

**FEC
FORM 3****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type
over the lines.

12FE4M5

Amodei for Nevada

ADDRESS (number and street)

503 N Division St

Check if different
than previously
reported. (ACC)

Carson City

NV

89703

2. FEC IDENTIFICATION NUMBER ▼

C

C00496760

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS
REPORTNEW
(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

M M /

D D /

Y Y Y Y

in the
State of(c) 30-Day **POST**-Election Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

M M /

D D /

Y Y Y Y

in the
State of

5. Covering Period

M M /

D D /

Y Y Y Y

through

M M /

D D /

Y Y Y Y

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

Type or Print Name of Treasurer Nicola Neilon

Signature of Treasurer

Nicola Neilon

[Electronically Filed]

Date

M M /

D D /

Y Y Y Y

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

FEC Form 3 (Revised 02/2003)

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Write or Type Committee Name

Amodei for Nevada

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	1		2	0	1	3

To:

M	M	/	D	D	/	Y	Y	Y	Y
1	2		3	1		2	0	1	3

	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))....	72321.00	198121.00
(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))	72321.00	197621.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	52799.12	210788.76
(b) Total Offsets to Operating Expenditures (from Line 14).....	1191.90	1191.90
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	51607.22	209596.86
8. Cash on Hand at Close of Reporting Period (from Line 27).....	231539.94	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	9000.00	

For further information contact:

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

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

DETAILED SUMMARY PAGE of Receipts

FEC Form 3 (Revised 12/2003)

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Write or Type Committee Name

Amodei for Nevada

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	1		2	0	1	3

To:

M	M	/	D	D	/	Y	Y	Y	Y
1	2		3	1		2	0	1	3

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).....

35850.00

79075.00

(ii) Unitemized.....

971.00

5996.00

(iii) TOTAL of contributions from individuals ▶

36821.00

85071.00

(b) Political Party Committees.....

0.00

0.00

(c) Other Political Committees (such as PACs).....

35500.00

113050.00

(d) The Candidate.....

0.00

0.00

(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..

72321.00

198121.00

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.)

1191.90

1191.90

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)..... ▶

73512.90

199312.90

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3 (Revised 02/2003)

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II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	52799.12	210788.76
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	1000.00	1000.00
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) ►	53799.12	212288.76

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	211826.16
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	73512.90
25. SUBTOTAL (add Line 23 and Line 24).....	285339.06
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	53799.12
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	231539.94

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

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

FOR LINE NUMBER:

PAGE 5 OF 63

(check only one)

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

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

Full Name (Last, First, Middle Initial)

Gary Andreas

Mailing Address 3 Yorktown Dr

City

Carson city

State

NV

Zip Code

89703

FEC ID number of contributing
federal political committee.

C

Name of Employer

State Farm

Occupation

Insurance Agent

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2013

Transaction ID : SA11AI.9704

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

Kris Bart

Mailing Address 4435 Starwood Ct

City

Reno

State

NV

Zip Code

89519

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self

Occupation

Consultant

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2013

Transaction ID : SA11AI.9714

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

Malinda Campbell

Mailing Address 7280 Cheltenham Way

City

Reno

State

NV

Zip Code

89502

FEC ID number of contributing
federal political committee.

C

Name of Employer

Dynonemic Diesel

Occupation

Owner

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2013

Transaction ID : SA11AI.9703

Amount of Each Receipt this Period

500.00

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

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

1800.00

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

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

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

A. Full Name (Last, First, Middle Initial) Angelina Capurro			Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>11</td> <td></td> <td>01</td> <td></td> <td>2013</td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y Y	11		01		2013
M M M	/	D D D	/	Y Y Y Y Y Y										
11		01		2013										
Mailing Address 30 Promontory Pointe			Transaction ID : SA11AI.9729											
City	State	Zip Code												
Reno	NV	89519												
FEC ID number of contributing federal political committee.			Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="5">250.00</td> </tr> </table>		250.00									
250.00														
Name of Employer None		Occupation Housewife												
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date <table border="1"> <tr> <td colspan="5">250.00</td> </tr> </table>	250.00											
250.00														
B. Full Name (Last, First, Middle Initial) Cindy Carano			Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>10</td> <td></td> <td>25</td> <td></td> <td>2013</td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y Y	10		25		2013
M M M	/	D D D	/	Y Y Y Y Y Y										
10		25		2013										
Mailing Address 550 W. Plumb Ln Ste. B436			Transaction ID : SA11AI.9716											
City	State	Zip Code												
Reno	NV	89509												
FEC ID number of contributing federal political committee.			Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="5">500.00</td> </tr> </table>		500.00									
500.00														
Name of Employer El Dorado Hotel Casino		Occupation Executive Director												
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date <table border="1"> <tr> <td colspan="5">500.00</td> </tr> </table>	500.00											
500.00														
C. Full Name (Last, First, Middle Initial) James Caviola			Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>12</td> <td></td> <td>03</td> <td></td> <td>2013</td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y Y	12		03		2013
M M M	/	D D D	/	Y Y Y Y Y Y										
12		03		2013										
Mailing Address 5 Paradise Valley			Transaction ID : SA11AI.9735											
City	State	Zip Code												
Henderson	NV	89052												
FEC ID number of contributing federal political committee.			Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="5">500.00</td> </tr> </table>		500.00									
500.00														
Name of Employer CA Group Inc		Occupation Executive												
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date <table border="1"> <tr> <td colspan="5">500.00</td> </tr> </table>	500.00											
500.00														
SUBTOTAL of Receipts This Page (optional).....			<table border="1"> <tr> <td colspan="5">1250.00</td> </tr> </table>		1250.00									
1250.00														
TOTAL This Period (last page this line number only).....			<table border="1"> <tr> <td colspan="5"></td> </tr> </table>											

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)

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☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

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

Mailing Address 9295 Prototype Dr

City State Zip Code
Reno NV 89521

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

Name of Employer Occupation
IGT Director Gov Relations & Legal Affairs

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt

M M / D D / Y Y Y Y
11 15 2013

Transaction ID : SA11AI.9734

Amount of Each Receipt this Period

1000.00

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

Mailing Address 5520 Rue St. Tropez

City State Zip Code
Reno NV 89511

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

Name of Employer Occupation
Self employed Consultant

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt

M M / D D / Y Y Y Y
12 20 2013

Transaction ID : SA11AI.9785

Amount of Each Receipt this Period

500.00

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

Mailing Address 1754 Cavern Dr

City State Zip Code
Reno NV 89521

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

Name of Employer Occupation
Nevada Motor Transport Associa Owner

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt

M M / D D / Y Y Y Y
11 15 2013

Transaction ID : SA11AI.9733

Amount of Each Receipt this Period

1000.00

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

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

2500.00

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a 12 ☐ 11b 13a ☐ 11c 13b ☐ 11d 14 ☐ 15

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

A. Full Name (Last, First, Middle Initial) Joseph Gibson			Date of Receipt M M / D D / Y Y Y Y 12 / 12 / 2013	
Mailing Address 5040 Glenbrook Ter NW			Transaction ID : SA11AI.9771	
City	State	Zip Code		
Washinton	DC	20016		
FEC ID number of contributing federal political committee.			Amount of Each Receipt this Period 500.00	
Name of Employer Constantine Cannon		Occupation Attorney		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 500.00		
B. Full Name (Last, First, Middle Initial) Lance Gilman			Date of Receipt M M / D D / Y Y Y Y 12 / 12 / 2013	
Mailing Address PO Box 838			Transaction ID : SA11AI.9764	
City	State	Zip Code		
Poway	CA	92074		
FEC ID number of contributing federal political committee.			Amount of Each Receipt this Period 2600.00	
Name of Employer Lance Gilman Commercial Real E		Occupation Real Estate		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 2600.00		
C. Full Name (Last, First, Middle Initial) Lance Gilman			Date of Receipt M M / D D / Y Y Y Y 12 / 12 / 2013	
Mailing Address PO Box 838			Transaction ID : SA11AI.9772	
City	State	Zip Code		
Poway	CA	92074		
FEC ID number of contributing federal political committee.			Amount of Each Receipt this Period 1000.00	
Name of Employer Lance Gilman Commercial Real E		Occupation Real Estate		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 3600.00		
SUBTOTAL of Receipts This Page (optional).....			4100.00	
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:

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(check only one)

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

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

Full Name (Last, First, Middle Initial) Lance Gilman		Date of Receipt M M / D D / Y Y Y Y 12 / 12 / 2013
Mailing Address PO Box 838		Transaction ID : SA11AI.10010
City Poway	State CA	Zip Code 92074
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period -1000.00
Name of Employer Lance Gilman Commercial Real E	Occupation Real Estate	Redesignate:
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	[MEMO ITEM]

Full Name (Last, First, Middle Initial) Lance Gilman		Date of Receipt M M / D D / Y Y Y Y 12 / 12 / 2013
Mailing Address PO Box 838		Transaction ID : SA11AI.10011
City Poway	State CA	Zip Code 92074
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Lance Gilman Commercial Real E	Occupation Real Estate	Redesignate:
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	[MEMO ITEM]

Full Name (Last, First, Middle Initial) Garry Goett		Date of Receipt M M / D D / Y Y Y Y 12 / 03 / 2013
Mailing Address 11411 Southern Highlands Parkway S		Transaction ID : SA11AI.9752
City Las Vegas	State NV	Zip Code 89141
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Olympia Companies	Occupation CEO	Redesignate:
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

SUBTOTAL of Receipts This Page (optional).....	1000.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

Full Name (Last, First, Middle Initial) Ross Golding		Date of Receipt M M / D D / Y Y Y Y 12 / 03 / 2013	
Mailing Address 3368 Nambe Dr		Transaction ID : SA11AI.9754	
City Reno	State NV		Zip Code 89511
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 1000.00
Name of Employer Reno Diagnostic Centers	Occupation Medical Director		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00		

Full Name (Last, First, Middle Initial) Stephen Hartman		Date of Receipt M M / D D / Y Y Y Y 11 / 05 / 2013	
Mailing Address 150 Plantation Dr		Transaction ID : SA11AI.9731	
City Carson City	State NV		Zip Code 89703
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 2500.00
Name of Employer Hartman & Hartman	Occupation Attorney		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 3500.00		

Full Name (Last, First, Middle Initial) Stephen Hartman		Date of Receipt M M / D D / Y Y Y Y 11 / 05 / 2013	
Mailing Address 150 Plantation Dr		Transaction ID : SA11AI.10007	
City Carson City	State NV		Zip Code 89703
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period -900.00
Name of Employer Hartman & Hartman	Occupation Attorney		Redesignate: [MEMO ITEM]
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date		

SUBTOTAL of Receipts This Page (optional).....	3500.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

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

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

A. Full Name (Last, First, Middle Initial) Stephen Hartman		Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>11</td> <td></td> <td>05</td> <td></td> <td>2013</td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y Y	11		05		2013
M M M	/	D D D	/	Y Y Y Y Y Y									
11		05		2013									
Mailing Address 150 Plantation Dr		Transaction ID : SA11AI.10008											
City Carson City	State NV	Zip Code 89703											
FEC ID number of contributing federal political committee. <div>C</div>		Amount of Each Receipt this Period <div>900.00</div>											
Name of Employer Hartman & Hartman	Occupation Attorney												
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <div></div>												
		Redesignate: [MEMO ITEM]											

B. Full Name (Last, First, Middle Initial) Alan Humphrey		Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>11</td> <td></td> <td>01</td> <td></td> <td>2013</td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y Y	11		01		2013
M M M	/	D D D	/	Y Y Y Y Y Y									
11		01		2013									
Mailing Address 11650 Meadowood Lane		Transaction ID : SA11AI.9727											
City Reno	State NV	Zip Code 89506											
FEC ID number of contributing federal political committee. <div>C</div>		Amount of Each Receipt this Period <div>500.00</div>											
Name of Employer Information requested	Occupation Information requested												
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <div>500.00</div>												

C. Full Name (Last, First, Middle Initial) Gene Krametbauer		Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>12</td> <td></td> <td>03</td> <td></td> <td>2013</td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y Y	12		03		2013
M M M	/	D D D	/	Y Y Y Y Y Y									
12		03		2013									
Mailing Address 2727 S Rainbow Blvd		Transaction ID : SA11AI.9737											
City Las Vegas	State NV	Zip Code 89146											
FEC ID number of contributing federal political committee. <div>C</div>		Amount of Each Receipt this Period <div>500.00</div>											
Name of Employer VTN Nevada	Occupation Land Surveyor												
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <div>500.00</div>												

SUBTOTAL of Receipts This Page (optional).....	<div>1000.00</div>
TOTAL This Period (last page this line number only).....	<div></div>

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

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)
Amodei for Nevada

A. Full Name (Last, First, Middle Initial) Paul Laxalt			Date of Receipt M M / D D / Y Y Y Y 12 / 12 / 2013	
Mailing Address 750 9th St NW #750			Transaction ID : SA11AI.9770	
City	State	Zip Code		
Washington	DC	20001		
FEC ID number of contributing federal political committee.			Amount of Each Receipt this Period 500.00	
Name of Employer The Paul Laxalt Group		Occupation Owner		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 500.00		
B. Full Name (Last, First, Middle Initial) Frank Lepori			Date of Receipt M M / D D / Y Y Y Y 10 / 25 / 2013	
Mailing Address 1475 Hymer Avenue			Transaction ID : SA11AI.9700	
City	State	Zip Code		
Sparks	NV	89431		
FEC ID number of contributing federal political committee.			Amount of Each Receipt this Period 1000.00	
Name of Employer Frank Lepori Construction		Occupation Owner		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 2000.00		
C. Full Name (Last, First, Middle Initial) Tim McCoy			Date of Receipt M M / D D / Y Y Y Y 12 / 03 / 2013	
Mailing Address 11761 Del Sur Ave			Transaction ID : SA11AI.9738	
City	State	Zip Code		
Las Vegas	NV	89138		
FEC ID number of contributing federal political committee.			Amount of Each Receipt this Period 1000.00	
Name of Employer Information requested		Occupation Information requested		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 1000.00		
SUBTOTAL of Receipts This Page (optional).....			2500.00	
TOTAL This Period (last page this line number only).....				

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

Use separate schedule(s)
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(check only one)

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

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

A. Corey Newcome Full Name (Last, First, Middle Initial) Mailing Address 4980 Ghost Dance Cir City Las Vegas State NV Zip Code 89149 FEC ID number of contributing federal political committee. C Name of Employer Information requested Occupation Information requested Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Election Cycle-to-Date 1000.00			Date of Receipt M M / D D / Y Y Y Y 12 / 03 / 2013 Transaction ID : SA11AI.9742 Amount of Each Receipt this Period 1000.00
B. Bill Paddock Full Name (Last, First, Middle Initial) Mailing Address 358 Madge City Las Vegas State NV Zip Code 89110 FEC ID number of contributing federal political committee. C Name of Employer Information requested Occupation Information requested Las Vegas Toilet Rentals Principal Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Election Cycle-to-Date 500.00			Date of Receipt M M / D D / Y Y Y Y 12 / 20 / 2013 Transaction ID : SA11AI.9783 Amount of Each Receipt this Period 500.00
C. George Peek Full Name (Last, First, Middle Initial) Mailing Address 4485 Mountaingate Drive City Reno State NV Zip Code 89519-7938 FEC ID number of contributing federal political committee. C Name of Employer Information requested Occupation Information requested ERGS, Inc President Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Election Cycle-to-Date 1500.00			Date of Receipt M M / D D / Y Y Y Y 10 / 25 / 2013 Transaction ID : SA11AI.9702 Amount of Each Receipt this Period 1000.00
SUBTOTAL of Receipts This Page (optional).....			2500.00
TOTAL This Period (last page this line number only).....			

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

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

A. Full Name (Last, First, Middle Initial) Eugene Perry		Date of Receipt M M / D D / Y Y Y Y 12 / 03 / 2013	
Mailing Address 4 Wild Ridge Ct		Transaction ID : SA11AI.9747	
City Las Vegas	State NV	Zip Code 89135	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C			
Name of Employer None	Occupation None		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00		
B. Full Name (Last, First, Middle Initial) Eugene Perry		Date of Receipt M M / D D / Y Y Y Y 12 / 03 / 2013	
Mailing Address 4 Wild Ridge Ct		Transaction ID : SA11AI.9750	
City Las Vegas	State NV	Zip Code 89135	Amount of Each Receipt this Period 1500.00
FEC ID number of contributing federal political committee. C			
Name of Employer None	Occupation None		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2500.00		
C. Full Name (Last, First, Middle Initial) Thomas Prato		Date of Receipt M M / D D / Y Y Y Y 12 / 20 / 2013	
Mailing Address 105 W Charleston		Transaction ID : SA11AI.9780	
City Las Vegas	State NV	Zip Code 89102	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C			
Name of Employer Artistic Iron Works	Occupation Owner Operator		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00		
SUBTOTAL of Receipts This Page (optional).....		3000.00	
TOTAL This Period (last page this line number only).....			

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

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

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

Full Name (Last, First, Middle Initial)

David Rice

Mailing Address 3611 W Arbu

City

Las Vegas

State

NV

Zip Code

89118

FEC ID number of contributing
federal political committee.

C

Name of Employer

Rice Construction

Occupation

President

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		03		2013

Transaction ID : SA11AI.9751

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

Andrea Russo

Mailing Address 1913 Spyglass Dr

City

Las Vegas

State

NV

Zip Code

89074

FEC ID number of contributing
federal political committee.

C

Name of Employer

Information requested

Occupation

Information requested

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		03		2013

Transaction ID : SA11AI.9740

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

Cortnie Sanchez

Mailing Address 4611 Evan Ridge Ct

City

Las Vegas

State

NV

Zip Code

89129

FEC ID number of contributing
federal political committee.

C

Name of Employer

Information requested

Occupation

Information requested

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		03		2013

Transaction ID : SA11AI.9748

Amount of Each Receipt this Period

1000.00

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

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

3000.00

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

A. Full Name (Last, First, Middle Initial) Ramon Sanchez		Date of Receipt M M / D D / Y Y Y Y 12 / 03 / 2013	
Mailing Address 5180 Rogers St		Transaction ID : SA11AI.9746	
City Las Vegas	State NV	Zip Code 89118	Amount of Each Receipt this Period 1500.00
FEC ID number of contributing federal political committee. C			
Name of Employer P&S MEtals and Supply Company	Occupation Business Owner		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1500.00		
B. Full Name (Last, First, Middle Initial) John Stanko		Date of Receipt M M / D D / Y Y Y Y 10 / 25 / 2013	
Mailing Address 12785 Silver Wolf Rd		Transaction ID : SA11AI.9701	
City Reno	State NV	Zip Code 89511	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C			
Name of Employer Chamion Chevrolet	Occupation Auto Dealer		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00		
C. Full Name (Last, First, Middle Initial) Colton Vollman		Date of Receipt M M / D D / Y Y Y Y 12 / 20 / 2013	
Mailing Address 807 San Gabriel Ave		Transaction ID : SA11AI.9781	
City Henderson	State NV	Zip Code 89052	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C			
Name of Employer VSR	Occupation Manager		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00		
SUBTOTAL of Receipts This Page (optional).....		3500.00	
TOTAL This Period (last page this line number only).....			

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

A. Full Name (Last, First, Middle Initial) William Wellman		Date of Receipt M M / D D / Y Y Y Y 12 / 03 / 2013	
Mailing Address 2308 Premoetheus Ct		Transaction ID : SA11AI.9744	
City Henderson	State NV	Zip Code 89074	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C			
Name of Employer Information requested	Occupation Information requested		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00		
B. Full Name (Last, First, Middle Initial) John Ying		Date of Receipt M M / D D / Y Y Y Y 12 / 31 / 2013	
Mailing Address PO Box 7172 #228		Transaction ID : SA11AI.9995	
City Stateline	State NV	Zip Code 89449	Amount of Each Receipt this Period 2600.00
FEC ID number of contributing federal political committee. C			
Name of Employer Peak Capital	Occupation Business Executive		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2600.00		
C. Full Name (Last, First, Middle Initial) John Ying		Date of Receipt M M / D D / Y Y Y Y 12 / 31 / 2013	
Mailing Address PO Box 7172 #228		Transaction ID : SA11AI.9996	
City Stateline	State NV	Zip Code 89449	Amount of Each Receipt this Period 2600.00
FEC ID number of contributing federal political committee. C			
Name of Employer Peak Capital	Occupation Business Executive		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5200.00		
SUBTOTAL of Receipts This Page (optional).....		6200.00	
TOTAL This Period (last page this line number only).....		35850.00	

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

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

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

Full Name (Last, First, Middle Initial) AKERMAN LLP PAC		Date of Receipt M M / D D / Y Y Y Y Y 12 / 12 / 2013
Mailing Address 495 NORTH KELLER ROAD SUITE 300		Transaction ID : SA11C.9768
City MAITLAND	State FL	
Zip Code 32751		Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C C00280008		
Name of Employer	Occupation	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

Full Name (Last, First, Middle Initial) AMERICAN CABLE ASSOCIATION INC PAC (ACA PAC)		Date of Receipt M M / D D / Y Y Y Y Y 12 / 12 / 2013
Mailing Address ONE PARKWAY CENTER, SUITE 212		Transaction ID : SA11C.9775
City PITTSBURGH	State PA	
Zip Code 15220		Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C C00364109		
Name of Employer	Occupation	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

Full Name (Last, First, Middle Initial) AMERICAN CONCRETE PIPE ASSOCIATION PAC		Date of Receipt M M / D D / Y Y Y Y Y 12 / 03 / 2013
Mailing Address 1303 W WALNUT HILL LANE SUITE 305		Transaction ID : SA11C.9758
City IRVING	State TX	
Zip Code 75038		Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C C00425686		
Name of Employer	Occupation	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

SUBTOTAL of Receipts This Page (optional).....	2500.00
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
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<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 SOCIETY OF ANESTHESIOLOGISTS

Mailing Address **520 N NORTHWEST HIGHWAY**

City **PARK RIDGE** State **IL** Zip Code **60068-2538**

FEC ID number of contributing federal political committee. **C C70004684**

Name of Employer Occupation

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date **2500.00**

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 24 2013

Transaction ID : **SA11C.9789**

Amount of Each Receipt this Period

2500.00

B. Full Name (Last, First, Middle Initial)
AT&T INC. FEDERAL POLITICAL ACTION COMMITTEE (AT&T FEDERAL PAC)

Mailing Address **208 S. AKARD STREET
 SUITE 2701**

City **DALLAS** State **TX** Zip Code **75202**

FEC ID number of contributing federal political committee. **C C00109017**

Name of Employer Occupation

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date **3000.00**

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 25 2013

Transaction ID : **SA11C.9723**

Amount of Each Receipt this Period

1000.00

C. Full Name (Last, First, Middle Initial)
AT&T INC. FEDERAL POLITICAL ACTION COMMITTEE (AT&T FEDERAL PAC)

Mailing Address **208 S. AKARD STREET
 SUITE 2701**

City **DALLAS** State **TX** Zip Code **75202**

FEC ID number of contributing federal political committee. **C C00109017**

Name of Employer Occupation

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date **4000.00**

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 24 2013

Transaction ID : **SA11C.9787**

Amount of Each Receipt this Period

1000.00

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

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

4500.00

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

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

Full Name (Last, First, Middle Initial)

BARRICK GOLD OF NORTH AMERICA INC. EMPLOYEES PAF

Mailing Address 136 E. SOUTH TEMPLE ST.
 SUITE 1300

City	State	Zip Code
SALT LAKE CITY	UT	84111

FEC ID number of contributing
federal political committee.

C C00320580

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

10000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		19		2013

Transaction ID : SA11C.9794

Amount of Each Receipt this Period

3000.00

Full Name (Last, First, Middle Initial)

BUILD POLITICAL ACTION COMMITTEE OF THE NATIONAL ASSOCIATION OF HOME BUILDERS (BUILDPAC)

Mailing Address 1201 15TH STREET, NW

City	State	Zip Code
WASHINGTON	DC	20005

FEC ID number of contributing
federal political committee.

C C00000901

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		31		2013

Transaction ID : SA11C.9795

Amount of Each Receipt this Period

1500.00

Full Name (Last, First, Middle Initial)

CEMEX INC. EMPLOYEES POLITICAL ACTION COMMITTEE

Mailing Address 920 MEMORIAL CITY WAY SUITE 100

City	State	Zip Code
HOUSTON	TX	77024

FEC ID number of contributing
federal political committee.

C C00111880

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		03		2013

Transaction ID : SA11C.9759

Amount of Each Receipt this Period

1500.00

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

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

6000.00

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<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)
CLEAR CHANNEL COMMUNICATIONS INC. PAC

Mailing Address 200 E. BASSE ROAD

City	State	Zip Code
SAN ANTONIO	TX	78209

FEC ID number of contributing federal political committee.

C C00279216

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	31	/	2013

Transaction ID : SA11C.9796

Amount of Each Receipt this Period

1000.00

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

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	31	/	2013

Transaction ID : SA11C.9791

Amount of Each Receipt this Period

1000.00

C. Full Name (Last, First, Middle Initial)
CONSTELLATION BRANDS INC POLITICAL ACTION COMMITTEE

Mailing Address 207 HIGH POINT DRIVE
BUILDING 100

City	State	Zip Code
VICTOR	NY	14564

FEC ID number of contributing federal political committee.

C C00304832

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	12	/	2013

Transaction ID : SA11C.9777

Amount of Each Receipt this Period

1000.00

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

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

3000.00

SCHEDULE A (FEC Form 3)
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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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

 NAME OF COMMITTEE (In Full)
Amodei for Nevada

Full Name (Last, First, Middle Initial)

CULAC THE PAC OF CREDIT UNION NATIONAL ASSOCIATION

Mailing Address 604 PENNSYLVANIA AVENUE, NW

City

WASHINGTON

State

DC

Zip Code

20004-2601

FEC ID number of contributing
federal political committee.

C C00007880

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		25		2013

Transaction ID : SA11C.9713

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

CULAC THE PAC OF CREDIT UNION NATIONAL ASSOCIATION

Mailing Address 604 PENNSYLVANIA AVENUE, NW

City

WASHINGTON

State

DC

Zip Code

20004-2601

FEC ID number of contributing
federal political committee.

C C00007880

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

3000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12		04		2013

Transaction ID : SA11C.9760

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

EMPLOYEES OF NORTHROP GRUMMAN CORPORATION PAC

Mailing Address 2980 FAIRVIEW PARK DRIVE

City

FALLS CHURCH

State

VA

Zip Code

22042

FEC ID number of contributing
federal political committee.

C C00088591

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12		24		2013

Transaction ID : SA11C.9790

Amount of Each Receipt this Period

2000.00

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

4000.00

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 23 OF 63

<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)
FREEPORT-MCMORAN COPPER & GOLD INC. CITIZENSHIP COMMITTEE

Mailing Address 333 N. CENTRAL AVENUE

City	State	Zip Code
PHOENIX	AZ	85004

FEC ID number of contributing federal political committee.

C C00320101

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		29		2013

Transaction ID : SA11C.9726

Amount of Each Receipt this Period

1000.00

B. Full Name (Last, First, Middle Initial)
MGM RESORTS INTERNATIONAL PAC

Mailing Address 2350 KERNER BLVD., SUITE 250

City	State	Zip Code
SAN RAFAEL	CA	94901

FEC ID number of contributing federal political committee.

C C00299321

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		31		2013

Transaction ID : SA11C.9797

Amount of Each Receipt this Period

2500.00

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

Mailing Address 1125 EXECUTIVE CIRCLE

City	State	Zip Code
IRVING	TX	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

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		31		2013

Transaction ID : SA11C.9792

Amount of Each Receipt this Period

2500.00

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

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

6000.00

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

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

FOR LINE NUMBER:

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(check only one)

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

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

A. Full Name (Last, First, Middle Initial)
NATIONAL STONE, SAND & GRAVEL ASSOCIATION ROCKPAC

Mailing Address 1605 KING STREET

City	State	Zip Code
ALEXANDRIA	VA	22314

FEC ID number of contributing
federal political committee.

C C00089458

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 24 / 2013

Transaction ID : SA11C.9788

Amount of Each Receipt this Period

1000.00

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

Mailing Address 700 UNIVERSE BLVD.

City	State	Zip Code
JUNO BEACH	FL	33408

FEC ID number of contributing
federal political committee.

C C00064774

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
11 / 05 / 2013

Transaction ID : SA11C.9732

Amount of Each Receipt this Period

1000.00

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

Mailing Address P.O. BOX 81500

ATTN: JOHN J. VINSKI, TREASURER

City	State	Zip Code
LAS VEGAS	NV	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

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 12 / 2013

Transaction ID : SA11C.9779

Amount of Each Receipt this Period

2500.00

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

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

4500.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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

NAME OF COMMITTEE (In Full)
Amodei for Nevada**A.** Full Name (Last, First, Middle Initial)
NV ENERGY POLITICAL ACTION COMMITTEE

Mailing Address P.O. BOX 81500

ATTN: JOHN J. VINSKI, TREASURER

City	State	Zip Code
LAS VEGAS	NV	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

7000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		17		2013

Transaction ID : SA11C.9778

Amount of Each Receipt this Period

2000.00

B. Full Name (Last, First, Middle Initial)
RAYTHEON COMPANY POLITICAL ACTION COMMITTEEMailing Address 1100 WILSON BLVD
SUITE 1500

City	State	Zip Code
ARLINGTON	VA	22209

FEC ID number of contributing
federal political committee.**C** C00097568

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		04		2013

Transaction ID : SA11C.9763

Amount of Each Receipt this Period

1000.00

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

Mailing Address P.O. BOX 50193

City	State	Zip Code
SPARKS	NV	89434

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

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

4500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		12		2013

Transaction ID : SA11C.9774

Amount of Each Receipt this Period

1000.00

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

4000.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 26 OF 63

<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)
UNION PACIFIC CORP. FUND FOR EFFECTIVE GOVERNMENTMailing Address 600 13TH ST., NW
SUITE 340City State Zip Code
WASHINGTON DC 20005FEC ID number of contributing
federal political committee.**C** C00010470

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
12 31 2013**Transaction ID : SA11C.9793**

Amount of Each Receipt this Period

1000.00

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

Mailing Address

City State Zip Code

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

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M / D D / Y Y Y Y

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

Amount of Each Receipt this Period

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

1000.00

35500.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE 27 OF 63

<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input checked="" type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)
Amodei for Nevada

Full Name (Last, First, Middle Initial)
City of Reno

Mailing Address **1 E. First Street**

City	State	Zip Code
Reno	NV	89501

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

10 / **29** / **2013**

Transaction ID : **SA14.9849**

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

B.
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

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

C.
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

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 PageFOR LINE NUMBER:
(check only one)

PAGE 28 OF 63

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

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NAME OF COMMITTEE (In Full)

Amodei for Nevada

Full Name (Last, First, Middle Initial)

A. 7 eleven

Mailing Address 3701 N Carson St

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		20		2013

City	State	Zip Code
Carson City	NV	89703

Purpose of Disbursement
Fuel in lieu of mileage

002

Amount of Each Disbursement this Period

60.10

Transaction ID : SB17.9947

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

B. Adeles

Mailing Address 1112 N Carson St

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		30		2013

City	State	Zip Code
Carson City	NV	89701

Purpose of Disbursement
Meals - Contributor relations

003

Amount of Each Disbursement this Period

320.00

Transaction ID : SB17.9908

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

C. Aristotle

Mailing Address 205 Pennsylvania Avenue SE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		16		2013

City	State	Zip Code
Washington	DC	20003

Purpose of Disbursement
Campaign Software

001

Amount of Each Disbursement this Period

1625.00

Transaction ID : SB17.9836

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

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

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

2005.10

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 29 OF 63

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

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NAME OF COMMITTEE (In Full)

Amodei for Nevada

Full Name (Last, First, Middle Initial)

A. Aristotle

Mailing Address 205 Pennsylvania Avenue SE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		24		2013

City	State	Zip Code
Washington	DC	20003

Purpose of Disbursement
Campaign Software

001

Amount of Each Disbursement this Period

2762.50

Transaction ID : SB17.9915

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

B. AT & T

Mailing Address PO Box 5025

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		18		2013

City	State	Zip Code
Carol Stream	IL	60197

Purpose of Disbursement
Telephone costs

001

Amount of Each Disbursement this Period

128.81

Transaction ID : SB17.9889

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

C. AT & T

Mailing Address PO Box 5025

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		20		2013

City	State	Zip Code
Carol Stream	IL	60197

Purpose of Disbursement
Campaign Telephone

001

Amount of Each Disbursement this Period

49.84

Transaction ID : SB17.9898

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

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

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

2941.15

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 30 OF 63

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

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NAME OF COMMITTEE (In Full)

Amodei for Nevada

Full Name (Last, First, Middle Initial)

A. AT & T

Mailing Address PO Box 5025

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		12		2013

City	State	Zip Code
Carol Stream	IL	60197

Amount of Each Disbursement this Period

26.15

Purpose of Disbursement
Telephone

001

Transaction ID : SB17.9935

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

B. AT & T

Mailing Address PO Box 5025

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		24		2013

City	State	Zip Code
Carol Stream	IL	60197

Amount of Each Disbursement this Period

26.12

Purpose of Disbursement
Telephone

001

Transaction ID : SB17.9913

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

c. Atlantis Casino

Mailing Address 3800 S Virginia St

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		23		2013

City	State	Zip Code
Reno	NV	89502

Amount of Each Disbursement this Period

58.00

Purpose of Disbursement
Meals - Contributor relations

003

Transaction ID : SB17.9842

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

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

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

110.27

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 31 OF 63

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

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NAME OF COMMITTEE (In Full)

Amodei for Nevada

Full Name (Last, First, Middle Initial)

A. Authnet Gateway

Mailing Address P.O. Box 8999

City	State	Zip Code
San Francisco	CA	94128

Purpose of Disbursement
Bank charges

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			02			2013			

Amount of Each Disbursement this Period

22.35

Transaction ID : SB17.9804

B. Authnet Gateway

Mailing Address P.O. Box 8999

City	State	Zip Code
San Francisco	CA	94128

Purpose of Disbursement
Bank charges

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			04			2013			

Amount of Each Disbursement this Period

20.00

Transaction ID : SB17.9860

C. Authnet Gateway

Mailing Address P.O. Box 8999

City	State	Zip Code
San Francisco	CA	94128

Purpose of Disbursement
Bank charges

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			03			2013			

Amount of Each Disbursement this Period

20.00

Transaction ID : SB17.9979

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

62.35

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 32 OF 63

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

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NAME OF COMMITTEE (In Full)

Amodei for Nevada

Full Name (Last, First, Middle Initial)

A. Brian BalutaMailing Address 70 I St SE
Apt 1135

City Washington State DC Zip Code 20003

Purpose of Disbursement
Stipend

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	D D	Y Y Y Y
12	17	2013

Amount of Each Disbursement this Period

2000.00

Transaction ID : SB17.9916

B. Bill.com

Full Name (Last, First, Middle Initial)

Mailing Address 3200 Ash Street

City Palo Alto State CA Zip Code 94306

Purpose of Disbursement
Bank charges

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	D D	Y Y Y Y
10	07	2013

Amount of Each Disbursement this Period

26.44

Transaction ID : SB17.9810

c. Bill.com

Full Name (Last, First, Middle Initial)

Mailing Address 3200 Ash Street

City Palo Alto State CA Zip Code 94306

Purpose of Disbursement
Bank charges

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	D D	Y Y Y Y
11	07	2013

Amount of Each Disbursement this Period

24.96

Transaction ID : SB17.9866

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

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

2051.40

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 33 OF 63

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

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NAME OF COMMITTEE (In Full)

Amodei for Nevada

Full Name (Last, First, Middle Initial)

A. Bill.com

Mailing Address 3200 Ash Street

City	State	Zip Code
Palo Alto	CA	94306

Purpose of Disbursement
Bank charges

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		09		2013

Amount of Each Disbursement this Period

23.97

Transaction ID : SB17.9973

B. Bull Feathers

Mailing Address 410 1st Street

City	State	Zip Code
Washington	DC	20003

Purpose of Disbursement
Meals - Contributor relations

003

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		04		2013

Amount of Each Disbursement this Period

112.00

Transaction ID : SB17.9805

c. Capital Grill

Mailing Address 601 Pennsylvania Ave NW

City	State	Zip Code
Washington	DC	20004

Purpose of Disbursement
Meals - Contributor relations

003

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		04		2013

Amount of Each Disbursement this Period

400.00

Transaction ID : SB17.9852

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

535.97

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Amodei for Nevada

Full Name (Last, First, Middle Initial)

A. Capital Grill

Mailing Address 601 Pennsylvania Ave NW

City	State	Zip Code
Washington	DC	20004

Purpose of Disbursement
Meals - Contributor relations

003

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		15		2013

Amount of Each Disbursement this Period

890.00

Transaction ID : SB17.9885

B. Capital Grill

Mailing Address 601 Pennsylvania Ave NW

City	State	Zip Code
Washington	DC	20004

Purpose of Disbursement
Meals - Contributor relations

003

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		04		2013

Amount of Each Disbursement this Period

640.00

Transaction ID : SB17.9978

c. Capital Grill

Mailing Address 601 Pennsylvania Ave NW

City	State	Zip Code
Washington	DC	20004

Purpose of Disbursement
Fundraising expenses

003

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		16		2013

Amount of Each Disbursement this Period

2320.00

Transaction ID : SB17.9959

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

3850.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Amodei for Nevada

Full Name (Last, First, Middle Initial)

A. Capital Grill

Mailing Address 601 Pennsylvania Ave NW

City	State	Zip Code
Washington	DC	20004

Purpose of Disbursement
Fundraising expenses

003

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		16		2013

Amount of Each Disbursement this Period

84.50

Transaction ID : SB17.9960

B. Carson City Republican Central Committee

Mailing Address 1931 California Street, Suite B

City	State	Zip Code
Carson City	NV	89701

Purpose of Disbursement
Donation

012

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		31		2013

Amount of Each Disbursement this Period

500.00

Transaction ID : SB17.9990

c. Casey Neilon & Associates, LLC

Mailing Address 503 N Division St

City	State	Zip Code
Carson City	NV	89703

Purpose of Disbursement
Accounting fees

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		12		2013

Amount of Each Disbursement this Period

1081.27

Transaction ID : SB17.9926

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

1665.77

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 36 OF 63

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

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

Full Name (Last, First, Middle Initial)

A. Casey Neilon & Associates, LLC

Mailing Address 503 N Division St

City	State	Zip Code
Carson City	NV	89703

Purpose of Disbursement
Accounting Fees

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		12		2013

Amount of Each Disbursement this Period

595.00

Transaction ID : SB17.9931

B. Casey Neilon & Associates, LLC

Mailing Address 503 N Division St

City	State	Zip Code
Carson City	NV	89703

Purpose of Disbursement
Accounting fees

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		12		2013

Amount of Each Disbursement this Period

1891.25

Transaction ID : SB17.9932

C. Casey Neilon & Associates, LLC

Mailing Address 503 N Division St

City	State	Zip Code
Carson City	NV	89703

Purpose of Disbursement
Accounting fees

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		24		2013

Amount of Each Disbursement this Period

4005.52

Transaction ID : SB17.9912

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

6491.77

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 37 OF 63

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

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

Full Name (Last, First, Middle Initial)

A. Casino Fandango

Mailing Address 3800 South Carson Street

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		15		2013

City	State	Zip Code
Carson City	NV	89701

Purpose of Disbursement
Meals - Contributor relations

003

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Amount of Each Disbursement this Period

274.62

Transaction ID : SB17.9826

B. Casino Fandango

Mailing Address 3800 South Carson Street

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		22		2013

City	State	Zip Code
Carson City	NV	89701

Purpose of Disbursement
Meals - Contributor relations

003

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Amount of Each Disbursement this Period

66.00

Transaction ID : SB17.9841

C. Casino Fandango

Mailing Address 3800 South Carson Street

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		12		2013

City	State	Zip Code
Carson City	NV	89701

Purpose of Disbursement
Meals - Contributor relations

003

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Amount of Each Disbursement this Period

250.00

Transaction ID : SB17.9882

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

590.62

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 38 OF 63

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

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NAME OF COMMITTEE (In Full)

Amodei for Nevada

Full Name (Last, First, Middle Initial)

A. Danielle Cherry

Mailing Address 345 Sondrio Way

City	State	Zip Code
Reno	NV	89521

Purpose of Disbursement
Fundraising commissions and reimbursement of expenses

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		16		2013

Amount of Each Disbursement this Period

725.94

Transaction ID : SB17.9837

B. Danielle Cherry

Mailing Address 345 Sondrio Way

City	State	Zip Code
Reno	NV	89521

Purpose of Disbursement
Fundraising commissions and reimbursment of expenses

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		20		2013

Amount of Each Disbursement this Period

4588.83

Transaction ID : SB17.9896

c. Danielle Cherry

Mailing Address 345 Sondrio Way

City	State	Zip Code
Reno	NV	89521

Purpose of Disbursement
Fundraising commissions and reimbursement of expenses

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		12		2013

Amount of Each Disbursement this Period

2523.45

Transaction ID : SB17.9936

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

7838.22

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 39 OF 63

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

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

Full Name (Last, First, Middle Initial)

A. Chevron

Mailing Address 1102 North Carson Street

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		21		2013

City	State	Zip Code
Carson City	NV	89703

Purpose of Disbursement
Fuel in lieu of mileage

002

Amount of Each Disbursement this Period

63.96

Transaction ID : SB17.9840

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

B. Chevron

Mailing Address 1102 North Carson Street

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		26		2013

City	State	Zip Code
Carson City	NV	89703

Purpose of Disbursement
Fuel in lieu of mileage

002

Amount of Each Disbursement this Period

71.34

Transaction ID : SB17.9902

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

C. Chevron

Mailing Address 1102 North Carson Street

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		09		2013

City	State	Zip Code
Carson City	NV	89703

Purpose of Disbursement
Fuel in lieu of mileage

002

Amount of Each Disbursement this Period

87.24

Transaction ID : SB17.9972

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

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

222.54

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 40 OF 63

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

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NAME OF COMMITTEE (In Full)

Amodei for Nevada

Full Name (Last, First, Middle Initial)

A. City of Reno

Mailing Address 1 E. First Street

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		01		2013

City	State	Zip Code
Reno	NV	89501

Amount of Each Disbursement this Period

1450.00

Purpose of Disbursement
Event Facilities

003

Transaction ID : SB17.9800

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

B. Congressional Institute

Mailing Address 1700 Diagonal Road

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		13		2013

City	State	Zip Code
Alexandria	VA	22314

Amount of Each Disbursement this Period

890.00

Purpose of Disbursement
Seminar/Educational Materials

001

Transaction ID : SB17.9961

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

C. El Dorado Hotel

Mailing Address PO Box 3399

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		12		2013

City	State	Zip Code
Reno	NV	89505

Amount of Each Disbursement this Period

73.49

Purpose of Disbursement
Campaign travel

002

Transaction ID : SB17.9937

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

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

2413.49

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 PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

Full Name (Last, First, Middle Initial)

A. Richard Goddard

Mailing Address 215 Prince St

City	State	Zip Code
Alexandria	VA	22314

Purpose of Disbursement
Reimbursement of expenses

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		24		2013

Amount of Each Disbursement this Period

419.83

Transaction ID : SB17.9914

B. Great Basin Gallery

Mailing Address 110 South Curry Street

City	State	Zip Code
Carson City	NV	89701

Purpose of Disbursement
Picture Framing

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		23		2013

Amount of Each Disbursement this Period

541.43

Transaction ID : SB17.9843

c. Harris Media LLC

Mailing Address 611 S Congress Ave Suite 400

City	State	Zip Code
Austin	TX	78704

Purpose of Disbursement
Reimbursement of expenses

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		16		2013

Amount of Each Disbursement this Period

88.64

Transaction ID : SB17.9835

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

1049.90

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

Full Name (Last, First, Middle Initial)

A. Harris Media LLC

Mailing Address 611 S Congress Ave Suite 400

City	State	Zip Code
Austin	TX	78704

Purpose of Disbursement
Reimbursement of expenses

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		20		2013

Amount of Each Disbursement this Period

538.64

Transaction ID : SB17.9897

B. Incline Village GID

Mailing Address 893 Southwood Blvd

City	State	Zip Code
Incline Village	NV	89451

Purpose of Disbursement
Lake Tahoe Tap Water Bottles

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		16		2013

Amount of Each Disbursement this Period

250.00

Transaction ID : SB17.9986

c. John Ascuaga's Nugget

Mailing Address 1100 Nugget Ave

City	State	Zip Code
Sparks	NV	89431

Purpose of Disbursement
Meals - Contributor relations

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		07		2013

Amount of Each Disbursement this Period

200.00

Transaction ID : SB17.9867

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

538.64

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Amodei for Nevada

Full Name (Last, First, Middle Initial)

A. La Dolce Vita

Mailing Address 12112 Mayfield Rd

City	State	Zip Code
Cleveland	OH	44106

Purpose of Disbursement
Meals - Contributor relations

003

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		20		2013

Amount of Each Disbursement this Period

370.00

Transaction ID : SB17.9894

B. McCormick Kuletos

Mailing Address 900 North Point St

City	State	Zip Code
San Francisco	CA	94109

Purpose of Disbursement
Meals - Contributor relations

003

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		29		2013

Amount of Each Disbursement this Period

504.00

Transaction ID : SB17.9980

c. MGM Grand

Mailing Address 3799 Las Vegas Boulevard South

City	State	Zip Code
Las Vegas	NV	89109

Purpose of Disbursement
Meals - Contributor relations

002

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		13		2013

Amount of Each Disbursement this Period

73.92

Transaction ID : SB17.9992

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

947.92

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Amodei for Nevada

Full Name (Last, First, Middle Initial)

A. MGM Grand

Mailing Address 3799 Las Vegas Boulevard South

City	State	Zip Code
Las Vegas	NV	89109

Purpose of Disbursement
Meals - Contributor relations

003

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		17		2013

Amount of Each Disbursement this Period

510.00

Transaction ID : SB17.9956

B. MGM Grand

Mailing Address 3799 Las Vegas Boulevard South

City	State	Zip Code
Las Vegas	NV	89109

Purpose of Disbursement
Campaign travel

002

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		17		2013

Amount of Each Disbursement this Period

128.00

Transaction ID : SB17.9957

C. Mirabelle

Mailing Address 290 Kingsbury Grade, Suite 22

City	State	Zip Code
Stateline	NV	89449

Purpose of Disbursement
Meals - Contributor relations

003

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		08		2013

Amount of Each Disbursement this Period

245.99

Transaction ID : SB17.9874

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

883.99

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 45 OF 63

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

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

Full Name (Last, First, Middle Initial)

A. National Capital Flag Company

Mailing Address 100 S Quaker Ln

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		15		2013

City	State	Zip Code
Alexandria	VA	22314

Amount of Each Disbursement this Period

103.99

Purpose of Disbursement
Flags

001

Transaction ID : SB17.9823

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

B. Oyamel

Mailing Address 401 7th St NW

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		08		2013

City	State	Zip Code
Washington	DC	20004

Amount of Each Disbursement this Period

340.00

Purpose of Disbursement
Meals - Contributor relations

003

Transaction ID : SB17.9813

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

c. Stacy Parobek

Mailing Address 4865 Ramcreek Trail

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		09		2013

City	State	Zip Code
Reno	NV	89519

Amount of Each Disbursement this Period

486.38

Purpose of Disbursement
Reimbursement for Framing Costs

001

Transaction ID : SB17.9815

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

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

930.37

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)

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☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Amodei for Nevada

Full Name (Last, First, Middle Initial)

A. Proof Restaurant

Mailing Address 775 G St NW,

City Washington State DC Zip Code 20001

Purpose of Disbursement
Meals - Contributor relations

003

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y
11 / 18 / 2013

Amount of Each Disbursement this Period

480.00

Transaction ID : SB17.9887

B. Rapscallions

Mailing Address 1555 S Wells Ave,

City Reno State NV Zip Code 89509

Purpose of Disbursement
Christmas lunch for staff

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y
12 / 19 / 2013

Amount of Each Disbursement this Period

232.00

Transaction ID : SB17.9949

C. Red Lion Inn

Mailing Address 2065 Idaho St,

City Elko State NV Zip Code 89801

Purpose of Disbursement
Campaign Travel

002

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y
12 / 23 / 2013

Amount of Each Disbursement this Period

220.00

Transaction ID : SB17.9946

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

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

932.00

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Amodei for Nevada

Full Name (Last, First, Middle Initial)

A. Redrock Strategies

Mailing Address 9500 W Flamingo Rd #203

City	State	Zip Code
Las Vegas	NV	89147

Purpose of Disbursement
Special Election Win Bonus

003

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2012

☐ Primary ☐ General
☒ Other (specify) Special-General

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		17		2013

Amount of Each Disbursement this Period

2000.00

Transaction ID : SB17.9919

B. Reno Embroidery

Mailing Address 1008 S Wells Ave

City	State	Zip Code
Reno	NV	89509

Purpose of Disbursement
District 2 Patch Design

003

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		11		2013

Amount of Each Disbursement this Period

322.10

Transaction ID : SB17.9967

c. San Marcos Grill

Mailing Address 260 E Winnie Ln

City	State	Zip Code
Carson City	NV	89706

Purpose of Disbursement
Meals - Contributor relations

003

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		21		2013

Amount of Each Disbursement this Period

100.00

Transaction ID : SB17.9838

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

2422.10

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

Full Name (Last, First, Middle Initial)

A. Savemart

Mailing Address 3620 N Carson St

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		26		2013

City	State	Zip Code
Carson City	NV	89703

Amount of Each Disbursement this Period

96.84

Purpose of Disbursement

001

Transaction ID : SB17.9901

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

B. Shell Carson Cty

Mailing Address Hwy 395

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		24		2013

City	State	Zip Code
Carson City	NV	89703

Amount of Each Disbursement this Period

66.56

Purpose of Disbursement
Fuel in lieu of mileage

002

Transaction ID : SB17.9847

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

C. Shell Carson Cty

Mailing Address Hwy 395

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		04		2013

City	State	Zip Code
Carson City	NV	89703

Amount of Each Disbursement this Period

77.67

Purpose of Disbursement
Fuel in lieu of mileage

002

Transaction ID : SB17.9859

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

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

241.07

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

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Amodei for Nevada

Full Name (Last, First, Middle Initial)

A. Shell Carson Cty

Mailing Address Hwy 395

City	State	Zip Code
Carson City	NV	89703

Purpose of Disbursement
Fuel in lieu of mileage

002

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		06		2013

Amount of Each Disbursement this Period

68.00

Transaction ID : SB17.9865

B. Shell Carson Cty

Mailing Address Hwy 395

City	State	Zip Code
Carson City	NV	89703

Purpose of Disbursement
Fuel in lieu of mileage

002

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		12		2013

Amount of Each Disbursement this Period

49.94

Transaction ID : SB17.9880

c. Shell Carson Cty

Mailing Address Hwy 395

City	State	Zip Code
Carson City	NV	89703

Purpose of Disbursement
Fuel in lieu of mileage

002

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		12		2013

Amount of Each Disbursement this Period

53.73

Transaction ID : SB17.9881

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

171.67

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 50 OF 63

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

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

Full Name (Last, First, Middle Initial)

A. Shell Carson Cty

Mailing Address Hwy 395

City	State	Zip Code
Carson City	NV	89703

Purpose of Disbursement
Fuel in lieu of mileage

002

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		18		2013

Amount of Each Disbursement this Period

85.55

Transaction ID : SB17.9951

B. Shell Carson Cty

Mailing Address Hwy 395

City	State	Zip Code
Carson City	NV	89703

Purpose of Disbursement
Fuel in lieu of mileage

002

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		19		2013

Amount of Each Disbursement this Period

77.44

Transaction ID : SB17.9948

c. Shell Carson Cty

Mailing Address Hwy 395

City	State	Zip Code
Carson City	NV	89703

Purpose of Disbursement
Fuel in lieu of mileage

002

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		24		2013

Amount of Each Disbursement this Period

37.69

Transaction ID : SB17.9938

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

200.68

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

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 51 OF 63

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

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

Full Name (Last, First, Middle Initial)

A. Southwest Airlines

Mailing Address P.O. Box 36647-1CR

City	State	Zip Code
Dallas	TX	73235

Purpose of Disbursement
Airfare - campaign travel

002

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		15		2013

Amount of Each Disbursement this Period

214.90

Transaction ID : SB17.9817

B. Southwest Airlines

Mailing Address P.O. Box 36647-1CR

City	State	Zip Code
Dallas	TX	73235

Purpose of Disbursement
Airfare - campaign travel

002

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		15		2013

Amount of Each Disbursement this Period

171.90

Transaction ID : SB17.9820

C. Southwest Airlines

Mailing Address P.O. Box 36647-1CR

City	State	Zip Code
Dallas	TX	73235

Purpose of Disbursement
Airfare - campaign travel

002

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		21		2013

Amount of Each Disbursement this Period

214.90

Transaction ID : SB17.9839

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

601.70

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 52 OF 63

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

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NAME OF COMMITTEE (In Full)

Amodei for Nevada

Full Name (Last, First, Middle Initial)

A. Southwest Airlines

Mailing Address P.O. Box 36647-1CR

City	State	Zip Code
Dallas	TX	73235

Purpose of Disbursement
Airfare - campaign travel

002

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	4		2	0	1	3

Amount of Each Disbursement this Period

6	4	1	.	7	0
---	---	---	---	---	---

Transaction ID : SB17.9844

B. Southwest Airlines

Mailing Address P.O. Box 36647-1CR

City	State	Zip Code
Dallas	TX	73235

Purpose of Disbursement
Airfare - campaign travel

002

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	6		2	0	1	3

Amount of Each Disbursement this Period

2	1	3	.	9	0
---	---	---	---	---	---

Transaction ID : SB17.9863

C. Southwest Airlines

Mailing Address P.O. Box 36647-1CR

City	State	Zip Code
Dallas	TX	73235

Purpose of Disbursement
Airfare - campaign travel

002

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	8		2	0	1	3

Amount of Each Disbursement this Period

4	6	3	.	8	0
---	---	---	---	---	---

Transaction ID : SB17.9886

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

1319.40

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 53 OF 63

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

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

Full Name (Last, First, Middle Initial)

A. Southwest Airlines

Mailing Address P.O. Box 36647-1CR

City	State	Zip Code
Dallas	TX	73235

Purpose of Disbursement
Airfare - campaign travel

002

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		06		2013

Amount of Each Disbursement this Period

429.80

Transaction ID : SB17.9977

B. Stubhub

Mailing Address 199 Fremont, 3rd Floor

City	State	Zip Code
San Francisco	CA	94105

Purpose of Disbursement
Nationals tickets - Contributor relations

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		04		2013

Amount of Each Disbursement this Period

219.60

Transaction ID : SB17.10004

c. Tamarack Junction

Mailing Address 13101 S Virginia St

City	State	Zip Code
Reno	NV	89521

Purpose of Disbursement
Meals - Contributor relations

002

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		14		2013

Amount of Each Disbursement this Period

30.00

Transaction ID : SB17.9883

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

679.40

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 54 OF 63

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

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

Full Name (Last, First, Middle Initial)

A. Target

Mailing Address 3101 Jefferson Davis Hwy

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		04		2013

City	State	Zip Code
Alexandria	VA	22305

Amount of Each Disbursement this Period

298.50

Purpose of Disbursement
Vacuum cleaner to clean office

001

Transaction ID : SB17.9807

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

B. The Firehouse

Mailing Address 1112 2nd St

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		27		2013

City	State	Zip Code
Sacramento	CA	95814

Amount of Each Disbursement this Period

325.00

Purpose of Disbursement
Meals - Contributor relations

003

Transaction ID : SB17.9984

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

c. The M Group

Mailing Address 100 Luna Park #156

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		16		2013

City	State	Zip Code
Alexandria	VA	22305

Amount of Each Disbursement this Period

3263.30

Purpose of Disbursement
Fundraising commissions and reimbursement of expensesCategory/
Type

Transaction ID : SB17.9834

Candidate Name

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

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

3886.80

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 55 OF 63

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

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

Full Name (Last, First, Middle Initial)

A. The M Group

Mailing Address 100 Luna Park #156

City	State	Zip Code
Alexandria	VA	22305

Purpose of Disbursement
Fundraising commissions and reimbursement of expenses

003

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		12		2013

Amount of Each Disbursement this Period

3217.41

Transaction ID : SB17.9934

B. Tortilla Coast

Mailing Address 400 First Street SE

City	State	Zip Code
Washington	DC	20003

Purpose of Disbursement
Meals - Contributor relations

003

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		01		2013

Amount of Each Disbursement this Period

148.70

Transaction ID : SB17.9802

c. Tortilla Coast

Mailing Address 400 First Street SE

City	State	Zip Code
Washington	DC	20003

Purpose of Disbursement
Meals - Contributor relations

003

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		24		2013

Amount of Each Disbursement this Period

116.00

Transaction ID : SB17.9846

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

3482.11

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 56 OF 63

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

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NAME OF COMMITTEE (In Full)
Amodei for Nevada

Full Name (Last, First, Middle Initial)

A. Washoe county Republican Party

Mailing Address 3652 South Virginia Street

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		20		2013

City	State	Zip Code
Reno	NV	89502

Amount of Each Disbursement this Period

600.00

Purpose of Disbursement
Donation

012

Transaction ID : SB17.9988

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

B. Wells Fargo

Mailing Address PO Box 6995

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		08		2013

City	State	Zip Code
Portland	OR	97228

Amount of Each Disbursement this Period

3.00

Purpose of Disbursement
Bank ChargesCategory/
Type

Transaction ID : SB17.9812

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

C. Wells Fargo

Mailing Address PO Box 6995

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		11		2013

City	State	Zip Code
Portland	OR	97228

Amount of Each Disbursement this Period

111.31

Purpose of Disbursement
Merchant Fees

001

Transaction ID : SB17.9816

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

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

714.31

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

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

FOR LINE NUMBER:
(check only one)

PAGE 57 OF 63

☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Amodei for Nevada

Full Name (Last, First, Middle Initial)

A. Wells Fargo

Mailing Address PO Box 6995

City Portland State OR Zip Code 97228

Purpose of Disbursement
Bank CHarges

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y
11 / 08 / 2013

Amount of Each Disbursement this Period

3.00

Transaction ID : SB17.9873

B. Wells Fargo

Mailing Address PO Box 6995

City Portland State OR Zip Code 97228

Purpose of Disbursement
Merchant fees

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y
11 / 14 / 2013

Amount of Each Disbursement this Period

47.90

Transaction ID : SB17.9884

c. Wells Fargo

Mailing Address PO Box 6995

City Portland State OR Zip Code 97228

Purpose of Disbursement
Bank charges

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y
12 / 09 / 2013

Amount of Each Disbursement this Period

3.00

Transaction ID : SB17.9974

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

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

53.90

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 58 OF 63

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

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NAME OF COMMITTEE (In Full)

Amodei for Nevada

Full Name (Last, First, Middle Initial)

A. Wells Fargo

Mailing Address PO Box 6995

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		12		2013

City	State	Zip Code
Portland	OR	97228

Amount of Each Disbursement this Period

90.00

Purpose of Disbursement
Merchant fees

001

Transaction ID : SB17.9964

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

B.

Mailing Address

Date of Disbursement

M M	/	D D	/	Y Y Y Y

City	State	Zip Code

Amount of Each Disbursement this Period

--

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

C.

Mailing Address

Date of Disbursement

M M	/	D D	/	Y Y Y Y

City	State	Zip Code

Amount of Each Disbursement this Period

--

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

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

90.00

49924.61

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 59 OF 63

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

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NAME OF COMMITTEE (In Full)

Amodei for Nevada

Full Name (Last, First, Middle Initial)

A. FRIENDS OF JACK KINGSTON

Mailing Address PO BOX 2133

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		12		2013

City	State	Zip Code
SAVANNAH	GA	31402

Amount of Each Disbursement this Period

1000.00

Purpose of Disbursement
Campaign Contribution

011

Transaction ID : SB18.9922

Candidate Name

Category/
Type

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: GA

District: 11

Full Name (Last, First, Middle Initial)

B.

Mailing Address

Date of Disbursement

M M	/	D D	/	Y Y Y Y

City	State	Zip Code

Amount of Each Disbursement this Period

--

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

C.

Mailing Address

Date of Disbursement

M M	/	D D	/	Y Y Y Y

City	State	Zip Code

Amount of Each Disbursement this Period

--

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

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

1000.00

1000.00

SCHEDULE D (FEC Form 3)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 60 OF 63

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

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):

Accounting fees

Mailing Address 503 N Division St

City State

Zip Code

Carson City

NV

89703

Outstanding Balance Beginning This Period

1081.27

Transaction ID : SD10.9692

Amount Incurred This Period

0.00

Payment This Period

1081.27

Outstanding Balance at Close of This Period

0.00

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

Casey Neilon & Associates, LLC

Nature of Debt (Purpose):

Accounting fees

Mailing Address 503 N Division St

City State

Zip Code

Carson City

NV

89703

Outstanding Balance Beginning This Period

595.00

Transaction ID : SD10.9693

Amount Incurred This Period

0.00

Payment This Period

595.00

Outstanding Balance at Close of This Period

0.00

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

Casey Neilon & Associates, LLC

Nature of Debt (Purpose):

Accounting fees

Mailing Address 503 N Division St

City

State

Zip Code

Carson City

NV

89703

Outstanding Balance Beginning This Period

1891.25

Transaction ID : SD10.9694

Amount Incurred This Period

0.00

Payment This Period

1891.25

Outstanding Balance at Close of This Period

0.00

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

0.00

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

SCHEDULE D (FEC Form 3)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 61 OF 63

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Amodei for Nevada

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

Redrock Strategies

Nature of Debt (Purpose):

Special Election Win Bonus

Mailing Address 9500 W Flamingo Rd #203

City State

Zip Code

Las Vegas

NV

89147

Outstanding Balance Beginning This Period

2000.00

Transaction ID : SD10.7597

Amount Incurred This Period

0.00

Payment This Period

2000.00

Outstanding Balance at Close of This Period

0.00

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

Shirley & Bannister

Nature of Debt (Purpose):

Public Relations Service

Mailing Address 122 South Patrick Street

City State

Zip Code

Alexandria

VA

22314

Outstanding Balance Beginning This Period

4500.00

Transaction ID : SD10.7593

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

4500.00

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

Stutzman Public Affairs

Nature of Debt (Purpose):

Professional Fees

Mailing Address 1415 L Street

City

State

Zip Code

Sacramento

CA

95814

Outstanding Balance Beginning This Period

1500.00

Transaction ID : SD10.7279

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1500.00

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

6000.00

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

: 97 `A=G79 @G B9CI G`H9LH`F9 @G H98 `HC`5 `F9DCFHŽG7 <98I @G `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**(Use separate
schedule(s)
for each
numbered line)

PAGE 63 OF 63

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Amodei for Nevada

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

Stutzman Public Affairs

Nature of Debt (Purpose):

Production Costs

Mailing Address 1415 L Street

City State

Zip Code

Sacramento

CA

95814

Outstanding Balance Beginning This Period

3000.00

Transaction ID : SD10.7284

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

3000.00

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

Nature of Debt (Purpose):

Mailing Address

City State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

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

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) **SUBTOTALS** This Period This Page (optional)

3000.00

2) **TOTALS** This Period (last page this line number only)

9000.00

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

9000.00