

**FEC
FORM 3**

**REPORT OF RECEIPTS
AND DISBURSEMENTS**

For An Authorized Committee

RECEIVED

Office Use Only
JAN 10 PM 12:02

1. NAME OF
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type
over the lines.

12FE4M5

FEC MAIL CENTER

Kristen Spees Committee

ADDRESS (number and street)

808 Northwood Blvd #2

☐ Check if different
than previously
reported. (ACC)

Incline Village

NV

89450

FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

C00565408

3. IS THIS
REPORT



NEW
(N)

OR



AMENDED
(A)

NU

02

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 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 Y

in the
State of

5. Covering Period

03 / 04 / 2014

through

09 / 30 / 2014

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

Type or Print Name of Treasurer

Kristen Spees

Signature of Treasurer

Kristen Spees

Date

10 / 09 / 2014

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

Office
Use
Only

FEC FORM 3
(Revised 02/2003)

SUMMARY PAGE

FEC Form 3 (Revised 02/2003)

of Receipts and Disbursements

Page 2

Write or Type Committee Name

Report Covering the Period:

From:

03 / 04 / 26 Y Y

To:

09 / 30 / 20 Y Y

COLUMN A
This Period

COLUMN B
Election Cycle-to-Date

Net Contributions (other than loans)

(a) Total Contributions
(other than loans) (from Line 11(e))

6,440.00

6,440.00

(b) Total Contribution Refunds
(from Line 20(d))

0.00

0

(c) Net Contributions (other than loans)
(subtract Line 6(b) from Line 6(a))

6,440.00

6,440.00

Net Operating Expenditures

(a) Total Operating Expenditures
(from Line 17)

4,343.98

4,343.98

(b) Total Offsets to Operating
Expenditures (from Line 14)

0

0

(c) Net Operating Expenditures
(subtract Line 7(b) from Line 7(a))

4,343.98

4,343.98

8. Cash on Hand at Close of
Reporting Period (from Line 27)

2,096.02

9. Debts and Obligations Owed **TO**
the Committee (Itemize all on
Schedule C and/or Schedule D)

0

10. Debts and Obligations Owed **BY**
the Committee (Itemize all on
Schedule C and/or Schedule D)

0

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)

Page 3

Write or Type Committee Name

Report Covering the Period: From:

M 3 / D 4 / Y 2014

To:

M 9 / D 30 / Y 2014

I. RECEIPTS

COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date

11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than Political Committees

(i) Itemized (use Schedule A)

4,740.00

4,740.00

(ii) Unitemized

0.00

0.00

(iii) TOTAL of contributions from individuals ▶

4,740.00

4,740.00

(b) Political Party Committees

0.00

0.00

(c) Other Political Committees (such as PACs)

0.00

0.00

(d) The Candidate

1,700.00

1,700.00

(e) TOTAL CONTRIBUTIONS

(other than loans)

(add Lines 11(a)(iii), (b), (c), and (d))..

6,440.00

6,440.00

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.)

0.00

0.00

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) ▶

6,440.00

6,440.00

DETAILED SUMMARY PAGE

FEC Form 3 (Revised 02/2003)

of Disbursements

Page 4

II. DISBURSEMENTS

COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date

17. OPERATING EXPENDITURES.....

43,439.8

43,439.8

18. TRANSFERS TO OTHER
AUTHORIZED COMMITTEES

0.00

0.00

19. LOAN REPAYMENTS:

(a) Of Loans Made or Guaranteed
by the Candidate.....

0.00

0

(b) Of All Other Loans

0.00

0

(c) TOTAL LOAN REPAYMENTS
(add Lines 19(a) and (b)).....

0.00

0

20. REFUNDS OF CONTRIBUTIONS TO:

(a) Individuals/Persons Other
Than Political Committees

0.00

0

(b) Political Party Committees.....

0.00

0

(c) Other Political Committees
(such as PACs)

0.00

0

(d) TOTAL CONTRIBUTION REFUNDS
(add Lines 20(a), (b), and (c)).....

0.00

0

21. OTHER DISBURSEMENTS

0.00

0

22. TOTAL DISBURSEMENTS
(add Lines 17, 18, 19(c), 20(d), and 21) ▶

43,439.8

43,439.8

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....

0.00

24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....

64,400.00

25. SUBTOTAL (add Line 23 and Line 24).....

64,400.00

26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....

43,439.8

27. CASH ON HAND AT CLOSE OF REPORTING PERIOD
(subtract Line 26 from Line 25).....

20,960.20

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 1 OF 17

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

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NAME OF COMMITTEE (In Full)

Kristen Spees Committee

Full Name (Last, First, Middle Initial)

Bailey, Deborah

Mailing Address

3040 Roxbury Dr

City

Reno, NV

State

Zip Code

89525

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

25,000

Date of Receipt

8 / 29 / 2014

Amount of Each Receipt this Period

25,000

Full Name (Last, First, Middle Initial)

Riner, R Myles

Mailing Address

307 Oakdale Ave.

City

NW Valley

State

Zip Code

CA 94941

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Doctor

Doctor

Receipt For:

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

100,000

Date of Receipt

8 / 29 / 2014

Amount of Each Receipt this Period

100,000

Full Name (Last, First, Middle Initial)

Tracey, Gary

Mailing Address

1187 Bayshore Dr.

City

Sparks

State

Zip Code

NV 89434

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

10,000

Date of Receipt

8 / 20 / 2014

Amount of Each Receipt this Period

10,000

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

135,000

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

PAGE 2 OF 17

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NAME OF COMMITTEE (In Full)
Kristen Spees Committee

A. Full Name (Last, First, Middle Initial)
Putnam, Randal

Mailing Address
5455 cypress Point Dr.

City
Reno State
NV Zip Code
89502

FEC ID number of contributing federal political committee.
C

Name of Employer
Retired Occupation
Retired

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

Election Cycle-to-Date
5000

Date of Receipt
8 / 3 / 2014

Amount of Each Receipt this Period
50.00

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

Mailing Address
3094 Pawle St.

City
Winnemucca State
NV Zip Code
89445

FEC ID number of contributing federal political committee.
C

Name of Employer

Occupation

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

Election Cycle-to-Date
25.00

Date of Receipt
8 / 30 / 2014

Amount of Each Receipt this Period
25.00

C. Full Name (Last, First, Middle Initial)
McLean, Michael

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
20.00

Date of Receipt
6 / 29 / 2014

Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

95.00

SCHEDULE A (FEC Form 3)**ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE **3** OF **17**

(check only one)

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

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NAME OF COMMITTEE (In Full)

Kristen Spees Committee

Full Name (Last, First, Middle Initial)

A. Schoenherr, Ronald

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

28.00

Date of Receipt

6 8 2014

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

Noble, Jim

Mailing Address

1115 Fathom Ave

City

State

Zip Code

Seal Beach**CA****90740**FEC ID number of contributing
federal political committee.**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

100.00

Date of Receipt

6 7 2014

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

C. Information exchange Group

Mailing Address

3429 Jacks Valley Rd.

City

State

Zip Code

Carson City**NV****89705**FEC ID number of contributing
federal political committee.**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

50.00

Date of Receipt

9 2 2014

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

175.00

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 4 OF 17

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

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NAME OF COMMITTEE (In Full)

Kristen Spees Committee

Full Name (Last, First, Middle Initial)

A. Harron, Gregory

Mailing Address

1172 Green Mountain St.

City

Reno

State

NV

Zip Code

89506

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For:

☐ Primary

☒ General

☐ Other (specify)

Election Cycle-to-Date

100.00

Date of Receipt

9/9/2014

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. Vermazen, Duke

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

50.00

Date of Receipt

9/9/2014

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

C. Cernoch, Barry

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

25.00

Date of Receipt

6/9/2014

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

\$175

TOTAL This Period (last page this line number only)

175.00

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NAME OF COMMITTEE (In Full)
Kristen Spees Committee

A. Full Name (Last, First, Middle Initial)
Pagni, Jean

Mailing Address
1290 Washington St.

City
Reno

State
NV

Zip Code
89503

FEC ID number of contributing federal political committee.
C

Name of Employer

Occupation

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

Election Cycle-to-Date
2500

Date of Receipt
9/8/2014

Amount of Each Receipt this Period
2500

Full Name (Last, First, Middle Initial)
Tracy Gary

Mailing Address
1187 Bayshore Dr.

City
Sparks

State
NV

Zip Code
89434

FEC ID number of contributing federal political committee.
C

Name of Employer

Occupation

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

Election Cycle-to-Date
500

Date of Receipt
9/14/2014

Amount of Each Receipt this Period
500

C. Full Name (Last, First, Middle Initial)
Schaevitz, Alan

Mailing Address
193 Bayview Dr.

City
SAN RAFAEL

State
CA

Zip Code
94901

FEC ID number of contributing federal political committee.
C

Name of Employer

Occupation

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

Election Cycle-to-Date
10000

Date of Receipt
9/20/2014

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

13000

SCHEDULE A (FEC Form 3)

ITEMIZED RECEIPTS

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

FOR LINE NUMBER:
(check only one)

PAGE 6 OF 17

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

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NAME OF COMMITTEE (In Full)

Full Name (Last, First, Middle Initial)

A. macaluso, Sam

Mailing Address

5036 Canterbury Cir.

City

Reno

State

NV

Zip Code

89502

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify)

☒ General

Election Cycle-to-Date

2,500

Date of Receipt

9 / 3 / 2014

Amount of Each Receipt this Period

2,500

Full Name (Last, First, Middle Initial)

B. Lernoch, Barry

Mailing Address

3095 Lakeshore Dr.

City

Washoe Valley

State

NV

Zip Code

89704

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Retired

Receipt For:

☐ Primary
☐ Other (specify)

☒ General

Election Cycle-to-Date

7,500

Date of Receipt

9 / 3 / 2014

Amount of Each Receipt this Period

5,000

Full Name (Last, First, Middle Initial)

C. Tews, Christy

Mailing Address

424 Tahoe Dr.

City

Carson City

State

NV

Zip Code

89703

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify)

☒ General

Election Cycle-to-Date

40.00

Date of Receipt

9 / 9 / 2014

Amount of Each Receipt this Period

4000

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

11,500

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:
(check only one)

PAGE **7** OF **17**

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

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NAME OF COMMITTEE (In Full)

Kristen Spees Committee

Full Name (Last, First, Middle Initial)

Cernoch, Barry

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

9000

Date of Receipt

8 / 26 / 2014

Amount of Each Receipt this Period

15.00

Full Name (Last, First, Middle Initial)

Putnam, Randal

Mailing Address

5455 Cypress Point Dr.

City

State

Zip Code

Reno

NV

89502

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Retired

Receipt For:

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

100000

Date of Receipt

8 / 2 / 2014

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

Pagni, Jean

Mailing Address

1290 Washington St.

City

State

Zip Code

Reno

NV

89503

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

50.00

Date of Receipt

8 / 29 / 2014

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

90.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 8 OF 17	
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
				<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Kristen Spees Committee

Full Name (Last, First, Middle Initial) Martin, Andrew		Date of Receipt 9 / 3 / 2014
Mailing Address 3317 Daylight Moss St.		Amount of Each Receipt this Period 250.00
City Las Vegas	State Zip Code NV 89135	
FEC ID number of contributing federal political committee. C		
Name of Employer CPA	Occupation CPA	Amount of Each Receipt this Period 250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) Dutnam, Randal		Date of Receipt 9 / 3 / 2014
Mailing Address 5455 Cypress Point Dr.		Amount of Each Receipt this Period 50.00
City Reno Reno	State Zip Code NV 89502	
FEC ID number of contributing federal political committee. C		
Name of Employer Retired	Occupation Retired	Amount of Each Receipt this Period 150.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 150.00	

Full Name (Last, First, Middle Initial) Tracy, Gary		Date of Receipt 9 / 3 / 2014
Mailing Address 1187 Bayshore Dr.		Amount of Each Receipt this Period 10.00
City Sparks	State Zip Code NV 89434	
FEC ID number of contributing federal political committee. C		
Name of Employer Retired	Occupation Retired	Amount of Each Receipt this Period 15.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 15.00	

SUBTOTAL of Receipts This Page (optional)	360.00
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)
☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Kristen Spees Committee

Full Name (Last, First, Middle Initial)
Hepburn, James

Mailing Address
2214 Sanderling St

City
Ventura State
CA Zip Code
93003

FEC ID number of contributing federal political committee.
C

Name of Employer
owner HHH Occupation
Ceretary Products

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

Election Cycle-to-Date
1000.00

Date of Receipt
6 / 24 / 2014

Amount of Each Receipt this Period
1000.00

Full Name (Last, First, Middle Initial)
Mark E Smith NV Trust

Mailing Address
PO BOX 4044

City
Incline Village State
NV Zip Code
89450

FEC ID number of contributing federal political committee.
C

Name of Employer
Retired Occupation
Retired

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

Election Cycle-to-Date
500.00

Date of Receipt
6 / 20 / 2014

Amount of Each Receipt this Period
500.00

Full Name (Last, First, Middle Initial)
Bready, Michael

Mailing Address
3202 Northgate Ln

City
Carson State
CA Zip Code
94706

FEC ID number of contributing federal political committee.
C

Name of Employer
Retired Occupation
Retired

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

Election Cycle-to-Date
250.00

Date of Receipt
8 / 30 / 2014

Amount of Each Receipt this Period
250.00

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

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

1750.00

SCHEDULE A (FEC Form 3)

ITEMIZED RECEIPTS

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

FOR LINE NUMBER:
(check only one)

PAGE 10 OF 17

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

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NAME OF COMMITTEE (In Full)

Kristen Spees Committee

Full Name (Last, First, Middle Initial)

A. Mailing Address Hanson, Gregory

11172 Green Mountain St.

City Reno State NV Zip Code 89506

FEC ID number of contributing federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For:

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

200,00

Date of Receipt

9 28 2014

Amount of Each Receipt this Period

100,00

Full Name (Last, First, Middle Initial)

B. Mailing Address Trigg, Cynthia

PO Box 294

City Zephyr Cove State NV Zip Code 89448

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

100,00

Date of Receipt

6 21 2014

Amount of Each Receipt this Period

100,00

Full Name (Last, First, Middle Initial)

C. Mailing Address Hardcastle, Jeffrey M

2606 Sunray dr

City Reno State NV Zip Code 89503

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

50,00

Date of Receipt

6 21 2014

Amount of Each Receipt this Period

50,00

SUBTOTAL of Receipts This Page (optional)

250,00

TOTAL This Period (last page this line number only)

250,00

SCHEDULE A (FEC Form 3)

ITEMIZED RECEIPTS

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

FOR LINE NUMBER:
(check only one)

PAGE 11 OF 17

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

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NAME OF COMMITTEE (In Full)

Full Name (Last, First, Middle Initial)

A. Greedy, Michael

Mailing Address

3202 Northgate Ln.

City

Carson City

State

NU

Zip Code

89706

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

35000

Date of Receipt

7 / 1 / 2014

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. Churchill County Democrats c/o Nyla Howell

Mailing Address

2171 West Williams #133

City

Fallon

State

NU

Zip Code

89402

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Retired

Receipt For:

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

50000

Date of Receipt

8 / 30 / 2014

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C. Toth, Susan + Richard

Mailing Address

50 Darilyn Ln.

City

Carson City

State

NU

Zip Code

89704

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

75000

Date of Receipt

9 / 3 / 2014

Amount of Each Receipt this Period

75.00

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

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

675.00

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

Use separate schedule(s)
for each separate schedule (a)
for each separate schedule (b)
for each separate schedule (c)
for each separate schedule (d)
for each separate schedule (e)
for each separate schedule (f)
for each separate schedule (g)
for each separate schedule (h)
for each separate schedule (i)
for each separate schedule (j)
for each separate schedule (k)
for each separate schedule (l)
for each separate schedule (m)
for each separate schedule (n)
for each separate schedule (o)
for each separate schedule (p)
for each separate schedule (q)
for each separate schedule (r)
for each separate schedule (s)
for each separate schedule (t)
for each separate schedule (u)
for each separate schedule (v)
for each separate schedule (w)
for each separate schedule (x)
for each separate schedule (y)
for each separate schedule (z)

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

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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions

NAME OF COMMITTEE (In Full)
Kristen Spees Committee

Full Name (Last, First, Middle Initial)
A. Cole, Kimi

Mailing Address
1759 Oakwood dr.

City
Minden

State
NV

Zip Code
89423

FEC ID number of contributing federal political committee.
C

Name of Employer
Occupation

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

Election Cycle-to-Date
50.00

Date of Receipt
8 7 2014

Amount of Each Receipt this Period
50.00

Full Name (Last, First, Middle Initial)
Roberts, Michael & Julie

Mailing Address
18124 Wedge Parkway # 1606

City
Reno

State
NV

Zip Code
89511

FEC ID number of contributing federal political committee.
C

Name of Employer
Occupation

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

Election Cycle-to-Date
25.00

Date of Receipt
8 28 2014

Amount of Each Receipt this Period
25.00

Full Name (Last, First, Middle Initial)
C. Hull, Dennis

Mailing Address
PO Box 1712

City
Minden

State
NV

Zip Code
89423

FEC ID number of contributing federal political committee.
C

Name of Employer
Retired

Occupation
Retired

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

Election Cycle-to-Date
100.00

Date of Receipt
8 29 2014

Amount of Each Receipt this Period
100.00

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

175.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:
(check only one)

PAGE 13 OF 17

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

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NAME OF COMMITTEE (In Full)

Kristen Spees Committee

Full Name (Last, First, Middle Initial)

Barnes, David

A. Mailing Address

3495 Lakeside Dr. PBM 73

City

Reno

State

NV

Zip Code

89509

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For:

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

30.00

Date of Receipt

8 / 18 / 2014

Amount of Each Receipt this Period

30.00

Full Name (Last, First, Middle Initial)

Griffin, Eric

B. Mailing Address

2603 Terra Ct

City

Minden

State

NV

Zip Code

89423

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

20.00

Date of Receipt

8 / 28 / 2014

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

Kiadney, David + Deborah

C. Mailing Address

905 Joy Lake Rd

City

Reno

State

NV

Zip Code

89511

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

100.00

Date of Receipt

9 / 3 / 2014

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

150.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:
(check only one)

PAGE 14 OF 17

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

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NAME OF COMMITTEE (In Full)

Kristen Speers Committee

Full Name (Last, First, Middle Initial)

Leedex, Nancyann

Mailing Address

335 Lancaster Dr.

City

Reno

State

NV

Zip Code

89508

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

50.00

Date of Receipt

9 / 2 / 2014

Amount of Each Receipt this Period

50.00

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

Amount of Each Receipt this Period

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

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

50.00

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) <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 15	PAGE 1 OF 1
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NAME OF COMMITTEE (In Full)
Kristen Spees Committee

Full Name (Last, First, Middle Initial) Scott, Arden		Date of Receipt 9/8/2014
Mailing Address 280 Bisby Street		Amount of Each Receipt this Period 100.00
City Reno	State NV Zip Code 89512	
FEC ID number of contributing federal political committee. C		
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 100.00

Full Name (Last, First, Middle Initial) Stewart, Vickie		Date of Receipt 9/8/2014
Mailing Address 80 Skline cir.		Amount of Each Receipt this Period 100.00
City Reno	State NV Zip Code 89509	
FEC ID number of contributing federal political committee. C		
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 100.00

Full Name (Last, First, Middle Initial) Anonymous		Date of Receipt 9/10/2014
Mailing Address		Amount of Each Receipt this Period 25.00
City	State Zip Code	
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 25.00

SUBTOTAL of Receipts This Page (optional)	225.00
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 **16** OF **17**

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

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NAME OF COMMITTEE (In Full)

Kristen Spees Committee

Full Name (Last, First, Middle Initial)

A. Mailing Address **Speech at Democratic Headquarters - 3x \$20 anonymous Donations**
City State Zip Code

Date of Receipt

6 / **21** / **2014**

FEC ID number of contributing federal political committee.

C

Amount of Each Receipt this Period

60.00

Name of Employer

Occupation

Receipt For:

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

60.00

Full Name (Last, First, Middle Initial)

MacIn, Clifton

Mailing Address

827 Shenandoah Dr.
City State Zip Code
Carson City Nevada

Date of Receipt

6 / **21** / **2014**

FEC ID number of contributing federal political committee.

C

Amount of Each Receipt this Period

100.00

Name of Employer

Occupation

Self

Jeweler

Receipt For:

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

100.00

Full Name (Last, First, Middle Initial)

Anonymous

C. Mailing Address

City State Zip Code

Date of Receipt

8 / **9** / **2014**

FEC ID number of contributing federal political committee.

C

Amount of Each Receipt this Period

30.00

Name of Employer

Occupation

Receipt For:

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

30.00

SUBTOTAL of Receipts This Page (optional)

190.00

TOTAL This Period (last page this line number only)

4740.00

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)

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

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NAME OF COMMITTEE (In Full)

Kristen Spees committee

Full Name (Last, First, Middle Initial)

Spees, Kristen

Mailing Address

PO Box 3464

City

Incline Village

State

NV

Zip Code

89430

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

Attorney

Receipt For:

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1200.00

Date of Receipt

3 / 4 / 2014

Amount of Each Receipt this Period

1200.00

Full Name (Last, First, Middle Initial)

Spees, Kristen

Mailing Address

PO Box 3464

City

Incline Village

State

NV

Zip Code

89430

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

Attorney

Receipt For:

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

1700.00

Date of Receipt

6 / 23 / 2014

Amount of Each Receipt this Period

500.00

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

Amount of Each Receipt this Period

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

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

1700.00

1700.00

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE **2** OF **28**

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

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NAME OF COMMITTEE (In Full)

Kristen Spees Committee

Full Name (Last, First, Middle Initial)

A. **Kristen Spees Committee**

Mailing Address

PO BOX 3464

City

Incline Village

State

NV

Zip Code

89450

Purpose of Disbursement

Race entrance fee

Candidate Name

Kristen Spees

17

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☒ Primary ☐ General
☐ Other (specify)

State: **NV**

District: **2**

Date of Disbursement

4 / **17** / **2014**

Amount of Each Disbursement this Period

4750

Full Name (Last, First, Middle Initial)

B. **Kristen Spees Committee**

Mailing Address

PO BOX 3464

City

Incline Village

State

NV

Zip Code

89450

Purpose of Disbursement

gas - Reno NV

Candidate Name

Kristen Spees

17

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☒ Primary ☐ General
☐ Other (specify)

State: **NV**

District: **2**

Date of Disbursement

4 / **9** / **2014**

Amount of Each Disbursement this Period

4365

Full Name (Last, First, Middle Initial)

C. **Kristen Spees Committee**

Mailing Address

PO BOX 3464

City

Incline Village

State

NV

Zip Code

89450

Purpose of Disbursement

Vista print cards

Candidate Name

Kristen Spees

17

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☒ Primary ☐ General
☐ Other (specify)

State: **NV**

District: **2**

Date of Disbursement

3 / **14** / **2014**

Amount of Each Disbursement this Period

3799

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

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

12914

**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 1 OF 23

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

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NAME OF COMMITTEE (In Full)

Kristen Spees Committee

Full Name (Last, First, Middle Initial)

A.

Kristen Spees Committee

Mailing Address

PO BOX 3464

City

Incline Village

State

NV

Zip Code

89450

Purpose of Disbursement

Campaign Registration

Candidate Name

Kristen Spees

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☒ Primary ☐ General
☐ Other (specify)

State: NV

District: 2

Date of Disbursement

3 / 4 / 2014

Amount of Each Disbursement this Period

300.00

B.

Kristen Spees Committee

Mailing Address

PO BOX 3464

City

Incline Village

State

NV

Zip Code

89450

Purpose of Disbursement

Gas \$

Candidate Name

Kristen Spees

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☒ Primary ☐ General
☐ Other (specify)

State: NV

District: 2

Date of Disbursement

4 / 28 / 2014

Amount of Each Disbursement this Period

424.7

C.

Kristen Spees Committee

Mailing Address

PO BOX 3464

City

Incline Village

State

NV

Zip Code

89450

Purpose of Disbursement

Gas

Candidate Name

Kristen Spees

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☒ Primary ☐ General
☐ Other (specify)

State: NV

District: 2

Date of Disbursement

4 / 27 / 2014

Amount of Each Disbursement this Period

359.6

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

3784.3

**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)

Kristen Spees Committee

Full Name (Last, First, Middle Initial)

Date of Disbursement

6 / 23 / 2014

Mailing Address

PO BOX 3464

City

Incline Village

State

NV

Zip Code

89450

Purpose of Disbursement

Lunch meeting

17

Candidate Name

Kristen Spees

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☒ Primary ☐ General
☐ Other (specify)

State: NV

District: 2

Amount of Each Disbursement this Period

3400

Full Name (Last, First, Middle Initial)

Date of Disbursement

5 / 5 / 2014

Mailing Address

PO BOX 3464

City

Incline Village

State

NV

Zip Code

89450

Purpose of Disbursement

Gas - Carson, NV

17

Candidate Name

Kristen Spees

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☒ Primary ☐ General
☐ Other (specify)

State: NV

District: 2

Amount of Each Disbursement this Period

4730

Full Name (Last, First, Middle Initial)

Date of Disbursement

5 / 6 / 2014

Mailing Address

PO BOX 3464

City

Incline Village

State

NV

Zip Code

89450

Purpose of Disbursement

Campaign T-shirts

17

Candidate Name

Kristen Spees

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☒ Primary ☐ General
☐ Other (specify)

State: NV

District: 2

Amount of Each Disbursement this Period

3900

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

12030

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE **3** OF **23**

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

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NAME OF COMMITTEE (In Full)

Kristen Spees Committee

Full Name (Last, First, Middle Initial)

Date of Disbursement

A. **Kristen Spees Committee**

Mailing Address

PO BOX 3464

5 / 12 / 2014

City

Incline Village

State

NV

Zip Code

89450

Amount of Each Disbursement this Period

Purpose of Disbursement

gas carson

49.93

Candidate Name

Kristen Spees

17
Category/
Type.

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☒ Primary ☐ General
☐ Other (specify)

State: **NV**

District: **2**

Full Name (Last, First, Middle Initial)

Date of Disbursement

B. **Kristen Spees Committee**

Mailing Address

PO BOX 3464

5 / 13 / 2014

City

Incline Village

State

NV

Zip Code

89450

Amount of Each Disbursement this Period

Purpose of Disbursement

gas Reno

25.49

Candidate Name

Kristen Spees

17
Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☒ Primary ☐ General
☐ Other (specify)

State: **NV**

District: **2**

Full Name (Last, First, Middle Initial)

Date of Disbursement

C. **Kristen Spees Committee**

Mailing Address

PO BOX 3464

5 / 19 / 2014

City

Incline Village

State

NV

Zip Code

89450

Amount of Each Disbursement this Period

Purpose of Disbursement

Lunch Reno

5.17

Candidate Name

Kristen Spees

17
Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☒ Primary ☐ General
☐ Other (specify)

State: **NV**

District: **2**

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

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

80.59

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 6 OF 23

☒ 17 18 19a 19b
20a 20b 20c 21

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NAME OF COMMITTEE (In Full)

Kristen Spees Committee

Full Name (Last, First, Middle Initial)

A. Kristen Spees Committee

Mailing Address

PO BOX 3464

City

Incline Village

State

NV

Zip Code

89450

Purpose of Disbursement

Candidate Name

Kristen Spees

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☒ Primary ☐ General
☐ Other (specify)

State: NV

District: 2

Date of Disbursement

MM / DD / YYYY

Amount of Each Disbursement this Period

Amount

B. Kristen Spees Committee

Mailing Address

PO BOX 3464

City

Incline Village

State

NV

Zip Code

89450

Purpose of Disbursement

Gas Reno, NV

Candidate Name

Kristen Spees

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☒ Primary ☐ General
☐ Other (specify)

State: NV

District: 2

Date of Disbursement

M / D / Y

Amount of Each Disbursement this Period

Amount 49.72

C. Kristen Spees Committee

Mailing Address

PO BOX 3464

City

Incline Village

State

NV

Zip Code

89450

Purpose of Disbursement

Gas Ely, NV

Candidate Name

Kristen Spees

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☒ Primary ☐ General
☐ Other (specify)

State: NV

District: 2

Date of Disbursement

M / D / Y

Amount of Each Disbursement this Period

Amount 53.95

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

Amount 103.67

Amount

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

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

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(check only one)

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NAME OF COMMITTEE (In Full)

Kristen Spees Committee

Full Name (Last, First, Middle Initial)

Date of Disbursement

5 / 19 / 2014

A. Kristen Spees Committee

Mailing Address

PO BOX 3464

City

Incline Village

State

NV

Zip Code

89450

Purpose of Disbursement

Gas Rental

17

Amount of Each Disbursement this Period

20.95

Candidate Name

Kristen Spees

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☒ Primary ☐ General
☐ Other (specify)

State: NV

District: 2

Full Name (Last, First, Middle Initial)

Date of Disbursement

5 / 20 / 2014

B. Kristen Spees Committee

Mailing Address

PO BOX 3464

City

Incline Village

State

NV

Zip Code

89450

Purpose of Disbursement

Gas Caravan

17

Amount of Each Disbursement this Period

45.50

Candidate Name

Kristen Spees

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☒ Primary ☐ General
☐ Other (specify)

State: NV

District: 2

Full Name (Last, First, Middle Initial)

Date of Disbursement

5 / 28 / 2014

C. Kristen Spees Committee

Mailing Address

PO BOX 3464

City

Incline Village

State

NV

Zip Code

89450

Purpose of Disbursement

Lunch Meeting

17

Amount of Each Disbursement this Period

18.22

Candidate Name

Kristen Spees

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☒ Primary ☐ General
☐ Other (specify)

State: NV

District: 2

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

84.67

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

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21

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NAME OF COMMITTEE (In Full)

Kristen Spees Committee

Full Name (Last, First, Middle Initial)

Date of Disbursement

A. Kristen Spees Committee

Mailing Address

PO BOX 3464

6 / 12 / 2014

City

Incline Village

State

NV

Zip Code

89450

Amount of Each Disbursement this Period

Purpose of Disbursement

Gas Carson, NV

17

49.88

Candidate Name

Kristen Spees

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☒ Primary ☐ General
☐ Other (specify)

State: NV

District: 2

Full Name (Last, First, Middle Initial)

Date of Disbursement

B. Kristen Spees Committee

Mailing Address

PO BOX 3464

6 / 17 / 2014

City

Incline Village

State

NV

Zip Code

89450

Amount of Each Disbursement this Period

Purpose of Disbursement

Gas Ranch NV

17

48.36

Candidate Name

Kristen Spees

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☒ Primary ☐ General
☐ Other (specify)

State: NV

District: 2

Full Name (Last, First, Middle Initial)

Date of Disbursement

C. Kristen Spees Committee

Mailing Address

PO BOX 3464

6 / 18 / 2014

City

Incline Village

State

NV

Zip Code

89450

Amount of Each Disbursement this Period

Purpose of Disbursement

Dinner meeting Carson

17

17.78

Candidate Name

Kristen Spees

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☒ Primary ☐ General
☐ Other (specify)

State: NV

District: 2

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

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

116.02

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

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

FOR LINE NUMBER: (check only one)

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NAME OF COMMITTEE (In Full)

Kristen Spees Committee

Full Name (Last, First, Middle Initial)

Date of Disbursement

MM/DD/YYYY
6/2/2014

A.

Kristen Spees Committee

Mailing Address

PO BOX 3464

City

Incline Village

State

NV

Zip Code

89450

Purpose of Disbursement

Gas Ely, NV

17

Candidate Name

Kristen Spees

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☒ Primary ☐ General
☐ Other (specify)

State: NV

District: 2

Amount of Each Disbursement this Period

4520

Full Name (Last, First, Middle Initial)

Kristen Spees Committee

Mailing Address

PO BOX 3464

City

Incline Village

State

NV

Zip Code

89450

Purpose of Disbursement

Gas Fallon, NV

17

Candidate Name

Kristen Spees

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☒ Primary ☐ General
☐ Other (specify)

State: NV

District: 2

Date of Disbursement

MM/DD/YYYY
6/2/2014

Amount of Each Disbursement this Period

4962

Full Name (Last, First, Middle Initial)

Kristen Spees Committee

Mailing Address

PO BOX 3464

City

Incline Village

State

NV

Zip Code

89450

Purpose of Disbursement

Gas Minden, NV

17

Candidate Name

Kristen Spees

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☒ Primary ☐ General
☐ Other (specify)

State: NV

District: 2

Date of Disbursement

MM/DD/YYYY
6/6/2014

Amount of Each Disbursement this Period

4668

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

14150

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

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(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
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NAME OF COMMITTEE (In Full)

Kristen Spees Committee

Full Name (Last, First, Middle Initial)

A. **Kristen Spees Committee**

Mailing Address

PO BOX 3464

City

Incline Village

State

NV

Zip Code

89450

Purpose of Disbursement

Starbucks - Dinner

Candidate Name

Kristen Spees

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☒ General
☐ Other (specify)

State: **NV**

District: **2**

Date of Disbursement

6 **20** **2014**

Amount of Each Disbursement this Period

4.41

B. **Kristen Spees Committee**

Mailing Address

PO BOX 3464

City

Incline Village

State

NV

Zip Code

89450

Purpose of Disbursement

Democratic BBQ

Candidate Name

Kristen Spees

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☒ General
☐ Other (specify)

State: **NV**

District: **2**

Date of Disbursement

6 **20** **2014**

Amount of Each Disbursement this Period

3.500

C. **Kristen Spees Committee**

Mailing Address

PO BOX 3464

City

Incline Village

State

NV

Zip Code

89450

Purpose of Disbursement

Parking Fee

Candidate Name

Kristen Spees

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☒ Primary ☒ General
☐ Other (specify)

State: **NV**

District: **2**

Date of Disbursement

9 **17** **2014**

Amount of Each Disbursement this Period

6.00

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

4.541

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

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

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Kristen Spees Committee

Full Name (Last, First, Middle Initial)

Date of Disbursement

A. **Kristen Spees Committee**

Mailing Address

PO BOX 3464

6 / 18 / 2014

City

Incline Village

State

NV

Zip Code

89450

Amount of Each Disbursement this Period

Purpose of Disbursement

Lunch meeting

11

1399

Candidate Name

Kristen Spees

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☒ Primary ☐ General
☐ Other (specify)

State: **NV**

District: **2**

Full Name (Last, First, Middle Initial)

Date of Disbursement

B. **Kristen Spees Committee**

Mailing Address

PO BOX 3464

6 / 20 / 2014

City

Incline Village

State

NV

Zip Code

89450

Amount of Each Disbursement this Period

Purpose of Disbursement

Parking

11

150

Candidate Name

Kristen Spees

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☒ Primary ☐ General
☐ Other (specify)

State: **NV**

District: **2**

Full Name (Last, First, Middle Initial)

Date of Disbursement

C. **Kristen Spees Committee**

Mailing Address

PO BOX 3464

6 / 28 / 2014

City

Incline Village

State

NV

Zip Code

89450

Amount of Each Disbursement this Period

Purpose of Disbursement

Gas

17

2577

Candidate Name

Kristen Spees

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☒ Primary ☐ General
☐ Other (specify)

State: **NV**

District: **2**

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

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

4126

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

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21

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NAME OF COMMITTEE (In Full)

Kristen Spees Committee

Full Name (Last, First, Middle Initial)

A. **Kristen Spees Committee**

Mailing Address

PO BOX 3464

City

Incline Village

State

NV

Zip Code

89450

Purpose of Disbursement

Campaign Signs

Candidate Name

Kristen Spees

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☒ General
☐ Other (specify)

State: **NV**

District: **2**

Full Name (Last, First, Middle Initial)

Date of Disbursement

7 / **22** / **2014**

Amount of Each Disbursement this Period

309.21

B. **Kristen Spees Committee**

Mailing Address

PO BOX 3464

City

Incline Village

State

NV

Zip Code

89450

Purpose of Disbursement

SonicPrint Cards

Candidate Name

Kristen Spees

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☒ General
☐ Other (specify)

State: **NV**

District: **2**

Full Name (Last, First, Middle Initial)

Date of Disbursement

7 / **17** / **2014**

Amount of Each Disbursement this Period

117.78

C. **Kristen Spees Committee**

Mailing Address

PO BOX 3464

City

Incline Village

State

NV

Zip Code

89450

Purpose of Disbursement

Lunch and parking Carson

Candidate Name

Kristen Spees

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☒ General
☐ Other (specify)

State: **NV**

District: **2**

Full Name (Last, First, Middle Initial)

Date of Disbursement

7 / **9** / **2014**

Amount of Each Disbursement this Period

20.00

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

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

446.99

**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 1 OF 23

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NAME OF COMMITTEE (In Full)

Kristen Spees Committee

Full Name (Last, First, Middle Initial)

A.

Kristen Spees Committee

Mailing Address

PO BOX 3464

City

Incline Village

State

NV

Zip Code

89450

Purpose of Disbursement

Food For BBG

Candidate Name

Kristen Spees

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☒ General
☐ Other (specify)

State: NV

District: 2

Date of Disbursement

MM/DD/YYYY
7/6/2014

Amount of Each Disbursement this Period

6.00

B.

Kristen Spees Committee

Mailing Address

PO BOX 3464

City

Incline Village

State

NV

Zip Code

89450

Purpose of Disbursement

Meet N Greet Reno

Candidate Name

Kristen Spees

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☒ General
☐ Other (specify)

State: NV

District: 2

Date of Disbursement

MM/DD/YYYY
7/22/2014

Amount of Each Disbursement this Period

15.00

C.

Kristen Spees Committee

Mailing Address

PO BOX 3464

City

Incline Village

State

NV

Zip Code

89450

Purpose of Disbursement

UPS

Candidate Name

Kristen Spees

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☒ General
☐ Other (specify)

State: NV

District: 2

Date of Disbursement

MM/DD/YYYY
7/22/2014

Amount of Each Disbursement this Period

16.29

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

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

37.29

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

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

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(check only one)

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NAME OF COMMITTEE (In Full)

Kristen Spees Committee

Full Name (Last, First, Middle Initial)

Date of Disbursement

7 28 2015

A. Kristen Spees Committee

Mailing Address

PO BOX 3464

City

Incline Village

State

NV

Zip Code

89450

Purpose of Disbursement

GAS, carson, NV

17

Candidate Name

Kristen Spees

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☒ General
☐ Other (specify)

State: NV

District: 2

Amount of Each Disbursement this Period

3635

B. Kristen Spees Committee

Mailing Address

PO BOX 3464

City

Incline Village

State

NV

Zip Code

89450

Purpose of Disbursement

GAS Incline, NV

17

Candidate Name

Kristen Spees

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☒ General
☐ Other (specify)

State: NV

District: 2

Date of Disbursement

8 7 2014

Amount of Each Disbursement this Period

2506

C. Kristen Spees Committee

Mailing Address

PO BOX 3464

City

Incline Village

State

NV

Zip Code

89450

Purpose of Disbursement

GAS carson, NV

17

Candidate Name

Kristen Spees

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☒ General
☐ Other (specify)

State: NV

District: 2

Date of Disbursement

8 8 2014

Amount of Each Disbursement this Period

5338

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

11479

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

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

Use separate schedule(s)
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Detailed Summary Page

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(check only one)

PAGE 13 OF 23

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Kristen Spees Committee

Full Name (Last, First, Middle Initial)

A. Kristen Spees Committee

Mailing Address

PO BOX 3464

City

Incline Village

State

NV

Zip Code

89450

Purpose of Disbursement

Parking

Candidate Name

Kristen Spees

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☒ Primary ☒ General
☐ Other (specify)

State: NV

District: 2

Full Name (Last, First, Middle Initial)

Date of Disbursement

8 / 11 / 2014

Amount of Each Disbursement this Period

200

B. Kristen Spees Committee

Mailing Address

PO BOX 3464

City

Incline Village

State

NV

Zip Code

89450

Purpose of Disbursement

Paid manager gas money

Candidate Name

Kristen Spees

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☒ Primary ☒ General
☐ Other (specify)

State: NV

District: 2

Full Name (Last, First, Middle Initial)

Date of Disbursement

8 / 11 / 2014

Amount of Each Disbursement this Period

8000

C. Kristen Spees Committee

Mailing Address

PO BOX 3464

City

Incline Village

State

NV

Zip Code

89450

Purpose of Disbursement

Gas Cost CO NV

Candidate Name

Kristen Spees

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☒ Primary ☒ General
☐ Other (specify)

State: NV

District: 2

Full Name (Last, First, Middle Initial)

Date of Disbursement

8 / 11 / 2014

Amount of Each Disbursement this Period

2924

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

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

11124

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

Use separate schedule(s)
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Detailed Summary Page

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(check only one)

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20c ☐ 19b
21

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NAME OF COMMITTEE (In Full)

Kristen Spees Committee

Full Name (Last, First, Middle Initial)

Kristen Spees Committee

Mailing Address

PO BOX 3464

City

Incline Village

State

NV

Zip Code

89450

Purpose of Disbursement

Lunch EIKO, NV

Candidate Name

Kristen Spees

Category/
Type

17

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☒ Primary ☒ General
☐ Other (specify)

State: **NV**

District: **2**

Date of Disbursement

8 / 18 / 2014

Amount of Each Disbursement this Period

1439

Full Name (Last, First, Middle Initial)

Kristen Spees Committee

Mailing Address

PO BOX 3464

City

Incline Village

State

NV

Zip Code

89450

Purpose of Disbursement

Gas EIKO, NV

Candidate Name

Kristen Spees

Category/
Type

17

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☒ Primary ☒ General
☐ Other (specify)

State: **NV**

District: **2**

Date of Disbursement

8 / 20 / 2014

Amount of Each Disbursement this Period

5438

Full Name (Last, First, Middle Initial)

Kristen Spees Committee

Mailing Address

PO BOX 3464

City

Incline Village

State

NV

Zip Code

89450

Purpose of Disbursement

Gas Lovelocks NV

Candidate Name

Kristen Spees

Category/
Type

17

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☒ Primary ☒ General
☐ Other (specify)

State: **NV**

District: **2**

Date of Disbursement

8 / 21 / 2014

Amount of Each Disbursement this Period

50.04

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

118.81

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 15 OF 23

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

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NAME OF COMMITTEE (In Full)

Kristen Spees Committee

Full Name (Last, First, Middle Initial)

Date of Disbursement

A. Kristen Spees Committee

Mailing Address

PO BOX 3464

8 / 15 / 2014

City

Incline Village

State

NV

Zip Code

89450

Amount of Each Disbursement this Period

Purpose of Disbursement

Gas Rents, NV

17

4848

Candidate Name

Kristen Spees

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☒ Primary ☒ General
☐ Other (specify)

State: NV

District: 2

Full Name (Last, First, Middle Initial)

Date of Disbursement

B. Kristen Spees Committee

Mailing Address

PO BOX 3464

8 / 18 / 2014

City

Incline Village

State

NV

Zip Code

89450

Amount of Each Disbursement this Period

Purpose of Disbursement

Gas Carson

17

5284

Candidate Name

Kristen Spees

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☒ Primary ☒ General
☐ Other (specify)

State: NV

District: 2

Full Name (Last, First, Middle Initial)

Date of Disbursement

C. Kristen Spees Committee

Mailing Address

PO BOX 3464

8 / 18 / 2014

City

Incline Village

State

NV

Zip Code

89450

Amount of Each Disbursement this Period

Purpose of Disbursement

Gas Eiko, NV

17

5525

Candidate Name

Kristen Spees

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☒ Primary ☒ General
☐ Other (specify)

State: NV

District: 2

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

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

15657

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

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

FOR LINE NUMBER:
(check only one)

PAGE 18 OF 28

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

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NAME OF COMMITTEE (In Full)

Kristen Spees Committee

Full Name (Last, First, Middle Initial)

A. Kristen Spees Committee

Mailing Address

PO BOX 3464

City

Incline Village

State

NV

Zip Code

89450

Purpose of Disbursement

Gas Carson, NV

Candidate Name

Kristen Spees

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☒ Primary ☒ General
☐ Other (specify)

State: NV

District: 2

Date of Disbursement

9 / 2 / 2014

Amount of Each Disbursement this Period

3876

B. Kristen Spees Committee

Mailing Address

PO BOX 3464

City

Incline Village

State

NV

Zip Code

89450

Purpose of Disbursement

Gas Carson, NV

Candidate Name

Kristen Spees

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☒ Primary ☒ General
☐ Other (specify)

State: NV

District: 2

Date of Disbursement

9 / 4 / 2014

Amount of Each Disbursement this Period

6043

C. Kristen Spees Committee

Mailing Address

PO BOX 3464

City

Incline Village

State

NV

Zip Code

89450

Purpose of Disbursement

Costco Camping Food Road trip

Candidate Name

Kristen Spees

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☒ Primary ☒ General
☐ Other (specify)

State: NV

District: 2

Date of Disbursement

9 / 4 / 2014

Amount of Each Disbursement this Period

17650

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

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

27569

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

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

FOR LINE NUMBER:
(check only one)

PAGE **17** OF **28**

☒ 17 18 19a 19b
20a 20b 20c 21

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NAME OF COMMITTEE (In Full)

Kristen Spees Committee

Full Name (Last, First, Middle Initial)

Date of Disbursement

8 / 25 / 2014

A.

Kristen Spees Committee

Mailing Address

PO BOX 3464

City

Incline Village

State

NV

Zip Code

89450

Purpose of Disbursement

Gas Carson, NV

Candidate Name

Kristen Spees

17
Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☒ General
☐ Other (specify)

State: **NV**

District: **2**

Amount of Each Disbursement this Period

5624

B.

Kristen Spees Committee

Mailing Address

PO BOX 3464

City

Incline Village

State

NV

Zip Code

89450

Purpose of Disbursement

Costco gas Carson

Candidate Name

Kristen Spees

17
Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☒ Primary ☒ General
☐ Other (specify)

State: **NV**

District: **2**

Date of Disbursement

8 / 27 / 2014

Amount of Each Disbursement this Period

3741

C.

Kristen Spees Committee

Mailing Address

PO BOX 3464

City

Incline Village

State

NV

Zip Code

89450

Purpose of Disbursement

Gas Winnemucca, NV

Candidate Name

Kristen Spees

17
Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☒ General
☐ Other (specify)

State: **NV**

District: **2**

Date of Disbursement

9 / 2 / 2014

Amount of Each Disbursement this Period

6366

SUBTOTAL of Disbursements This Page (optional)

15731

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

PAGE 20 OF 28

☒ 17 ☐ 18 ☐ 19a ☐ 19b
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NAME OF COMMITTEE (In Full)

Kristen Spees Committee

Full Name (Last, First, Middle Initial)

Date of Disbursement

9/12/2014

A. Kristen Spees Committee

Mailing Address

PO BOX 3464

City

Incline Village

State

NV

Zip Code

89450

Purpose of Disbursement

Bike Race Registration

Candidate Name

Kristen Spees

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☒ Primary ☒ General
☐ Other (specify)

State: NV

District: 2

Amount of Each Disbursement this Period

4300

B. Kristen Spees Committee

Mailing Address

PO BOX 3464

City

Incline Village

State

NV

Zip Code

89450

Purpose of Disbursement

7-11 Gas + lunch

Candidate Name

Kristen Spees

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☒ Primary ☒ General
☐ Other (specify)

State: NV

District: 2

Date of Disbursement

9/15/2014

Amount of Each Disbursement this Period

75.05

C. Kristen Spees Committee

Mailing Address

PO BOX 3464

City

Incline Village

State

NV

Zip Code

89450

Purpose of Disbursement

Lunch - Rano

Candidate Name

Kristen Spees

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☒ Primary ☒ General
☐ Other (specify)

State: NV

District: 2

Date of Disbursement

9/16/2014

Amount of Each Disbursement this Period

2147

SUBTOTAL of Disbursements This Page (optional)

13952

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 19 OF 23

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

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NAME OF COMMITTEE (In Full)

Kristen Spees Committee

Full Name (Last, First, Middle Initial)

A. Kristen Spees Committee

Mailing Address

PO BOX 3464

City

Incline Village

State

NV

Zip Code

89450

Purpose of Disbursement

Gas Dayton, NV - Support

Candidate Name

Kristen Spees

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☒ Primary ☒ General
☐ Other (specify)

State: NV

District: 2

Date of Disbursement

9 / 8 / 2014

Amount of Each Disbursement this Period

81.73

B. Kristen Spees Committee

Mailing Address

PO BOX 3464

City

Incline Village

State

NV

Zip Code

89450

Purpose of Disbursement

Gas Dayton - Mototrip

Candidate Name

Kristen Spees

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☒ Primary ☒ General
☐ Other (specify)

State: NV

District: 2

Date of Disbursement

9 / 8 / 2014

Amount of Each Disbursement this Period

125.00

C. Kristen Spees Committee

Mailing Address

PO BOX 3464

City

Incline Village

State

NV

Zip Code

89450

Purpose of Disbursement

NV Day Parade

Candidate Name

Kristen Spees

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☒ Primary ☒ General
☐ Other (specify)

State: NV

District: 2

Date of Disbursement

9 / 8 / 2014

Amount of Each Disbursement this Period

255.00

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

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

461.73

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 **12** OF **23**

☒ 17 20a ☐ 18 20b ☐ 19a 20c ☐ 19b 21

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NAME OF COMMITTEE (In Full)

Kristen Spees Committee

Full Name (Last, First, Middle Initial)

A. **Kristen Spees Committee**

Mailing Address

PO BOX 3464

City

Incline Village

State

NV

Zip Code

89450

Purpose of Disbursement

Gas - Reno

Candidate Name

Kristen Spees

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☒ General
☐ Other (specify)

State: **NV**

District: **2**

Date of Disbursement

9 **25** **2014**

Amount of Each Disbursement this Period

62.07

B. **Kristen Spees Committee**

Mailing Address

PO BOX 3464

City

Incline Village

State

NV

Zip Code

89450

Purpose of Disbursement

Gas - Carson

Candidate Name

Kristen Spees

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☒ General
☐ Other (specify)

State: **NV**

District: **2**

Date of Disbursement

9 **29** **2014**

Amount of Each Disbursement this Period

43.67

C. **Kristen Spees Committee**

Mailing Address

PO BOX 3464

City

Incline Village

State

NV

Zip Code

89450

Purpose of Disbursement

Camping Fees

Candidate Name

Kristen Spees

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☒ General
☐ Other (specify)

State: **NV**

District: **2**

Date of Disbursement

8 **18** **2014**

Amount of Each Disbursement this Period

45.00

SUBTOTAL of Disbursements This Page (optional)

150.74

TOTAL This Period (last page this line number only)

359.20

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

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

FOR LINE NUMBER:
(check only one)

PAGE 21 OF 23

☒ 17
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20c ☐ 19b
21

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NAME OF COMMITTEE (In Full)

Kristen Spees Committee

Full Name (Last, First, Middle Initial)

Kristen Spees Committee

Mailing Address

PO BOX 3464

City

Incline Village

State

NV

Zip Code

89450

Purpose of Disbursement

Gas - Reno

17

Candidate Name

Kristen Spees

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☒ Primary ☒ General
☐ Other (specify)

State: NV

District: 2

Date of Disbursement

9 / 22 / 2014

Amount of Each Disbursement this Period

50.00

B. Kristen Spees Committee

Mailing Address

PO BOX 3464

City

Incline Village

State

NV

Zip Code

89450

Purpose of Disbursement

Campaign Cards

17

Candidate Name

Kristen Spees

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☒ Primary ☒ General
☐ Other (specify)

State: NV

District: 2

Date of Disbursement

9 / 22 / 2014

Amount of Each Disbursement this Period

90.01

C. Kristen Spees Committee

Mailing Address

PO BOX 3464

City

Incline Village

State

NV

Zip Code

89450

Purpose of Disbursement

Gas - Reno

17

Candidate Name

Kristen Spees

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☒ Primary ☒ General
☐ Other (specify)

State: NV

District: 2

Date of Disbursement

9 / 22 / 2014

Amount of Each Disbursement this Period

39.42

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

179.43

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

179.43

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

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

FOR LINE NUMBER:
(check only one)

PAGE **23** OF **23**

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

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NAME OF COMMITTEE (In Full)

Kristen Spees Committee

Full Name (Last, First, Middle Initial)

Kristen Spees Committee

Mailing Address

PO BOX 3464

City

Incline Village

State

NV

Zip Code

89450

Purpose of Disbursement

original fee to start Bank acct.

Candidate Name

reimbursement to candidate

Kristen Spees

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☒ General
☐ Other (specify)

State: *NV*

District: *2*

Date of Disbursement

9 / 29 / 2014

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

Kristen Spees Committee

Mailing Address

PO BOX 3464

City

Incline Village

State

NV

Zip Code

89450

Purpose of Disbursement

Fees for Internet transaction fees

Candidate Name

ALT BNC

Kristen Spees

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☒ General
☐ Other (specify)

State: *NV*

District: *2*

Date of Disbursement

9 / 30 / 2014

Amount of Each Disbursement this Period

252.78

Full Name (Last, First, Middle Initial)

Date of Disbursement

MM / DD / YYYY

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Amount of Each Disbursement this Period

752.78

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

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

752.78

4343.98

SCHEDULE C (FEC Form 3)
LOANS

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

PAGE OF

FOR LINE NUMBER:
(check only one)

☐ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Kristen Speers Committee

LOAN SOURCE Full Name (Last, First, Middle Initial)

N/A

Election:

☐ Primary
☐ General
☐ Other (specify) ▼

Mailing Address

City

State

ZIP Code

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M M /

D D /

Y Y Y Y Y

M M /

D D /

Y Y Y Y Y

% (apr)

☐ Yes

☐ No

List All Endorsers or Guarantors (if any) to Loan Source

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

SUBTOTALS This Period This Page (optional).....

TOTALS This Period (last page in this line only).....

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C-1 (FEC Form 3)

LOANS AND LINES OF CREDIT FROM LENDING INSTITUTIONS

Federal Election Commission, Washington, D.C. 20463

Supplementary for
Information found on
Page ____ of Schedule C

NAME OF COMMITTEE (In Full) <div style="font-size: 1.2em; font-family: cursive;">Kristen Speers Committee</div>		FEC IDENTIFICATION NUMBER <div style="border: 1px solid black; padding: 2px; font-family: monospace; font-size: 1.1em;">C 00565408</div>	
LENDING INSTITUTION (LENDER) Full Name <div style="font-size: 1.5em; font-family: cursive;">N/A</div>		Amount of Loan <div style="border: 1px solid black; height: 20px; width: 100%;"></div>	
Mailing Address		Interest Rate (APR) <div style="border: 1px solid black; height: 20px; width: 100%;"></div> %	
City State Zip Code		Date Incurred or Established <div style="display: flex; justify-content: space-between;"><div style="border: 1px solid black; width: 20px; height: 20px;"></div><div style="border: 1px solid black; width: 20px; height: 20px;"></div><div style="border: 1px solid black; width: 20px; height: 20px;"></div></div>	
		Date Due <div style="display: flex; justify-content: space-between;"><div style="border: 1px solid black; width: 20px; height: 20px;"></div><div style="border: 1px solid black; width: 20px; height: 20px;"></div><div style="border: 1px solid black; width: 20px; height: 20px;"></div></div>	
A. Has loan been restructured? <input type="checkbox"/> No <input type="checkbox"/> Yes If yes, date originally incurred <div style="display: flex; justify-content: space-between;"><div style="border: 1px solid black; width: 20px; height: 20px;"></div><div style="border: 1px solid black; width: 20px; height: 20px;"></div><div style="border: 1px solid black; width: 20px; height: 20px;"></div></div>			
B. If line of credit, Amount of this Draw: <div style="border: 1px solid black; height: 20px; width: 100%;"></div>		Total Outstanding Balance: <div style="border: 1px solid black; height: 20px; width: 100%;"></div>	
C. Are other parties secondarily liable for the debt incurred? <input type="checkbox"/> No <input type="checkbox"/> Yes (Endorsers and guarantors must be reported on Schedule C.)			
D. Are any of the following pledged as collateral for the loan: real estate, personal property, goods, negotiable instruments, certificates of deposit, chattel papers, stocks, accounts receivable, cash on deposit, or other similar traditional collateral? <input type="checkbox"/> No <input type="checkbox"/> Yes If yes, specify: _____		What is the value of this collateral? <div style="border: 1px solid black; height: 20px; width: 100%;"></div> Does the lender have a perfected security interest in it? <input type="checkbox"/> No <input type="checkbox"/> Yes	
E. Are any future contributions or future receipts of interest income, pledged as collateral for the loan? <input type="checkbox"/> No <input type="checkbox"/> Yes If yes, specify: _____		What is the estimated value? <div style="border: 1px solid black; height: 20px; width: 100%;"></div>	
A depository account must be established pursuant to 11 CFR 100.82(e)(2) and 100.142(e)(2). Date account established: <div style="display: flex; justify-content: space-between;"><div style="border: 1px solid black; width: 20px; height: 20px;"></div><div style="border: 1px solid black; width: 20px; height: 20px;"></div><div style="border: 1px solid black; width: 20px; height: 20px;"></div></div>		Location of account: Address: City, State, Zip: _____	
F. If neither of the types of collateral described above was pledged for this loan, or if the amount pledged does not equal or exceed the loan amount, state the basis upon which this loan was made and the basis on which it assures repayment.			
G. COMMITTEE TREASURER Typed Name Signature		DATE <div style="display: flex; justify-content: space-between;"><div style="border: 1px solid black; width: 20px; height: 20px;"></div><div style="border: 1px solid black; width: 20px; height: 20px;"></div><div style="border: 1px solid black; width: 20px; height: 20px;"></div></div>	
H. Attach a signed copy of the loan agreement.			
I. TO BE SIGNED BY THE LENDING INSTITUTION: I. To the best of this institution's knowledge, the terms of the loan and other information regarding the extension of the loan are accurate as stated above. II. The loan was made on terms and conditions (including interest rate) no more favorable at the time than those imposed for similar extensions of credit to other borrowers of comparable credit worthiness. III. This institution is aware of the requirement that a loan must be made on a basis which assures repayment, and has complied with the requirements set forth at 11 CFR 100.82 and 100.142 in making this loan.			
AUTHORIZED REPRESENTATIVE Typed Name Signature		DATE <div style="display: flex; justify-content: space-between;"><div style="border: 1px solid black; width: 20px; height: 20px;"></div><div style="border: 1px solid black; width: 20px; height: 20px;"></div><div style="border: 1px solid black; width: 20px; height: 20px;"></div></div>	
Title			

Excluding Loans

9
10

Kristen Speers committee

N/A

City _____ State _____ Zip Code _____



Outstanding Balance at Close of This Period

Nature of Debt (Purpose):	
---------------------------	--

City	State	Zip Code
------	-------	----------

Outstanding Balance at Close of This Period

Nature of Debt (Purpose):	
---------------------------	--

City	State	Zip Code
------	-------	----------

Outstanding Balance at Close of This Period

FEC FORM 3Z (File with Form 3)

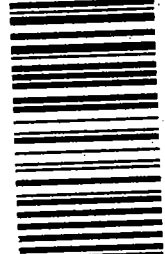
CONSOLIDATION REPORT OF RECEIPTS AND DISBURSEMENTS

(To Be Used By A Principal Campaign Committee)

Name of Principal Campaign Committee (In Full) Kristen Spees Committee		Report Covering Period: From: 3 4 2014 To: 9 30 2014			
Committee Name		(a) Line No. 11(a) Total Contributions From Indiv./Persons Other Than Political Committees	(b) Line No. 11(b) Total Contributions From Political Party Committees		
A Kristen Spees Committee		4740.00	0		
B Column Total Last Page Only.....		4740.00			
(c) Line No. 11(c) Total Contributions From Other Political Committees	(d) Line No. 11(d) Total Contributions From The Candidate	(e) Line No. 11(e) Total Contributions	(f) Line No. 12 Total Transfers From Other Authorized Committees	(g) Line No. 13(a) Total Loans Made or Guaranteed by the Candidate	(h) Line No. 13(b) Total All Other Loans
A 0	1700.00	6440.0	0	0	0
B	1700.0	6440.0			
(i) Line No. 13(c) Total Loans	(j) Line No. 14 Total Offsets to Operating Expenditures	(k) Line No. 15 Total Other Receipts	(l) Line No. 16 Total Receipts	(m) Line No. 17 Total Operating Expenditures	(n) Line No. 18 Total Transfers to Other Authorized Committees
A 0	0	0	6440.0	4343.98	0
B			6440.0	4343.98	
(o) Line No. 19(a) Total Loan Repayments of Loans Made or Guaranteed by The Can- didate	(p) Line No. 19(b) Total Loan Repayments of All Other Loans	(q) Line No. 19(c) Total Loan Repayments	(r) Line No. 20(a) Total Contribution Refunds to Individuals/Persons	(s) Line No. 20(b) Total Contribution Refunds to Political Party Committees	(t) Line No. 20(c) Total Contribution Refunds to Other Political Committees
A 0	0	0	0	0	0
B					
(u) Line No. 20(d) Total Contribution Refunds	(v) Line No. 21 Total Other Disbursements	(w) Line No. 22 Total Disbursements	(x) Line No. 23 Cash on Hand Beginning of Reporting Period	(y) Line No. 27 Cash on Hand Close of Reporting Period	(z) Line No. 9 Debts & Obligations Owed TO the Committee
A 0	0	4343.98	0	2096.02	0
B		4343.98		2096.02	
(aa) Line No. 10 Debts & Obligations Owed BY the Committee	(bb) Line No. 6(c) Net Contributions	(cc) Line No. 7(c) Net Operating Expenditures			
A 0	6440.0	4343.98			
B	6440.0	4343.98			

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