

FEC
FORM 3

REPORT OF RECEIPTS
AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type
over the lines.

12FE4M5

GREG KIDD FOR NEVADA

ADDRESS (number and street)

PO BOX 1186



Check if different
than previously
reported. (ACC)

CRYSTAL BAY

NV

89402

CITY ▲

STATE ▲

ZIP CODE ▲

2. FEC IDENTIFICATION NUMBER ▼

C

C00873620

3. IS THIS
REPORT



NEW
(N)

OR



AMENDED
(A)

STATE ▼ DISTRICT

NV

02

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:



Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M / D D / Y Y Y Y
06 / 11 / 2024

in the
State of

NV

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



General (30G)



Runoff (30R)



Special (30S)

Election on

M M / D D / Y Y Y Y

in the
State of

5. Covering Period

M M / D D / Y Y Y Y
04 / 01 / 2024

through

M M / D D / Y Y Y Y
05 / 22 / 2024

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

Castelli, Emily, , ,

Signature of Treasurer

Castelli, Emily, , ,

Date

M M / D D / Y Y Y Y
05 / 30 / 2024

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. §30109.

Office
Use
Only

FEC FORM 3
(Revised 05/2016)

SUMMARY PAGE
of Receipts and Disbursements

FEC Form 3 (Revised 03/2016)

Write or Type Committee Name

GREG KIDD FOR NEVADA

Report Covering the Period:

From:

MM / DD / YYYY
04 / 01 / 2024

To:

MM / DD / YYYY
05 / 22 / 2024

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))	0.00	0.00
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	0.00	0.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	513539.78	597679.78
(b) Total Offsets to Operating Expenditures (from Line 14)	260.98	260.98
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	513278.80	597418.80
8. Cash on Hand at Close of Reporting Period (from Line 27)	402581.58	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	1006750.00	

For further information, contact the Federal Election Commission at 800-424-9530 or visit www.fec.gov.

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

GREG KIDD FOR NEVADA

Report Covering the Period: From: 04 / 01 / 2024 To: 05 / 22 / 2024

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).....	0.00	0.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL of contributions from individuals	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) The Candidate	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	0.00	0.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	500000.00	1000000.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	500000.00	1000000.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	260.98	260.98
15. OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	0.38
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4).....	500260.98	1000261.36

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3 (Revised 05/2016)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	513539.78	597679.78
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	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 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	513539.78	597679.78

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	415860.38
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	500260.98
25. SUBTOTAL (add Line 23 and Line 24).....	916121.36
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	513539.78
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	402581.58

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

PAGE 5 OF 24

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

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

NAME OF COMMITTEE (In Full)

GREG KIDD FOR NEVADA

Full Name (Last, First, Middle Initial)

KIDD, GREG, , ,

A.

Mailing Address PO BOX 1186

City

CRYSTAL BAY

State

NV

Zip Code

89402

FEC ID number of contributing
federal political committee.**C** H4NV02185Name of Employer
Hard Yaka VenturesOccupation
Partner

Receipt For: 2024

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	1		2	0	2	4

Transaction ID : SA13A.4176

Amount of Each Receipt this Period

500000.00

☐ Memo Item
Loan

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

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

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y

Amount of Each Receipt this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

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

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y

Amount of Each Receipt this Period

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ▶

500000.00

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

500000.00

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

PAGE 6 OF 24

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

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NAME OF COMMITTEE (In Full)

GREG KIDD FOR NEVADA

Full Name (Last, First, Middle Initial)

Southwest Airlines

A. Mailing Address PO Box 36647 TOP-1CRCity
DallasState
TXZip Code
75235FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2024

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

260.98

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 11 2024

Transaction ID : SA14.4112

Amount of Each Receipt this Period

260.98

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

260.98

260.98

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

PAGE 7 OF 24

☒ 17	☐ 18	☐ 19a	☐ 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

GREG KIDD FOR NEVADA

Full Name (Last, First, Middle Initial)

A. Aguila, Fernando, , ,Mailing Address 1285 64th St
Lot ACity
EmeryvilleState
CAZip Code
94608Purpose of Disbursement
Strategic Consulting

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2024

☐	Primary	☒ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		07		2024

FEC Identification Number

C

Amount of Each Disbursement this Period

5280.00

Transaction ID : SB17.4188

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Amplify Power

Mailing Address 345 Huron Ave

City
CambridgeState
MAZip Code
02138Purpose of Disbursement
Strategic Consulting

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2024

☐	Primary	☒ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		20		2024

FEC Identification Number

C

Amount of Each Disbursement this Period

10000.00

Transaction ID : SB17.4199

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Apple

Mailing Address One Apple Park Way

City
CupertinoState
CAZip Code
95014Purpose of Disbursement
Office Supplies

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2024

☐	Primary	☒ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		29		2024

FEC Identification Number

C

Amount of Each Disbursement this Period

1081.57

Transaction ID : SB17.4172

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

16361.57

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

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

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

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NAME OF COMMITTEE (In Full)

GREG KIDD FOR NEVADA

Full Name (Last, First, Middle Initial)

A. Bravo Schrager

Mailing Address 6675 S Tenaya Way

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		16		2024

City
Las VegasState
NVZip Code
89113

FEC Identification Number

C

Purpose of Disbursement
Legal Services

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

5000.00

Transaction ID : SB17.4150

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2024

☐ Primary	☒ General
☐ Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

B. Bravo Schrager

Mailing Address 6675 S Tenaya Way

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		03		2024

City
Las VegasState
NVZip Code
89113

FEC Identification Number

C

Purpose of Disbursement
Legal Services

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

5000.00

Transaction ID : SB17.4181

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2024

☐ Primary	☒ General
☐ Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

C. Canva

Mailing Address 200 E 6th St

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		17		2024

City
AustinState
TXZip Code
78701

FEC Identification Number

C

Purpose of Disbursement
Software

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

500.00

Transaction ID : SB17.4214

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2024

☐ Primary	☒ General
☐ Other (specify) ▼	

State:

District:

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

10500.00

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

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

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

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NAME OF COMMITTEE (In Full)

GREG KIDD FOR NEVADA

Full Name (Last, First, Middle Initial)

A. Changing DynamicsMailing Address 255 W Moana Lane
Suite 214City
RenoState
NVZip Code
89509Purpose of Disbursement
Strategic Consulting

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2024

☐	Primary	☒ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	8		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

2500.00

Transaction ID : SB17.4158

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Changing DynamicsMailing Address 255 W Moana Lane
Suite 214City
RenoState
NVZip Code
89509Purpose of Disbursement
Strategic Consulting

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2024

☐	Primary	☒ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	9		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

2500.00

Transaction ID : SB17.4190

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Comal

Mailing Address 2020 Shattuck Ave

City
BerkeleyState
CAZip Code
94704Purpose of Disbursement
Food

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2024

☐	Primary	☒ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	6		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

615.19

Transaction ID : SB17.4152

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

5615.19

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

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

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

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NAME OF COMMITTEE (In Full)

GREG KIDD FOR NEVADA

Full Name (Last, First, Middle Initial)

A. Expedia

Mailing Address 1111 Expedia Group Way W

City
SeattleState
WAZip Code
98119Purpose of Disbursement
Travel

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2024

☐	Primary	☒ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	5		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

279.96

Transaction ID : SB17.4117

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Expedia

Mailing Address 1111 Expedia Group Way W

City
SeattleState
WAZip Code
98119Purpose of Disbursement
Travel

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2024

☐	Primary	☒ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	5		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

253.95

Transaction ID : SB17.4119

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Expedia

Mailing Address 1111 Expedia Group Way W

City
SeattleState
WAZip Code
98119Purpose of Disbursement
Travel

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2024

☐	Primary	☒ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	4		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

529.76

Transaction ID : SB17.4192

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

1063.67

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

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

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☒ 17	☐ 18	☐ 19a	☐ 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

GREG KIDD FOR NEVADA

Full Name (Last, First, Middle Initial)

A. Expedia

Mailing Address 1111 Expedia Group Way W

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		20		2024

City
SeattleState
WAZip Code
98119Purpose of Disbursement
Travel

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2024

☐	Primary	☒ General
☐	Other (specify) ▼	

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

1102.08

Transaction ID : SB17.4217

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Expedia

Mailing Address 1111 Expedia Group Way W

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		22		2024

City
SeattleState
WAZip Code
98119Purpose of Disbursement
Travel

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2024

☐	Primary	☒ General
☐	Other (specify) ▼	

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

1158.38

Transaction ID : SB17.4238

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Google

Mailing Address 1600 Amphitheatre Parkway

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		06		2024

City
Mountain ViewState
CAZip Code
94043Purpose of Disbursement
Software

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2024

☐	Primary	☒ General
☐	Other (specify) ▼	

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

167.14

Transaction ID : SB17.4185

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

2427.60

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

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

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

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NAME OF COMMITTEE (In Full)

GREG KIDD FOR NEVADA

Full Name (Last, First, Middle Initial)

A. In Ad VentureMailing Address 155 Bertram Market Dr.
Suite 135-256City
Saint JohnsState
FLZip Code
32259Purpose of Disbursement
Strategic Consulting

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2024

☐	Primary	☒ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	6		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

1564.50

Transaction ID : SB17.4186

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. J Resort

Mailing Address 345 N. Arlington Ave

City
RenoState
NVZip Code
94608Purpose of Disbursement
Travel

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2024

☐	Primary	☒ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	9		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

65.22

Transaction ID : SB17.4132

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Nevada Bighorn

Mailing Address PO Box 21393

City
RenoState
NVZip Code
89515Purpose of Disbursement
Food

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2024

☐	Primary	☒ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	8		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

640.00

Transaction ID : SB17.4126

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

2269.72

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

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

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20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

GREG KIDD FOR NEVADA

Full Name (Last, First, Middle Initial)

A. NEVADA STATE DEMOCRATIC PARTYMailing Address 2310 PASEO DEL PRADO
SUITE A120City
LAS VEGASState
NVZip Code
89102Purpose of Disbursement
Voter File Software

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2024

☐	Primary	☒ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	1		2	0	2	4

FEC Identification Number

C C00208991

Amount of Each Disbursement this Period

10000.00

Transaction ID : SB17.4229

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. NGPVANMailing Address 655 15th Street NW
#650City
WashingtonState
DCZip Code
20005Purpose of Disbursement
Software

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2024

☐	Primary	☒ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

650.00

Transaction ID : SB17.4140

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. NGPVANMailing Address 655 15th Street NW
#650City
WashingtonState
DCZip Code
20005Purpose of Disbursement
Software

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2024

☐	Primary	☒ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	4		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

315.00

Transaction ID : SB17.4164

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

10965.00

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

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

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NAME OF COMMITTEE (In Full)

GREG KIDD FOR NEVADA

Full Name (Last, First, Middle Initial)

A. NGPVANMailing Address 655 15th Street NW
#650City
WashingtonState
DCZip Code
20005Purpose of Disbursement
Software

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2024

☐	Primary	☒ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	3		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

965.00

Transaction ID : SB17.4180

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. NGPVANMailing Address 655 15th Street NW
#650City
WashingtonState
DCZip Code
20005Purpose of Disbursement
Software

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2024

☐	Primary	☒ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	5		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

500.00

Transaction ID : SB17.4193

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Pauly, Hannah P., , ,

Mailing Address 10463 Summershade Ln

City
RenoState
NVZip Code
89521Purpose of Disbursement
Payroll

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2024

☐	Primary	☒ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	8		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

1666.00

Transaction ID : SB17.4160

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

3131.00

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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NAME OF COMMITTEE (In Full)

GREG KIDD FOR NEVADA

Full Name (Last, First, Middle Initial)

A. Ruby 360 Lodge

Mailing Address PO Box 281192

City
LamoilleState
NVZip Code
89828Purpose of Disbursement
Travel

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2024

☐	Primary	☒ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	6		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

3000.00

Transaction ID : SB17.4212

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Ruby 360 Lodge

Mailing Address PO Box 281192

City
LamoilleState
NVZip Code
89828Purpose of Disbursement
Travel

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2024

☐	Primary	☒ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	7		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

340.00

Transaction ID : SB17.4216

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Ruby 360 Lodge

Mailing Address PO Box 281192

City
LamoilleState
NVZip Code
89828Purpose of Disbursement
Travel

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2024

☐	Primary	☒ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	0		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

480.00

Transaction ID : SB17.4221

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

3820.00

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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(check only one)

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NAME OF COMMITTEE (In Full)

GREG KIDD FOR NEVADA

Full Name (Last, First, Middle Initial)

A. Ruby 360 Lodge

Mailing Address PO Box 281192

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	2		2	0	2	4

City
LamoilleState
NVZip Code
89828

FEC Identification Number

C

Purpose of Disbursement
Travel

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

259.60

Transaction ID : SB17.4239

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2024

☐ Primary	☒ General
☐ Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

B. Saguaro Strategies

Mailing Address 2120 University Ave

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	9		2	0	2	4

City
BerkeleyState
CAZip Code
94704

FEC Identification Number

C

Purpose of Disbursement
Strategic Consulting

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

20000.00

Transaction ID : SB17.4133

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2024

☐ Primary	☒ General
☐ Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

C. Saguaro Strategies

Mailing Address 2120 University Ave

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	3		2	0	2	4

City
BerkeleyState
CAZip Code
94704

FEC Identification Number

C

Purpose of Disbursement
Strategic Consulting

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

10000.00

Transaction ID : SB17.4182

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2024

☐ Primary	☒ General
☐ Other (specify) ▼	

State:

District:

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

30259.60

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

GREG KIDD FOR NEVADA

Full Name (Last, First, Middle Initial)

A. Saguro Strategies

Mailing Address 2120 University Ave

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	3		2	0	2	4

City
BerkeleyState
CAZip Code
94704

FEC Identification Number

C

Purpose of Disbursement
Strategic Consulting

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

2120.49

Transaction ID : SB17.4183

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2024

☐ Primary	☒ General
☐ Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

B. Sol Food

Mailing Address 401 Miller Ave

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	5		2	0	2	4

City
Mill ValleyState
CAZip Code
94941

FEC Identification Number

C

Purpose of Disbursement
Food

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

353.30

Transaction ID : SB17.4144

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2024

☐ Primary	☒ General
☐ Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

C. Southwest Airlines

Mailing Address PO Box 36647 TOP-1CR

Date of Disbursement

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

City
DallasState
TXZip Code
75235

FEC Identification Number

C

Purpose of Disbursement
Travel

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

260.98

Transaction ID : SB17.4135

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2024

☐ Primary	☒ General
☐ Other (specify) ▼	

State:

District:

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

2734.77

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

GREG KIDD FOR NEVADA

Full Name (Last, First, Middle Initial)

A. Tadich

Mailing Address 240 California Street

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		26		2024

City
San FranciscoState
CAZip Code
94111

FEC Identification Number

CPurpose of Disbursement
Food

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

640.31

Transaction ID : SB17.4168

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2024

☐ Primary	☒ General
☐ Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

B. TedxMailing Address 59 Damonte Ranch Pkwy
Suite B-514

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		09		2024

City
RenoState
NVZip Code
89521

FEC Identification Number

CPurpose of Disbursement
Event Sponsorship

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

25000.00

Transaction ID : SB17.4130

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2024

☐ Primary	☒ General
☐ Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

C. The Outreach TeamMailing Address 3090 S Durango Dr
Suite 200D

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		18		2024

City
Las VegasState
NVZip Code
89117

FEC Identification Number

CPurpose of Disbursement
Strategic Consulting

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

3472.29

Transaction ID : SB17.4156

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2024

☐ Primary	☒ General
☐ Other (specify) ▼	

State:

District:

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

29112.60

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
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☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

GREG KIDD FOR NEVADA

Full Name (Last, First, Middle Initial)

A. The Outreach TeamMailing Address 3090 S Durango Dr
Suite 200DCity
Las VegasState
NVZip Code
89117Purpose of Disbursement
Strategic Consulting

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2024

☐	Primary	☒ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	9		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

25000.00

Transaction ID : SB17.4161

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Tokubo, Sharon, , ,

Mailing Address 5257 Bristol Pl

City
NewarkState
CAZip Code
94560Purpose of Disbursement
Accounting Services

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2024

☐	Primary	☒ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	2		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

400.00

Transaction ID : SB17.4233

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. United Airlines

Mailing Address 233 S. Wacker Dive

City
ChicagoState
ILZip Code
60606Purpose of Disbursement
Travel

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2024

☐	Primary	☒ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	5		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

951.72

Transaction ID : SB17.4165

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

26351.72

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

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

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☒ 17	☐ 18	☐ 19a	☐ 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

GREG KIDD FOR NEVADA

Full Name (Last, First, Middle Initial)

A. Uplift

Mailing Address 2120 University Ave

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		10		2024

City
BerkeleyState
CAZip Code
94704

FEC Identification Number

CPurpose of Disbursement
Strategic Consulting

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

20000.00

Transaction ID : SB17.4138

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2024

☐ Primary	☒ General
☐ Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

B. Uplift

Mailing Address 2120 University Ave

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		02		2024

City
BerkeleyState
CAZip Code
94704

FEC Identification Number

CPurpose of Disbursement
Strategic/Voter Contact Consulting

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

342830.59

Transaction ID : SB17.4179

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2024

☐ Primary	☒ General
☐ Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

C.

Mailing Address

Date of Disbursement

M M	/	D D	/	Y Y Y Y

City

State

Zip Code

FEC Identification Number

C

Purpose of Disbursement

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary	☐ General
☐ Other (specify) ▼	

State:

District:

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

362830.59

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

510975.56

SCHEDULE C (FEC Form 3)
LOANS

PAGE 22 OF 24

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4100

GREG KIDD FOR NEVADA

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Election: 2024

☐ Primary☒ General☐ Other (specify) ▼

KIDD, GREG, , ,

Mailing Address

PO BOX 1186

City

CRYSTAL BAY

State

NV

ZIP Code

89402

☒ Personal Funds of the Candidate

Original Amount of Loan

500000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

500000.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
03 19 / 2024

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

None

0.00 % (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).....▶

500000.00

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 (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

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FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4176

GREG KIDD FOR NEVADA

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Election: 2024

☐ Primary☒ General☐ Other (specify) ▼

KIDD, GREG, , ,

Mailing Address

PO BOX 1186

City

CRYSTAL BAY

State

NV

ZIP Code

89402

☒ Personal Funds of the Candidate

Original Amount of Loan

500000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

500000.00

TERMS

Date Incurred

Date Due

Interest Rate

(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
05 / 01 / 2024

M M / D D / Y Y Y Y

D D / Y Y Y Y

None

0.00

% (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).....▶

500000.00

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

1000000.00

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

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate
schedule(s)
for each
numbered line)

PAGE 24 OF 24

FOR LINE NUMBER:
(check only one)

☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

GREG KIDD FOR NEVADA

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

Amplify Power

Nature of Debt (Purpose):

Strategic Consulting

Mailing Address 345 Huron Ave

City

Cambridge

State

MA

Zip Code

02138

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.4240

Amount Incurred This Period

6750.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

6750.00

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

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

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

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

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

6750.00

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

6750.00

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

1000000.00

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

1006750.00