

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)

 PAGE 1 OF 9
 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) NEW AMERICA PAC NV	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00549006 </div>
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee Mr. Leo Bletnitsky			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div>MM / DD / YYYY 05 / 27 / 2014</div> </div>	
Mailing Address 2251 North Rampart Blvd #375			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">523.87</div>	
City Las Vegas	State NV	Zip Code 89128	Transaction ID : SE.4168 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div>MM / DD / YYYY 05 / 19 / 2014</div> </div>	
Purpose of Expenditure Video Production		Category/ Type 003		
Name of Federal Candidate CRESENT HARDY		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 04 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NV	
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee Mr. Leo Bletnitsky			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div>MM / DD / YYYY 05 / 27 / 2014</div> </div>	
Mailing Address 2251 North Rampart Blvd #375			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">523.87</div>	
City Las Vegas	State NV	Zip Code 89128	Transaction ID : SE.4169 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div>MM / DD / YYYY 05 / 19 / 2014</div> </div>	
Purpose of Expenditure Video Production		Category/ Type 003		
Name of Federal Candidate NIGER INNIS		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 04 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NV	
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;">1047.74</div>
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
(c) TOTAL Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Michael Gruccio

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05 / 29 / 2014

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24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)

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 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) NEW AMERICA PAC NV		FEC IDENTIFICATION NUMBER ▼ C C00549006	
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M M / D D D / Y Y Y Y Y Y</div>	

Full Name of Payee Cox Media		Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 05 / 27 / 2014	
Mailing Address 1700 Vegas Dr		Amount 3678.38	
City Las Vegas	State NV	Zip Code 89106	Transaction ID : SE.4166
Purpose of Expenditure Advertising Buy	Category/ Type 003	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 05 / 19 / 2014	
Name of Federal Candidate CRESENT HARDY		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose <input type="checkbox"/> President <input type="checkbox"/> Senate State: NV	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee Cox Media		Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 05 / 27 / 2014	
Mailing Address 1700 Vegas Dr		Amount 3678.37	
City Las Vegas	State NV	Zip Code 89106	Transaction ID : SE.4167
Purpose of Expenditure Advertising Buy	Category/ Type 003	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 05 / 19 / 2014	
Name of Federal Candidate NIGER INNIS		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> President <input type="checkbox"/> Senate State: NV	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	7356.75
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

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NAME OF COMMITTEE (In Full) NEW AMERICA PAC NV		FEC IDENTIFICATION NUMBER ▼ C C00549006	
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee KLAS TV 8		Date of Public Distribution/Dissemination MM / DD / YYYY 05 / 27 / 2014	
Mailing Address 3228 Channel 8 Drive		Amount 3081.25	
City Las Vegas	State NV	Zip Code 89109	Transaction ID : SE.4164
Purpose of Expenditure Advertising Buy	Category/Type 003	Date of Disbursement or Obligation MM / DD / YYYY 05 / 19 / 2014	
Name of Federal Candidate CRESENT HARDY		<input type="checkbox"/> Support Office Sought: <input checked="" type="checkbox"/> House District: 04 <input checked="" type="checkbox"/> Oppose <input type="checkbox"/> President <input type="checkbox"/> Senate State: NV	
Calendar Year-To-Date Per Election for Office Sought 8808.75		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee KLAS TV 8		Date of Public Distribution/Dissemination MM / DD / YYYY 05 / 27 / 2014	
Mailing Address 3228 Channel 8 Drive		Amount 3081.25	
City Las Vegas	State NV	Zip Code 89109	Transaction ID : SE.4165
Purpose of Expenditure Advertising Buy	Category/Type 003	Date of Disbursement or Obligation MM / DD / YYYY 05 / 19 / 2014	
Name of Federal Candidate NIGER INNIS		<input checked="" type="checkbox"/> Support Office Sought: <input checked="" type="checkbox"/> House District: 04 <input type="checkbox"/> Oppose <input type="checkbox"/> President <input type="checkbox"/> Senate State: NV	
Calendar Year-To-Date Per Election for Office Sought 5727.50		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	6162.50
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

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Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee KSNV TV		Date of Public Distribution/Dissemination MM / DD / YYYY 05 / 27 / 2014	
Mailing Address 1500 Foremaster Lane		Amount 2146.25	
City Las Vegas	State NV	Zip Code 89101	Transaction ID : SE.4162
Purpose of Expenditure Advertising Buy	Category/Type 003	Date of Disbursement or Obligation MM / DD / YYYY 05 / 19 / 2014	
Name of Federal Candidate NIGER INNIS		<input checked="" type="checkbox"/> Support Office Sought: <input checked="" type="checkbox"/> House District: 04 <input type="checkbox"/> Oppose <input type="checkbox"/> President <input type="checkbox"/> Senate State: NV	
Calendar Year-To-Date Per Election for Office Sought 10955.00		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee KSNV TV		Date of Public Distribution/Dissemination MM / DD / YYYY 05 / 27 / 2014	
Mailing Address 1500 Foremaster Lane		Amount 2146.25	
City Las Vegas	State NV	Zip Code 89101	Transaction ID : SE.4163
Purpose of Expenditure Advertising Buy	Category/Type 003	Date of Disbursement or Obligation MM / DD / YYYY 05 / 19 / 2014	
Name of Federal Candidate CRESENT HARDY		<input type="checkbox"/> Support Office Sought: <input checked="" type="checkbox"/> House District: 04 <input checked="" type="checkbox"/> Oppose <input type="checkbox"/> President <input type="checkbox"/> Senate State: NV	
Calendar Year-To-Date Per Election for Office Sought 2646.25		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	4292.50
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

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NAME OF COMMITTEE (In Full) NEW AMERICA PAC NV		FEC IDENTIFICATION NUMBER ▼ C C00549006	
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee Laguna Productions		Date of Public Distribution/Dissemination MM / DD / YYYY 05 / 27 / 2014	
Mailing Address 2708 S Highland Dr		Amount 1250.00	
City Las Vegas	State NV	Zip Code 89109	Transaction ID : SE.4160
Purpose of Expenditure Video Production	Category/ Type 003	Date of Disbursement or Obligation MM / DD / YYYY 05 / 19 / 2014	
Name of Federal Candidate CRESENT HARDY		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 04 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NV
Calendar Year-To-Date Per Election for Office Sought 23954.97		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee Laguna Productions		Date of Public Distribution/Dissemination MM / DD / YYYY 05 / 27 / 2014	
Mailing Address 2708 S Highland Dr		Amount 1250.00	
City Las Vegas	State NV	Zip Code 89109	Transaction ID : SE.4161
Purpose of Expenditure Video Production	Category/ Type 003	Date of Disbursement or Obligation MM / DD / YYYY 05 / 19 / 2014	
Name of Federal Candidate NIGER INNIS		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 04 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NV
Calendar Year-To-Date Per Election for Office Sought 22704.97		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	2500.00
(b) SUBTOTAL of Unitemized Independent Expenditures▶	
(c) TOTAL Independent Expenditures.....▶	

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24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
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Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee Laguna Productions		Date of Public Distribution/Dissemination MM / DD / YYYY 05 / 27 / 2014	
Mailing Address 2708 S Highland Dr		Amount 75.00	
City Las Vegas	State NV	Zip Code 89109	Transaction ID : SE.4158
Purpose of Expenditure Video Production	Category/ Type 003	Date of Disbursement or Obligation MM / DD / YYYY 05 / 22 / 2014	
Name of Federal Candidate CRESENT HARDY		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 04 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NV
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee Laguna Productions		Date of Public Distribution/Dissemination MM / DD / YYYY 05 / 27 / 2014	
Mailing Address 2708 S Highland Dr		Amount 75.00	
City Las Vegas	State NV	Zip Code 89109	Transaction ID : SE.4159
Purpose of Expenditure Video Production	Category/ Type 003	Date of Disbursement or Obligation MM / DD / YYYY 05 / 22 / 2014	
Name of Federal Candidate NIGER INNIS		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 04 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NV
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	150.00
(b) SUBTOTAL of Unitemized Independent Expenditures▶	
(c) TOTAL Independent Expenditures.....▶	

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 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) NEW AMERICA PAC NV	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00549006 </div>
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee Carlos Maffat		Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div>MM / DD / YYYY 05 / 27 / 2014</div> </div>	
Mailing Address 7495 West Azure Drive		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">523.87</div>	
City North Las Vegas	State NV	Zip Code 89130	Transaction ID : SE.4156 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div>MM / DD / YYYY 05 / 19 / 2014</div> </div>
Purpose of Expenditure Video Production	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">003</div>		
Name of Federal Candidate CRESENT HARDY		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 04 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NV
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;">19359.49</div>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee Carlos Maffat		Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div>MM / DD / YYYY 05 / 27 / 2014</div> </div>	
Mailing Address 7495 West Azure Drive		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">523.87</div>	
City North Las Vegas	State NV	Zip Code 89130	Transaction ID : SE.4157 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div>MM / DD / YYYY 05 / 19 / 2014</div> </div>
Purpose of Expenditure Video Production	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">003</div>		
Name of Federal Candidate NIGER INNIS		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 04 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NV
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;">18835.62</div>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;">1047.74</div>
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>
(c) TOTAL Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>

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Michael Gruccio

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NAME OF COMMITTEE (In Full) NEW AMERICA PAC NV	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> C C00549006 </div>
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on MM / DD / YYYY	

Full Name of Payee Susan Stoffel		Date of Public Distribution/Dissemination MM / DD / YYYY 05 / 27 / 2014	
Mailing Address		Amount 523.87	
City	State	Zip Code	Transaction ID : SE.4154
Purpose of Expenditure Video Production	Category/ Type	003	Date of Disbursement or Obligation MM / DD / YYYY 05 / 19 / 2014
Name of Federal Candidate NIGER INNIS	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> President <input type="checkbox"/> Senate	District: 04 State: NV
Calendar Year-To-Date Per Election for Office Sought	21454.97		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name of Payee Susan Stoffel		Date of Public Distribution/Dissemination MM / DD / YYYY 05 / 27 / 2014	
Mailing Address		Amount 523.87	
City	State	Zip Code	Transaction ID : SE.4155
Purpose of Expenditure Video Production	Category/ Type	003	Date of Disbursement or Obligation MM / DD / YYYY 05 / 19 / 2014
Name of Federal Candidate CRESENT HARDY	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> President <input type="checkbox"/> Senate	District: 04 State: NV
Calendar Year-To-Date Per Election for Office Sought	20931.10		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....	1047.74
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

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NAME OF COMMITTEE (In Full) NEW AMERICA PAC NV		FEC IDENTIFICATION NUMBER ▼ C C00549006
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		MM / DD / YYYY

Full Name of Payee Stuart D. Waymire		Date of Public Distribution/Dissemination MM / DD / YYYY 05 / 27 / 2014
Mailing Address 3588 S. Malafia Cir		Amount 250.00
City Las Vegas	State NV	Zip Code 89103
Purpose of Expenditure Video Production	Category/ Type 003	Transaction ID : SE.4148 Date of Disbursement or Obligation MM / DD / YYYY 05 / 19 / 2014
Name of Federal Candidate CRESENT HARDY	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 04 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NV
Calendar Year-To-Date Per Election for Office Sought	500.00	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee Stuart D. Waymire		Date of Public Distribution/Dissemination MM / DD / YYYY 05 / 27 / 2014
Mailing Address 3588 S. Malafia Cir		Amount 250.00
City Las Vegas	State NV	Zip Code 89103
Purpose of Expenditure Video Production	Category/ Type 003	Transaction ID : SE.4153 Date of Disbursement or Obligation MM / DD / YYYY 05 / 19 / 2014
Name of Federal Candidate NIGER INNIS	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 04 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NV
Calendar Year-To-Date Per Election for Office Sought	250.00	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	500.00
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	24104.97

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