FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example:If typing, type over the lines

Dina Titus for Congress

ADDRESS (number and street) P. O. Box 50614

Check if different than previously reported. (ACC)

Henderson | NV | 89016

2. **FEC IDENTIFICATION NUMBER** C00450577

CITY STATE ZIP CODE

3. IS THIS REPORT [ ] NEW (N) **OR** [X] AMENDED (A)

STATE DISTRICT: NV 03

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

- [X] 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 ____ in the State of ____

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

[ ] General (30G) [ ] Runoff (30R) [ ] Special (30S)

Election on ____ in the State of ____

5. Covering Period 01 01 2009 through 03 31 2009

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 Steve Sisolak

Signature of Treasurer Electronically Filed by Steve Sisolak Date 09 10 2009

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

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