

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. 12FE4M5
ZUFFA POLITICAL ACTION COMMITTEE

ADDRESS (number and street) 2350 KERNER BLVD., SUITE 250
Check if different than previously reported. (ACC) SAN RAFAEL CA 94901

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

C C00459693

3. IS THIS REPORT NEW (N) OR AMENDED (A)

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)
 - July 31 Mid-Year Report (Non-election Year Only) (MY)
 - Termination Report (TER)

- (b) Monthly Report Due On:
- Feb 20 (M2)
 - Mar 20 (M3)
 - Apr 20 (M4)
 - May 20 (M5)
 - Jun 20 (M6)
 - Jul 20 (M7)
 - Aug 20 (M8)
 - Sep 20 (M9)
 - Oct 20 (M10)
 - Nov 20 (M11) (Non-Election Year Only)
 - Dec 20 (M12) (Non-Election Year Only)
 - Jan 31 (YE)

(c) 12-Day **PRE**-Election Report for the: Primary (12P) General (12G) Runoff (12R) Convention (12C) Special (12S)

Election on / / in the State of

(d) 30-Day **POST**-Election Report for the: General (30G) Runoff (30R) Special (30S)

Election on / / in the State of

5. Covering Period 07 / 01 / 2015 through 12 / 31 / 2015

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 STEVEN S. LUCAS

Signature of Treasurer STEVEN S. LUCAS [Electronically Filed] Date 01 / 26 / 2016

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

ZUFFA POLITICAL ACTION COMMITTEE

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

| | COLUMN A This Period | COLUMN B Calendar Year-to-Date |
|--|---------------------------------------|--|
| 6. (a) Cash on Hand January 1, <input type="text" value="2015"/> | <input type="text" value="9054.19"/> | <input type="text" value="9054.19"/> |
| (b) Cash on Hand at Beginning of Reporting Period..... | <input type="text" value="35268.09"/> | |
| (c) Total Receipts (from Line 19) | <input type="text" value="41250.00"/> | <input type="text" value="93110.00"/> |
| (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)..... | <input type="text" value="76518.09"/> | <input type="text" value="102164.19"/> |
| 7. Total Disbursements (from Line 31)..... | <input type="text" value="36430.51"/> | <input type="text" value="62076.61"/> |
| 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))..... | <input type="text" value="40087.58"/> | <input type="text" value="40087.58"/> |
| 9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) | <input type="text" value="0.00"/> | |
| 10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) | <input type="text" value="713.46"/> | |

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

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

Write or Type Committee Name

ZUFFA POLITICAL ACTION COMMITTEE

Report Covering the Period: From: 07 / 01 / 2015 To: 12 / 31 / 2015

| I. Receipts | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|---|-------------------------------|-----------------------------------|
| 11. Contributions (other than loans) From: | | |
| (a) Individuals/Persons Other Than Political Committees | | |
| (i) Itemized (use Schedule A)..... | 41250.00 | 92750.00 |
| (ii) Unitemized | 0.00 | 0.00 |
| (iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶ | 41250.00 | 92750.00 |
| (b) Political Party Committees | 0.00 | 0.00 |
| (c) Other Political Committees (such as PACs)..... | 0.00 | 0.00 |
| (d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) | 41250.00 | 92750.00 |
| 12. Transfers From Affiliated/Other Party Committees..... | 0.00 | 0.00 |
| 13. All Loans Received | 0.00 | 0.00 |
| 14. Loan Repayments Received..... | 0.00 | 0.00 |
| 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)..... | 0.00 | 0.00 |
| 16. Refunds of Contributions Made to Federal Candidates and Other Political Committees..... | 0.00 | 360.00 |
| 17. Other Federal Receipts (Dividends, Interest, etc.)..... | 0.00 | 0.00 |
| 18. Transfers from Non-Federal and Levin Funds | | |
| (a) Non-Federal Account (from Schedule H3)..... | 0.00 | 0.00 |
| (b) Levin Funds (from Schedule H5) | 0.00 | 0.00 |
| (c) Total Transfers (add 18(a) and 18(b)).. | 0.00 | 0.00 |
| 19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶ | 41250.00 | 93110.00 |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶ | 41250.00 | 93110.00 |

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

| II. Disbursements | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 21. Operating Expenditures: | | |
| (a) Allocated Federal/Non-Federal Activity (from Schedule H4) | | |
| (i) Federal Share | 0.00 | 0.00 |
| (ii) Non-Federal Share..... | 0.00 | 0.00 |
| (b) Other Federal Operating Expenditures | 8430.51 | 14076.61 |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) | 8430.51 | 14076.61 |
| 22. Transfers to Affiliated/Other Party Committees..... | 0.00 | 0.00 |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees..... | 28000.00 | 48000.00 |
| 24. Independent Expenditures (use Schedule E) | 0.00 | 0.00 |
| 25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F)..... | 0.00 | 0.00 |
| 26. Loan Repayments Made..... | 0.00 | 0.00 |
| 27. Loans Made..... | 0.00 | 0.00 |
| 28. Refunds of Contributions To: | | |
| (a) Individuals/Persons Other Than Political Committees | 0.00 | 0.00 |
| (b) Political Party Committees | 0.00 | 0.00 |
| (c) Other Political Committees (such as PACs)..... | 0.00 | 0.00 |
| (d) Total Contribution Refunds (add Lines 28(a), (b), and (c))..... | 0.00 | 0.00 |
| 29. Other Disbursements | 0.00 | 0.00 |
| 30. Federal Election Activity (2 U.S.C. §431(20)) | | |
| (a) Allocated Federal Election Activity (from Schedule H6) | | |
| (i) Federal Share | 0.00 | 0.00 |
| (ii) "Levin" Share..... | 0.00 | 0.00 |
| (b) Federal Election Activity Paid Entirely With Federal Funds | 0.00 | 0.00 |
| (c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b)).... | 0.00 | 0.00 |
| 31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) .. | 36430.51 | 62076.61 |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 36430.51 | 62076.61 |

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

| III. Net Contributions/Operating Expenditures | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 33. Total Contributions (other than loans) (from Line 11(d), page 3) | 41250.00 | 92750.00 |
| 34. Total Contribution Refunds (from Line 28(d)) | 0.00 | 0.00 |
| 35. Net Contributions (other than loans) (subtract Line 34 from Line 33) | 41250.00 | 92750.00 |
| 36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) | 8430.51 | 14076.61 |
| 37. Offsets to Operating Expenditures (from Line 15, page 3)..... | 0.00 | 0.00 |
| 38. Net Operating Expenditures (subtract Line 37 from Line 36) | 8430.51 | 14076.61 |

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

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 6 OF 17 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
ZUFFA POLITICAL ACTION COMMITTEE

A. TIMOTHY J. BELLAMY
Full Name (Last, First, Middle Initial)

Mailing Address 2960 WEST SAHARA AVENUE

| | | |
|-----------|-------|----------|
| City | State | Zip Code |
| LAS VEGAS | NV | 89102 |

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

| | |
|---------------------------------------|--------------------------------------|
| Name of Employer | Occupation |
| ZUFFA, LLC dba ULTIMATE FIGHTING CHAM | SENIOR VICE PRESIDENT & ASSOCIATE GE |

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 27 / 2015

Transaction ID : INCA351

Amount of Each Receipt this Period
 1000.00

B. FRANK J. FERTITTA III
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 379045

| | | |
|-----------|-------|----------|
| City | State | Zip Code |
| LAS VEGAS | NV | 89137 |

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

| | |
|-----------------------|------------------|
| Name of Employer | Occupation |
| STATION CASINOS, INC. | CHAIRMAN AND CEO |

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 02 / 2015

Transaction ID : INCA353

Amount of Each Receipt this Period
 5000.00

C. JILL ANN FERTITTA
Full Name (Last, First, Middle Initial)

Mailing Address P.O BOX 379045

| | | |
|-----------|-------|----------|
| City | State | Zip Code |
| Las Vegas | NV | 89137 |

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

| | |
|------------------|------------|
| Name of Employer | Occupation |
| N/A | HOMEMAKER |

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 02 / 2015

Transaction ID : INCA352

Amount of Each Receipt this Period
 5000.00

| | |
|--|----------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 11000.00 |
| TOTAL This Period (last page this line number only).....▶ | |

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

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 7 OF 17 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | | <input type="checkbox"/> 15 |
| | | <input type="checkbox"/> 16 |
| | | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
ZUFFA POLITICAL ACTION COMMITTEE

A. DONNA MARCOLINI
Full Name (Last, First, Middle Initial)

Mailing Address 1010 RIPPLESTONE AVENUE

| | | |
|-----------------|-------|----------|
| City | State | Zip Code |
| NORTH LAS VEGAS | NV | 89081 |

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

| | |
|--|------------------------------------|
| Name of Employer | Occupation |
| ZUFFA, LLC dba ULTIMATE FIGHTING CHAMP | VICE PRESIDENT OF EVENT OPERATIONS |

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 02 / 2015

Transaction ID : INCA354

Amount of Each Receipt this Period
 250.00

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

Mailing Address 10033 CHARLEMONT DRIVE

| | | |
|-----------|-------|----------|
| City | State | Zip Code |
| LAS VEGAS | NV | 89134 |

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

| | |
|--|--|
| Name of Employer | Occupation |
| ZUFFA, LLC dba ULTIMATE FIGHTING CHAMP | VICE PRESIDENT OF FINANCIAL ADMINISTRATION |

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 10 / 2015

Transaction ID : INCA355

Amount of Each Receipt this Period
 5000.00

C. FRANK FERTITTA, IV
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 379045

| | | |
|-----------|-------|----------|
| City | State | Zip Code |
| Las Vegas | NV | 89137 |

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

| | |
|------------------|-----------------|
| Name of Employer | Occupation |
| N/A | COLLEGE STUDENT |

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 09 / 2015

Transaction ID : INCA374

Amount of Each Receipt this Period
 5000.00

| | |
|---|----------|
| SUBTOTAL of Receipts This Page (optional)..... | 10250.00 |
| TOTAL This Period (last page this line number only)..... | |

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

| | | |
|---|--|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 8 OF 17 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <input type="checkbox"/> 14 |

| | | |
|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 12 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)
ZUFFA POLITICAL ACTION COMMITTEE

A. LORENZO FERTITTA, JR.
 Full Name (Last, First, Middle Initial)
 Mailing Address P.O. BOX 379045

| | | |
|-------------------|-------------|-------------------|
| City Las Vegas | State NV | Zip Code 89137 |
|-------------------|-------------|-------------------|

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

| | |
|-------------------------|-------------------------------|
| Name of Employer N/A | Occupation COLLEGE STUDENT |
|-------------------------|-------------------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 09 / 2015

Transaction ID : INCA373

Amount of Each Receipt this Period
 5000.00

B. KELLEY ANN FERTITTA
 Full Name (Last, First, Middle Initial)
 Mailing Address P.O. BOX 379045

| | | |
|-------------------|-------------|-------------------|
| City Las Vegas | State NV | Zip Code 89137 |
|-------------------|-------------|-------------------|

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

| | |
|--------------------------------------|-------------------------------------|
| Name of Employer STATIONS CASINOS | Occupation DIRECTOR OF MARKETING |
|--------------------------------------|-------------------------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 09 / 2015

Transaction ID : INCA371

Amount of Each Receipt this Period
 5000.00

C. NICCO J FERTITTA
 Full Name (Last, First, Middle Initial)
 Mailing Address P.O. BOX 379045

| | | |
|-------------------|-------------|-------------------|
| City Las Vegas | State NV | Zip Code 89137 |
|-------------------|-------------|-------------------|

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

| | |
|-------------------------|-------------------------------|
| Name of Employer N/A | Occupation COLLEGE STUDENT |
|-------------------------|-------------------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 09 / 2015

Transaction ID : INCA369

Amount of Each Receipt this Period
 5000.00

| | |
|--|----------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 15000.00 |
| TOTAL This Period (last page this line number only).....▶ | |

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

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

FOR LINE NUMBER: PAGE 9 OF 17
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
ZUFFA POLITICAL ACTION COMMITTEE

A. VICTORIA FERTITTA
 Full Name (Last, First, Middle Initial)
 Mailing Address P.O. BOX 379045
 City Las Vegas State NV Zip Code 89137
 FEC ID number of contributing federal political committee. **C**
 Name of Employer N/A Occupation COLLEGE STUDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 09 / 2015
Transaction ID : INCA370
 Amount of Each Receipt this Period
 5000.00

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) ▼
 Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 Amount of Each Receipt this Period

C.
 Full Name (Last, First, Middle Initial)
 Mailing Address
 City State Zip Code
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 Amount of Each Receipt this Period

| | |
|--|----------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 5000.00 |
| TOTAL This Period (last page this line number only).....▶ | 41250.00 |

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

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

FOR LINE NUMBER:
(check only one)

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
ZUFFA POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. NIELSEN MERKSAMER PARRINELLO GROSS & LEONI LLP

Mailing Address 1415 L STREET, SUITE 1200

City State Zip Code
SACRAMENTO CA 95814

Purpose of Disbursement
LEGAL SERVICES & PAC ADMINISTRATION

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : EXPB340

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. NIELSEN MERKSAMER PARRINELLO GROSS & LEONI LLP

Mailing Address 1415 L STREET, SUITE 1200

City State Zip Code
SACRAMENTO CA 95814

Purpose of Disbursement
LEGAL SERVICES & PAC ADMINISTRATION

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : EXPB338

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. NIELSEN MERKSAMER PARRINELLO GROSS & LEONI LLP

Mailing Address 1415 L STREET, SUITE 1200

City State Zip Code
SACRAMENTO CA 95814

Purpose of Disbursement
LEGAL SERVICES & PAC ADMINISTRATION

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : EXPB345

Amount of Each Disbursement this Period

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

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

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

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

FOR LINE NUMBER:
(check only one)

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
ZUFFA POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. NIELSEN MERKSAMER PARRINELLO GROSS & LEONI LLP

Mailing Address 1415 L STREET, SUITE 1200

City State Zip Code
SACRAMENTO CA 95814

Purpose of Disbursement
LEGAL SERVICES & PAC ADMINISTRATION

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : EXPB357

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. ZUFFA, LLC

Mailing Address 2960 WEST SAHARA AVENUE

City State Zip Code
LAS VEGAS NV 89102

Purpose of Disbursement
PAC ADMINISTRATION

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : EXPB366

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. NIELSEN MERKSAMER PARRINELLO GROSS & LEONI LLP

Mailing Address 1415 L STREET, SUITE 1200

City State Zip Code
SACRAMENTO CA 95814

Purpose of Disbursement
LEGAL SERVICES & PAC ADMINISTRATION

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : EXPB377

Amount of Each Disbursement this Period

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

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

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

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

FOR LINE NUMBER:
(check only one)

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
ZUFFA POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. NIELSEN MERKSAMER PARRINELLO GROSS & LEONI LLP

Mailing Address 1415 L STREET, SUITE 1200

City State Zip Code
SACRAMENTO CA 95814

Purpose of Disbursement
LEGAL SERVICES & PAC ADMINISTRATION

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 10 | | | 19 | | | 2015 | | | |

Transaction ID : EXPB375

Amount of Each Disbursement this Period

| | | | | | | | | | |
|--|--|--|--|--|--|--|--|--|---------|
| | | | | | | | | | |
| | | | | | | | | | 1156.75 |

Full Name (Last, First, Middle Initial)

B. NIELSEN MERKSAMER PARRINELLO GROSS & LEONI LLP

Mailing Address 1415 L STREET, SUITE 1200

City State Zip Code
SACRAMENTO CA 95814

Purpose of Disbursement
LEGAL SERVICES & PAC ADMINISTRATION

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 11 | | | 13 | | | 2015 | | | |

Transaction ID : EXPB381

Amount of Each Disbursement this Period

| | | | | | | | | | |
|--|--|--|--|--|--|--|--|--|--------|
| | | | | | | | | | |
| | | | | | | | | | 895.96 |

Full Name (Last, First, Middle Initial)

C. NIELSEN MERKSAMER PARRINELLO GROSS & LEONI LLP

Mailing Address 1415 L STREET, SUITE 1200

City State Zip Code
SACRAMENTO CA 95814

Purpose of Disbursement
LEGAL SERVICES & PAC ADMINISTRATION

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 11 | | | 2015 | | | |

Transaction ID : EXPB385

Amount of Each Disbursement this Period

| | | | | | | | | | |
|--|--|--|--|--|--|--|--|--|--------|
| | | | | | | | | | |
| | | | | | | | | | 574.50 |

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

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

| | | | | | | | | | |
|--|--|--|--|--|--|--|--|--|---------|
| | | | | | | | | | 2627.21 |
|--|--|--|--|--|--|--|--|--|---------|

| | | | | | | | | | |
|--|--|--|--|--|--|--|--|--|---------|
| | | | | | | | | | 8430.51 |
|--|--|--|--|--|--|--|--|--|---------|

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

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

FOR LINE NUMBER:
(check only one)

| | | | | | |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
ZUFFA POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. AMODEI FOR NEVADA

Mailing Address 503 N DIVISION ST.

City CARSON CITY State NV Zip Code 89703

Purpose of Disbursement

011

Category/
Type

Candidate Name

MARK EUGENE AMODEI

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: NV District: 02

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 8 | | 0 | 3 | | 2 | 0 | 1 | 5 |

Transaction ID : EXPB348

Amount of Each Disbursement this Period

| | | | | | | |
|---|---|---|---|---|---|---|
| 2 | 5 | 0 | 0 | . | 0 | 0 |
|---|---|---|---|---|---|---|

Full Name (Last, First, Middle Initial)

B. SEARCHLIGHT LEADERSHIP FUND

Mailing Address 700 13TH STREET, NW, SUITE 600

City Washington, Dc State Zip Code 20005

Purpose of Disbursement

011

Category/
Type

Candidate Name

LEADERSHIP PAC

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 8 | | 0 | 3 | | 2 | 0 | 1 | 5 |

Transaction ID : EXPB347

Amount of Each Disbursement this Period

| | | | | | | |
|---|---|---|---|---|---|---|
| 5 | 0 | 0 | 0 | . | 0 | 0 |
|---|---|---|---|---|---|---|

Full Name (Last, First, Middle Initial)

C. ROBERSON FOR CONGRESS

Mailing Address PO BOX 371722

City Las Vegas State NV Zip Code 89137

Purpose of Disbursement

011

Category/
Type

Candidate Name

MICHAEL ROBERSON

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: NV District: 03

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 8 | | 1 | 2 | | 2 | 0 | 1 | 5 |

Transaction ID : EXPB350

Amount of Each Disbursement this Period

| | | | | | | |
|---|---|---|---|---|---|---|
| 1 | 5 | 0 | 0 | . | 0 | 0 |
|---|---|---|---|---|---|---|

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

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

| | | | | | | |
|---|---|---|---|---|---|---|
| 9 | 0 | 0 | 0 | . | 0 | 0 |
|---|---|---|---|---|---|---|

| | | | | | | |
|---|---|---|---|---|---|---|
| 9 | 0 | 0 | 0 | . | 0 | 0 |
|---|---|---|---|---|---|---|

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

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

FOR LINE NUMBER:
(check only one)

| | | | | | |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
ZUFFA POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. TITUS FOR CONGRESS

Mailing Address PO BOX 72454

City LAS VEGAS State NV Zip Code 89170

Purpose of Disbursement

011

Category/
Type

Candidate Name
DINA TITUS

Office Sought: House
 Senate
 President
State: NV District: 01

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
09 / 15 / 2015

Transaction ID : EXPB359

Amount of Each Disbursement this Period

1500.00

Full Name (Last, First, Middle Initial)

B. CATHY MCMORRIS RODGERS FOR CONGRESS

Mailing Address BOX 137

City Spokane State WA Zip Code 99210

Purpose of Disbursement

011

Category/
Type

Candidate Name
CATHY MCMORRIS RODGERS

Office Sought: House
 Senate
 President
State: WA District: 05

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
09 / 18 / 2015

Transaction ID : EXPB362

Amount of Each Disbursement this Period

2700.00

Full Name (Last, First, Middle Initial)

C. CORY GARDNER FOR SENATE

Mailing Address 9227 E. LINCOLN AVE., #200-234

City LONE TREE State CO Zip Code 80124

Purpose of Disbursement

011

Category/
Type

Candidate Name
CORY GARDNER

Office Sought: House
 Senate
 President
State: CO District:

Disbursement For: 2020
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
09 / 18 / 2015

Transaction ID : EXPB361

Amount of Each Disbursement this Period

2700.00

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

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

6900.00

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

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

FOR LINE NUMBER:
(check only one)

| | | | | | |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
ZUFFA POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. CORY GARDNER FOR SENATE

Mailing Address 9227 E. LINCOLN AVE., #200-234

City Lone Tree State CO Zip Code 80124

Purpose of Disbursement

011

Candidate Name
CORY GARDNER

Category/
Type

Office Sought: House
 Senate
 President
State: CO District:

Disbursement For: 2020
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
09 / 18 / 2015

Transaction ID : EXPB363

Amount of Each Disbursement this Period

2700.00

Full Name (Last, First, Middle Initial)

B. FRIENDS OF JOE HECK

Mailing Address PO BOX 753908

City Las Vegas State NV Zip Code 89136

Purpose of Disbursement

011

Candidate Name
JOE HECK

Category/
Type

Office Sought: House
 Senate
 President
State: NV District:

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
09 / 30 / 2015

Transaction ID : EXPB364

Amount of Each Disbursement this Period

2700.00

Full Name (Last, First, Middle Initial)

C. FRIENDS OF JOE HECK

Mailing Address PO BOX 753908

City Las Vegas State NV Zip Code 89136

Purpose of Disbursement

011

Candidate Name
JOE HECK

Category/
Type

Office Sought: House
 Senate
 President
State: NV District:

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
09 / 30 / 2015

Transaction ID : EXPB365

Amount of Each Disbursement this Period

2700.00

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

8100.00

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

| | | | | | |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
ZUFFA POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. TARKANIAN FOR CONGRESS

Mailing Address 3008 CAMPBELL CIRCLE

City Las Vegas State NV Zip Code 89107

Purpose of Disbursement

011

Category/
Type

Candidate Name

DANNY TARKANIAN

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: NV District: 03

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 11 | / | 24 | / | 2015 |

Transaction ID : EXPB383

Amount of Each Disbursement this Period

| |
|---------|
| 1500.00 |
|---------|

Full Name (Last, First, Middle Initial)

B. WRIGHT 2016

Mailing Address 193 MALCOLM X BLVD, SUITE 1

City New York State NY Zip Code 10026

Purpose of Disbursement

011

Category/
Type

Candidate Name

KEITH L.T. WRIGHT

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: NY District: 13

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 14 | / | 2015 |

Transaction ID : EXPB387

Amount of Each Disbursement this Period

| |
|---------|
| 2500.00 |
|---------|

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| | / | | / | |

Amount of Each Disbursement this Period

| |
|--|
| |
|--|

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

4000.00

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

28000.00

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

| | |
|---|---|
| (Use separate schedule(s) for each numbered line) | PAGE 17 OF 17 |
| | FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10 |

NAME OF COMMITTEE (In Full)
ZUFFA POLITICAL ACTION COMMITTEE

| | |
|---|--|
| A. Full Name (Last, First, Middle Initial) of Debtor or Creditor NIELSEN MERKSAMER PARRINELLO GROSS & LEONI LLP | Nature of Debt (Purpose): LEGAL SERVICES & PAC ADMINISTRATION |
| Mailing Address 1415 L STREET, SUITE 1200 | |
| City State Zip Code SACRAMENTO CA 95814 | |

| | | |
|---|---------------------------------|---|
| Outstanding Balance Beginning This Period 621.50 | Transaction ID : PAYD334 | |
| Amount Incurred This Period 0.00 | Payment This Period 621.50 | Outstanding Balance at Close of This Period 0.00 |

| | |
|---|--|
| B. Full Name (Last, First, Middle Initial) of Debtor or Creditor NIELSEN MERKSAMER PARRINELLO GROSS & LEONI LLP | Nature of Debt (Purpose): LEGAL SERVICES & PAC ADMINISTRATION |
| Mailing Address 1415 L STREET, SUITE 1200 | |
| City State Zip Code SACRAMENTO CA 95814 | |

| | | |
|---|---------------------------------|---|
| Outstanding Balance Beginning This Period 765.48 | Transaction ID : PAYD342 | |
| Amount Incurred This Period 0.00 | Payment This Period 765.48 | Outstanding Balance at Close of This Period 0.00 |

| | |
|---|--|
| C. Full Name (Last, First, Middle Initial) of Debtor or Creditor NIELSEN MERKSAMER PARRINELLO GROSS & LEONI LLP | Nature of Debt (Purpose): LEGAL SERVICES & PAC ADMINISTRATION |
| Mailing Address 1415 L STREET, SUITE 1200 | |
| City State Zip Code SACRAMENTO CA 95814 | |

| | | |
|---|---------------------------------|---|
| Outstanding Balance Beginning This Period 0.00 | Transaction ID : PAYD390 | |
| Amount Incurred This Period 713.46 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 713.46 |

| | |
|--|--------|
| 1) SUBTOTALS This Period This Page (optional)..... ▶ | 713.46 |
| 2) TOTALS This Period (last page this line number only)..... ▶ | 713.46 |
| 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) ▶ | 713.46 |