
**David J. Willden Trust**

Mailing Address 8641 Canyon View

City Las Vegas State NV Zip Code 89117

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 08 / 2012

**Transaction ID : SA11AI.5297**

Amount of Each Receipt this Period  
 250.00  
 Donation

Election Cycle-to-Date  
 250.00

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

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

1500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 24
	<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)  
**Cegavske for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Howard Dudley**

Mailing Address 3327 Pipeline Rd.

City State Zip Code  
Celburne TX 76033

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 08 / 2012

**Transaction ID : SA11AI.5295**

Amount of Each Receipt this Period  
 250.00

Donation

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

Mailing Address 6620 N. Sutherland Ridge Place

City State Zip Code  
Tuscon AZ 85718

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

Name of Employer Occupation  
T.M. Dyhr Inc. Environmental Manager

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 31 / 2012

**Transaction ID : SA11AI.5267**

Amount of Each Receipt this Period  
 500.00

Donation

**C.** Full Name (Last, First, Middle Initial)  
**Harry Eliades**

Mailing Address 10100 Stony Ridge Dr.

City State Zip Code  
Las Vegas NV 89144

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 08 / 2012

**Transaction ID : SA11AI.5301**

Amount of Each Receipt this Period  
 250.00

Donation

**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 24
	<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)  
**Cegavske for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Conita Opp Jones**

Mailing Address 5645 Obannon Dr.

City Las Vegas State NV Zip Code 89146-0311

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

Name of Employer Self Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 30 / 2012

**Transaction ID : SA11AI.5241**

Amount of Each Receipt this Period  
 1000.00  
 donation

**B.** Full Name (Last, First, Middle Initial)  
**Harry Kallick**

Mailing Address 10800 Woodstream Ct.

City Las Vegas State NV Zip Code 89135

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 31 / 2012

**Transaction ID : SA11AI.5242**

Amount of Each Receipt this Period  
 1000.00  
 donation

**C.** Full Name (Last, First, Middle Initial)  
**Irais Kolesar**

Mailing Address 8621 Canyon View Dr.

City Las Vegas State NV Zip Code 89117

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

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1200.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 05 / 2012

**Transaction ID : SA11AI.5283**

Amount of Each Receipt this Period  
 500.00  
 Donation

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

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

**2500.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 24
	<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)  
**Cegavske for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Robert j Kolesar**

Mailing Address 8621 Canyon View Dr.

City Las Vegas State NV Zip Code 89117

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

Name of Employer Self Occupation Attorney

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1200.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 05 / 2012

**Transaction ID : SA11AI.5282**

Amount of Each Receipt this Period  
500.00

Donation

**B.** Full Name (Last, First, Middle Initial)  
**David Krieger**

Mailing Address 764 Dibasio Court

City Henderson State NV Zip Code 89012

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

Name of Employer Haines & Krieger, LLC Occupation Attorney

Receipt For: 2012  
 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 / 2012

**Transaction ID : SA11AI.5247**

Amount of Each Receipt this Period  
2000.00

donation

**C.** Full Name (Last, First, Middle Initial)  
**Tom Mangione**

Mailing Address 624 Summer Mesa Dr.

City Las Vegas State NV Zip Code 89144

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

Name of Employer Coldwell Banker Occupation BDO

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 06 / 2012

**Transaction ID : SA11AI.5307**

Amount of Each Receipt this Period  
250.00

Donation

**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 9 OF 24
	<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)  
**Cegavske for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Thomas M McDonald**

Mailing Address 3 Sable Ridge Court

City Las Vegas State NV Zip Code 89135

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 04 / 2012

**Transaction ID : SA11AI.5278**

Amount of Each Receipt this Period  
 500.00

Donation

**B.** Full Name (Last, First, Middle Initial)  
**Diana I Murphy**

Mailing Address 2847 S. Utica Circle

City Las Vegas State NV Zip Code 89146

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

Name of Employer Occupation  
 Retired Consultant

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 14 / 2012

**Transaction ID : SA11AI.5312**

Amount of Each Receipt this Period  
 250.00

Donation

**C.** Full Name (Last, First, Middle Initial)  
**Joseph T Murphy**

Mailing Address 2847 S Utica Circle

City Las Vegas State NV Zip Code 89146

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

Name of Employer Occupation  
 Retired Consultant

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 14 / 2012

**Transaction ID : SA11AI.5310**

Amount of Each Receipt this Period  
 250.00

Donation

**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 10 OF 24
	<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)  
**Cegavske for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Stanley W Paher**

Mailing Address 4135 Badger Circle

City Reno State NV Zip Code 89519

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 05 / 24 / 2012

**Transaction ID : SA11AI.5271**

Amount of Each Receipt this Period  
 500.00

Donation

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

Mailing Address PO Box 60246

City Boulder City State NV Zip Code 89006

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

Name of Employer Occupation  
 Porter Gordon Silver Consultant

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 05 / 24 / 2012

**Transaction ID : SA11AI.5263**

Amount of Each Receipt this Period  
 500.00

donation

**C.** Full Name (Last, First, Middle Initial)  
**George Ross**

Mailing Address 1962 Barranca Dr

City Henderson State NV Zip Code 89074

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

Name of Employer Occupation  
 Snell & Wilmer LLP Legislative Advocate

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 05 / 2012

**Transaction ID : SA11AI.5288**

Amount of Each Receipt this Period  
 100.00

Donation

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

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

1100.00

**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 24
	<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)  
**Cegavske for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Saffron Flavors of India**

Mailing Address 4450 N. Tenaya Way  
Ste225

City Las Vegas State NV Zip Code 89129

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 05 / 2012

**Transaction ID : SA11AI.5259**

Amount of Each Receipt this Period  
 1500.00  
 donation

**B.** Full Name (Last, First, Middle Initial)  
**Sarika Patel DMD PLLC**

Mailing Address 4450 N. Tenaya Way  
Ste 225

City Las Vegas State NV Zip Code 89129

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 05 / 2012

**Transaction ID : SA11AI.5291**

Amount of Each Receipt this Period  
 500.00  
 Donation

**C.** Full Name (Last, First, Middle Initial)  
**Stephen P. Solomon**

Mailing Address 10832 Button Willow Drive

City Las Vegas State NV Zip Code 89134

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 26 / 2012

**Transaction ID : SA11AI.5264**

Amount of Each Receipt this Period  
 400.00  
 donation

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

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

2400.00

**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 24
	<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)  
**Cegavske for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Stephen P. Solomon**

Mailing Address 10832 Button Willow Drive

City Las Vegas State NV Zip Code 89134

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

Name of Employer Retired Occupation Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 06 / 2012

**Transaction ID : SA11AI.5293**

Amount of Each Receipt this Period  
**500.00**

Donation

**B.** Full Name (Last, First, Middle Initial)  
**The Milton I Schwartz Revocable Family Trust**

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

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 08 / 2012

**Transaction ID : SA11AI.5303**

Amount of Each Receipt this Period  
**250.00**

Donation

**C.** Full Name (Last, First, Middle Initial)  
**Paul Truman**

Mailing Address 102 Grosse Pointe Pl

City Henderson State NV Zip Code 89052

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

Name of Employer Truline Corp. Occupation President

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1500.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 07 / 2012

**Transaction ID : SA11AI.5309**

Amount of Each Receipt this Period  
**500.00**

Donation

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

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

**1250.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 24
	<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)  
**Cegavske for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Western Representation PAC**

Mailing Address PO Box 50655

City Sparks State NV Zip Code 89435

FEC ID number of contributing federal political committee. **C** C00461772

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 25 / 2012

**Transaction ID : SA11AI.5226**

Amount of Each Receipt this Period  
 2500.00  
 donation

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

2500.00

16000.00

**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 24
	<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)  
**Cegavske for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**MAGGIE'S LIST**

Mailing Address 610 S. Boulevard

City Tampa State FL Zip Code 33606

FEC ID number of contributing federal political committee. **C** C00469023

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 05 / 2012

**Transaction ID : SA11C.5249**

Amount of Each Receipt this Period  
 1000.00  
 donation

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

1000.00

1000.00

**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 15 OF 24	
	<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)  
**Cegavske for Congress**

Full Name (Last, First, Middle Initial) <b>A. Advanced Micro Targeting, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 29 / 2012
Mailing Address 8987 W. Flamingo Rd Suite 105		Amount of Each Disbursement this Period 13660.40 <b>Transaction ID : SB17.5318</b>
City Las Vegas State NV Zip Code 89147	Purpose of Disbursement mailers 004 Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Advanced Micro Targeting, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address 8987 W. Flamingo Rd Suite 105		Amount of Each Disbursement this Period 5937.10 <b>Transaction ID : SB17.5319</b>
City Las Vegas State NV Zip Code 89147	Purpose of Disbursement mailers 004 Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Advanced Micro Targeting, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 03 / 2012
Mailing Address 8987 W. Flamingo Rd Suite 105		Amount of Each Disbursement this Period 10396.65 <b>Transaction ID : SB17.5320</b>
City Las Vegas State NV Zip Code 89147	Purpose of Disbursement mailers 004 Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	29994.15
<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 16 OF 24	
	<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)  
**Cegavske for Congress**

Full Name (Last, First, Middle Initial) <b>A. Advanced Micro Targeting, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 05 / 2012
Mailing Address 8987 W. Flamingo Rd Suite 105		Amount of Each Disbursement this Period 1874.25
City Las Vegas	State NV Zip Code 89147	
Purpose of Disbursement mailers	Category/Type 004	<b>Transaction ID : SB17.5321</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Advanced Micro Targeting, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 07 / 2012
Mailing Address 8987 W. Flamingo Rd Suite 105		Amount of Each Disbursement this Period 11266.75
City Las Vegas	State NV Zip Code 89147	
Purpose of Disbursement mailers	Category/Type 004	<b>Transaction ID : SB17.5322</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Campaign Solutions (Edonation 1 account)</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address 117 North Saint Asaph Street		Amount of Each Disbursement this Period 211.20
City Alexandria	State VA Zip Code 22314	
Purpose of Disbursement fees for online contribution portal	Category/Type 003	<b>Transaction ID : SB17.5363</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	13352.20
<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 17 OF 24	
	<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)  
**Cegavske for Congress**

Full Name (Last, First, Middle Initial)  
**A. Campaign Solutions (Edonation 1 account)**

Mailing Address 117 North Saint Asaph Street

City Alexandria State VA Zip Code 22314

Purpose of Disbursement fees for online contribution portal

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2012  Primary  General  Other (specify)

State: District:

Date of Disbursement: 06 / 30 / 2012

Amount of Each Disbursement this Period: 229.56

Transaction ID : SB17.5360

Category/Type: 003

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

Mailing Address 3201 West Tropicana

City Las Vegas State NV Zip Code 89103

Purpose of Disbursement gasoline

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2012  Primary  General  Other (specify)

State: District:

Date of Disbursement: 06 / 12 / 2012

Amount of Each Disbursement this Period: 57.79

Transaction ID : SB17.5341

Category/Type: 002

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

Mailing Address 1250 Eye Street NW

City Washington State DC Zip Code 20005

Purpose of Disbursement legal fees paid

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2012  Primary  General  Other (specify)

State: District:

Date of Disbursement: 05 / 25 / 2012

Amount of Each Disbursement this Period: 1500.00

Transaction ID : SB17.5223

Category/Type: 001

**SUBTOTAL** of Disbursements This Page (optional)..... 1787.35

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 24			
	<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)  
**Cegavske for Congress**

**A. Enterprise Rent a Car**

Full Name (Last, First, Middle Initial)  
Mailing Address 4840 West Charleston Blvd.

City Las Vegas State NV Zip Code 89107

Purpose of Disbursement rental car

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2012  Primary  General  Other (specify)

State: District:

Date of Disbursement: 06 / 14 / 2012

Amount of Each Disbursement this Period: 250.00

Transaction ID : SB17.5328

Category/Type: 002

**B. Friends of the NRA**

Full Name (Last, First, Middle Initial)  
Mailing Address 11250 Waples Mill Rd

City Fairfax State VA Zip Code 22030

Purpose of Disbursement donation

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2012  Primary  General  Other (specify)

State: District:

Date of Disbursement: 05 / 26 / 2012

Amount of Each Disbursement this Period: 321.30

Transaction ID : SB17.5338

Category/Type: 012

**C. Friends of the NRA**

Full Name (Last, First, Middle Initial)  
Mailing Address 11250 Waples Mill Rd

City Fairfax State VA Zip Code 22030

Purpose of Disbursement NRA luncheon, including event fee, and raffle

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2012  Primary  General  Other (specify)

State: District:

Date of Disbursement: 06 / 11 / 2012

Amount of Each Disbursement this Period: 76.00

Transaction ID : SB17.5358

Category/Type: 012

**SUBTOTAL** of Disbursements This Page (optional) ..... 647.30

**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 24	
	<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)  
**Cegavske for Congress**

Full Name (Last, First, Middle Initial) <b>A. Las Vegas Color Graphics, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 04 / 2012
Mailing Address 4265 West Sunset Road		Amount of Each Disbursement this Period 1153.56 <b>Transaction ID : SB17.5324</b>
City Las Vegas	State NV Zip Code 89118	
Purpose of Disbursement printing up mailers	Category/Type 004	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Southwest Airlines</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 29 / 2012
Mailing Address PO Box 36647-1CR		Amount of Each Disbursement this Period 341.60 <b>Transaction ID : SB17.5342</b>
City Dallas	State TX Zip Code 75235	
Purpose of Disbursement plane tickets	Category/Type 002	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Verizon Wireless</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 04 / 2012
Mailing Address PO Box 660108		Amount of Each Disbursement this Period 131.94 <b>Transaction ID : SB17.5323</b>
City Dallas	State TX Zip Code 75266	
Purpose of Disbursement phone bill	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1627.10
<b>TOTAL</b> This Period (last page this line number only).....	47408.10

**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 24	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Cegavske for Congress**

Full Name (Last, First, Middle Initial)  
**A. Campaign Solutions (Edonation 1 account)**

Mailing Address 117 North Saint Asaph Street

City Alexandria State VA Zip Code 22314

Purpose of Disbursement  
payment to remedy imbalance in previous transaction

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2012  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement  
M M / D D / Y Y Y Y  
05 / 31 / 2012

Amount of Each Disbursement this Period  
3376.69

Transaction ID : SB21.5362

Category/Type  
009

Full Name (Last, First, Middle Initial)  
**B. Campaign Solutions (Edonation 1 account)**

Mailing Address 117 North Saint Asaph Street

City Alexandria State VA Zip Code 22314

Purpose of Disbursement  
payment to remedy imbalance in previous transaction

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2012  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement  
M M / D D / Y Y Y Y  
06 / 30 / 2012

Amount of Each Disbursement this Period  
1004.07

Transaction ID : SB21.5361

Category/Type  
009

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

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  
M M / D D / Y Y Y Y

Amount of Each Disbursement this Period

Category/Type

**SUBTOTAL** of Disbursements This Page (optional)..... 3376.69

**TOTAL** This Period (last page this line number only)..... 3376.69

**SCHEDULE D (FEC Form 3)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9  
 10

NAME OF COMMITTEE (In Full)

**Cegavske for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**Advanced Micro Targeting, Inc.**

Nature of Debt (Purpose):  
bill received but not yet paid as of 6/30/12

Mailing Address 8987 W. Flamingo Rd  
Suite 105

City State Zip Code  
Las Vegas NV 89147

Outstanding Balance Beginning This Period  
0.00

Transaction ID : SD10.5367

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period  
4300.00 0.00 4300.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**Advanced Micro Targeting, Inc.**

Nature of Debt (Purpose):  
bill received but not yet paid as of 6/30/12

Mailing Address 8987 W. Flamingo Rd  
Suite 105

City State Zip Code  
Las Vegas NV 89147

Outstanding Balance Beginning This Period  
0.00

Transaction ID : SD10.5368

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period  
17056.80 0.00 17056.80

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**Campaign Solutions (Edonation 1 account)**

Nature of Debt (Purpose):  
error on campaign solutions side. double payment to bank account for donations for January 2012.

Mailing Address 117 North Saint Asaph Street

City State Zip Code  
Alexandria VA 22314

Outstanding Balance Beginning This Period  
3597.62

Transaction ID : SD10.5235

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period  
0.00 3376.69 220.93

- 1) **SUBTOTALS** This Period This Page (optional) ..... ▶
- 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) ▶

21577.73

**SCHEDULE D (FEC Form 3)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9  
 10

NAME OF COMMITTEE (In Full)

**Cegavske for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**Campaign Solutions / The Donatelli Group**

Mailing Address 117 North Saint Asaph Street

City State Zip Code  
Alexandria VA 22314

Nature of Debt (Purpose):  
bill received but not yet paid as of 6/30/12

Outstanding Balance Beginning This Period **Transaction ID : SD10.5364**  
0.00

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period  
1004.07 0.00 1004.07

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**Clark Hill**

Mailing Address 1250 Eye Street NW

City State Zip Code  
Washington DC 20005

Nature of Debt (Purpose):  
legal fees owed by committee at 5/23/12 but not yet paid

Outstanding Balance Beginning This Period **Transaction ID : SD10.5222**  
1500.00

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period  
0.00 1500.00 0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**Clark Hill**

Mailing Address 1250 Eye Street NW

City State Zip Code  
Washington DC 20005

Nature of Debt (Purpose):  
bill received but not yet paid as of 6/30/12

Outstanding Balance Beginning This Period **Transaction ID : SD10.5350**  
0.00

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period  
1500.00 0.00 1500.00

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	▶	2504.07
2) <b>TOTALS</b> This Period (last page this line number only) .....	▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	▶	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶		

**SCHEDULE D (FEC Form 3)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9  
 10

NAME OF COMMITTEE (In Full)

**Cegavske for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**Clark Hill**

Nature of Debt (Purpose):  
bill received but not yet paid as of 6/30/12

Mailing Address 1250 Eye Street NW

City State Zip Code  
Washington DC 20005

Outstanding Balance Beginning This Period  
0.00

Transaction ID : SD10.5351

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period  
1500.00 0.00 1500.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**Red Rock Strategies**

Nature of Debt (Purpose):  
bill received but not yet paid as of 6/30/12

Mailing Address 9500 W. Flamingo Rd.  
#203

City State Zip Code  
Las Vegas NV 89147

Outstanding Balance Beginning This Period  
0.00

Transaction ID : SD10.5347

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period  
5500.00 0.00 5500.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**Red Rock Strategies**

Nature of Debt (Purpose):  
bill received but not yet paid as of 6/30/12

Mailing Address 9500 W. Flamingo Rd.  
#203

City State Zip Code  
Las Vegas NV 89147

Outstanding Balance Beginning This Period  
0.00

Transaction ID : SD10.5344

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period  
5500.00 0.00 5500.00

- 1) **SUBTOTALS** This Period This Page (optional) ..... ▶
- 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) ▶

12500.00

**SCHEDULE D (FEC Form 3)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 24 OF 24
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)

**Cegavske for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Red Rock Strategies</b>	Nature of Debt (Purpose): bill received but not yet paid as of 6/30/12
Mailing Address 9500 W. Flamingo Rd. #203	
City State Zip Code Las Vegas NV 89147	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID : SD10.5345</b>	
Amount Incurred This Period 1709.20	Payment This Period 0.00	Outstanding Balance at Close of This Period 1709.20

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Seale &amp; Beers CPAs</b>	Nature of Debt (Purpose): bill received but not yet paid as of 6/30/12
Mailing Address 50 S. Jones Blvd #202	
City State Zip Code Las Vegas NV 89107	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID : SD10.5348</b>	
Amount Incurred This Period 1050.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1050.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Verizon Wireless</b>	Nature of Debt (Purpose): bill received but not yet paid as of 6/30/12
Mailing Address PO Box 660108	
City State Zip Code Dallas TX 75266	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID : SD10.5349</b>	
Amount Incurred This Period 131.74	Payment This Period 0.00	Outstanding Balance at Close of This Period 131.74

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	2890.94
2) <b>TOTALS</b> This Period (last page this line number only) .....	39472.74
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) ▶	39472.74