

# 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

Tarkanian for Congress

ADDRESS (number and street)

3008 Campbell Circle

Check if different than previously reported. (ACC)

Las Vegas

NV

89107

CITY ▲

STATE ▲

ZIP CODE ▲

2. **FEC IDENTIFICATION NUMBER** ▼

C C00582320

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

STATE ▼ DISTRICT

NV

03

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

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

11 / 08 / 2016

in the State of

NV

5. Covering Period

M M / D D / Y Y Y Y

10 / 20 / 2016

through

M M / D D / Y Y Y Y

11 / 28 / 2016

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

Phillips, Cameron, , , PhD.

Type or Print Name of Treasurer

Signature of Treasurer

Phillips, Cameron, , , PhD.

[Electronically Filed]

Date

M M / D D / Y Y Y Y

01 / 30 / 2017

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

**SUMMARY PAGE**  
of Receipts and Disbursements

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name  
Tarkanian for Congress

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

	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))....	293319.36	1932195.25
(b) Total Contribution Refunds (from Line 20(d)) .....	500.00	36075.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	292819.36	1896120.25
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	474325.10	1850279.63
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	37.39
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	474325.10	1850242.24
8. Cash on Hand at Close of Reporting Period (from Line 27).....	64440.98	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	109544.97	

**For further information contact:**

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

**POST-ELECTION DETAILED SUMMARY PAGE**

Report of Receipts and Disbursements

FEC Form 3 (Revised 07/05)

PAGE 3 / 193

- If the candidate participated in the general election, use this form for the 30-day Post-General report.
- If the candidate did NOT participate in the general election, use this form for the Year-end report covering through December 31 of the election year (due on January 31).

This form is used in lieu of filling out Line Numbers 6 through 7 on Page 2 (Summary Page) and Pages 3 and 4 (the Detailed Summary Page) for the last report filed by a candidate during the current election cycle.

Write or Type Committee Name  
**Tarkanian for Congress**

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

**I. RECEIPTS**

COLUMN A Total this Period	COLUMN B Election Cycle Total as of <input type="text" value="11"/> / <input type="text" value="08"/> / <input type="text" value="2016"/> (date of general election)	COLUMN C Total for <input type="text" value="11"/> / <input type="text" value="09"/> / <input type="text" value="2016"/> (date after general election)  through <input type="text" value="11"/> / <input type="text" value="28"/> / <input type="text" value="2016"/> (last day of reporting period)
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other than Political Committees		
(i) Itemized (use Schedule A)	133440.00	1431380.54
(ii) Unitemized	9731.36	48054.99
(iii) Total of contributions from individuals	143171.36	1479435.53
(b) Political Party Committees	0.00	10000.00
(c) Other Political Committees	150148.00	412298.00

# POST-ELECTION DETAILED SUMMARY PAGE

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

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COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)
(d) The Candidate		
0.00	30461.72	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c) and (d))		
293319.36	1932195.25	0.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES		
0.00	3915.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate		
46472.61	145134.20	0.00
(b) All Other Loans		
0.00	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b))		
46472.61	145134.20	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, rebates, etc.)		
0.00	37.39	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.)		
0.00	0.00	0.00
16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15)		
339791.97	2081281.84	0.00

**POST-ELECTION DETAILED SUMMARY PAGE**

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

PAGE 5 / 193

Write or Type Committee Name

Tarkanian for Congress

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

**II. DISBURSEMENTS**

	<b>COLUMN A</b> Total this Period	<b>COLUMN B</b> Election Cycle Total as of * (date of general election) (* See page 5 for date)	<b>COLUMN C</b> Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)
17. OPERATING EXPENDITURES	<input type="text" value="474325.10"/>	<input type="text" value="1850279.63"/>	<input type="text" value="54688.75"/>
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
19. LOAN REPAYMENTS:			
(a) Of Loans Made or Guaranteed by the Candidate	<input type="text" value="59763.00"/>	<input type="text" value="16000.00"/>	<input type="text" value="59763.00"/>
(b) Of All Other Loans	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and 19(b))	<input type="text" value="59763.00"/>	<input type="text" value="16000.00"/>	<input type="text" value="59763.00"/>
20. REFUNDS OF CONTRIBUTIONS TO:			
(a) Individuals/Persons Other Than Political Committees	<input type="text" value="500.00"/>	<input type="text" value="36075.00"/>	<input type="text" value="0.00"/>
(b) Political Party Committees	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>

## POST-ELECTION DETAILED SUMMARY PAGE

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

PAGE 6 / 193

COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)
(c) Other Political Committees (such as PACs)		
0.00	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b) and (c))		
500.00	36075.00	0.00
<b>21. OTHER DISBURSEMENTS</b>		
0.00	34.48	0.00
<b>22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d) and 21)</b>		
534588.10	1902389.11	114451.75

### III. NET CONTRIBUTIONS (OTHER THAN LOANS)

(Note: Substitute in lieu of Line #6 of Summary Page for this report only; subtract Line 20(d) from Line 11(e))

292819.36	1896120.25	0.00
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### IV. NET OPERATING EXPENDITURES

(Note: Substitute in lieu of Line #7 of Summary Page for this report only; subtract Line 14 from Line 17)

474325.10	1850242.24	54688.75
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### V. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	259237.11
24. TOTAL RECIEPTS THIS PERIOD (from Line 16).....	339791.97
25. SUBTOTAL (add Line 23 and Line 24).....	599029.08
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	534588.10
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)	64440.98

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

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

FOR LINE NUMBER: PAGE 7 OF 193  
(check only one)  
 11a  11b  11c  11d  
 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)  
**Tarkanian for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Hamparian, Raffi, , ,**  
Mailing Address 950 Arden Road

City Pasadena State CA Zip Code 91106-4002

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

Name of Employer LA Metro Occupation Jr. Gov Rel Director

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 27 / 2016

Transaction ID : **AB13C2099B0784AF9BD4**

Amount of Each Receipt this Period  
 1000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Rosler, Hans Jorg, , ,**  
Mailing Address 90 Hawk Ridge Drive

City Las Vegas State NV Zip Code 89135-7864

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

Name of Employer Self-Employed Occupation Physician

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
800.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 03 / 2016

Transaction ID : **AA15AF465F1B042A48B6**

Amount of Each Receipt this Period  
 300.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Ramanathan, Meenaakshi, , ,**  
Mailing Address 2287 Buckingham Court

City Henderson State NV Zip Code 89074-5336

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 03 / 2016

Transaction ID : **A672D17E4413040B09CB**

Amount of Each Receipt this Period  
 300.00

Memo Item

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

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

1600.00

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

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

FOR LINE NUMBER: PAGE 8 OF 193  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Tarkanian for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Kemp, Will, , ,**

Mailing Address 3800 Howard Hughes Pkwy 17th Floor

City Las Vegas State NV Zip Code 89169-0925

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

Name of Employer Self Employed Occupation Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date **2700.00**

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 21 / 2016

**Transaction ID : A829D37E8B00B42E89C2**

Amount of Each Receipt this Period  
**2700.00**

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Tuttle, Robert, , ,**

Mailing Address 9940 Orient Express Ct

City Las Vegas State NV Zip Code 89145-8704

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

Name of Employer Volo, LLC Occupation CEO

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date **2700.00**

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 26 / 2016

**Transaction ID : A2B30CFCA60944A90B47**

Amount of Each Receipt this Period  
**2700.00**

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Sabitan, Maysam, , ,**

Mailing Address 3057 Las Vegas Blvd S

City Las Vegas State NV Zip Code 89109-1904

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

Name of Employer Luna Lounge Occupation Owner

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date **500.00**

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 31 / 2016

**Transaction ID : A799F989528AD499786C**

Amount of Each Receipt this Period  
**500.00**

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **5900.00**

**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: PAGE 9 OF 193  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Tarkanian for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Kourounian, Garo, , ,**

Mailing Address 3770 Deervale Drive

City Sherman Oaks State CA Zip Code 91403-4603

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

Name of Employer Self Employed Occupation Jeweler

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 27 / 2016

Transaction ID : **A5CB8E27A73BE437A90A**

Amount of Each Receipt this Period  
1000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Esh, Steven, , ,**

Mailing Address 1447 Arden Street

City Las Vegas State NV Zip Code 89104-5425

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

Name of Employer Retired Occupation Retired

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 25 / 2016

Transaction ID : **AB826BF9FF4434EA38A2**

Amount of Each Receipt this Period  
300.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Melkonian, Melkon, , ,**

Mailing Address 4720 Katherine Ave.

City Sherman Oaks State CA Zip Code 91423-2309

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

Name of Employer Keosian Berberian LLP Occupation Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 27 / 2016

Transaction ID : **A2432AE122A3B4B25993**

Amount of Each Receipt this Period  
1000.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 2300.00

**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: PAGE 10 OF 193  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Tarkanian for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Eye & Cosmetic Surgery LLC**

Mailing Address 2505 Anthem Village Drive #E-594

City Henderson State NV Zip Code 89052-5505

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

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 26 2016

Transaction ID : **ADA02CCF7841A4CA0970**

Amount of Each Receipt this Period  
2000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Hadjinian, Jack, , ,**

Mailing Address 2453 Via Nina

City Montebello State CA Zip Code 90640-2355

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

Name of Employer Occupation  
Century 21 Realty Masters Realtor

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 27 2016

Transaction ID : **A9836F6B5875E4BB996A**

Amount of Each Receipt this Period  
1000.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Reddy, Prem, , ,**

Mailing Address 16850 Bear Valley Road

City Victorville State CA Zip Code 92395-5794

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

Name of Employer Occupation  
Prime Healthcare Services Physician

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2700.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 31 2016

Transaction ID : **AE7CD4459ABDA47F2A25**

Amount of Each Receipt this Period  
2700.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 5700.00

**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: PAGE 11 OF 193  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Tarkanian for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Dimejian, Aida, , ,**

Mailing Address 482 N. Rosemead Blvd. Ste. 101

City Pasadena	State CA	Zip Code 91107-3001
------------------	-------------	------------------------

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

Name of Employer Self Employed	Occupation Realtor
-----------------------------------	-----------------------

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 27 / 2016

**Transaction ID : A88FE3ED9060B4EC88FC**

Amount of Each Receipt this Period  
500.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Zinkin, Sandra, , ,**

Mailing Address 7676 N. Van Ness Blvd.

City Fresno	State CA	Zip Code 93711-0434
----------------	-------------	------------------------

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

Name of Employer Homemaker	Occupation Homemaker
-------------------------------	-------------------------

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2700.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 03 / 2016

**Transaction ID : A2C3B3268C2ED4C25AE5**

Amount of Each Receipt this Period  
2700.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**McCann, John, , ,**

Mailing Address 1344 Jordan Ave.

City Clovis	State CA	Zip Code 93611-8185
----------------	-------------	------------------------

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

Name of Employer Self Employed	Occupation Doctor MD
-----------------------------------	-------------------------

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 04 / 2016

**Transaction ID : ABC4B72E4262F4A35B49**

Amount of Each Receipt this Period  
1000.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	4200.00
<b>TOTAL</b> 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: PAGE 12 OF 193  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Tarkanian for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Pasimio, Edmund, R, ,**

Mailing Address 601 S. Rancho Dr. Suite A6

City Las Vegas State NV Zip Code 89106-4898

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
300.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 05 / 2016

Transaction ID : **A2AEDE6B7CC784E2ABC5**

Amount of Each Receipt this Period  
300.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Akian, Sonia, , ,**

Mailing Address 355 N. Rockingham Ave.

City Los Angeles State CA Zip Code 90049-2635

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

Name of Employer Information Requested Occupation Information Requested  
Homemaker Homemaker

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 31 / 2016

Transaction ID : **A850A3F6A741B4A378DB**

Amount of Each Receipt this Period  
1000.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Engs, Stuart, , ,**

Mailing Address 11 Painted Feather Way

City Las Vegas State NV Zip Code 89135-7856

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

Name of Employer Information Requested Occupation Information Requested  
Retired Retired

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
750.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 03 / 2016

Transaction ID : **A7BCE26271D2B43F8841**

Amount of Each Receipt this Period  
250.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1550.00

**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: PAGE 13 OF 193  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Tarkanian for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Nowins, John, M., ,**  
Mailing Address 3380 S. Eastern Ave.  
City Las Vegas State NV Zip Code 89169-3313  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Self Employed Occupation Physician  
Receipt For: 2016  
 Primary  General  
 Other (specify) ▼ Election Cycle-to-Date 250.00

Date of Receipt 10 / 31 / 2016  
Transaction ID : **A9898A3FEC00541BEB6A**  
Amount of Each Receipt this Period 250.00  
 Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Kassabian, Armen, , ,**  
Mailing Address 2701 W Alameda Ave #506  
City Burbank State CA Zip Code 91505-4410  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Self-Employed Occupation Urologist  
Receipt For: 2016  
 Primary  General  
 Other (specify) ▼ Election Cycle-to-Date 2650.00

Date of Receipt 11 / 05 / 2016  
Transaction ID : **AECA57A91E91D4511932**  
Amount of Each Receipt this Period 1150.00  
 Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Oroudjian, Armine, , ,**  
Mailing Address 1601 Heather Ridge Dr.  
City Glendale State CA Zip Code 91207-1035  
FEC ID number of contributing federal political committee. **C**  
Name of Employer AM Healthcare, Inc. Occupation Administrator  
Receipt For: 2016  
 Primary  General  
 Other (specify) ▼ Election Cycle-to-Date 2700.00

Date of Receipt 10 / 27 / 2016  
Transaction ID : **A73A0E5A57F99473190C**  
Amount of Each Receipt this Period 2700.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 4100.00  
**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

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(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Tarkanian for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Becker, Barry, , ,**  
 Mailing Address 50 S Jones Blvd, Suite 100  
 City Las Vegas State NV Zip Code 89107-2672  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Becker Enterprises Owner  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 08 / 2016  
**Transaction ID : A47DC0403FE614F76B79**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Miyashiro, Ulrika, C., ,**  
 Mailing Address 2912 Setting Sun Street  
 City Las Vegas State NV Zip Code 89117-0655  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Retired Retired  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 350.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 08 / 2016  
**Transaction ID : AA291B633B5F64033AE7**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Dirienzo, Frederick, , ,**  
 Mailing Address 4735 S Saddlehorn Dr  
 City Reno State NV Zip Code 89511-6756  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Self Employed Investor  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 26 / 2016  
**Transaction ID : A0D5C9AE8BCB94F718A2**  
 Amount of Each Receipt this Period  
 1000.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1750.00  
**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: PAGE 15 OF 193  
(check only one)  
 11a  11b  11c  11d  
 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)  
**Tarkanian for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Keosian, Zareh, , ,**

Mailing Address 19118 Welby Way

City Reseda State CA Zip Code 91335-5024

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

Name of Employer Keosian Berberian LLP Occupation Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 27 2016

Transaction ID : **A8C0DAC0261044393A37**

Amount of Each Receipt this Period  
 1000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Kerimyan, Perch, , ,**

Mailing Address 116 N. Maryland Ave. Suite 205

City Glendale State CA Zip Code 91206-4270

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

Name of Employer Kerimyan Ins. Occupation Insurance Broker

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 27 2016

Transaction ID : **ADFB8C0EFA7D452CB14**

Amount of Each Receipt this Period  
 1000.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Mehocic, George, , ,**

Mailing Address 420 St Andrews Ct

City Las Vegas State NV Zip Code 89144-0815

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

Name of Employer Castle Properties Occupation Owner

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 03 2016

Transaction ID : **A33B313C514634E7ABB8**

Amount of Each Receipt this Period  
 1000.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 3000.00

**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

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(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Tarkanian for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Franasiak, David, , ,**

Mailing Address 701 8th St. N.W. Suite 500

City Washington State DC Zip Code 20001-3965

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

Name of Employer Williams & Jensen PLLC Occupation Lobbyist

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 05 / 2016

Transaction ID : **A4167E1C897324FA292F**

Amount of Each Receipt this Period  
500.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Salas, Steven, , ,**

Mailing Address 310 Linda Vista Ave

City Pasadena State CA Zip Code 91105-1236

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

Name of Employer Newmark, Grubb, Knight Frank Occupation Real Estate Broker

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 26 / 2016

Transaction ID : **A53A7ADCC64444CC9AA9**

Amount of Each Receipt this Period  
1000.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Horton, Gregory, Dallas, ,**

Mailing Address 122 Serramonte Ct

City Henderson State NV Zip Code 89074-7201

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

Name of Employer Retired Occupation Retired

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2800.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 05 / 2016

Transaction ID : **A6B034BABC3E8447182D**

Amount of Each Receipt this Period  
300.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1800.00

**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: PAGE 17 OF 193  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Tarkanian for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**List, Robert, , ,**

Mailing Address 1904 Red Robin Court

City Las Vegas State NV Zip Code 89134-6156

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

Name of Employer Kolesar & Leatham Occupation Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date **500.00**

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
**11 / 03 / 2016**

Transaction ID : **A4A8C639BC58E44699D7**

Amount of Each Receipt this Period  
**250.00**

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Campbell, Donald, , ,**

Mailing Address 550 Davis St, Unit 25

City San Francisco State CA Zip Code 94111-1953

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

Name of Employer DCI Consultants LLC Occupation Consultant

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date **1000.00**

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
**10 / 26 / 2016**

Transaction ID : **A0D230372BFE8423ABC2**

Amount of Each Receipt this Period  
**1000.00**

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Premrsirut, Puonyarat, , ,**

Mailing Address 520 S 4th St Ste 320

City Las Vegas State NV Zip Code 89101-6524

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

Name of Employer Goodman, Brown & Premrsirut Occupation Partner

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date **250.00**

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
**11 / 03 / 2016**

Transaction ID : **A14D065300F3544F285B**

Amount of Each Receipt this Period  
**250.00**

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **1500.00**

**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

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(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Tarkanian for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**McBeath, Robert, , ,**

Mailing Address 2537 Red Arrow Dr.

City Las Vegas State NV Zip Code 89135-1628

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

Name of Employer Optum Health Occupation Physician

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 05 / 2016

Transaction ID : **A0C9D2204D85F40F1AF4**

Amount of Each Receipt this Period  
1000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Gahvejian, Lorrie, , ,**

Mailing Address 1740 S. Claremont Ave.

City Fresno State CA Zip Code 93727-6205

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

Name of Employer Mid Valley Packin & Supply Co. Occupation Owner

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 04 / 2016

Transaction ID : **A973CDA4A72464666A41**

Amount of Each Receipt this Period  
500.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Lowden, Sue, , ,**

Mailing Address 9004 Greensboro Ln

City Las Vegas State NV Zip Code 89134-0500

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 03 / 2016

Transaction ID : **AEFFFE7E99A784A849D4**

Amount of Each Receipt this Period  
1000.00

Memo Item

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

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

2500.00

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

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

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(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Tarkanian for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Blut, Jerome, , ,**  
Mailing Address 300 S Fourth #701

City: Las Vegas State: NV Zip Code: 89101-6023

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

Name of Employer: Self Employed Occupation: Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 03 / 2016

Transaction ID : **A45F86C1561D64EDCABB**

Amount of Each Receipt this Period  
 500.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Machado, Richard, C., ,**  
Mailing Address 3236 W Dovewood Lane

City: Fresno State: CA Zip Code: 93711-2125

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

Name of Employer: Agrian, Inc. Occupation: President

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
750.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 08 / 2016

Transaction ID : **AE859FB86B4AD4FD2BC1**

Amount of Each Receipt this Period  
 250.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Kimberly, Richard, H., ,**  
Mailing Address 1318 Skipwith Rd.

City: Mc Lean State: VA Zip Code: 22101-1834

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

Name of Employer: Kimberly Consulting LLC Occupation: President

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 05 / 2016

Transaction ID : **A1E5E18F8327B4D7FBE8**

Amount of Each Receipt this Period  
 1000.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1750.00

**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 20 OF 193	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
**Tarkanian for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Gaboudian, Aram, , ,**

Mailing Address 451 S. Oakland Ave. #4

City Pasadena	State CA	Zip Code 91101-3374
------------------	-------------	------------------------

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

Name of Employer Keller Williams Realty	Occupation Realtor
--	-----------------------

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 21 / 2016

**Transaction ID : A4BA19D46EEDB4DC88F9**

Amount of Each Receipt this Period  
1000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Fine, Susan, Greenspun, ,**

Mailing Address 18 Quail Hollow

City Henderson	State NV	Zip Code 89014-2143
-------------------	-------------	------------------------

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

Name of Employer Retired	Occupation Retired
-----------------------------	-----------------------

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
3050.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 05 / 2016

**Transaction ID : A566E45FD204C43D0A3F**

Amount of Each Receipt this Period  
1200.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Schaefer, J. Michael, , ,**

Mailing Address 3930 Swenson St #103

City Las Vegas	State NV	Zip Code 89119-7269
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FEC ID number of contributing federal political committee. **C**

Name of Employer Retired	Occupation Retired
-----------------------------	-----------------------

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
700.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 03 / 2016

**Transaction ID : A0618B04C667D423288B**

Amount of Each Receipt this Period  
100.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	2300.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s)  
for each category of the  
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(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Tarkanian for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Kassabian, Armine, , ,**

Mailing Address 2701 W Alameda Ave, Ste 506

City Burbank	State CA	Zip Code 91505-4410
-----------------	-------------	------------------------

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

Name of Employer Self Employed	Occupation Dentist
-----------------------------------	-----------------------

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 26 / 2016

**Transaction ID : A7E9FD86912B645E2954**

Amount of Each Receipt this Period  
1000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Cheney, Liz, , ,**

Mailing Address PO Box 236

City Wilson	State WY	Zip Code 83014-0236
----------------	-------------	------------------------

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

Name of Employer Self Employed	Occupation Attorney
-----------------------------------	------------------------

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 02 / 2016

**Transaction ID : AE50A1424AEE2400F9A5**

Amount of Each Receipt this Period  
1000.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Lee, Irene, , ,**

Mailing Address 9631 Orient Express Ct

City Las Vegas	State NV	Zip Code 89145-8701
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FEC ID number of contributing federal political committee. **C**

Name of Employer None	Occupation None
--------------------------	--------------------

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 03 / 2016

**Transaction ID : AF444786BC3A648EB9B3**

Amount of Each Receipt this Period  
1000.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	3000.00
<b>TOTAL</b> 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: PAGE 22 OF 193  
(check only one)  
 11a  11b  11c  11d  
 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)  
**Tarkanian for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Jarvis, Joel, , ,**  
 Mailing Address 9612 Fast Elk St  
 City Las Vegas State NV Zip Code 89143-1161  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Information Requested Occupation Information Requested  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 03 / 2016  
**Transaction ID : A1F928090B9084E1FB17**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Vartanian, Vahe, , ,**  
 Mailing Address 18934 Carmel Crest Drive  
 City Tarzana State CA Zip Code 91356-5827  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Information Requested Occupation Information Requested  
 Retired Retired  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 02 / 2016  
**Transaction ID : AF9CB8392ADA14992812**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Schwartz, Samuel, , ,**  
 Mailing Address 3750 Las Vegas Blvd. S.  
 City Las Vegas State NV Zip Code 89158-4356  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Information Requested Occupation Information Requested  
 Self Employed Attorney  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 04 / 2016  
**Transaction ID : A46FFF862CE01426999C**  
 Amount of Each Receipt this Period  
 1000.00  
 Memo Item

**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: PAGE 23 OF 193  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Tarkanian for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Cooper, Jeff, , ,**

Mailing Address 5660 Kayenta Court

City Las Vegas State NV Zip Code 89118-1961

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

Name of Employer Bradshaw Smith Co. LLP Occupation CPA

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 04 / 2016

Transaction ID : **AA73887472F004824B2B**

Amount of Each Receipt this Period  
500.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Folks, Casey, , ,**

Mailing Address 3560 Wisdom Court

City Las Vegas State NV Zip Code 89120-2556

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

Name of Employer Best in the Desert Racing Assoc. Occupation Director

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 03 / 2016

Transaction ID : **A52448CB81EE64333B63**

Amount of Each Receipt this Period  
1000.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Wang, Lawrence, , ,**

Mailing Address 7090 N. Durango #110

City Las Vegas State NV Zip Code 89149-4495

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

Name of Employer Centennial Family Eye Care Occupation Optometrist

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 21 / 2016

Transaction ID : **ACF25AD45115B4128988**

Amount of Each Receipt this Period  
500.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 2000.00

**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: PAGE 24 OF 193  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Tarkanian for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Karapetian, Berdj, , ,**  
 Mailing Address 1623 Ben Lomond Dr.  
 City: Glendale State: CA Zip Code: 91202-1249  
 FEC ID number of contributing federal political committee: C  
 Name of Employer: HiChoice Health Care, Inc. Occupation: CEO  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 2700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 27 / 2016  
**Transaction ID : AED8A6FA946BF4A98A65**  
 Amount of Each Receipt this Period  
 2700.00  
 Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Geyer, Richard, , ,**  
 Mailing Address 8260 Hilton Head Ct  
 City: Las Vegas State: NV Zip Code: 89128-7159  
 FEC ID number of contributing federal political committee: C  
 Name of Employer: Self Employed Occupation: Consultant  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 26 / 2016  
**Transaction ID : A25AE75CA20FD4C76A82**  
 Amount of Each Receipt this Period  
 50.00  
 Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Bruderman, Robert, , ,**  
 Mailing Address 11565 Evergreen Creek Ln  
 City: Las Vegas State: NV Zip Code: 89135-1649  
 FEC ID number of contributing federal political committee: C  
 Name of Employer: Canterbury Wealth Advisors LLC Occupation: Investment Advisor  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 26 / 2016  
**Transaction ID : A0919EF4813794742958**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

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

3000.00



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

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

FOR LINE NUMBER: PAGE 25 OF 193  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Tarkanian for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Schaefer, J. Michael, , ,**

Mailing Address 3930 Swenson St #103

City Las Vegas State NV Zip Code 89119-7269

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

Name of Employer Retired Occupation Retired

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 26 / 2016

Transaction ID : **A97B1245FA5004388B33**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 100.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Pancholi, Samir, , ,**

Mailing Address 10 Princeville Lane

City Las Vegas State NV Zip Code 89113-1345

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 02 / 2016

Transaction ID : **A79B694388F594877A85**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 250.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Cram, Mark, , ,**

Mailing Address 5632 Dorian Black Ave

City Las Vegas State NV Zip Code 89139-7477

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

Name of Employer Advanstaff HR Occupation Business Division Manager

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 1150.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 27 / 2016

Transaction ID : **A0147A87C4AD541388A8**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 250.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ \_\_\_\_\_ 600.00

**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: PAGE 26 OF 193  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Tarkanian for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mallin, Sandra, , ,**

Mailing Address 3025 Lullingstone St

City Las Vegas State NV Zip Code 89135-2246

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

Name of Employer None Occupation Retired

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date **350.00**

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
**11 / 02 / 2016**

Transaction ID : **A3D1517891B7946D6887**

Amount of Each Receipt this Period  
**150.00**

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Sarian, Mike, M, ,**

Mailing Address 3426 Oakmont View Dr.

City Glendale State CA Zip Code 91208-1160

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

Name of Employer Prime Healthcare Occupation President

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date **2700.00**

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
**11 / 05 / 2016**

Transaction ID : **AD223DB1A83E44B0DB99**

Amount of Each Receipt this Period  
**2700.00**

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Aronov, Jake, F., ,**

Mailing Address PO Box 235000

City Montgomery State AL Zip Code 36123-5000

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

Name of Employer Aronov Realty Management, Inc. Occupation President & CEO

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date **500.00**

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
**11 / 08 / 2016**

Transaction ID : **ABC8AA9E033648EDB8A**

Amount of Each Receipt this Period  
**500.00**

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **3350.00**

**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: PAGE 27 OF 193  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Tarkanian for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Orrock, Diana, , ,**

Mailing Address 22 Drifting Shadow Way

City Las Vegas State NV Zip Code 89135-7879

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

Name of Employer Retired Occupation Retired

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 03 / 2016

Transaction ID : **A114A854088AB4B5B8C4**

Amount of Each Receipt this Period  
500.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Chenin, Stephen, , ,**

Mailing Address 1070 S Eastern Ave

City Henderson State NV Zip Code 89052

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

Name of Employer Chenin Orthodontics Occupation Self Employed

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 26 / 2016

Transaction ID : **A1B6DFC1F8C62499E878**

Amount of Each Receipt this Period  
250.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Kassabian, Armen, , ,**

Mailing Address 2701 W Alameda Ave #506

City Burbank State CA Zip Code 91505-4410

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

Name of Employer Self-Employed Occupation Urologist

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 26 / 2016

Transaction ID : **A6D1D4CE1389D4F32859**

Amount of Each Receipt this Period  
1000.00

Memo Item

**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: PAGE 28 OF 193  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Tarkanian for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Alajajian, Aram, , ,**  
Mailing Address 1927 Melwood Dr.  
City: Glendale State: CA Zip Code: 91207-1511  
FEC ID number of contributing federal political committee: **C**  
Name of Employer: Alajajian Marcoosi Architects Occupation: Architect  
Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
Election Cycle-to-Date ▼  
1000.00

Date of Receipt: 10 / 31 / 2016  
Transaction ID : **A625F9DAB674B4CB7B58**  
Amount of Each Receipt this Period: 1000.00  
 Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Colquitt, Randall, , ,**  
Mailing Address 10201 Red Bridge Ave  
City: Las Vegas State: NV Zip Code: 89134-2556  
FEC ID number of contributing federal political committee: **C**  
Name of Employer: Information Requested Occupation: Information Requested  
Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
Election Cycle-to-Date ▼  
250.00

Date of Receipt: 11 / 03 / 2016  
Transaction ID : **A70650574C16A4DAF915**  
Amount of Each Receipt this Period: 250.00  
 Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Saroyan, George, , ,**  
Mailing Address 2443 Picasso Circle  
City: Corona State: CA Zip Code: 92882-6947  
FEC ID number of contributing federal political committee: **C**  
Name of Employer: Homefield Financial Occupation: Sales  
Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
Election Cycle-to-Date ▼  
925.00

Date of Receipt: 10 / 26 / 2016  
Transaction ID : **A2449957DBC244062982**  
Amount of Each Receipt this Period: 250.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1500.00  
**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: PAGE 29 OF 193  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Tarkanian for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Fine, Gloria, , ,**

Mailing Address 11727 Morning Grove Dr

City Las Vegas State NV Zip Code 89135-1542

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

Name of Employer N/A Occupation Homemaker

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 03 / 2016

Transaction ID : **ADA1A7BECB4574A9E875**

Amount of Each Receipt this Period  
1000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Bagdasarian, Mitch, , ,**

Mailing Address 6385 E. North Ave.

City Fresno State CA Zip Code 93725-9309

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

Name of Employer Baggie Farms Occupation Farmer

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 08 / 2016

Transaction ID : **AB4EEA736BD9847B1870**

Amount of Each Receipt this Period  
1000.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Prato, Thomas, , ,**

Mailing Address 9220 Golden Eagle Dr

City Las Vegas State NV Zip Code 89134-6162

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

Name of Employer Astistic Iron Works Occupation Owner/Operator

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 03 / 2016

Transaction ID : **A1DB8A6264DDE49D5B09**

Amount of Each Receipt this Period  
1000.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 3000.00

**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

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(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Tarkanian for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Chou, Jennifer, , ,**

Mailing Address 801 Town & Country Blvd. #608

City Houston State TX Zip Code 77024-4584

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

Name of Employer BP Occupation Public Relations

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2700.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 21 / 2016

Transaction ID : **A515B24EAF49747499E2**

Amount of Each Receipt this Period  
2700.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Karabajakyan, Abraham, , ,**

Mailing Address 2515 Iowa Ave

City South Gate State CA Zip Code 90280-3911

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

Name of Employer Retired Occupation Retired

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
210.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 31 / 2016

Transaction ID : **A410798355D884B31A0F**

Amount of Each Receipt this Period  
25.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Ku, Danny, C., ,**

Mailing Address 17612 Ember Dr.

City Rowland Heights State CA Zip Code 91748-4104

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 31 / 2016

Transaction ID : **A5254288A40874AA9B3D**

Amount of Each Receipt this Period  
1000.00

Memo Item

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

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

3725.00

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

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

FOR LINE NUMBER: PAGE 31 OF 193  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Tarkanian for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Khachigian, Kenneth, , ,**

Mailing Address 501 W. Ave Los Lobos Marianos

City San Clemente State CA Zip Code 92672-4374

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

Name of Employer Self-Employed Occupation Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 26 / 2016

Transaction ID : **A4C0F661B2EA5447F966**

Amount of Each Receipt this Period  
500.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Kassabian, Dikran, , ,**

Mailing Address 17034 Addison St

City Encino State CA Zip Code 91316-3465

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

Name of Employer K Design Build Occupation Architect

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 26 / 2016

Transaction ID : **A1ECC9F5AF1FA4756978**

Amount of Each Receipt this Period  
1000.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Dukmajian, Greg, , ,**

Mailing Address 23423 Bradwell Ave

City Torrance State CA Zip Code 90502-2706

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

Name of Employer Self Employed Occupation Self Employed

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 26 / 2016

Transaction ID : **A10B9E9C90C5C461F872**

Amount of Each Receipt this Period  
1000.00

Memo Item

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

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

2500.00

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

Use separate schedule(s)  
for each category of the  
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(check only one)  
 11a  11b  11c  11d  
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)  
**Tarkanian for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Assemi, Darius, ,**  
Mailing Address 1396 W Herndon Ave., Ste 101

City: Fresno State: CA Zip Code: 93711-7126

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

Name of Employer: Granville Homes, Inc. Occupation: Real Estate Developer

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date: 5400.00

Date of Receipt: 11 / 02 / 2016  
Transaction ID : **A3D64FD65B0314858B69**

Amount of Each Receipt this Period: 2700.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Yu, Moon, Jae, ,**  
Mailing Address 2560 Montesosouri Street #208

City: Las Vegas State: NV Zip Code: 89117-3064

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

Name of Employer: Self Employed Occupation: CPA

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date: 500.00

Date of Receipt: 10 / 26 / 2016  
Transaction ID : **AD4EAED772F084BB4B4D**

Amount of Each Receipt this Period: 500.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Saltzman, Matthew, , ,**  
Mailing Address 8921 Canyon Springs Dr.

City: Las Vegas State: NV Zip Code: 89117-5848

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

Name of Employer: Kolesar & Leatham Occupation: Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date: 250.00

Date of Receipt: 11 / 02 / 2016  
Transaction ID : **AE42025EAD9404A82AB2**

Amount of Each Receipt this Period: 250.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 3450.00

**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: PAGE 33 OF 193  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Tarkanian for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Bagerdjan, Haig, , ,**  
 Mailing Address 14410 Mulholland Dr.  
 City Los Angeles State CA Zip Code 90077-1712  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Point 360 Occupation CEO  
 Receipt For: 2016  
 Primary  General  
 Other (specify) **PrimaryDebt**  
 Election Cycle-to-Date **5400.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 31 / 2016  
**Transaction ID : A92F0E551572D48E4A9D**  
 Amount of Each Receipt this Period  
 2700.00  
 Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Fessenden, Alice, , ,**  
 Mailing Address 262 Sandrock Pointe Lane  
 City Henderson State NV Zip Code 89012-2202  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Retired Occupation Retired  
 Receipt For: 2016  
 Primary  General  
 Other (specify) **500.00**  
 Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 05 / 2016  
**Transaction ID : A8245E2732FCE4353898**  
 Amount of Each Receipt this Period  
 100.00  
 Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Roski, Edward, P., ,**  
 Mailing Address Sixth Floor  
 13191 Crossroads Parkway North  
 City City Of Industry State CA Zip Code 91746-3421  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Majestic Realty Occupation President  
 Receipt For: 2016  
 Primary  General  
 Other (specify) **5400.00**  
 Election Cycle-to-Date **5400.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 08 / 2016  
**Transaction ID : AA9BA95FEDA5C4234BCB**  
 Amount of Each Receipt this Period  
 2700.00  
 Memo Item

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

5500.00

**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 34 OF 193	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
**Tarkanian for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Cecchi, Mercedes, , ,**

Mailing Address 1209 Aldebran Drive

City Mc Lean	State VA	Zip Code 22101-2304
-----------------	-------------	------------------------

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

Name of Employer Malena Import Ltd.	Occupation Business Owner
--	------------------------------

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 28 / 2016

Transaction ID : **AD205E5CD1D37411CA6C**

Amount of Each Receipt this Period  
2000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Simonian, Vic, , ,**

Mailing Address 6 Burning Tree

City Laguna Niguel	State CA	Zip Code 92677-5305
-----------------------	-------------	------------------------

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

Name of Employer Retired	Occupation Retired
-----------------------------	-----------------------

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
270.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 02 / 2016

Transaction ID : **A8811E7B0C10147CFACF**

Amount of Each Receipt this Period  
35.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Jaeger, David, , ,**

Mailing Address 27 Grand Miramar Drive

City Henderson	State NV	Zip Code 89011-2203
-------------------	-------------	------------------------

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

Name of Employer Retired	Occupation Retired
-----------------------------	-----------------------

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
800.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 02 / 2016

Transaction ID : **A0AB3415D28164923AB5**

Amount of Each Receipt this Period  
100.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	2135.00
<b>TOTAL</b> 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: PAGE 35 OF 193  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Tarkanian for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Ajamian, Alin, , ,**  
Mailing Address 9440 S Santa Monica Blvd, 708

City Beverly Hills	State CA	Zip Code 90210-4609
-----------------------	-------------	------------------------

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

Name of Employer Pro Travel	Occupation Travel Agent
--------------------------------	----------------------------

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 26 / 2016

Transaction ID : **A6681D6AACFEB4452826**

Amount of Each Receipt this Period  
1000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Newton, Elaine, , ,**  
Mailing Address 10009 Alegria Dr

City Las Vegas	State NV	Zip Code 89144-1512
-------------------	-------------	------------------------

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

Name of Employer Best Efforts	Occupation Best Efforts
----------------------------------	----------------------------

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 03 / 2016

Transaction ID : **A8A450F0D76984A3FAFF**

Amount of Each Receipt this Period  
250.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Schaefer, J. Michael, , ,**  
Mailing Address 3930 Swenson St #103

City Las Vegas	State NV	Zip Code 89119-7269
-------------------	-------------	------------------------

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

Name of Employer Retired	Occupation Retired
-----------------------------	-----------------------

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
600.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 31 / 2016

Transaction ID : **A6D092A930EB54ABAB2A**

Amount of Each Receipt this Period  
100.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	1350.00
<b>TOTAL</b> 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: PAGE 36 OF 193  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Tarkanian for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Volker, K. Warren, , ,**

Mailing Address 10110 W Charleston Blvd

City Las Vegas State NV Zip Code 89135

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

Name of Employer Well Health Quality Care Occupation CEO

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date  
2844.05

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 31 / 2016

Transaction ID : **AD3CB8ABE40A1459590B**

Amount of Each Receipt this Period  
1000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Simsarian, Stephen, , ,**

Mailing Address 405 Serrano Drive #8C

City San Francisco State CA Zip Code 94132-2270

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

Name of Employer Self-Employed Occupation Optician

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date  
1250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 31 / 2016

Transaction ID : **AAF24855BB2A94E8884A**

Amount of Each Receipt this Period  
100.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Karabajakyan, Abraham, , ,**

Mailing Address 2515 Iowa Ave

City South Gate State CA Zip Code 90280-3911

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

Name of Employer Retired Occupation Retired

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date  
235.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 05 / 2016

Transaction ID : **A313EA0E4BB3D48C191E**

Amount of Each Receipt this Period  
25.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1125.00

**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: PAGE 37 OF 193  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Tarkanian for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Bath, Charanjit, S., ,**

Mailing Address 5434 W Kamm Ave

City Caruthers State CA Zip Code 93609-9400

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

Name of Employer Self-Employed Occupation Farmer

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
3700.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 02 / 2016

Transaction ID : **A512EEC4325A64923A76**

Amount of Each Receipt this Period  
1000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Fine, Susan, Greenspun, ,**

Mailing Address 18 Quail Hollow

City Henderson State NV Zip Code 89014-2143

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

Name of Employer Retired Occupation Retired

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1850.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 03 / 2016

Transaction ID : **A1467095534F348CDB88**

Amount of Each Receipt this Period  
500.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Jaegar, Jason, , ,**

Mailing Address 6592 N. Decatur Blvd. #115

City Las Vegas State NV Zip Code 89131-1038

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

Name of Employer Self Employed Occupation Physician

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
300.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 05 / 2016

Transaction ID : **AAC0BFAF3DD6845F6A8A**

Amount of Each Receipt this Period  
300.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1800.00

**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: PAGE 38 OF 193  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Tarkanian for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Ogron, Mitchell, , ,**

Mailing Address 1918 Bannie Ave

City Las Vegas State NV Zip Code 89102-2419

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

Name of Employer Self Employed Occupation Real Estate Developer

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 03 / 2016

Transaction ID : **A217CA28952234F82B3A**

Amount of Each Receipt this Period  
1000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Ying, John, J., ,**

Mailing Address PO Box 7172 #228

City Stateline State NV Zip Code 89449-7172

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

Name of Employer Business Executive Occupation Peak Capital

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2700.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 07 / 2016

Transaction ID : **A69A05737C1BE4095806**

Amount of Each Receipt this Period  
2700.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Shapiro, Robert, , ,**

Mailing Address 14225 Ventura Blvd

City Sherman Oaks State CA Zip Code 91423-2758

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

Name of Employer Woodbridge Companies Occupation CEO

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 26 / 2016

Transaction ID : **ACE783092C39542C58C6**

Amount of Each Receipt this Period  
1000.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 4700.00

**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)  
**Tarkanian for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**McKay, Glenn, , ,**

Mailing Address 20 Vintage Valley Dr

City Las Vegas State NV Zip Code 89141-6060

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

Name of Employer Selling Source LLC Occupation CEO

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 26 / 2016

Transaction ID : ADA5920D963A349D2B65

Amount of Each Receipt this Period  
 1000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Hamassian, Anthony, , ,**

Mailing Address 24941 Palmilla Drive

City Calabasas State CA Zip Code 91302-3053

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

Name of Employer Self Employed Occupation Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 27 / 2016

Transaction ID : A3991B0CD74D14147A42

Amount of Each Receipt this Period  
 1000.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Keusseyan, Tony, P., ,**

Mailing Address 3711 Winford Drive

City Tarzana State CA Zip Code 91356-5810

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

Name of Employer Exoto, Inc. Occupation Owner/President

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 31 / 2016

Transaction ID : A29A6342FFF174FF29F7

Amount of Each Receipt this Period  
 300.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 2300.00

**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: PAGE 40 OF 193  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Tarkanian for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Gurgevich, Phyllis, , ,**

Mailing Address 3636 Fieldcrest Road

City Las Vegas State NV Zip Code 89121-4908

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

Name of Employer Nevada Bankers Assoc. Occupation Director

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 03 / 2016

Transaction ID : **A5C3C8DB738F4404D812**

Amount of Each Receipt this Period  
250.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Curry, Donna, , ,**

Mailing Address 3031 W. Horizon Ridge #100

City Henderson State NV Zip Code 89052-3809

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2700.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 01 / 2016

Transaction ID : **AD08B15510BE146DE85E**

Amount of Each Receipt this Period  
2700.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Conroy, Crisann, , ,**

Mailing Address 9432 Teaberry Court

City Las Vegas State NV Zip Code 89129-3660

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

Name of Employer Crisann Conroy LLC/RE/MAX Advantage Occupation Realtor

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 03 / 2016

Transaction ID : **AA35E409B5DC94E8FA9E**

Amount of Each Receipt this Period  
250.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 3200.00

**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: PAGE 41 OF 193  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Tarkanian for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Sinanian, Sinan, , ,**

Mailing Address 18980 Ventura Blvd.

City Tarzana	State CA	Zip Code 91356-3233
-----------------	-------------	------------------------

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

Name of Employer Self-Employed	Occupation Developer
-----------------------------------	-------------------------

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 4700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 07 / 2016

**Transaction ID : A00C601A42B744EDD9EB**

Amount of Each Receipt this Period  
 2000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Kantor, Lynn, , ,**

Mailing Address 2816 Vista Del Sol

City Las Vegas	State NV	Zip Code 89120-3610
-------------------	-------------	------------------------

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

Name of Employer Retired	Occupation Retired
-----------------------------	-----------------------

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 2700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 27 / 2016

**Transaction ID : A29D8E28B64E549348EF**

Amount of Each Receipt this Period  
 2700.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Somekh, Javid, , ,**

Mailing Address 156 S. Clark Dr.

City Beverly Hills	State CA	Zip Code 90211-2604
-----------------------	-------------	------------------------

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

Name of Employer Information Requested	Occupation Information Requested
---	-------------------------------------

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 08 / 2016

**Transaction ID : A60100ACAB0A148339B8**

Amount of Each Receipt this Period  
 1000.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	5700.00
<b>TOTAL</b> 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: PAGE 42 OF 193  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Tarkanian for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Kennett, Lorraine, , ,**  
 Mailing Address 2876 Patriot Park Place  
 City Henderson State NV Zip Code 89052-6902  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Information Requested Occupation Information Requested  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 26 / 2016  
**Transaction ID : A2441633A473447928D5**  
 Amount of Each Receipt this Period  
 300.00  
 Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Bagerdjan, Haig, , ,**  
 Mailing Address 14410 Mulholland Dr.  
 City Los Angeles State CA Zip Code 90077-1712  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Information Requested Occupation Information Requested  
 Point 360 CEO  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 5400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 31 / 2016  
**Transaction ID : A33D74A53B5E745CA886**  
 Amount of Each Receipt this Period  
 2700.00  
 Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Ohanian, Viken, , ,**  
 Mailing Address 607 South Hill St. 520  
 City Los Angeles State CA Zip Code 90014-1787  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Information Requested Occupation Information Requested  
 Ohansons LLC Commodities Finance  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 27 / 2016  
**Transaction ID : AB2485807BC31443D801**  
 Amount of Each Receipt this Period  
 1000.00  
 Memo Item

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

4000.00

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

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

FOR LINE NUMBER: PAGE 43 OF 193  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Tarkanian for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Armenian, Andy, , ,**

Mailing Address 2050 Troon Drive

City Henderson State NV Zip Code 89074-0668

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

Name of Employer Retired Occupation Retired

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date **1000.00**

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
**10 / 27 / 2016**

Transaction ID : **ADA6B7DB0068147FFB4F**

Amount of Each Receipt this Period  
**1000.00**

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Conway, Dennis, , ,**

Mailing Address 3865 W Naples Dr

City Las Vegas State NV Zip Code 89103-5526

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

Name of Employer Commercial Roofers, Inc. Occupation Construction Manager

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date **750.00**

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
**10 / 21 / 2016**

Transaction ID : **AB374E5896BB441B1A03**

Amount of Each Receipt this Period  
**500.00**

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Hadrill, Richard, , ,**

Mailing Address 6601 S. Bermuda Road

City Las Vegas State NV Zip Code 89119-3605

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date **1000.00**

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
**10 / 31 / 2016**

Transaction ID : **A7FF11822A6BC462995E**

Amount of Each Receipt this Period  
**1000.00**

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **2500.00**

**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

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(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Tarkanian for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Donner, Belinda, , ,**

Mailing Address PO Box 1570

City: Las Vegas State: NV Zip Code: 89125-1570

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

Name of Employer: Homemaker Occupation: Homemaker

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date: 250.00

Date of Receipt: 11 / 03 / 2016

Transaction ID : **A46C1BFD8319A466E9E6**

Amount of Each Receipt this Period: 250.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Malkassian, Elizabeth, , ,**

Mailing Address 3040 Pacific Avenue

City: San Francisco State: CA Zip Code: 94115-1014

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

Name of Employer: Information Requested Occupation: Information Requested

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date: 1000.00

Date of Receipt: 10 / 25 / 2016

Transaction ID : **AC7EF733BAD5B450AA9C**

Amount of Each Receipt this Period: 1000.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Samra, Harout, , ,**

Mailing Address 445 Sevilla Ave

City: Coral Gables State: FL Zip Code: 33134-5712

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

Name of Employer: DLA Piper LLP Occupation: Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date: 2000.00

Date of Receipt: 10 / 31 / 2016

Transaction ID : **AEEAA93DC00AB42BFB59**

Amount of Each Receipt this Period: 1000.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 2250.00

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

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

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)  
**Tarkanian for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Achadjian, Katcho, , ,**  
Mailing Address 203 Patricia Ct  
City San Luis Obispo State CA Zip Code 93405-1062  
FEC ID number of contributing federal political committee. **C**  
Name of Employer State of California Occupation Assemblymember  
Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 26 / 2016  
Transaction ID : **A9B5D0BC2920949EA9BC**  
Amount of Each Receipt this Period  
1000.00  
 Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Kassabian, Garo, , ,**  
Mailing Address 436 N Bedford Dr., Ste 302  
City Beverly Hills State CA Zip Code 90210-4320  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Self-Employed Occupation Plastic Surgeon  
Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
Election Cycle-to-Date ▼  
1500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 27 / 2016  
Transaction ID : **A3F8A5F1710404735938**  
Amount of Each Receipt this Period  
1000.00  
 Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Paher, Stanley, , ,**  
Mailing Address 4135 Badger Circle  
City Reno State NV Zip Code 89519-2901  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Self Employed Occupation Publisher  
Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
Election Cycle-to-Date ▼  
1500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 03 / 2016  
Transaction ID : **AAD2C907917434FB6B78**  
Amount of Each Receipt this Period  
1500.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 3500.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

Use separate schedule(s)  
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Detailed Summary Page

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(check only one)  
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12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Tarkanian for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Ookhtens, Murad, , ,**

Mailing Address 227 N Lucerne Blvd

City Los Angeles State CA Zip Code 90004-3722

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

Name of Employer University of Southern California Occupation Faculty

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
300.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 02 / 2016

Transaction ID : **A89F9F59DE9A34D63A29**

Amount of Each Receipt this Period  
200.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Tharp, Kevin, , ,**

Mailing Address PO Box 10740

City Burbank State CA Zip Code 91510-0740

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

Name of Employer Northrup Grumman Occupation Engineer

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 21 / 2016

Transaction ID : **A0A5D79C2A980439BA0D**

Amount of Each Receipt this Period  
250.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Ozman, Beverly, L., ,**

Mailing Address 3240 La Mirada Ave.

City Las Vegas State NV Zip Code 89120-3012

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 27 / 2016

Transaction ID : **AC212856CA86E4D4BAA2**

Amount of Each Receipt this Period  
1000.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1450.00

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

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

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)  
**Tarkanian for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Malkasian, Tom, , ,**

Mailing Address PO Box 929

City State Zip Code  
La Habra CA 90633-0929

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

Name of Employer Occupation Information Requested

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 31 2016

**Transaction ID : A11A92B3786F2446F968**

Amount of Each Receipt this Period  
250.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Keosian, H., Greg, ,**

Mailing Address 19118 Welby Way

City State Zip Code  
Reseda CA 91335-5024

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

Name of Employer Occupation Information Requested  
Keosian Berberian LLP Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 27 2016

**Transaction ID : ADD40B1F8A6014E8ABD6**

Amount of Each Receipt this Period  
1000.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Nersisyan, Harutyun, , ,**

Mailing Address 12115 Braemore

City State Zip Code  
Porter Ranch CA 91326-1201

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

Name of Employer Occupation Information Requested

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 27 2016

**Transaction ID : A68244D16284147B4868**

Amount of Each Receipt this Period  
1000.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 2250.00

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

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

Use separate schedule(s)  
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Detailed Summary Page

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

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NAME OF COMMITTEE (In Full)  
**Tarkanian for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Martin, Armen, , ,**

Mailing Address 1991 Ashington Drive

City Glendale	State CA	Zip Code 91206-1134
------------------	-------------	------------------------

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

Name of Employer Foundation Law Group LLP	Occupation Attorney
--	------------------------

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1700.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 21 / 2016

**Transaction ID : A7969C3E427F544E8B62**

Amount of Each Receipt this Period  
1000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Mallin, Stanley, , ,**

Mailing Address 3025 Lullingstone St

City Las Vegas	State NV	Zip Code 89135-2246
-------------------	-------------	------------------------

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

Name of Employer Information Requested	Occupation Information Requested
---	-------------------------------------

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
350.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 03 / 2016

**Transaction ID : AEA50DEB2A59640CA9D0**

Amount of Each Receipt this Period  
350.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Mickelson, Russell, C., ,**

Mailing Address P.O. Box 9764

City Nellis Afb	State NV	Zip Code 89191-0764
--------------------	-------------	------------------------

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

Name of Employer Retired	Occupation Retired
-----------------------------	-----------------------

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
915.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 08 / 2016

**Transaction ID : AD202313B0B4045E3A95**

Amount of Each Receipt this Period  
505.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	1855.00
<b>TOTAL</b> This Period (last page this line number only)..... ▶	



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

Use separate schedule(s)  
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 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Tarkanian for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Brown, Joseph, , ,**

Mailing Address 8 Tapadero Lane

City Las Vegas State NV Zip Code 89135-7852

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

Name of Employer Kolesar & Leatham Occupation Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 03 / 2016

Transaction ID : **A07750596426744118E8**

Amount of Each Receipt this Period  
500.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Pakhyan, Harutyun, , ,**

Mailing Address 19413 Scroll Street

City Reseda State CA Zip Code 91335-3739

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

Name of Employer Arsenal, Inc. Occupation General Manager

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
3000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 31 / 2016

Transaction ID : **A733B285A7C8A42B5AF7**

Amount of Each Receipt this Period  
2700.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Kassabian, Garbis, , ,**

Mailing Address 2638 Wallingford Dr

City Beverly Hills State CA Zip Code 90210-1039

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

Name of Employer Self Employed Occupation Physician

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 26 / 2016

Transaction ID : **AB2C5B91AB7D24F10B35**

Amount of Each Receipt this Period  
2000.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 5200.00

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

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

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)  
**Tarkanian for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Roski, Edward, P., ,**  
 Mailing Address Sixth Floor  
 13191 Crossroads Parkway North  
 City State Zip Code  
 City Of Industry CA 91746-3421  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Majestic Realty President  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼ PrimaryDebt  
 Election Cycle-to-Date ▼  
 5400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 08 2016  
**Transaction ID : A689FCEFE9A744DDEB96**  
 Amount of Each Receipt this Period  
 2700.00  
 Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Wallace, Chip, , ,**  
 Mailing Address 1824 Glenview Drive  
 City State Zip Code  
 Las Vegas NV 89134-6100  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Nevada Mutual Insurance Marketing Director  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 03 2016  
**Transaction ID : A5AC365AFCE514DC3900**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Kaercher, William, , ,**  
 Mailing Address 1908 Red Robin Ct  
 City State Zip Code  
 Las Vegas NV 89134-6156  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Information Requested Information Requested  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 03 2016  
**Transaction ID : AC0E0E10BC0414E8585C**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item

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

3450.00

**SCHEDULE A (FEC Form 3)  
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NAME OF COMMITTEE (In Full)  
**Tarkanian for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Kantor, Gary, , ,**  
 Mailing Address 2816 Vista Del Sol  
 City Las Vegas State NV Zip Code 89120-3610  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Retired Occupation Retired  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 2700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 26 / 2016  
**Transaction ID : A077B6F4EEB884270B21**  
 Amount of Each Receipt this Period  
 2700.00  
 Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Ohanian, Viken, , ,**  
 Mailing Address 607 South Hill St. 520  
 City Los Angeles State CA Zip Code 90014-1787  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Ohansons LLC Occupation Commodities Finance  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 27 / 2016  
**Transaction ID : A9D5D1717B5274D2E85C**  
 Amount of Each Receipt this Period  
 1000.00  
 Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Scarlett, Trent, , ,**  
 Mailing Address 4024 Antique Sterling Ct.  
 City Las Vegas State NV Zip Code 89129-3657  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Wells Cargo Construction Occupation Vice President  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 2700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 03 / 2016  
**Transaction ID : A3277D7F985114635B67**  
 Amount of Each Receipt this Period  
 2500.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 6200.00  
**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)  
**Tarkanian for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Scarlett, Kari, , ,**

Mailing Address 4024 Antique Sterling Court

City Las Vegas State NV Zip Code 89129-3657

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 03 / 2016

Transaction ID : **A88F4CA8564F54D23A3A**

Amount of Each Receipt this Period  
 300.00

Memo Item  
 Reattribution from Spouse

**B.** Full Name (Last, First, Middle Initial)  
**Scarlett, Trent, , ,**

Mailing Address 4024 Antique Sterling Ct.

City Las Vegas State NV Zip Code 89129-3657

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

Name of Employer Wells Cargo Construction Occupation Vice President

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 2700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 03 / 2016

Transaction ID : **A03EF165A33064012983**

Amount of Each Receipt this Period  
 -300.00

Memo Item  
 Reattribution to Spouse

**C.** Full Name (Last, First, Middle Initial)  
**Hill, Ronald, , ,**

Mailing Address 9208 Tesoras Dr Unit 401

City Las Vegas State NV Zip Code 89144-1548

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

Name of Employer Gallagher Aviation Occupation Insurance Broker

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 5400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 03 / 2016

Transaction ID : **A6E837C64D39A4C80B4F**

Amount of Each Receipt this Period  
 1000.00

Memo Item

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

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

1000.00

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

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(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Tarkanian for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Hill, Ronald, , ,**

Mailing Address 9208 Tesoras Dr Unit 401

City Las Vegas State NV Zip Code 89144-1548

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

Name of Employer Gallagher Aviation Occupation Insurance Broker

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 03 / 2016

Transaction ID : **AFE5DD98FA68645F186E**

Amount of Each Receipt this Period  
 -300.00

Memo Item  
 Reattribution from Memo

**B.** Full Name (Last, First, Middle Initial)  
**Hill, Cheryl, , ,**

Mailing Address 9208 Tesoras Drive, Unit 401

City Las Vegas State NV Zip Code 89144-1548

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

Name of Employer None Occupation Homemaker

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1800.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 03 / 2016

Transaction ID : **A04EFCC8B31904E348AF**

Amount of Each Receipt this Period  
 300.00

Memo Item  
 Reattribution to Memo

**C.** Full Name (Last, First, Middle Initial)  
**Karapetian, Sylvia, , ,**

Mailing Address 750 E. Slauson Ave.

City Los Angeles State CA Zip Code 90011-5236

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 22 / 2016

Transaction ID : **AACCCCE63341F46D7A45**

Amount of Each Receipt this Period  
 2700.00

Memo Item  
 Reattribution from Spouse

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 0.00

**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  
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(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Tarkanian for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Karapetian, Nick, , ,**

Mailing Address 750 E. Slauson Ave.

City Los Angeles State CA Zip Code 90011-5236

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
-2700.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 22 / 2016

Transaction ID : **A48DFB309B4084766875**

Amount of Each Receipt this Period  
-2700.00

Memo Item  
Reattribution to Spouse

**B.** Full Name (Last, First, Middle Initial)  
**Ohanian, Diron, , ,**

Mailing Address 4657 Arcola Ave.

City Toluca Lake State CA Zip Code 91602-1519

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

Name of Employer Information Requested Occupation Information Requested  
Knapp Petersen & Clarke Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1900.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 07 / 2016

Transaction ID : **AC1FA3094AD504E34B73**

Amount of Each Receipt this Period  
4600.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Ohanian, Diron, , ,**

Mailing Address 4657 Arcola Ave.

City Toluca Lake State CA Zip Code 91602-1519

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

Name of Employer Information Requested Occupation Information Requested  
Knapp Petersen & Clarke Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
0.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 22 / 2016

Transaction ID : **AC0415AD096BB4382BDB**

Amount of Each Receipt this Period  
-1900.00

Memo Item  
Redesignation from Memo

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 0.00

**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: PAGE 55 OF 193  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Tarkanian for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Ohanian, Diron, , ,**

Mailing Address 4657 Arcola Ave.

City Toluca Lake State CA Zip Code 91602-1519

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

Name of Employer Knapp Petersen & Clarke Occupation Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼ PrimaryDebt

Election Cycle-to-Date ▼ 0.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 22 / 2016

Transaction ID : **A8E76E916C01E4B4E982**

Amount of Each Receipt this Period  
 1900.00

Memo Item  
 Redesignation to Memo

**B.** Full Name (Last, First, Middle Initial)  
**Gibson, Marianne, , ,**

Mailing Address 7409 Doe Ave

City Las Vegas State NV Zip Code 89117-1445

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

Name of Employer Retired Occupation Retired

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 31 / 2016

Transaction ID : **A4A05B16689EA4904B9F**

Amount of Each Receipt this Period  
 2300.00

Memo Item  
 Reattribution from Spouse

**C.** Full Name (Last, First, Middle Initial)  
**Gibson, John, , ,**

Mailing Address 7409 Doe Avenue

City Las Vegas State NV Zip Code 89117-1445

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

Name of Employer Retired Occupation Retired

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 5400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 31 / 2016

Transaction ID : **AFDE45246AC974C71978**

Amount of Each Receipt this Period  
 -2300.00

Memo Item  
 Reattribution to Spouse

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 0.00

**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)  
**Tarkanian for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Ghailian, Julia, , ,**

Mailing Address 3900 Lake Vista Court

City Encino State CA Zip Code 91316-4440

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 4600.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 01 / 2016

**Transaction ID : A96593799CAC34FA5917**

Amount of Each Receipt this Period  
 2300.00

Memo Item  
 Reattribution from Spouse

**B.** Full Name (Last, First, Middle Initial)  
**Ghailian, Charles, , ,**

Mailing Address 3900 Lake Vista Court

City Encino State CA Zip Code 91316-4440

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

Name of Employer Information Requested Occupation Information Requested  
 Monarch Apparel Group President

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 5400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 01 / 2016

**Transaction ID : AF1E0C6636DF54DC0A4A**

Amount of Each Receipt this Period  
 -2300.00

Memo Item  
 Reattribution to Spouse

**C.** Full Name (Last, First, Middle Initial)  
**Polaris Properties NV LLC**

Mailing Address 10120 S Eastern

City Henderson State NV Zip Code 89052-3951

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

Name of Employer Information Requested Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 03 / 2016

**Transaction ID : AECF5D74DD91B431D9C2**

Amount of Each Receipt this Period  
 400.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 400.00

**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: PAGE 57 OF 193  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Tarkanian for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Alamo, Antonio, T., ,**

Mailing Address 56 N. Pecos Rd. Ste A

City Henderson State NV Zip Code 89074-7332

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

Name of Employer Alamo Medical Clinic Occupation Physician

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
800.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 14 / 2016

Transaction ID : **AFFC1E1A3A98E4ED8B79**

Amount of Each Receipt this Period  
1000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Alamo, Antonio, T., ,**

Mailing Address 56 N. Pecos Rd. Ste A

City Henderson State NV Zip Code 89074-7332

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

Name of Employer Alamo Medical Clinic Occupation Physician

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
0.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 28 / 2016

Transaction ID : **A303413A91FA742F5A61**

Amount of Each Receipt this Period  
-800.00

Memo Item  
Redesignation from Memo

**C.** Full Name (Last, First, Middle Initial)  
**Alamo, Antonio, T., ,**

Mailing Address 56 N. Pecos Rd. Ste A

City Henderson State NV Zip Code 89074-7332

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

Name of Employer Alamo Medical Clinic Occupation Physician

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼ PrimaryDebt

Election Cycle-to-Date ▼  
0.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 28 / 2016

Transaction ID : **A55630E9B7E324959A9F**

Amount of Each Receipt this Period  
800.00

Memo Item  
Redesignation to Memo

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 0.00

**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: PAGE 58 OF 193  
(check only one)  
 11a  11b  11c  11d  
 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)  
**Tarkanian for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Dunn, Joan, , ,**

Mailing Address 2 Mountain Cove Court

City Henderson State NV Zip Code 89052-6680

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

Name of Employer Dunrite Construction Occupation Accountant

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 03 / 2016

Transaction ID : **A7C7B9F80BA5442AFA78**

Amount of Each Receipt this Period  
2000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Dunn, Leslie, , ,**

Mailing Address 2 Mountain Cove Ct

City Henderson State NV Zip Code 89052-6680

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1800.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 03 / 2016

Transaction ID : **A45C322FBD83E45EB9FA**

Amount of Each Receipt this Period  
1800.00

Memo Item  
Redesignation to Memo

**C.** Full Name (Last, First, Middle Initial)  
**Dunn, Joan, , ,**

Mailing Address 2 Mountain Cove Court

City Henderson State NV Zip Code 89052-6680

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

Name of Employer Dunrite Construction Occupation Accountant

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 03 / 2016

Transaction ID : **AFF9A8029E5904BBC9CB**

Amount of Each Receipt this Period  
-1800.00

Memo Item  
Reattribution from Memo

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

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

2000.00



# 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 60 OF 193	
<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
		<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Tarkanian for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**THE GEO GROUP, INC. POLITICAL ACTION COMMITTEE**

Mailing Address 621 NORTHWEST 53RD STREET  
ONE PARK PLACE, SUITE 700

City BOCA RATON	State FL	Zip Code 33487
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00382150

Name of Employer	Occupation
------------------	------------

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 31 / 2016

**Transaction ID : ACB17BE0D115443DA9CC**

Amount of Each Receipt this Period  
5000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**CITIZENS TO ELECT PHIL ROE TO CONGRESS**

Mailing Address PO BOX 3218

City JOHNSON CITY	State TN	Zip Code 37602
----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00444471

Name of Employer	Occupation
------------------	------------

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 27 / 2016

**Transaction ID : A16EB1DB4E844404B9D8**

Amount of Each Receipt this Period  
1000.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**CONSERVATIVE & REPUBLICAN TOGETHER EQUALS RESULTS PAC**

Mailing Address 116 NORTHFIELD

City Round Rock	State TX	Zip Code 78681-3822
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00427401

Name of Employer	Occupation
------------------	------------

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 03 / 2016

**Transaction ID : A4DE2EF8D82144D8C8B7**

Amount of Each Receipt this Period  
2500.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	8500.00
<b>TOTAL</b> 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 61 OF 193	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
**Tarkanian for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Exxon Mobil Corporation PAC**

Mailing Address 5959 Las Colinas Blvd

City Irving	State TX	Zip Code 75039-4202
----------------	-------------	------------------------

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

Name of Employer	Occupation
------------------	------------

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 27 / 2016

**Transaction ID : AEF16DCC75A9E40B9A0C**

Amount of Each Receipt this Period  
2500.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**LIBERTY & PROSPERITY PAC**

Mailing Address 19 CATTANO AVE

City MORRISTOWN	State NJ	Zip Code 07960
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00492538

Name of Employer	Occupation
------------------	------------

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 26 / 2016

**Transaction ID : A9F96B4B9AF784253B55**

Amount of Each Receipt this Period  
1000.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**ASSOCIATED BUILDERS AND CONTRACTORS POLITICAL ACTION COMMITTEE (ABC PAC)**

Mailing Address 440 FIRST STREET NW,  
SUITE 200

City WASHINGTON	State DC	Zip Code 20001
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00010421

Name of Employer	Occupation
------------------	------------

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 05 / 2016

**Transaction ID : A09998394388B4999993**

Amount of Each Receipt this Period  
5000.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	8500.00
<b>TOTAL</b> 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 62 OF 193		
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**Tarkanian for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**BUCHSHON FOR CONGRESS**

Mailing Address PO BOX 250

City: NEWBURGH State: IN Zip Code: 47629

FEC ID number of contributing federal political committee: **C** C00468256

Name of Employer: Occupation:

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 05 / 2016

Transaction ID : **A5EE601F82C8A44D2978**

Amount of Each Receipt this Period  
1000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**DOUG LAMALFA COMMITTEE**

Mailing Address 2150 RIVER PLAZA DR., #150

City: SACRAMENTO State: CA Zip Code: 95833

FEC ID number of contributing federal political committee: **C** C00509422

Name of Employer: Occupation:

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 05 / 2016

Transaction ID : **AC32DD6808E9D42A7966**

Amount of Each Receipt this Period  
1000.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**NEW PIONEERS PAC**

Mailing Address 228 S WASHINGTON ST STE 115

City: ALEXANDRIA State: VA Zip Code: 22314

FEC ID number of contributing federal political committee: **C** C00459123

Name of Employer: Occupation:

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼ PrimaryDebt

Election Cycle-to-Date ▼  
10000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 04 / 2016

Transaction ID : **A424B55D9706642698B0**

Amount of Each Receipt this Period  
5000.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 7000.00

**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: PAGE 63 OF 193  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Tarkanian for Congress**

**A. MAKING INVESTMENTS MAJORITY INSURED PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 9070 IRVINE CENTER DRIVE, #150  
 City IRVINE State CA Zip Code 92618  
 FEC ID number of contributing federal political committee. **C** C00564658  
 Name of Employer Occupation  
 Receipt For: 2016  
 Primary  General  
 Other (specify) **PrimaryDebt**  
 Election Cycle-to-Date **4000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 03 / 2016  
**Transaction ID : AB9FC547578CD44FE845**  
 Amount of Each Receipt this Period  
 3000.00  
 Memo Item

**B. FREEDOMWORKS PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address PO BOX 75760  
 City WASHINGTON State DC Zip Code 20013  
 FEC ID number of contributing federal political committee. **C** C00573550  
 Name of Employer Occupation  
 Receipt For: 2016  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date **100.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 22 / 2016  
**Transaction ID : A4B9EA3A19A804419BDE**  
 Amount of Each Receipt this Period  
 100.00  
 Memo Item  
 In-kind: Event Fees

**C. VOICE FOR FREEDOM**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2700 CUMBERLAND PARKWAY, SUITE 150  
 City Atlanta State GA Zip Code 30339-3321  
 FEC ID number of contributing federal political committee. **C** C00409805  
 Name of Employer Occupation  
 Receipt For: 2016  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date **5000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 31 / 2016  
**Transaction ID : A9EF7AFDF804A44FC9C4**  
 Amount of Each Receipt this Period  
 2000.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 5100.00  
**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 64 OF 193	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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)  
**Tarkanian for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Conservative Victory Fund**

Mailing Address PO Box 15245

City Washington	State DC	Zip Code 20003-0245
--------------------	-------------	------------------------

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

Name of Employer	Occupation
------------------	------------

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
10	/	31	/	2016

**Transaction ID : A89D207C64BC9453BAE7**

Amount of Each Receipt this Period  
250.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**NEVADA REPUBLICAN CENTRAL COMMITTEE**

Mailing Address PO BOX 95125

City LAS VEGAS	State NV	Zip Code 89193
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00082925

Name of Employer	Occupation
------------------	------------

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼ PrimaryDebt

Election Cycle-to-Date ▼  
10000.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
11	/	08	/	2016

**Transaction ID : AC88A86AC7F1B4AB0A6D**

Amount of Each Receipt this Period  
5000.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**TOGETHER UNITED FOR LIBERTY, INTEGRITY AND PROSPERITY PAC (TULIP PAC)**

Mailing Address 5915 EASTMAN AVENUE, SUITE 100

City MIDLAND	State MI	Zip Code 48640
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00583526

Name of Employer	Occupation
------------------	------------

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
10	/	26	/	2016

**Transaction ID : A00B43BF9A47545539A4**

Amount of Each Receipt this Period  
500.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	5750.00
<b>TOTAL</b> 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 65 OF 193	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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)  
**Tarkanian for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**ALTICOR POLITICAL ACTION COMMITTEE ALTIPAC**

Mailing Address 7575 E. FULTON ROAD

City Ada	State MI	Zip Code 49355-0001
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FEC ID number of contributing federal political committee. **C** C00034884

Name of Employer	Occupation
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Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 08 / 2016

**Transaction ID : AF1E407885DA94CE8BD3**

Amount of Each Receipt this Period  
2000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**BILL PAC**

Mailing Address P.O. BOX 4528

City BRYAN	State TX	Zip Code 77805
---------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00527275

Name of Employer	Occupation
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Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
3500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 08 / 2016

**Transaction ID : AC5847DE4DAE942C1809**

Amount of Each Receipt this Period  
1000.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**MORE CONSERVATIVES PAC (MCPAC)**

Mailing Address 228 S WASHINGTON ST STE 115

City ALEXANDRIA	State VA	Zip Code 22314
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00540187

Name of Employer	Occupation
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Receipt For: 2016  
 Primary  General  
 Other (specify) ▼ PrimaryDebt

Election Cycle-to-Date ▼  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 08 / 2016

**Transaction ID : A5A303BEFFDF8492F820**

Amount of Each Receipt this Period  
2500.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	5500.00
<b>TOTAL</b> 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: PAGE 66 OF 193  
(check only one)  
 11a  11b  11c  11d  
 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)  
**Tarkanian for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**SUPPORT TO ENSURE VICTORY EVERYWHERE PAC-STEVE PAC**

Mailing Address 228 S WASHINGTON ST STE 115

City ALEXANDRIA	State VA	Zip Code 22314
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00501478

Name of Employer	Occupation
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Receipt For: 2016  
 Primary  General  
 Other (specify) ▼ PrimaryDebt

Election Cycle-to-Date ▼  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 05 / 2016

**Transaction ID : AC9F7323C4FD34AC19FE**

Amount of Each Receipt this Period  
5000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**AGC PAC**

Mailing Address 2300 Wilson Blvd. #300

City Arlington	State VA	Zip Code 22201-5426
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FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
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Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 03 / 2016

**Transaction ID : A105AD497B75E47CEB98**

Amount of Each Receipt this Period  
2500.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Rodney PAC**

Mailing Address PO Box 573

City Edwardsville	State IL	Zip Code 62025-0573
----------------------	-------------	------------------------

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

Name of Employer	Occupation
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Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 26 / 2016

**Transaction ID : A260AEB1E86204B72A84**

Amount of Each Receipt this Period  
1000.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	8500.00
<b>TOTAL</b> 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 67 OF 193	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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)  
**Tarkanian for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**COMMON SENSE COMMON SOLUTIONS POLITICAL ACTION COMMITTEE**

Mailing Address 901 N WASHINGTON ST, SUITE 700

City Alexandria	State VA	Zip Code 22314-1535
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00345058

Name of Employer	Occupation
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Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 08 / 2016

**Transaction ID : A7F16FE22F0444A3B8C7**

Amount of Each Receipt this Period  
4000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**LAS VEGAS SANDS CORP. POLITICAL ACTION COMMITTEE (SANDS PAC)**

Mailing Address 3355 LAS VEGAS BLVD SOUTH

City LAS VEGAS	State NV	Zip Code 89109
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FEC ID number of contributing federal political committee. **C** C00399642

Name of Employer	Occupation
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Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 31 / 2016

**Transaction ID : A17A9A14B246943CA9D4**

Amount of Each Receipt this Period  
5000.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**NATIONAL STONE, SAND & GRAVEL ASSOCIATION ROCKPAC**

Mailing Address 1605 KING STREET

City ALEXANDRIA	State VA	Zip Code 22314
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00089458

Name of Employer	Occupation
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Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 26 / 2016

**Transaction ID : A9297E68AD5AE440DAA1**

Amount of Each Receipt this Period  
1000.00

Memo Item

NOTE: Seeking Formal Redesignation to PDebt

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	10000.00
<b>TOTAL</b> 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 68 OF 193	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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)  
**Tarkanian for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Our Country Deserves Better PAC**

Mailing Address PO Box 984

City Willows State CA Zip Code 95988-0984

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

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 27 / 2016

Transaction ID : **AE1DAD23EAC69462A8CF**

Amount of Each Receipt this Period  
1000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

Mailing Address PO BOX 72598

City NEWPORT State KY Zip Code 41072

FEC ID number of contributing federal political committee. **C** C00493924

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 25 / 2016

Transaction ID : **AAA961E41E1DF48958F4**

Amount of Each Receipt this Period  
1000.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**BAMPAC**

Mailing Address 815 CONNECTICUT AVE NW SUITE 1100

City WASHINGTON State DC Zip Code 20006

FEC ID number of contributing federal political committee. **C** C00194514

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 05 / 2016

Transaction ID : **A748B7EF4109B4068B26**

Amount of Each Receipt this Period  
1000.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	3000.00
<b>TOTAL</b> 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 69 OF 193	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
**Tarkanian for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**People for Enterprise Trade & Economic Growth**

Mailing Address 7804 Evening Lane

City Alexandria	State VA	Zip Code 22306-2754
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FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
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Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 31 / 2016

**Transaction ID : A534F24EF84BB43D9B45**

Amount of Each Receipt this Period  
2000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**REPUBLICAN NATIONAL COMMITTEE**

Mailing Address 310 FIRST STREET SE

City WASHINGTON	State DC	Zip Code 20003
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00003418

Name of Employer	Occupation
------------------	------------

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 08 / 2016

**Transaction ID : A88BE0C97828847AF85F**

Amount of Each Receipt this Period  
5000.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**GREAT AMERICA PAC**

Mailing Address 107 S WEST ST  
SUITE 555

City ALEXANDRIA	State VA	Zip Code 22314
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00608489

Name of Employer	Occupation
------------------	------------

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2700.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 31 / 2016

**Transaction ID : A0006911B89FE4410A3B**

Amount of Each Receipt this Period  
2700.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	9700.00
<b>TOTAL</b> 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 70 OF 193	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
**Tarkanian for Congress**

Full Name (Last, First, Middle Initial)  
ASSOCIATION OF AMERICAN PHYSICIANS AND SURGEONS POLITICAL ACTION COMMITTEE (AAPS-PAC)

**A.** Mailing Address 1601 N TUCSON BLVD  
SUITE 9

City TUCSON State AZ Zip Code 85716

FEC ID number of contributing federal political committee. **C** C00041590

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 03 / 2016

Transaction ID : AD90F8926ACF0417587C

Amount of Each Receipt this Period  
5000.00

Memo Item

Full Name (Last, First, Middle Initial)  
**B. KEN CALVERT FOR CONGRESS**

Mailing Address P O BOX 2256 1456 WEST 6TH ST

City CORCONA State CA Zip Code 91720

FEC ID number of contributing federal political committee. **C** C00150276

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 08 / 2016

Transaction ID : AE4BFADD1755440A7ABC

Amount of Each Receipt this Period  
1000.00

Memo Item

Full Name (Last, First, Middle Initial)  
**C. ROSKAM PAC**

Mailing Address 610 S. Boulevard

City Tampa State FL Zip Code 33606-2647

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

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 05 / 2016

Transaction ID : AF1320E6995E84F48B59

Amount of Each Receipt this Period  
5000.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	11000.00
<b>TOTAL</b> 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 71 OF 193	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
**Tarkanian for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**MAJORITY COMMITTEE PAC--MC PAC**

Mailing Address PO BOX 10134

City BAKERSFIELD	State CA	Zip Code 93389
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00428052

Name of Employer	Occupation
------------------	------------

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼ PrimaryDebt

Election Cycle-to-Date ▼  
10000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 03 / 2016

**Transaction ID : AAF027DABC18E4870B49**

Amount of Each Receipt this Period  
5000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**NEW PAC**

Mailing Address P.O. BOX 7480

City Visalia	State CA	Zip Code 93290-7480
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00398750

Name of Employer	Occupation
------------------	------------

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
3000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 26 / 2016

**Transaction ID : A6DE72A5152814F82B6A**

Amount of Each Receipt this Period  
2000.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**MCDONALD'S POLITICAL ACTION COMMITTEE**

Mailing Address 2111 McDonald's Dr.

City Oak Brook	State IL	Zip Code 60523-5500
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FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
------------------	------------

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 08 / 2016

**Transaction ID : A01ACA86A032141EF864**

Amount of Each Receipt this Period  
2500.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	9500.00
<b>TOTAL</b> 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 72 OF 193	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
**Tarkanian for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**VICTORY AND FREEDOM PAC (VAF PAC)**

Mailing Address 1666 K ST, NW  
STE 500

City WASHINGTON	State DC	Zip Code 20006
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00525212

Name of Employer	Occupation
------------------	------------

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 26 / 2016

**Transaction ID : A501EEE4742B543E5B83**

Amount of Each Receipt this Period  
1000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**CONSERVATIVE CAMPAIGN COMMITTEE**

Mailing Address PO BOX 984

City WILLOWS	State CA	Zip Code 95988
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00495010

Name of Employer	Occupation
------------------	------------

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 05 / 2016

**Transaction ID : AB01560DA29BB4423885**

Amount of Each Receipt this Period  
1000.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**ARMENIAN NATIONAL COMMITTEE PAC**

Mailing Address 910 M ST NW  
APT 701

City WASHINGTON	State DC	Zip Code 20001
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00146969

Name of Employer	Occupation
------------------	------------

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 05 / 2016

**Transaction ID : A452A9203319A4F94A85**

Amount of Each Receipt this Period  
5000.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	7000.00
<b>TOTAL</b> 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 73 OF 193	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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)  
**Tarkanian for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**FRIENDS OF DEBBIE POOCHIGIAN**

Mailing Address 504 VAN NESS AVE

City FRESNO	State CA	Zip Code 93721
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00589655

Name of Employer	Occupation
------------------	------------

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
998.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 05 / 2016

Transaction ID : A2A9B22D5DAF14522841

Amount of Each Receipt this Period  
998.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**American Dental Political Action Committee**

Mailing Address 1111-14th Street N.W. Suite 1100

City Washington	State DC	Zip Code 20005-5627
--------------------	-------------	------------------------

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

Name of Employer	Occupation
------------------	------------

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 05 / 2016

Transaction ID : ACBD42B26A07D4C1FB43

Amount of Each Receipt this Period  
2000.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**PIONEER POLITICAL ACTION COMMITTEE**

Mailing Address 701 8TH STREET, NW  
SUITE 500

City Washington	State DC	Zip Code 20001-3965
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00325357

Name of Employer	Occupation
------------------	------------

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼ PrimaryDebt

Election Cycle-to-Date ▼  
10000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 05 / 2016

Transaction ID : A96230E83A5B5403594C

Amount of Each Receipt this Period  
5000.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	7998.00
<b>TOTAL</b> 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 74 OF 193	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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)  
**Tarkanian for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**First In Freedom PAC**

Mailing Address PO Box 6507

City Concord	State NC	Zip Code 28027-1526
-----------------	-------------	------------------------

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

Name of Employer	Occupation
------------------	------------

Receipt For: 2016  
 Primary  General  
 Other (specify) **PrimaryDebt**

Election Cycle-to-Date **2500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 08 / 2016

**Transaction ID : ACE50B5425B4243A7BBB**

Amount of Each Receipt this Period  
 2500.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Prosperity Action Inc. PAC**

Mailing Address 320 First Street SE

City Washington	State DC	Zip Code 20003-1838
--------------------	-------------	------------------------

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

Name of Employer	Occupation
------------------	------------

Receipt For: 2016  
 Primary  General  
 Other (specify) **PrimaryDebt**

Election Cycle-to-Date **10000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 03 / 2016

**Transaction ID : A9167B53E93234224B91**

Amount of Each Receipt this Period  
 5000.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**AMERICAN SOCIETY OF PLASTIC SURGEONS PLASTYPAC**

Mailing Address 444 E ALGONQUIN RD

City ARLINGTON HEIGHTS	State IL	Zip Code 60005
---------------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C C00249342**

Name of Employer	Occupation
------------------	------------

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 27 / 2016

**Transaction ID : AFB9CA54F8DD04A14950**

Amount of Each Receipt this Period  
 2500.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	10000.00
<b>TOTAL</b> 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 75 OF 193	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
**Tarkanian for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**NEVADA REPUBLICAN CENTRAL COMMITTEE**

Mailing Address PO BOX 95125

City LAS VEGAS	State NV	Zip Code 89193
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00082925

Name of Employer	Occupation
------------------	------------

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
10000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 08 / 2016

**Transaction ID : A816A20B3891E4944A42**

Amount of Each Receipt this Period  
5000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Kirby PAC**

Mailing Address 55 Waugh Drive, Suite 1000

City Houston	State TX	Zip Code 77007-5834
-----------------	-------------	------------------------

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

Name of Employer	Occupation
------------------	------------

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 31 / 2016

**Transaction ID : A123DBE5F2F5747E4B10**

Amount of Each Receipt this Period  
1000.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**RAISIN BARGAINING ASS'N FEDERAL POLITICAL ACTION COMMITTEE**

Mailing Address 2444 MAIN STREET  
SUITE 160

City FRESNO	State CA	Zip Code 93721
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00128686

Name of Employer	Occupation
------------------	------------

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 08 / 2016

**Transaction ID : AFAB50D01994E4D08AC8**

Amount of Each Receipt this Period  
500.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	6500.00
<b>TOTAL</b> 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 76 OF 193	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
**Tarkanian for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Jim Jordan For Congress**

Mailing Address 2160 Kettering Tower Suite 2160

City Dayton	State OH	Zip Code 45423-1010
----------------	-------------	------------------------

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

Name of Employer	Occupation
------------------	------------

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 27 / 2016

**Transaction ID : A67DC39B82E7546B49E7**

Amount of Each Receipt this Period  
2000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Eye of the Tiger PAC**

Mailing Address PO Box 2485

City Springfield	State VA	Zip Code 22152-0485
---------------------	-------------	------------------------

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

Name of Employer	Occupation
------------------	------------

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼ PrimaryDebt

Election Cycle-to-Date ▼  
10000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 03 / 2016

**Transaction ID : A7AA94EA07E2640DBB2C**

Amount of Each Receipt this Period  
5000.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**GUTHRIE FOR CONGRESS**

Mailing Address PO BOX 9639

City BOWLING GREEN	State KY	Zip Code 42102
-----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00445023

Name of Employer	Occupation
------------------	------------

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 05 / 2016

**Transaction ID : A07FDA247463242D78C8**

Amount of Each Receipt this Period  
1000.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	8000.00
<b>TOTAL</b> 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 77 OF 193	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
**Tarkanian for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**MOOLENAAR FOR CONGRESS**

Mailing Address 5915 EASTMAN AVENUE  
SUITE 100

City MIDLAND	State MI	Zip Code 48640
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00561530

Name of Employer	Occupation
------------------	------------

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 05 / 2016

**Transaction ID : ACCA777EF44A6468BB0C**

Amount of Each Receipt this Period  
1000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**WALTERS FOR CONGRESS**

Mailing Address 9070 IRVINE CENTER DRIVE, #150

City IRVINE	State CA	Zip Code 92618
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00546853

Name of Employer	Occupation
------------------	------------

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼ PrimaryDebt

Election Cycle-to-Date ▼  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 03 / 2016

**Transaction ID : A458A98F293CB4DE58BB**

Amount of Each Receipt this Period  
2000.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**CONSERVATIVE OPPORTUNITIES FOR A NEW AMERICA PAC**

Mailing Address 110 W LOUISIANA AVENUE  
SUITE 312

City MIDLAND	State TX	Zip Code 79701
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00409458

Name of Employer	Occupation
------------------	------------

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
4000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 31 / 2016

**Transaction ID : A735F53A835B44C7F95D**

Amount of Each Receipt this Period  
2000.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	5000.00
<b>TOTAL</b> 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 78 OF 193	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
**Tarkanian for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**CONSERVATIVE LEADERSHIP POLITICAL ACTION COMMITTEE**

Mailing Address 3128 N. 17TH STREET

City ARLINGTON	State VA	Zip Code 22201
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00010363

Name of Employer	Occupation
------------------	------------

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
100.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 05 / 2016

Transaction ID : AFAAF7BED63D3404E87D

Amount of Each Receipt this Period  
100.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**AGC PAC**

Mailing Address 2300 Wilson Blvd. #300

City Arlington	State VA	Zip Code 22201-5426
-------------------	-------------	------------------------

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

Name of Employer	Occupation
------------------	------------

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 25 / 2016

Transaction ID : A632DF8642F8349559E5

Amount of Each Receipt this Period  
2500.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**MARATHON PETROLEUM CORPORATION EMPLOYEES POLITICAL ACTION COMMITTEE (MPAC)**

Mailing Address 539 S. MAIN STREET

City FINDLAY	State OH	Zip Code 45840
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00496307

Name of Employer	Occupation
------------------	------------

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 05 / 2016

Transaction ID : A4A30FEC75768419DB57

Amount of Each Receipt this Period  
5000.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	7600.00
<b>TOTAL</b> 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 79 OF 193	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
**Tarkanian for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**CITIZENS FOR JOHN RUTHERFORD**

Mailing Address 3030 HARTLEY RD  
STE 120

City JACKSONVILLE	State FL	Zip Code 32257
----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00615294

Name of Employer	Occupation
------------------	------------

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 26 / 2016

Transaction ID : **A7E11ED7499EC429487E**

Amount of Each Receipt this Period  
1000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**BURGER KING FRANCHISEE PAC**

Mailing Address 1701 BARRETT LAKES BLVD. NW  
SUITE 180

City KENNESAW	State GA	Zip Code 30144
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00329425

Name of Employer	Occupation
------------------	------------

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
4000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 26 / 2016

Transaction ID : **A2EE24E9F5E164307BA6**

Amount of Each Receipt this Period  
3000.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Wynn Resorts Ltd Initiative for Public Policy PAC**

Mailing Address 3131 Las Vegas Blvd. S.

City Las Vegas	State NV	Zip Code 89109-1967
-------------------	-------------	------------------------

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

Name of Employer	Occupation
------------------	------------

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
7000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 26 / 2016

Transaction ID : **AC4DF263FA5A7432D887**

Amount of Each Receipt this Period  
2000.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	6000.00
<b>TOTAL</b> 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 80 OF 193	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
**Tarkanian for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Wynn Resorts Ltd Initiative for Public Policy PAC**

Mailing Address 3131 Las Vegas Blvd. S.

City Las Vegas	State NV	Zip Code 89109-1967
-------------------	-------------	------------------------

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

Name of Employer	Occupation
------------------	------------

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
7000.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
10		31		2016

**Transaction ID : A38E4207396114153932**

Amount of Each Receipt this Period  
-2000.00

Memo Item  
Redesignation from Memo

**B.** Full Name (Last, First, Middle Initial)  
**Wynn Resorts Ltd Initiative for Public Policy PAC**

Mailing Address 3131 Las Vegas Blvd. S.

City Las Vegas	State NV	Zip Code 89109-1967
-------------------	-------------	------------------------

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

Name of Employer	Occupation
------------------	------------

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼ PrimaryDebt

Election Cycle-to-Date ▼  
7000.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
10		31		2016

**Transaction ID : A59AD489576EB49D0B10**

Amount of Each Receipt this Period  
2000.00

Memo Item  
Redesignation to Memo

**C.** Full Name (Last, First, Middle Initial)

Mailing Address

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

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

Name of Employer	Occupation
------------------	------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  

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

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	150148.00



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

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

FOR LINE NUMBER: PAGE 81 OF 193  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Tarkanian for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Tarkanian, Danny, , ,**

Mailing Address 3008 Campbell Circle

City Las Vegas State NV Zip Code 89107-3214

FEC ID number of contributing federal political committee. **C** H2NV04045

Name of Employer Danny Tarkanian Occupation Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 175595.92

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 07 / 2016

Transaction ID : **A0CB3C60661A646EC977**

Amount of Each Receipt this Period  
 547.80

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Tarkanian, Danny, , ,**

Mailing Address 3008 Campbell Circle

City Las Vegas State NV Zip Code 89107-3214

FEC ID number of contributing federal political committee. **C** H2NV04045

Name of Employer Danny Tarkanian Occupation Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 130048.12

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 20 / 2016

Transaction ID : **A52218DEA642147E98CE**

Amount of Each Receipt this Period  
 924.81

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Tarkanian, Danny, , ,**

Mailing Address 3008 Campbell Circle

City Las Vegas State NV Zip Code 89107-3214

FEC ID number of contributing federal political committee. **C** H2NV04045

Name of Employer Danny Tarkanian Occupation Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 175048.12

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 31 / 2016

Transaction ID : **A4A42FF0CE43542F4968**

Amount of Each Receipt this Period  
 45000.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	46472.61
<b>TOTAL</b> This Period (last page this line number only).....▶	46472.61

**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 82 OF 193	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Tarkanian for Congress**

Full Name (Last, First, Middle Initial) <b>A. FREEDOMWORKS PAC</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2016	
Mailing Address PO BOX 75760			FEC Identification Number C	
City WASHINGTON	State DC	Zip Code 20013	Amount of Each Disbursement this Period 100.00	
Purpose of Disbursement In-kind: Event Fees		Category/Type	Transaction ID : B4B9EA3A19A804419BDE	
Candidate Name		Disbursement For:	Memo Item <input type="checkbox"/>	
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State:	District:			

Full Name (Last, First, Middle Initial) <b>B. Born &amp; Raised</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 20 / 2016	
Mailing Address 7250 S Cimmaron			FEC Identification Number C	
City Las Vegas	State NV	Zip Code 89113-2134	Amount of Each Disbursement this Period 14.98	
Purpose of Disbursement Travel		Category/Type	Transaction ID : BAF129A559D194938924	
Candidate Name		Disbursement For:	Memo Item <input type="checkbox"/>	
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State:	District:			

Full Name (Last, First, Middle Initial) <b>c. Rebel Gas</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 20 / 2016	
Mailing Address 2200 Highland Drive			FEC Identification Number C	
City Las Vegas	State NV	Zip Code 89102-4629	Amount of Each Disbursement this Period 40.00	
Purpose of Disbursement Travel		Category/Type	Transaction ID : BAC196F20CEE94F03924	
Candidate Name		Disbursement For:	Memo Item <input type="checkbox"/>	
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State:	District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	154.98
<b>TOTAL</b> 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 83 OF 193			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Tarkanian for Congress**

Full Name (Last, First, Middle Initial) <b>A. Rebel Gas</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 20 / 2016		
Mailing Address 2200 Highland Drive			FEC Identification Number C		
City Las Vegas	State NV	Zip Code 89102-4629	Amount of Each Disbursement this Period 40.00		
Purpose of Disbursement Travel		Category/ Type	Transaction ID : BC72CFE1F0C8846B4ACB		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. Rebel Gas</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 20 / 2016		
Mailing Address 2200 Highland Drive			FEC Identification Number C		
City Las Vegas	State NV	Zip Code 89102-4629	Amount of Each Disbursement this Period 40.00		
Purpose of Disbursement Travel		Category/ Type	Transaction ID : B97E0A08D00AE47468BD		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>C. American Express</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 20 / 2016		
Mailing Address 200 Vesey Street			FEC Identification Number C		
City New York	State NY	Zip Code 10285-1000	Amount of Each Disbursement this Period 15.90		
Purpose of Disbursement Merchant Processing Fees		Category/ Type	Transaction ID : B1EC780DB4BA14CF6AAF		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	95.90
<b>TOTAL</b> 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 84 OF 193			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Tarkanian for Congress**

Full Name (Last, First, Middle Initial) <b>A. Rebel Gas</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 20 / 2016
Mailing Address 2200 Highland Drive		FEC Identification Number C
City Las Vegas	State NV	Zip Code 89102-4629
Purpose of Disbursement Travel		Amount of Each Disbursement this Period 40.00
Candidate Name		Transaction ID : BA57F72D985014D889E6
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Rebel Gas</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 20 / 2016
Mailing Address 2200 Highland Drive		FEC Identification Number C
City Las Vegas	State NV	Zip Code 89102-4629
Purpose of Disbursement Travel		Amount of Each Disbursement this Period 40.00
Candidate Name		Transaction ID : BCDE6879D96EA477596D
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Born &amp; Raised</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 20 / 2016
Mailing Address 7250 S Cimmaron		FEC Identification Number C
City Las Vegas	State NV	Zip Code 89113-2134
Purpose of Disbursement Travel		Amount of Each Disbursement this Period 16.22
Candidate Name		Transaction ID : B1A0BDF14A70640ADB60
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	96.22
<b>TOTAL</b> 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 85 OF 193	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Tarkanian for Congress**

Full Name (Last, First, Middle Initial) <b>A. Born &amp; Raised</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 20 / 2016
Mailing Address 7250 S Cimmaron		FEC Identification Number C
City Las Vegas	State NV	Zip Code 89113-2134
Purpose of Disbursement Travel	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 10.82	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : B3AAD286AA0E246B5A3C
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. Sandler-Innocenzi</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 20 / 2016
Mailing Address 705 Prince Street		FEC Identification Number C
City Alexandria	State VA	Zip Code 22314
Purpose of Disbursement Media	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 74006.20	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : BD5150B0DABF9448E8E
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>c. Authorize.net</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 20 / 2016
Mailing Address 808 E. Utah Valley Drive		FEC Identification Number C
City American Fork	State UT	Zip Code 84003-9707
Purpose of Disbursement Merchant Processing Fees	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 475.91	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : BA8E59861BEA34D85B15
State: District:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	74492.93
<b>TOTAL</b> 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 86 OF 193	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Tarkanian for Congress**

Full Name (Last, First, Middle Initial) <b>A. Targeted Victory Funding Credit Card Processing</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 21 / 2016	
Mailing Address 1033 N Fairfax St #40			FEC Identification Number C	
City Alexandria	State VA	Zip Code 22314-1547	Amount of Each Disbursement this Period 16.65	
Purpose of Disbursement Merchant Processing Fee		Category/ Type	Transaction ID : <b>BBAB3BD3BB7434970B64</b>	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Anedot</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 21 / 2016	
Mailing Address 10156 Perkins Rowe #17F			FEC Identification Number C	
City Baton Rouge	State LA	Zip Code 70810-1799	Amount of Each Disbursement this Period 276.07	
Purpose of Disbursement Merchant Processing Fees		Category/ Type	Transaction ID : <b>B9611B0D5DAA14AE1B7E</b>	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>c. Targeted Victory Funding Credit Card Processing</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 24 / 2016	
Mailing Address 1033 N Fairfax St #40			FEC Identification Number C	
City Alexandria	State VA	Zip Code 22314-1547	Amount of Each Disbursement this Period 29.12	
Purpose of Disbursement Merchant Processing Fee		Category/ Type	Transaction ID : <b>B7E3B617C6C6040AC8A1</b>	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	321.84
<b>TOTAL</b> 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 87 OF 193	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Tarkanian for Congress**

Full Name (Last, First, Middle Initial) <b>A. Targeted Victory Funding Credit Card Processing</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 25 / 2016
Mailing Address 1033 N Fairfax St #40		FEC Identification Number C
City Alexandria	State VA	Zip Code 22314-1547
Purpose of Disbursement Merchant Processing Fee		Amount of Each Disbursement this Period 26.97
Candidate Name		Transaction ID : B53BD8F8B9E974753926
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. The Prosper Group</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 25 / 2016
Mailing Address 435 E Main Street #250		FEC Identification Number C
City Greenwood	State IN	Zip Code 46143-1464
Purpose of Disbursement Digital Advertisement		Amount of Each Disbursement this Period 23000.00
Candidate Name		Transaction ID : BFBC0B9B5B8564BABBDB
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Anedot</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 25 / 2016
Mailing Address 10156 Perkins Rowe #17F		FEC Identification Number C
City Baton Rouge	State LA	Zip Code 70810-1799
Purpose of Disbursement Merchant Processing Fees		Amount of Each Disbursement this Period 872.16
Candidate Name		Transaction ID : B7DFEC7D4D9394EF5BFE
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	23899.13
<b>TOTAL</b> 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 88 OF 193			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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)  
**Tarkanian for Congress**

Full Name (Last, First, Middle Initial) <b>A. Targeted Victory Funding Credit Card Processing</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 26 / 2016
Mailing Address 1033 N Fairfax St #40		FEC Identification Number C
City Alexandria	State VA	Zip Code 22314-1547
Purpose of Disbursement Merchant Processing Fee	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 36.04	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : B93E4EB2A8066499791B
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. Policy Communications</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 27 / 2016
Mailing Address 415 S. 6th Street		FEC Identification Number C
City Las Vegas	State NV	Zip Code 89101-6940
Purpose of Disbursement Advertisement/Radio	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 15000.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : B09B88AEBDAF94CA5924
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>c. The Prosper Group</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 27 / 2016
Mailing Address 435 E Main Street #250		FEC Identification Number C
City Greenwood	State IN	Zip Code 46143-1464
Purpose of Disbursement Digital Advertisement	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 14680.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : BA934A121B0494B8CB5C
State: District:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	29716.04
<b>TOTAL</b> 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 89 OF 193			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Tarkanian for Congress**

Full Name (Last, First, Middle Initial) <b>A. In Compliance Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 27 / 2016
Mailing Address PO Box 751271		FEC Identification Number C
City Las Vegas	State NV	Zip Code 89136-1271
Purpose of Disbursement Office Supplies	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 94.64	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : B3CBEC3E5C9854056BBC
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. In Compliance Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 27 / 2016
Mailing Address PO Box 751271		FEC Identification Number C
City Las Vegas	State NV	Zip Code 89136-1271
Purpose of Disbursement Compliance Consulting	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 2746.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : B130FD2D7808C4BD1B67
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>c. Sandler-Innocenzi</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 27 / 2016
Mailing Address 705 Prince Street		FEC Identification Number C
City Alexandria	State VA	Zip Code 22314
Purpose of Disbursement Media	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 51760.60	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : B9C66A8BCE29544B69B1
State: District:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	54601.24
<b>TOTAL</b> 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 90 OF 193			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Tarkanian for Congress**

Full Name (Last, First, Middle Initial) <b>A. In Compliance Inc.</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 27 / 2016		
Mailing Address PO Box 751271			FEC Identification Number C		
City Las Vegas	State NV	Zip Code 89136-1271	Amount of Each Disbursement this Period 56.40		
Purpose of Disbursement Postage		Category/ Type	Transaction ID : B1E51AF05784945E0821		
Candidate Name			<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. Anedot</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 27 / 2016		
Mailing Address 10156 Perkins Rowe #17F			FEC Identification Number C		
City Baton Rouge	State LA	Zip Code 70810-1799	Amount of Each Disbursement this Period 997.42		
Purpose of Disbursement Merchant Processing Fees		Category/ Type	Transaction ID : BDE8E776CD1FC428C8DC		
Candidate Name			<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>c. Sandler-Innocenzi</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 27 / 2016		
Mailing Address 705 Prince Street			FEC Identification Number C		
City Alexandria	State VA	Zip Code 22314	Amount of Each Disbursement this Period 43481.34		
Purpose of Disbursement Media Production & Shipping		Category/ Type	Transaction ID : B26688509D0724219869		
Candidate Name			<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	44535.16
<b>TOTAL</b> 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 91 OF 193	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Tarkanian for Congress**

Full Name (Last, First, Middle Initial) <b>A. Sandler-Innocenzi</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 27 / 2016	
Mailing Address 705 Prince Street			FEC Identification Number C	
City Alexandria	State VA	Zip Code 22314	Amount of Each Disbursement this Period 23239.40	
Purpose of Disbursement Media		Category/ Type	Transaction ID : B489B3F216FDA4F2AAF4	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Tarkanian &amp; Knight Law Group</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 27 / 2016	
Mailing Address 7220 S. Cimarron #110			FEC Identification Number C	
City Las Vegas	State NV	Zip Code 89113-2157	Amount of Each Disbursement this Period 77.40	
Purpose of Disbursement Telephone & Internet		Category/ Type	Transaction ID : B2E6D317095F941B2BDD	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>c. Targeted Victory Funding Credit Card Processing</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 27 / 2016	
Mailing Address 1033 N Fairfax St #40			FEC Identification Number C	
City Alexandria	State VA	Zip Code 22314-1547	Amount of Each Disbursement this Period 13.76	
Purpose of Disbursement Merchant Processing Fee		Category/ Type	Transaction ID : B6F1A8E4CC1DF4A3E924	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	23330.56
<b>TOTAL</b> 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 92 OF 193			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Tarkanian for Congress**

Full Name (Last, First, Middle Initial) <b>A. Gormley Greenlight Consulting</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 28 / 2016		
Mailing Address 9550 W. Sahara Ave.			FEC Identification Number C		
City Las Vegas	State NV	Zip Code 89117-5373	Amount of Each Disbursement this Period 622.50		
Purpose of Disbursement Fundraising Svcs		Category/Type	Transaction ID : <b>BF87AEFE6F561420BB4D</b>		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. Targeted Victory Funding Credit Card Processing</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 28 / 2016		
Mailing Address 1033 N Fairfax St #40			FEC Identification Number C		
City Alexandria	State VA	Zip Code 22314-1547	Amount of Each Disbursement this Period 53.18		
Purpose of Disbursement Merchant Processing Fee		Category/Type	Transaction ID : <b>B9CC9A81292E74AEB9A7</b>		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>c. Gormley Greenlight Consulting</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 28 / 2016		
Mailing Address 9550 W. Sahara Ave.			FEC Identification Number C		
City Las Vegas	State NV	Zip Code 89117-5373	Amount of Each Disbursement this Period 5500.00		
Purpose of Disbursement Consulting Management		Category/Type	Transaction ID : <b>B2D72FE94523E44D59E9</b>		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	6175.68
<b>TOTAL</b> 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 93 OF 193			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Tarkanian for Congress**

Full Name (Last, First, Middle Initial) <b>A. Anedot</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 28 / 2016		
Mailing Address 10156 Perkins Rowe #17F			FEC Identification Number <b>C</b>		
City Baton Rouge	State LA	Zip Code 70810-1799	Amount of Each Disbursement this Period 90.30		
Purpose of Disbursement Merchant Processing Fees		Category/ Type	Transaction ID : <b>B0187A93BE1DF43F5B8A</b>		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. Sandler-Innocenzi</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2016		
Mailing Address 705 Prince Street			FEC Identification Number <b>C</b>		
City Alexandria	State VA	Zip Code 22314	Amount of Each Disbursement this Period 98655.40		
Purpose of Disbursement Media		Category/ Type	Transaction ID : <b>B23F392C5972A49E38B1</b>		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>C. Anedot</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2016		
Mailing Address 10156 Perkins Rowe #17F			FEC Identification Number <b>C</b>		
City Baton Rouge	State LA	Zip Code 70810-1799	Amount of Each Disbursement this Period 122.17		
Purpose of Disbursement Merchant Processing Fees		Category/ Type	Transaction ID : <b>BC22F8A6923934DC7BDF</b>		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	98867.87
<b>TOTAL</b> 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 94 OF 193			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
Tarkanian for Congress

Full Name (Last, First, Middle Initial) <b>A. Targeted Victory Funding Credit Card Processing</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2016
Mailing Address 1033 N Fairfax St #40		FEC Identification Number C
City Alexandria	State VA	Zip Code 22314-1547
Purpose of Disbursement Merchant Processing Fee		Amount of Each Disbursement this Period 26.25
Candidate Name		Transaction ID : B70BCB738B683424C99E
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: _____	District: _____	

Full Name (Last, First, Middle Initial) <b>B. American Express</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2016
Mailing Address 200 Vesey Street		FEC Identification Number C
City New York	State NY	Zip Code 10285-1000
Purpose of Disbursement Merchant Processing Fees		Amount of Each Disbursement this Period 7.95
Candidate Name		Transaction ID : BBEAFF2EB36CC440AA22
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: _____	District: _____	

Full Name (Last, First, Middle Initial) <b>c. The Prosper Group</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2016
Mailing Address 435 E Main Street #250		FEC Identification Number C
City Greenwood	State IN	Zip Code 46143-1464
Purpose of Disbursement Digital Advertisement		Amount of Each Disbursement this Period 23000.00
Candidate Name		Transaction ID : B15AA87581D9C4FFC816
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: _____	District: _____	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	23034.20
<b>TOTAL</b> 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 95 OF 193			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Tarkanian for Congress**

Full Name (Last, First, Middle Initial) <b>A. Nevada Department of Taxation</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2016
Mailing Address 555 E. Washington Ave.		FEC Identification Number C
City Las Vegas	State NV	Zip Code 89101-1083
Purpose of Disbursement Payroll Taxes	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 45.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : <b>BD229B7EEF18B4B818B7</b>
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. IRS Dept. of Treasury</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2016
Mailing Address		FEC Identification Number C
City Provo	State UT	Zip Code 84602
Purpose of Disbursement Payroll Taxes	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 123.75	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : <b>B333E35A68B3F4057A01</b>
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>c. The Prosper Group</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2016
Mailing Address 435 E Main Street #250		FEC Identification Number C
City Greenwood	State IN	Zip Code 46143-1464
Purpose of Disbursement Digital Management Svcs	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 4000.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : <b>B1E970FAF57844081855</b>
State: District:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	4168.75
<b>TOTAL</b> 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 96 OF 193	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Tarkanian for Congress**

Full Name (Last, First, Middle Initial) <b>A. Serrano, Raymond, , ,</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2016
Mailing Address 1089 Lisbon Ave.		FEC Identification Number C
City Las Vegas	State NV	Zip Code 89169-2967
Purpose of Disbursement Salary		Amount of Each Disbursement this Period 500.00
Candidate Name		Transaction ID : B525E2C670C06445CA1B
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Sholty, Morgun, , ,</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2016
Mailing Address 1765 Normandy Rd.		FEC Identification Number C
City Lexington	State KY	Zip Code 40504-2224
Purpose of Disbursement Salary		Amount of Each Disbursement this Period 1000.00
Candidate Name		Transaction ID : BF424C69A1E904A5D9EC
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Authorize.net</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2016
Mailing Address 808 E. Utah Valley Drive		FEC Identification Number C
City American Fork	State UT	Zip Code 84003-9707
Purpose of Disbursement Merchant Processing Fees		Amount of Each Disbursement this Period 110.22
Candidate Name		Transaction ID : B065365867F8742C385F
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1610.22
<b>TOTAL</b> 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 97 OF 193			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
**Tarkanian for Congress**

Full Name (Last, First, Middle Initial) <b>A. Targeted Victory Funding Credit Card Processing</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2016
Mailing Address 1033 N Fairfax St #40		FEC Identification Number C
City Alexandria	State VA	Zip Code 22314-1547
Purpose of Disbursement Merchant Processing Fee		Amount of Each Disbursement this Period 9.92
Candidate Name		Transaction ID : BB1DD21691FB8438F893
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Anedot</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2016
Mailing Address 10156 Perkins Rowe #17F		FEC Identification Number C
City Baton Rouge	State LA	Zip Code 70810-1799
Purpose of Disbursement Merchant Processing Fees		Amount of Each Disbursement this Period 121.80
Candidate Name		Transaction ID : B3D27A312DBA94D8AA8F
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Anedot</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2016
Mailing Address 10156 Perkins Rowe #17F		FEC Identification Number C
City Baton Rouge	State LA	Zip Code 70810-1799
Purpose of Disbursement Merchant Processing Fees		Amount of Each Disbursement this Period 303.15
Candidate Name		Transaction ID : B4CD78F72864E47F39F9
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	434.87
<b>TOTAL</b> 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 98 OF 193			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Tarkanian for Congress**

Full Name (Last, First, Middle Initial) <b>A. Chariot LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2016
Mailing Address 342 Edna Street		FEC Identification Number C
City San Francisco	State CA	Zip Code 94112-1325
Purpose of Disbursement Telephone Svcs		Amount of Each Disbursement this Period 949.12
Candidate Name	Category/ Type	Transaction ID : BBD3EBFC2EB4B467A852
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Authorize.net</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2016
Mailing Address 808 E. Utah Valley Drive		FEC Identification Number C
City American Fork	State UT	Zip Code 84003-9707
Purpose of Disbursement Merchant Fees		Amount of Each Disbursement this Period 19.50
Candidate Name	Category/ Type	Transaction ID : B13D4095C96134093895
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Targeted Victory Funding Credit Card Processing</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2016
Mailing Address 1033 N Fairfax St #40		FEC Identification Number C
City Alexandria	State VA	Zip Code 22314-1547
Purpose of Disbursement Merchant Processing Fee		Amount of Each Disbursement this Period 22.33
Candidate Name	Category/ Type	Transaction ID : B5070FE99963641BD8CE
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	990.95
<b>TOTAL</b> 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 99 OF 193	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Tarkanian for Congress**

Full Name (Last, First, Middle Initial) <b>A. Targeted Victory Funding Credit Card Processing</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2016
Mailing Address 1033 N Fairfax St #40		FEC Identification Number C
City Alexandria	State VA	Zip Code 22314-1547
Purpose of Disbursement Merchant Processing Fee		Amount of Each Disbursement this Period 24.12
Candidate Name		Transaction ID : B7AAD19635D1042CBAE0
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Anedot</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2016
Mailing Address 10156 Perkins Rowe #17F		FEC Identification Number C
City Baton Rouge	State LA	Zip Code 70810-1799
Purpose of Disbursement Merchant Processing Fees		Amount of Each Disbursement this Period 68.10
Candidate Name		Transaction ID : BC4037EE0EC4B417391B
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>c. The Prosper Group</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2016
Mailing Address 435 E Main Street #250		FEC Identification Number C
City Greenwood	State IN	Zip Code 46143-1464
Purpose of Disbursement Digital Advertisement		Amount of Each Disbursement this Period 12000.00
Candidate Name		Transaction ID : B294526C527AE44B9B22
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	12092.22
<b>TOTAL</b> 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 100 OF 193	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Tarkanian for Congress**

**A. Advantage Direct**

Full Name (Last, First, Middle Initial)  
Mailing Address 2300 Claredon Blvd.

City Arlington State VA Zip Code 22201-3398

Purpose of Disbursement Telephone Svcs

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 11 / 03 / 2016

FEC Identification Number: C

Amount of Each Disbursement this Period: 5712.85

Transaction ID : B74A5B0D50AB648B1ACA

Memo Item

**B. Anedot**

Full Name (Last, First, Middle Initial)  
Mailing Address 10156 Perkins Rowe #17F

City Baton Rouge State LA Zip Code 70810-1799

Purpose of Disbursement Merchant Processing Fees

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 11 / 03 / 2016

FEC Identification Number: C

Amount of Each Disbursement this Period: 111.75

Transaction ID : B62EFF409A73744E5A74

Memo Item

**c. Targeted Victory Funding Credit Card Processing**

Full Name (Last, First, Middle Initial)  
Mailing Address 1033 N Fairfax St #40

City Alexandria State VA Zip Code 22314-1547

Purpose of Disbursement Merchant Processing Fee

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 11 / 04 / 2016

FEC Identification Number: C

Amount of Each Disbursement this Period: 25.06

Transaction ID : B17DC90CECB6D4C11858

Memo Item

**SUBTOTAL** of Disbursements This Page (optional).....▶ 5849.66

**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 101 OF 193	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Tarkanian for Congress**

Full Name (Last, First, Middle Initial) <b>A. Anedot</b>			Date of Disbursement M M / D D / Y Y Y Y <b>11 / 04 / 2016</b>	
Mailing Address <b>10156 Perkins Rowe #17F</b>			FEC Identification Number <b>C</b>	
City <b>Baton Rouge</b>	State <b>LA</b>	Zip Code <b>70810-1799</b>	Amount of Each Disbursement this Period <b>68.10</b>	
Purpose of Disbursement <b>Merchant Processing Fees</b>		Category/ Type	Transaction ID : <b>B46E976652EC845718F6</b>	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Targeted Victory Funding Credit Card Processing</b>			Date of Disbursement M M / D D / Y Y Y Y <b>11 / 05 / 2016</b>	
Mailing Address <b>1033 N Fairfax St #40</b>			FEC Identification Number <b>C</b>	
City <b>Alexandria</b>	State <b>VA</b>	Zip Code <b>22314-1547</b>	Amount of Each Disbursement this Period <b>17.37</b>	
Purpose of Disbursement <b>Merchant Processing Fee</b>		Category/ Type	Transaction ID : <b>B210AF3CF38734EA5B76</b>	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. Anedot</b>			Date of Disbursement M M / D D / Y Y Y Y <b>11 / 05 / 2016</b>	
Mailing Address <b>10156 Perkins Rowe #17F</b>			FEC Identification Number <b>C</b>	
City <b>Baton Rouge</b>	State <b>LA</b>	Zip Code <b>70810-1799</b>	Amount of Each Disbursement this Period <b>176.84</b>	
Purpose of Disbursement <b>Merchant Processing Fees</b>		Category/ Type	Transaction ID : <b>B7A22031B90824D828F4</b>	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	<b>262.31</b>
<b>TOTAL</b> 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 102 OF 193	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Tarkanian for Congress**

Full Name (Last, First, Middle Initial) <b>A. Targeted Victory Funding Credit Card Processing</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 06 / 2016	
Mailing Address 1033 N Fairfax St #40			FEC Identification Number C	
City Alexandria	State VA	Zip Code 22314-1547	Amount of Each Disbursement this Period 23.46	
Purpose of Disbursement Merchant Processing Fee		Category/ Type	Transaction ID : B7093794E10564A78B03	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Chariot LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 07 / 2016	
Mailing Address 342 Edna Street			FEC Identification Number C	
City San Francisco	State CA	Zip Code 94112-1325	Amount of Each Disbursement this Period 3077.00	
Purpose of Disbursement Telephone Svcs		Category/ Type	Transaction ID : BFD74387BACBA42B9A66	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. Anedot</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 07 / 2016	
Mailing Address 10156 Perkins Rowe #17F			FEC Identification Number C	
City Baton Rouge	State LA	Zip Code 70810-1799	Amount of Each Disbursement this Period 217.27	
Purpose of Disbursement Merchant Processing Fees		Category/ Type	Transaction ID : BCD5B4E2A649B4F32986	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	3317.73
<b>TOTAL</b> 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 103 OF 193			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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)  
**Tarkanian for Congress**

Full Name (Last, First, Middle Initial) <b>A. Flynn, Judy, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 07 / 2016		
Mailing Address 5246 Lisagayle Ct			FEC Identification Number <b>C</b>		
City Las Vegas	State NV	Zip Code 89103-3647			
Purpose of Disbursement Travel/Mileage Reimbursement			Transaction ID : <b>B4F66B46585F2463C802</b>		
Candidate Name			<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. Flynn, Judy, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 07 / 2016		
Mailing Address 5246 Lisagayle Ct			FEC Identification Number <b>C</b>		
City Las Vegas	State NV	Zip Code 89103-3647			
Purpose of Disbursement Meeting Registration Fees			Transaction ID : <b>B553038A72CA6461995B</b>		
Candidate Name			<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>c. Constant Contact</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 07 / 2016		
Mailing Address 1601 Trapelo Road, Suite 329			FEC Identification Number <b>C</b>		
City Waltham	State MA	Zip Code 02451-7357			
Purpose of Disbursement Email Svcs			Transaction ID : <b>B0F04F2F6B3B141F6871</b>		
Candidate Name			<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	279.38
<b>TOTAL</b> 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 104 OF 193			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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)  
**Tarkanian for Congress**

Full Name (Last, First, Middle Initial) <b>A. Rebel Gas</b>		Date of Disbursement
Mailing Address 2200 Highland Drive		M M / D D / Y Y Y Y 11 / 07 / 2016
City Las Vegas	State NV	Zip Code 89102-4629
Purpose of Disbursement Travel	FEC Identification Number C	
Candidate Name	Amount of Each Disbursement this Period 40.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : B37084E739019429DBE4
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. Targeted Victory Funding Credit Card Processing</b>		Date of Disbursement
Mailing Address 1033 N Fairfax St #40		M M / D D / Y Y Y Y 11 / 07 / 2016
City Alexandria	State VA	Zip Code 22314-1547
Purpose of Disbursement Merchant Processing Fee	FEC Identification Number C	
Candidate Name	Amount of Each Disbursement this Period 18.43	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : B5EA6C1D8D0A140FF901
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>c. Targeted Victory Funding Credit Card Processing</b>		Date of Disbursement
Mailing Address 1033 N Fairfax St #40		M M / D D / Y Y Y Y 11 / 08 / 2016
City Alexandria	State VA	Zip Code 22314-1547
Purpose of Disbursement Merchant Processing Fee	FEC Identification Number C	
Candidate Name	Amount of Each Disbursement this Period 90.40	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : BA5F28025D91346869F4
State: District:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	148.83
<b>TOTAL</b> 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 105 OF 193	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Tarkanian for Congress**

Full Name (Last, First, Middle Initial) <b>A. Chariot LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 08 / 2016
Mailing Address 342 Edna Street		FEC Identification Number C
City San Francisco	State CA	Zip Code 94112-1325
Purpose of Disbursement Telephone Svcs	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 9000.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : B301C8E67C3674E93ABF
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. Targeted Victory Funding Credit Card Processing</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 08 / 2016
Mailing Address 1033 N Fairfax St #40		FEC Identification Number C
City Alexandria	State VA	Zip Code 22314-1547
Purpose of Disbursement Merchant Processing Fee	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 10.50	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : B9B9282B93C284D2A8A3
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>c. Sholty, Morgun, , ,</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 10 / 2016
Mailing Address 1765 Normandy Rd.		FEC Identification Number C
City Lexington	State KY	Zip Code 40504-2224
Purpose of Disbursement Travel/Mileage Reimbursement	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 671.96	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : B3C8351592D544D16927
State: District:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	9682.46
<b>TOTAL</b> 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 106 OF 193			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Tarkanian for Congress**

Full Name (Last, First, Middle Initial) <b>A. Khayat, Mary, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 10 / 2016		
Mailing Address 4340 Lowell Ave.			FEC Identification Number C		
City La Crescenta	State CA	Zip Code 91214-2363	Amount of Each Disbursement this Period 107.15		
Purpose of Disbursement Name badges		Category/ Type	Transaction ID : <b>BD3174FB88A814DD9B38</b>		
Candidate Name			<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. Khayat, Mary, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 10 / 2016		
Mailing Address 4340 Lowell Ave.			FEC Identification Number C		
City La Crescenta	State CA	Zip Code 91214-2363	Amount of Each Disbursement this Period 36.00		
Purpose of Disbursement Parking		Category/ Type	Transaction ID : <b>B938613A1D2AF496DA52</b>		
Candidate Name			<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>c. Khayat, Mary, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 10 / 2016		
Mailing Address 4340 Lowell Ave.			FEC Identification Number C		
City La Crescenta	State CA	Zip Code 91214-2363	Amount of Each Disbursement this Period 31.52		
Purpose of Disbursement Shipping		Category/ Type	Transaction ID : <b>B1AA2179716E74E579FD</b>		
Candidate Name			<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	174.67
<b>TOTAL</b> 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 107 OF 193	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Tarkanian for Congress**

Full Name (Last, First, Middle Initial) <b>A. Sholty, Morgun, , ,</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 10 / 2016
Mailing Address 1765 Normandy Rd.		FEC Identification Number C
City Lexington	State KY	Zip Code 40504-2224
Purpose of Disbursement Labels	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 82.02	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Transaction ID : B90E7151711A4457CAAE	
		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>B. Khayat, Mary, , ,</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 10 / 2016
Mailing Address 4340 Lowell Ave.		FEC Identification Number C
City La Crescenta	State CA	Zip Code 91214-2363
Purpose of Disbursement Consulting Fundraising	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 1387.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Transaction ID : BD7D69790070D4129A3B	
		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>c. Khayat, Mary, , ,</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 10 / 2016
Mailing Address 4340 Lowell Ave.		FEC Identification Number C
City La Crescenta	State CA	Zip Code 91214-2363
Purpose of Disbursement Meals	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 71.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Transaction ID : B310E28F1ACA14D58B3A	
		<input type="checkbox"/> Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1540.02
<b>TOTAL</b> 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 108 OF 193	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Tarkanian for Congress**

Full Name (Last, First, Middle Initial) <b>A. White Birch Strategies LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 14 / 2016	
Mailing Address 402 S. Capitol Str SE #A			FEC Identification Number C	
City Washington	State DC	Zip Code 20003-4070	Amount of Each Disbursement this Period 1457.50	
Purpose of Disbursement Consulting Fundraising Svcs		Category/Type	Transaction ID : BA0702127C0FD45E3A4B	
Candidate Name		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Memo Item <input type="checkbox"/>	
State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Friends of Joe Heck</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 15 / 2016	
Mailing Address PO Box 753908			FEC Identification Number C	
City Las Vegas	State NV	Zip Code 89136-3908	Amount of Each Disbursement this Period 1200.00	
Purpose of Disbursement Rent		Category/Type	Transaction ID : B5D64A21E76F14D53BD8	
Candidate Name		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Memo Item <input type="checkbox"/>	
State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. FBM, Inc.</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 15 / 2016	
Mailing Address 955 Vegas Valley Drive, Apt. A			FEC Identification Number C	
City Las Vegas	State NV	Zip Code 89109-1542	Amount of Each Disbursement this Period 20000.00	
Purpose of Disbursement List Rental		Category/Type	Transaction ID : B92A5F3B3282A41089D2	
Candidate Name		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Memo Item <input type="checkbox"/>	
State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	35757.50
<b>TOTAL</b> 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 109 OF 193			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Tarkanian for Congress**

Full Name (Last, First, Middle Initial) <b>A. Moors, Halie, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 19 / 2016		
Mailing Address 4508 Buckeye Ave			FEC Identification Number <b>C</b>		
City Las Vegas	State NV	Zip Code 89102-3551			
Purpose of Disbursement Canvassing Svcs			Transaction ID : <b>B6267B819E5B4446D9BF</b>		
Candidate Name			<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. Schrag, Skyler, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 19 / 2016		
Mailing Address 1405 S. 16th Street			FEC Identification Number <b>C</b>		
City Las Vegas	State NV	Zip Code 89104-1834			
Purpose of Disbursement Canvassing Svcs			Transaction ID : <b>B35ED541709C34F07A32</b>		
Candidate Name			<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>C. Hoerner, Joseph, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 19 / 2016		
Mailing Address 4647 Rita Drive			FEC Identification Number <b>C</b>		
City Las Vegas	State NV	Zip Code 89121-7038			
Purpose of Disbursement Canvassing Svcs			Transaction ID : <b>B9C9A750072AE4C4BB67</b>		
Candidate Name			<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	786.00
<b>TOTAL</b> 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 110 OF 193			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Tarkanian for Congress**

Full Name (Last, First, Middle Initial) <b>A. Ramirez, Erika, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 19 / 2016		
Mailing Address 4508 Buckeye Ave.			FEC Identification Number C		
City Las Vegas	State NV	Zip Code 89102-3551	Amount of Each Disbursement this Period 327.00		
Purpose of Disbursement Canvassing Svcs		Category/ Type	Transaction ID : B371F7B778E234585A3C		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. In Compliance Inc.</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 28 / 2016		
Mailing Address PO Box 751271			FEC Identification Number C		
City Las Vegas	State NV	Zip Code 89136-1271	Amount of Each Disbursement this Period 2400.00		
Purpose of Disbursement Compliance Consulting		Category/ Type	Transaction ID : B76281B8AFBA44F3E9CE		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>C. Strategic Advance Services</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 28 / 2016		
Mailing Address 611 Pennsylvania Ave. SE #267			FEC Identification Number C		
City Washington	State DC	Zip Code 20003-4303	Amount of Each Disbursement this Period 5000.00		
Purpose of Disbursement Travel & Event Services		Category/ Type	Transaction ID : B16B979855960474FBD9		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	7727.00
<b>TOTAL</b> 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 111 OF 193	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Tarkanian for Congress**

Full Name (Last, First, Middle Initial) <b>A. In Compliance Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 28 / 2016
Mailing Address PO Box 751271		FEC Identification Number C
City Las Vegas	State NV	Zip Code 89136-1271
Purpose of Disbursement Printing & Postage	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 141.60	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : B802E00FAEFE64D408DD
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. Khayat, Mary, , ,</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 10 / 2016
Mailing Address 4340 Lowell Ave.		FEC Identification Number C
City La Crescenta	State CA	Zip Code 91214-2363
Purpose of Disbursement Debt Repayment: Consulting Fundraising	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 7500.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : B5EAE5E07C11640C8A7E
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>c. Flynn, Judy, , ,</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 07 / 2016
Mailing Address 5246 Lisagayle Ct		FEC Identification Number C
City Las Vegas	State NV	Zip Code 89103-3647
Purpose of Disbursement See Below/Office Supplies	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 601.51	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : B796A6C2401E3462AAC4
State: District:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	8243.11
<b>TOTAL</b> 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 112 OF 193	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Tarkanian for Congress**

Full Name (Last, First, Middle Initial) <b>A. Walmart</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 07 / 2016
Mailing Address 7200 Arroyo Crossing		FEC Identification Number C
City Las Vegas	State NV	Zip Code 89113-4058
Purpose of Disbursement Office Supplies	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 17.48	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : B9508689DFE084A6EB81
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. Sam's Club</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 07 / 2016
Mailing Address 7100 W Arroyo Crossing Pkwy		FEC Identification Number C
City Las Vegas	State NV	Zip Code 89113
Purpose of Disbursement Office Supplies	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 262.07	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : B97C45248AE5340EF9BF
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>c. Flynn, Judy, , ,</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 07 / 2016
Mailing Address 5246 Lisagayle Ct		FEC Identification Number C
City Las Vegas	State NV	Zip Code 89103-3647
Purpose of Disbursement See Below/Travel	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 98.98	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : B03CCF880D90C4EE2946
State: District:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	98.98
<b>TOTAL</b> 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 113 OF 193	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Tarkanian for Congress**

Full Name (Last, First, Middle Initial) <b>A. Southwest Airlines</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 07 / 2016	
Mailing Address 2702 Love Field Drive			FEC Identification Number C	
City Dallas	State TX	Zip Code 75235	Amount of Each Disbursement this Period 98.98	
Purpose of Disbursement Travel		Category/ Type	Transaction ID : B73DBCD1C35064B0FA85	
Candidate Name		<input checked="" type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B.</b>			Date of Disbursement M M / D D / Y Y Y Y	
Mailing Address			FEC Identification Number C	
City	State	Zip Code	Amount of Each Disbursement this Period	
Purpose of Disbursement		Category/ Type	Memo Item <input type="checkbox"/>	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C.</b>			Date of Disbursement M M / D D / Y Y Y Y	
Mailing Address			FEC Identification Number C	
City	State	Zip Code	Amount of Each Disbursement this Period	
Purpose of Disbursement		Category/ Type	Memo Item <input type="checkbox"/>	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	472486.41

**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 114 OF 193	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input checked="" type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Tarkanian for Congress**

Full Name (Last, First, Middle Initial) <b>A. Tarkanian, Danny, , ,</b>		Date of Disbursement M M / D D / Y Y Y Y <b>11 / 18 / 2016</b>
Mailing Address <b>3008 Campbell Circle</b>		FEC Identification Number <b>C C00582320</b>
City <b>Las Vegas</b>	State <b>NV</b>	Zip Code <b>89107-3214</b>
Purpose of Disbursement Loan Repayment: Loan Repayment		Amount of Each Disbursement this Period <b>19763.00</b>
Candidate Name <b>Tarkanian, Danny, , ,</b>		Transaction ID : <b>B89E835872EA643A7BD4</b>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: <b>NV</b> District: <b>03</b>		

Full Name (Last, First, Middle Initial) <b>B. Tarkanian, Danny, , ,</b>		Date of Disbursement M M / D D / Y Y Y Y <b>11 / 18 / 2016</b>
Mailing Address <b>3008 Campbell Circle</b>		FEC Identification Number <b>C C00582320</b>
City <b>Las Vegas</b>	State <b>NV</b>	Zip Code <b>89107-3214</b>
Purpose of Disbursement Loan Repayment: Loan Repayment		Amount of Each Disbursement this Period <b>40000.00</b>
Candidate Name <b>Tarkanian, Danny, , ,</b>		Transaction ID : <b>BA33B87AF4DCB440DA0E</b>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ <b>PrimaryDebt</b>	<input type="checkbox"/> Memo Item
State: <b>NV</b> District: <b>03</b>		

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		FEC Identification Number <b>C</b>
City	State	Zip Code
Purpose of Disbursement		Amount of Each Disbursement this Period
Candidate Name		Transaction ID
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	<b>59763.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	<b>59763.00</b>

# 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)  
 17     18     19a     19b  
 20a     20b     20c     21

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NAME OF COMMITTEE (In Full)  
**Tarkanian for Congress**

Full Name (Last, First, Middle Initial) <b>A. Martin, Armen, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y <b>10 / 31 / 2016</b>		
Mailing Address <b>1991 Ashington Drive</b>			FEC Identification Number <b>C</b>		
City <b>Glendale</b>	State <b>CA</b>	Zip Code <b>91206-1134</b>	Amount of Each Disbursement this Period <b>500.00</b>		
Purpose of Disbursement <b>Refund</b>		Category/Type	Transaction ID : <b>B21D499EBBEA84FF4A6C</b>		
Candidate Name		Disbursement For: <b>2016</b> <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State:    District:				

Full Name (Last, First, Middle Initial) <b>B.</b>			Date of Disbursement M M / D D / Y Y Y Y		
Mailing Address			FEC Identification Number <b>C</b>		
City	State	Zip Code	Amount of Each Disbursement this Period		
Purpose of Disbursement		Category/Type	Memo Item <input type="checkbox"/>		
Candidate Name		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State:    District:				

Full Name (Last, First, Middle Initial) <b>C.</b>			Date of Disbursement M M / D D / Y Y Y Y		
Mailing Address			FEC Identification Number <b>C</b>		
City	State	Zip Code	Amount of Each Disbursement this Period		
Purpose of Disbursement		Category/Type	Memo Item <input type="checkbox"/>		
Candidate Name		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State:    District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	<b>500.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	<b>500.00</b>

# SCHEDULE C (FEC Form 3) LOANS

NAME OF COMMITTEE (In Full) **Tarkanian for Congress** Transaction ID : **CB999FD2C352B4755A2A**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) Tarkanian, Danny, , ,		<input type="checkbox"/> Memo Item	Election: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	ZIP Code 89107-3214	<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan 20.80	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 20.80
----------------------------------	------------------------------------	--

<b>TERMS</b>	Date Incurred M 05 / D 27 / Y 2016	Date Due M M / D D / Y None	Interest Rate (If none, enter 0) 0.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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:

<b>SUBTOTALS</b> This Period This Page (optional).....▶	20.80
<b>TOTALS</b> 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) LOANS

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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)  
Tarkanian for Congress

Transaction ID : C62B9A6BAFC2C413FAD7

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

Tarkanian, Danny, , ,

Memo Item

Election: 2016

Primary

General

Other (specify) ▼

Mailing Address  
3008 Campbell Circle

City  
Las Vegas

State  
NV

ZIP Code  
89107-3214

Personal Funds of the Candidate

Original Amount of Loan

29.71

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

29.71

**TERMS**

Date Incurred

Date Due

Interest Rate  
(If none, enter 0)

Secured:

M 05<sup>M</sup>

/ D 28<sup>D</sup>

/ Y 2016 Y

M M

/ D D

/ Y None Y

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).....▶

29.71

**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) LOANS

NAME OF COMMITTEE (In Full) **Tarkanian for Congress** Transaction ID : **C0CB3C60661A646EC977**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) Tarkanian, Danny, , ,		<input type="checkbox"/> Memo Item	Election: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	ZIP Code 89107-3214	<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan 547.80	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 547.80
-----------------------------------	------------------------------------	---

<b>TERMS</b>	Date Incurred M 11 / D 07 / Y 2016	Date Due M M / D D / Y None	Interest Rate (If none, enter 0) 0.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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:

<b>SUBTOTALS</b> This Period This Page (optional).....▶	547.80
<b>TOTALS</b> 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)**  
**LOANS**

NAME OF COMMITTEE (In Full) Transaction ID : C94677C6E7B4E49BE84B  
 Tarkanian for Congress

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) <input type="checkbox"/> Memo Item Tarkanian, Danny, , ,		Election: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 3008 Campbell Circle		
City Las Vegas	State NV	ZIP Code 89107-3214
		<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan 30.65	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 30.65
----------------------------------	------------------------------------	--

<b>TERMS</b> Date Incurred M 05 / D 29 / Y 2016	Date Due M M / D D / Y None Y	Interest Rate (If none, enter 0) 0.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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: <input type="text"/>
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>

<b>SUBTOTALS</b> This Period This Page (optional).....▶	<input type="text" value="30.65"/>
<b>TOTALS</b> This Period (last page in this line only).....▶	<input type="text"/>

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) LOANS

NAME OF COMMITTEE (In Full) **Tarkanian for Congress** Transaction ID : **CE0EAF247CB184A719FF**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) Tarkanian, Danny, , ,		<input type="checkbox"/> Memo Item	Election: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	ZIP Code 89107-3214	<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan 31.96	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 31.96
----------------------------------	------------------------------------	--

<b>TERMS</b>	Date Incurred M 05 / D 29 / Y 2016	Date Due M M / D D / Y None	Interest Rate (If none, enter 0) 0.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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:

<b>SUBTOTALS</b> This Period This Page (optional).....▶	31.96
<b>TOTALS</b> 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)**  
**LOANS**

NAME OF COMMITTEE (In Full) Transaction ID : C13C791B5C66748CBB4A  
 Tarkanian for Congress

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) <input type="checkbox"/> Memo Item Tarkanian, Danny, , ,		Election: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 3008 Campbell Circle		
City Las Vegas	State NV	ZIP Code 89107-3214
		<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan 36.75	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 36.75
----------------------------------	------------------------------------	--

<b>TERMS</b> Date Incurred M 05 / D 26 / Y 2016	Date Due M M / D D / Y None Y	Interest Rate (If none, enter 0) 0.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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: [ ]

<b>SUBTOTALS</b> This Period This Page (optional).....▶	36.75
<b>TOTALS</b> 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)**  
**LOANS**

NAME OF COMMITTEE (In Full) Transaction ID : C757CFDAA82DB4314B33  
 Tarkanian for Congress

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) Tarkanian, Danny, , ,		<input type="checkbox"/> Memo Item	Election: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	ZIP Code 89107-3214	<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
1011.38	0.00	1011.38

<b>TERMS</b>	Date Incurred	Date Due	Interest Rate (If none, enter 0)	Secured:
	M 06 / D 14 / Y 2016	M / D / Y None	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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:

<b>SUBTOTALS</b> This Period This Page (optional).....▶	1011.38
<b>TOTALS</b> 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) LOANS

NAME OF COMMITTEE (In Full) **Tarkanian for Congress** Transaction ID : **C4A42FF0CE43542F4968**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) Tarkanian, Danny, , ,		<input type="checkbox"/> Memo Item	Election: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	ZIP Code 89107-3214	<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan 45000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 45000.00
-------------------------------------	------------------------------------	---

<b>TERMS</b>	Date Incurred M 10 / D 31 / Y 2016	Date Due M / D / Y None	Interest Rate (If none, enter 0) 0.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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:

<b>SUBTOTALS</b> This Period This Page (optional).....▶	45000.00
<b>TOTALS</b> 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)**  
**LOANS**

NAME OF COMMITTEE (In Full) Transaction ID : CD70C96CD92D8418EADE  
**Tarkanian for Congress**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial)		<input type="checkbox"/> Memo Item	Election: 2016
Tarkanian, Danny, , ,			<input type="checkbox"/> Primary
Mailing Address 3008 Campbell Circle			<input checked="" type="checkbox"/> General
			<input type="checkbox"/> Other (specify) ▼
City	State	ZIP Code	<input checked="" type="checkbox"/> Personal Funds of the Candidate
Las Vegas	NV	89107-3214	

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
1444.55	0.00	1444.55

<b>TERMS</b>	Date Incurred	Date Due	Interest Rate (If none, enter 0)	Secured:
	M 06 / D 30 / Y 2016	M M / D D / Y None	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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: <input type="text"/>
2. Full Name (Last, First, Middle Initial)	Name of Employer		
Mailing Address	Occupation		
City	State	ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
3. Full Name (Last, First, Middle Initial)	Name of Employer		
Mailing Address	Occupation		
City	State	ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
4. Full Name (Last, First, Middle Initial)	Name of Employer		
Mailing Address	Occupation		
City	State	ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>

<b>SUBTOTALS</b> This Period This Page (optional).....▶	1444.55
<b>TOTALS</b> This Period (last page in this line only).....▶	<input type="text"/>
<b>Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.</b>	

**SCHEDULE C (FEC Form 3)**  
**LOANS**

NAME OF COMMITTEE (In Full) **Tarkanian for Congress** Transaction ID : **C403C7786D1AC4A21BE2**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) Tarkanian, Danny, , ,		<input type="checkbox"/> Memo Item	Election: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	ZIP Code 89107-3214	<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan 10.79	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 10.79
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<b>TERMS</b>	Date Incurred M 05 / D 28 / Y 2016	Date Due M / D / Y None	Interest Rate (If none, enter 0) 0.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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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:

<b>SUBTOTALS</b> This Period This Page (optional).....▶	10.79
<b>TOTALS</b> 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) LOANS

NAME OF COMMITTEE (In Full) **Tarkanian for Congress** Transaction ID : **C0869A66D033D47C5885**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) Tarkanian, Danny, , ,		<input type="checkbox"/> Memo Item	Election: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	ZIP Code 89107-3214	<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan 56000.00	Cumulative Payment To Date 35763.00	Balance Outstanding at Close of This Period 20237.00
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<b>TERMS</b>	Date Incurred M 06 / D 14 / Y 2016	Date Due M M / D D / Y None	Interest Rate (If none, enter 0) 0.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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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: [ ]

<b>SUBTOTALS</b> This Period This Page (optional).....▶	[ ] 20237.00
<b>TOTALS</b> 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) LOANS

NAME OF COMMITTEE (In Full) **Tarkanian for Congress** Transaction ID : **C52218DEA642147E98CE**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) Tarkanian, Danny, , ,		<input type="checkbox"/> Memo Item	Election: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	ZIP Code 89107-3214	<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan 924.81	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 924.81
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<b>TERMS</b>	Date Incurred M 10 / D 20 / Y 2016	Date Due M / D / Y None	Interest Rate (If none, enter 0) 0.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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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:

<b>SUBTOTALS</b> This Period This Page (optional).....▶	924.81
<b>TOTALS</b> 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)**  
**LOANS**

NAME OF COMMITTEE (In Full) **Tarkanian for Congress** Transaction ID : **C4F55EDF676234740842**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) Tarkanian, Danny, , ,		<input type="checkbox"/> Memo Item	Election: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	ZIP Code 89107-3214	<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan 40000.00	Cumulative Payment To Date 40000.00	Balance Outstanding at Close of This Period 0.00
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<b>TERMS</b>	Date Incurred M 06 / D 11 / Y 2016	Date Due M M / D D / Y None	Interest Rate (If none, enter 0) 0.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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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:

<b>SUBTOTALS</b> This Period This Page (optional).....▶	0.00
<b>TOTALS</b> 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) LOANS

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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)  
Tarkanian for Congress

Transaction ID : C98EA7F18FEE947FAB7D

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

Tarkanian, Danny, , ,

Memo Item

Election: 2016

Primary  
 General  
 Other (specify) ▼

Mailing Address  
3008 Campbell Circle

City  
Las Vegas

State  
NV

ZIP Code  
89107-3214

Personal Funds of the Candidate

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

45.00

0.00

45.00

TERMS

Date Incurred

Date Due

Interest Rate  
(If none, enter 0)

Secured:

M 05 / D 26 / Y 2016 Y

M M / D D / Y None Y

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).....▶

45.00

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

69371.20

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**

NAME OF COMMITTEE (In Full)  
**Tarkanian for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Tarkanian, Danny, , ,</b>			Nature of Debt (Purpose): In-Kind to be reimbursed; Website Registration
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	Zip Code 89107-3214	

Outstanding Balance Beginning This Period <input type="text" value="24.98"/>	Transaction ID : <b>D4048A57CB8BC4E37A53</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="24.98"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Tarkanian, Danny, , ,</b>			Nature of Debt (Purpose): In-Kind to be reimbursed; Website Hosting Fee
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	Zip Code 89107-3214	

Outstanding Balance Beginning This Period <input type="text" value="59.88"/>	Transaction ID : <b>D169DD77B8A064B71BF7</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="59.88"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Tarkanian, Danny, , ,</b>			Nature of Debt (Purpose): In-Kind to be reimbursed; Communications
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	Zip Code 89107-3214	

Outstanding Balance Beginning This Period <input type="text" value="16.25"/>	Transaction ID : <b>D9DE5774F250A4B76928</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="16.25"/>

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	<input type="text" value="101.11"/>
2) <b>TOTALS</b> This Period (last page this line number only) .....	<input type="text"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) .....	<input type="text"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) .....	<input type="text"/>

**SCHEDULE D (FEC Form 3)**  
**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

NAME OF COMMITTEE (In Full)  
**Tarkanian for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Tarkanian, Danny, , ,</b>			Nature of Debt (Purpose): In-Kind to be reimbursed; Communications
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	Zip Code 89107-3214	

Outstanding Balance Beginning This Period <input type="text" value="34.78"/>		Transaction ID : <b>D4CC14070DA97472CBAD</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="34.78"/>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Tarkanian, Danny, , ,</b>			Nature of Debt (Purpose): In-Kind to be reimbursed; Website Registration
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	Zip Code 89107-3214	

Outstanding Balance Beginning This Period <input type="text" value="208.98"/>		Transaction ID : <b>D6054BAC3FEC8497A858</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="208.98"/>	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Tarkanian, Danny, , ,</b>			Nature of Debt (Purpose): In-Kind to be reimbursed; Republican Women's Event
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	Zip Code 89107-3214	

Outstanding Balance Beginning This Period <input type="text" value="130.00"/>		Transaction ID : <b>D507BB0A91A7C49B8891</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="130.00"/>	

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	<input type="text" value="373.76"/>
2) <b>TOTALS</b> This Period (last page this line number only) .....	<input type="text"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) .....	<input type="text"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) .....	<input type="text"/>

**SCHEDULE D (FEC Form 3)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

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

FOR LINE NUMBER: (check only one)

9  
 10

NAME OF COMMITTEE (In Full)

**Tarkanian for Congress**

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

Tarkanian, Danny, , ,

Nature of Debt (Purpose):

In-Kind to be reimbursed; Republican Women's Event

Mailing Address 3008 Campbell Circle

City

Las Vegas

State

NV

Zip Code

89107-3214

Outstanding Balance Beginning This Period

130.00

Transaction ID : DD3438E249D074591825

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

130.00

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

Tarkanian, Danny, , ,

Nature of Debt (Purpose):

In-Kind to be reimbursed; Communications

Mailing Address 3008 Campbell Circle

City

Las Vegas

State

NV

Zip Code

89107-3214

Outstanding Balance Beginning This Period

101.35

Transaction ID : D69ED78C5B3A94A2290C

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

101.35

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

Tarkanian, Danny, , ,

Nature of Debt (Purpose):

In-Kind to be reimbursed; Communications

Mailing Address 3008 Campbell Circle

City

Las Vegas

State

NV

Zip Code

89107-3214

Outstanding Balance Beginning This Period

35.00

Transaction ID : D83FFB1A851144F07AB9

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

35.00

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

266.35

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

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

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

**SCHEDULE D (FEC Form 3)**  
**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

NAME OF COMMITTEE (In Full)  
**Tarkanian for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Tarkanian, Danny, , ,</b>			Nature of Debt (Purpose): In-Kind to be reimbursed; Website Hosting Fee
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	Zip Code 89107-3214	

Outstanding Balance Beginning This Period 22.95	Transaction ID : <b>D6198BAE2E31D4288808</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 22.95

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Tarkanian, Danny, , ,</b>			Nature of Debt (Purpose): In-Kind to be reimbursed
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	Zip Code 89107-3214	

Outstanding Balance Beginning This Period 195.00	Transaction ID : <b>D1F07E7B84A6C45FDA86</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 195.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Tarkanian, Danny, , ,</b>			Nature of Debt (Purpose): In-Kind to be reimbursed; 2015 Henderson Chamber of Commerce Event
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	Zip Code 89107-3214	

Outstanding Balance Beginning This Period 150.00	Transaction ID : <b>DCFD68C34888E45358DC</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 150.00

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	▶	367.95
2) <b>TOTALS</b> This Period (last page this line number only) .....	▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) .....	▶	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) .....	▶	

**SCHEDULE D (FEC Form 3)**  
**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 134 OF 193
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**Tarkanian for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Tarkanian, Danny, , ,</b>			Nature of Debt (Purpose): In-Kind to be reimbursed
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	Zip Code 89107-3214	

Outstanding Balance Beginning This Period <input type="text" value="179.99"/>	Transaction ID : <b>D9554121113354AE6871</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="179.99"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Tarkanian, Danny, , ,</b>			Nature of Debt (Purpose): In-kind to be reimbursed; NV Policy Research Institute Event
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	Zip Code 89107-3214	

Outstanding Balance Beginning This Period <input type="text" value="275.00"/>	Transaction ID : <b>D92FC92C0EE6243EFAEA</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="275.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Tarkanian, Danny, , ,</b>			Nature of Debt (Purpose): In-Kind to be reimbursed; Radio Air Time
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	Zip Code 89107-3214	

Outstanding Balance Beginning This Period <input type="text" value="6741.50"/>	Transaction ID : <b>D92ECAC47EA2E4D84BCD</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="6741.50"/>

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	<input type="text" value="7196.49"/>
2) <b>TOTALS</b> This Period (last page this line number only) .....	<input type="text"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) .....	<input type="text"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) .....	<input type="text"/>

**SCHEDULE D (FEC Form 3)**  
**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

NAME OF COMMITTEE (In Full)  
**Tarkanian for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Tarkanian, Danny, , ,</b>			Nature of Debt (Purpose): In-Kind to be reimbursed; Meals
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	Zip Code 89107-3214	

Outstanding Balance Beginning This Period <input type="text" value="76.94"/>		<b>Transaction ID : D215F131143724710B99</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="76.94"/>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Tarkanian, Danny, , ,</b>			Nature of Debt (Purpose): In-Kind to be reimbursed; travel
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	Zip Code 89107-3214	

Outstanding Balance Beginning This Period <input type="text" value="49.35"/>		<b>Transaction ID : D9C2E391FA3BF42549D1</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="49.35"/>	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Tarkanian, Danny, , ,</b>			Nature of Debt (Purpose): In-Kind to be reimbursed; parking
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	Zip Code 89107-3214	

Outstanding Balance Beginning This Period <input type="text" value="2.00"/>		<b>Transaction ID : DFE74601C9B6D471699A</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="2.00"/>	

<b>1) SUBTOTALS</b> This Period This Page (optional) .....	<input type="text" value="128.29"/>
<b>2) TOTALS</b> This Period (last page this line number only) .....	<input type="text"/>
<b>3) TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) .....	<input type="text"/>
<b>4) ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) .....	<input type="text"/>

**SCHEDULE D (FEC Form 3)**  
**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

NAME OF COMMITTEE (In Full)  
**Tarkanian for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Tarkanian, Danny, , ,</b>			Nature of Debt (Purpose): In-Kind to be reimbursed; Travel
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	Zip Code 89107-3214	

Outstanding Balance Beginning This Period <input type="text" value="439.98"/>	Transaction ID : <b>D8AE766DFDBBA495A8E6</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="439.98"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Tarkanian, Danny, , ,</b>			Nature of Debt (Purpose): In-Kind to be reimbursed
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	Zip Code 89107-3214	

Outstanding Balance Beginning This Period <input type="text" value="19.99"/>	Transaction ID : <b>D793C349C20B240C59AD</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="19.99"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Tarkanian, Danny, , ,</b>			Nature of Debt (Purpose): In-Kind to be reimbursed; Communications
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	Zip Code 89107-3214	

Outstanding Balance Beginning This Period <input type="text" value="50.00"/>	Transaction ID : <b>DD452BF2B758C4500A16</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="50.00"/>

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	<input type="text" value="509.97"/>
2) <b>TOTALS</b> This Period (last page this line number only) .....	<input type="text"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) .....	<input type="text"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) .....	<input type="text"/>



**SCHEDULE D (FEC Form 3)**  
**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

NAME OF COMMITTEE (In Full)  
**Tarkanian for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Tarkanian, Danny, , ,</b>			Nature of Debt (Purpose): In-Kind to be reimbursed
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	Zip Code 89107-3214	

Outstanding Balance Beginning This Period <input type="text" value="34.02"/>	Transaction ID : <b>D2E4119CC29204CB8A9B</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="34.02"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Tarkanian, Danny, , ,</b>			Nature of Debt (Purpose): In-Kind to be reimbursed; Parking
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	Zip Code 89107-3214	

Outstanding Balance Beginning This Period <input type="text" value="2.00"/>	Transaction ID : <b>DAA82E55EF5114C28A01</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="2.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Tarkanian, Danny, , ,</b>			Nature of Debt (Purpose): In-Kind to be reimbursed; Meal
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	Zip Code 89107-3214	

Outstanding Balance Beginning This Period <input type="text" value="7.00"/>	Transaction ID : <b>DE25682EB8365415EA79</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="7.00"/>

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	<input type="text" value="43.02"/>
2) <b>TOTALS</b> This Period (last page this line number only) .....	<input type="text"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) .....	<input type="text"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) .....	<input type="text"/>

**SCHEDULE D (FEC Form 3)**  
**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 138 OF 193
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**Tarkanian for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Tarkanian, Danny, , ,</b>			Nature of Debt (Purpose): In-Kind to be reimbursed; Travel
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	Zip Code 89107-3214	

Outstanding Balance Beginning This Period <input type="text" value="378.36"/>	Transaction ID : <b>DF0AFFD67B5F642B1BF5</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="378.36"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Tarkanian, Danny, , ,</b>			Nature of Debt (Purpose): In-Kind to be reimbursed; Meal
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	Zip Code 89107-3214	

Outstanding Balance Beginning This Period <input type="text" value="28.04"/>	Transaction ID : <b>D38F2F0DC0FAB4CD7B8C</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="28.04"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Tarkanian, Danny, , ,</b>			Nature of Debt (Purpose): In-Kind to be reimbursed; Travel
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	Zip Code 89107-3214	

Outstanding Balance Beginning This Period <input type="text" value="54.72"/>	Transaction ID : <b>D9E0ED4A2E87E47BB842</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="54.72"/>

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	<input type="text" value="461.12"/>
2) <b>TOTALS</b> This Period (last page this line number only) .....	<input type="text"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) .....	<input type="text"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) .....	<input type="text"/>

**SCHEDULE D (FEC Form 3)**  
**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

NAME OF COMMITTEE (In Full)  
**Tarkanian for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Tarkanian, Danny, , ,</b>			Nature of Debt (Purpose): In-Kind to be reimbursed; Meals
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	Zip Code 89107-3214	

Outstanding Balance Beginning This Period <input type="text" value="29.19"/>	Transaction ID : <b>DF847367E32E24BD8A44</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="29.19"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Tarkanian, Danny, , ,</b>			Nature of Debt (Purpose): In-Kind to be reimbursed; Travel
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	Zip Code 89107-3214	

Outstanding Balance Beginning This Period <input type="text" value="57.89"/>	Transaction ID : <b>D1CE4B3899FB548C6B8C</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="57.89"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Tarkanian, Danny, , ,</b>			Nature of Debt (Purpose): In-Kind to be reimbursed; Meal
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	Zip Code 89107-3214	

Outstanding Balance Beginning This Period <input type="text" value="12.83"/>	Transaction ID : <b>D4FFD95D5A4044480B7E</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="12.83"/>

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	<input type="text" value="99.91"/>
2) <b>TOTALS</b> This Period (last page this line number only) .....	<input type="text"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) .....	<input type="text"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) .....	<input type="text"/>

**SCHEDULE D (FEC Form 3)**  
**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

NAME OF COMMITTEE (In Full)  
**Tarkanian for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Tarkanian, Danny, , ,</b>			Nature of Debt (Purpose): In-Kind to be reimbursed; Meal
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	Zip Code 89107-3214	

Outstanding Balance Beginning This Period <input type="text" value="11.91"/>		Transaction ID : <b>D55DEA71AF1F848D19F2</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="11.91"/>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Tarkanian, Danny, , ,</b>			Nature of Debt (Purpose): In-Kind to be reimbursed; Meal
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	Zip Code 89107-3214	

Outstanding Balance Beginning This Period <input type="text" value="6.46"/>		Transaction ID : <b>DA40300672429457A921</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="6.46"/>	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Tarkanian, Danny, , ,</b>			Nature of Debt (Purpose): In-Kind to be reimbursed; Travel
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	Zip Code 89107-3214	

Outstanding Balance Beginning This Period <input type="text" value="33.95"/>		Transaction ID : <b>D2DAD6F8FB8194676BCB</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="33.95"/>	

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	<input type="text" value="52.32"/>
2) <b>TOTALS</b> This Period (last page this line number only) .....	<input type="text"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) .....	<input type="text"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) .....	<input type="text"/>

**SCHEDULE D (FEC Form 3)**  
**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

NAME OF COMMITTEE (In Full)  
**Tarkanian for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Tarkanian, Danny, , ,</b>			Nature of Debt (Purpose): In-Kind to be reimbursed; Meal
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	Zip Code 89107-3214	

Outstanding Balance Beginning This Period 12.78		Transaction ID : <b>D3A163620B3B24239B44</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 12.78	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Tarkanian, Danny, , ,</b>			Nature of Debt (Purpose): In-Kind to be reimbursed; Travel
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	Zip Code 89107-3214	

Outstanding Balance Beginning This Period 378.00		Transaction ID : <b>D74735EF77A88442387F</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 378.00	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Tarkanian, Danny, , ,</b>			Nature of Debt (Purpose): In-Kind to be reimbursed; Meal
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	Zip Code 89107-3214	

Outstanding Balance Beginning This Period 6.43		Transaction ID : <b>D8C7AB86260944BD0B31</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 6.43	

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	▶	397.21
2) <b>TOTALS</b> This Period (last page this line number only) .....	▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) .....	▶	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) .....	▶	

**SCHEDULE D (FEC Form 3)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

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

FOR LINE NUMBER: (check only one)

9  
 10

NAME OF COMMITTEE (In Full)

**Tarkanian for Congress**

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

Tarkanian, Danny, , ,

Nature of Debt (Purpose):

In-Kind to be reimbursed; Taxi fare

Mailing Address 3008 Campbell Circle

City

Las Vegas

State

NV

Zip Code

89107-3214

Outstanding Balance Beginning This Period

20.00

Transaction ID : DC801278021A54DC0B59

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

20.00

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

Tarkanian, Danny, , ,

Nature of Debt (Purpose):

In-Kind to be reimbursed; Meal

Mailing Address 3008 Campbell Circle

City

Las Vegas

State

NV

Zip Code

89107-3214

Outstanding Balance Beginning This Period

15.46

Transaction ID : D84A6128AA054426CA86

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

15.46

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

Tarkanian, Danny, , ,

Nature of Debt (Purpose):

In-Kind to be reimbursed; Taxi Fare

Mailing Address 3008 Campbell Circle

City

Las Vegas

State

NV

Zip Code

89107-3214

Outstanding Balance Beginning This Period

18.00

Transaction ID : D7ABC9B3A9B1445D5B66

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

18.00

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

53.46

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

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

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

**SCHEDULE D (FEC Form 3)**  
**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

NAME OF COMMITTEE (In Full)  
**Tarkanian for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Tarkanian, Danny, , ,</b>			Nature of Debt (Purpose): In-Kind to be reimbursed; Taxi fare
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	Zip Code 89107-3214	

Outstanding Balance Beginning This Period <input type="text" value="7.28"/>	Transaction ID : <b>D659FE6ECD73548D195D</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="7.28"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Tarkanian, Danny, , ,</b>			Nature of Debt (Purpose): In-Kind to be reimbursed; Meal
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	Zip Code 89107-3214	

Outstanding Balance Beginning This Period <input type="text" value="5.95"/>	Transaction ID : <b>DA349B2C18A11449FAFA</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="5.95"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Tarkanian, Danny, , ,</b>			Nature of Debt (Purpose): In-Kind to be reimbursed; Meal
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	Zip Code 89107-3214	

Outstanding Balance Beginning This Period <input type="text" value="18.70"/>	Transaction ID : <b>D754E856E45614C528C9</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="18.70"/>

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	<input type="text" value="31.93"/>
2) <b>TOTALS</b> This Period (last page this line number only) .....	<input type="text"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) .....	<input type="text"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) .....	<input type="text"/>

**SCHEDULE D (FEC Form 3)**  
**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

NAME OF COMMITTEE (In Full)  
**Tarkanian for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Tarkanian, Danny, , ,</b>			Nature of Debt (Purpose): In-Kind to be reimbursed; taxi fare
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	Zip Code 89107-3214	

Outstanding Balance Beginning This Period <input type="text" value="17.30"/>	Transaction ID : <b>D7D1AB25206034072ACF</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="17.30"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Tarkanian, Danny, , ,</b>			Nature of Debt (Purpose): In-Kind to be reimbursed; taxi fare
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	Zip Code 89107-3214	

Outstanding Balance Beginning This Period <input type="text" value="10.82"/>	Transaction ID : <b>D21A83715C29C4245896</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="10.82"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Tarkanian, Danny, , ,</b>			Nature of Debt (Purpose): In-Kind to be reimbursed; taxi fare
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	Zip Code 89107-3214	

Outstanding Balance Beginning This Period <input type="text" value="13.27"/>	Transaction ID : <b>DF50C431C01FE426E86B</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="13.27"/>

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	<input type="text" value="41.39"/>
2) <b>TOTALS</b> This Period (last page this line number only) .....	<input type="text"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) .....	<input type="text"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) .....	<input type="text"/>



**SCHEDULE D (FEC Form 3)**  
**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

NAME OF COMMITTEE (In Full)  
**Tarkanian for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Tarkanian, Danny, , ,</b>			Nature of Debt (Purpose): In-Kind to be reimbursed; Taxi Fare
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	Zip Code 89107-3214	

Outstanding Balance Beginning This Period 20.00	Transaction ID : <b>DBF8C818D94354D50A10</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 20.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Tarkanian, Danny, , ,</b>			Nature of Debt (Purpose): In-Kind to be reimbursed; beverage
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	Zip Code 89107-3214	

Outstanding Balance Beginning This Period 8.09	Transaction ID : <b>D4E251765480A4ED9A5F</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 8.09

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Tarkanian, Danny, , ,</b>			Nature of Debt (Purpose): In-Kind to be reimbursed; beverage
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	Zip Code 89107-3214	

Outstanding Balance Beginning This Period 7.70	Transaction ID : <b>DD9032A45AAB74BCDADF</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 7.70

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	▶	35.79
2) <b>TOTALS</b> This Period (last page this line number only) .....	▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) .....	▶	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) .....	▶	

**SCHEDULE D (FEC Form 3)**  
**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

NAME OF COMMITTEE (In Full)  
**Tarkanian for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Tarkanian, Danny, , ,</b>			Nature of Debt (Purpose): In-Kind to be reimbursed; Meal
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	Zip Code 89107-3214	

Outstanding Balance Beginning This Period <input type="text" value="87.75"/>	Transaction ID : <b>DB8107AD1AC124795B1E</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="87.75"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Tarkanian, Danny, , ,</b>			Nature of Debt (Purpose): In-Kind to be reimbursed; Taxi fare
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	Zip Code 89107-3214	

Outstanding Balance Beginning This Period <input type="text" value="124.90"/>	Transaction ID : <b>D420718B9D054474997C</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="124.90"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Tarkanian, Danny, , ,</b>			Nature of Debt (Purpose): In-Kind to be reimbursed; Meal
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	Zip Code 89107-3214	

Outstanding Balance Beginning This Period <input type="text" value="12.32"/>	Transaction ID : <b>D97C7FFEB1C8342DAB17</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="12.32"/>

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	<input type="text" value="224.97"/>
2) <b>TOTALS</b> This Period (last page this line number only) .....	<input type="text"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) .....	<input type="text"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) .....	<input type="text"/>

**SCHEDULE D (FEC Form 3)**  
**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

NAME OF COMMITTEE (In Full)  
**Tarkanian for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Tarkanian, Danny, , ,</b>			Nature of Debt (Purpose): In-Kind to be reimbursed; Meal
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	Zip Code 89107-3214	

Outstanding Balance Beginning This Period <input type="text" value="7.87"/>		Transaction ID : DD5DCE911147C4DD7B8B	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="7.87"/>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Tarkanian, Danny, , ,</b>			Nature of Debt (Purpose): In-Kind to be reimbursed; Meal
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	Zip Code 89107-3214	

Outstanding Balance Beginning This Period <input type="text" value="48.29"/>		Transaction ID : DBB8DB96663CE4A99A40	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="48.29"/>	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Tarkanian, Danny, , ,</b>			Nature of Debt (Purpose): In-Kind to be reimbursed; taxi fare
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	Zip Code 89107-3214	

Outstanding Balance Beginning This Period <input type="text" value="5.58"/>		Transaction ID : DB3DC0744EE8D46E9BB5	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="5.58"/>	

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	<input type="text" value="61.74"/>
2) <b>TOTALS</b> This Period (last page this line number only) .....	<input type="text"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) .....	<input type="text"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) .....	<input type="text"/>

**SCHEDULE D (FEC Form 3)**  
**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 148 OF 193
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**Tarkanian for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Tarkanian, Danny, , ,</b>			Nature of Debt (Purpose): In-Kind to be reimbursed; Meal
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	Zip Code 89107-3214	

Outstanding Balance Beginning This Period <input type="text" value="22.01"/>		Transaction ID : <b>DD11F8CAC5D92428399F</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="22.01"/>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Tarkanian, Danny, , ,</b>			Nature of Debt (Purpose): In-Kind to be reimbursed; Taxi Fare
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	Zip Code 89107-3214	

Outstanding Balance Beginning This Period <input type="text" value="113.73"/>		Transaction ID : <b>D1922914373814341B28</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="113.73"/>	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Tarkanian, Danny, , ,</b>			Nature of Debt (Purpose): In-Kind to be reimbursed; Office supplies from Office Depot
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	Zip Code 89107-3214	

Outstanding Balance Beginning This Period <input type="text" value="77.08"/>		Transaction ID : <b>D14681B047DAA4DC9A10</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="77.08"/>	

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	<input type="text" value="212.82"/>
2) <b>TOTALS</b> This Period (last page this line number only) .....	<input type="text"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) .....	<input type="text"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) .....	<input type="text"/>

**SCHEDULE D (FEC Form 3)**  
**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

NAME OF COMMITTEE (In Full)  
**Tarkanian for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Tarkanian, Danny, , ,</b>			Nature of Debt (Purpose): In-Kind to be reimbursed; Meal
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	Zip Code 89107-3214	

Outstanding Balance Beginning This Period <input type="text" value="57.23"/>	Transaction ID : <b>D84D5F7EF103C4CC2B90</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="57.23"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Tarkanian, Danny, , ,</b>			Nature of Debt (Purpose): In-Kind to be reimbursed; travel
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	Zip Code 89107-3214	

Outstanding Balance Beginning This Period <input type="text" value="58.75"/>	Transaction ID : <b>DC0924B5F0139427CA71</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="58.75"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Tarkanian, Danny, , ,</b>			Nature of Debt (Purpose): In-Kind to be reimbursed; Radio-air time
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	Zip Code 89107-3214	

Outstanding Balance Beginning This Period <input type="text" value="540.00"/>	Transaction ID : <b>DE025286B105F446284D</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="540.00"/>

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	<input type="text" value="655.98"/>
2) <b>TOTALS</b> This Period (last page this line number only) .....	<input type="text"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) .....	<input type="text"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) .....	<input type="text"/>

**SCHEDULE D (FEC Form 3)**  
**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

NAME OF COMMITTEE (In Full)  
**Tarkanian for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Tarkanian, Danny, , ,</b>			Nature of Debt (Purpose): In-Kind to be reimbursed; Meal
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	Zip Code 89107-3214	

Outstanding Balance Beginning This Period <input type="text" value="13.50"/>		Transaction ID : D7DB61B9E33874E86A4A	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="13.50"/>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Tarkanian, Danny, , ,</b>			Nature of Debt (Purpose): In-Kind to be reimbursed; Meal
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	Zip Code 89107-3214	

Outstanding Balance Beginning This Period <input type="text" value="60.00"/>		Transaction ID : D8DB746A4B95D4A6EB89	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="60.00"/>	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Tarkanian, Danny, , ,</b>			Nature of Debt (Purpose): In-Kind to be reimbursed; Meal
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	Zip Code 89107-3214	

Outstanding Balance Beginning This Period <input type="text" value="22.81"/>		Transaction ID : D9905E6EC7CBF4EB8962	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="22.81"/>	

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	<input type="text" value="96.31"/>
2) <b>TOTALS</b> This Period (last page this line number only) .....	<input type="text"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) .....	<input type="text"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) .....	<input type="text"/>

**SCHEDULE D (FEC Form 3)**  
**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

NAME OF COMMITTEE (In Full)  
**Tarkanian for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Tarkanian, Danny, , ,</b>			Nature of Debt (Purpose): In-Kind to be reimbursed; Website Services
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	Zip Code 89107-3214	

Outstanding Balance Beginning This Period <input type="text" value="55.00"/>	Transaction ID : <b>DD9A4750C8EC94B1589F</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="55.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Tarkanian, Danny, , ,</b>			Nature of Debt (Purpose): In-Kind to be reimbursed; Meal
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	Zip Code 89107-3214	

Outstanding Balance Beginning This Period <input type="text" value="30.00"/>	Transaction ID : <b>DE8C660D3FA0A406A9EA</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="30.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Tarkanian, Danny, , ,</b>			Nature of Debt (Purpose): In-Kind to be reimbursed; Meal
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	Zip Code 89107-3214	

Outstanding Balance Beginning This Period <input type="text" value="16.97"/>	Transaction ID : <b>DEB0229DAA44E4DB4B6C</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="16.97"/>

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	<input type="text" value="101.97"/>
2) <b>TOTALS</b> This Period (last page this line number only) .....	<input type="text"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) .....	<input type="text"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) .....	<input type="text"/>

**SCHEDULE D (FEC Form 3)**  
**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 152 OF 193
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**Tarkanian for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Tarkanian, Danny, , ,</b>			Nature of Debt (Purpose): In-Kind to be reimbursed; Meal
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	Zip Code 89107-3214	

Outstanding Balance Beginning This Period <input type="text" value="15.00"/>	Transaction ID : <b>D26492E337EA244388D0</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="15.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Tarkanian, Danny, , ,</b>			Nature of Debt (Purpose): In-Kind to be reimbursed; Website Services
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	Zip Code 89107-3214	

Outstanding Balance Beginning This Period <input type="text" value="55.00"/>	Transaction ID : <b>D544614F8BC8B4188B4A</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="55.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Tarkanian, Danny, , ,</b>			Nature of Debt (Purpose): In-Kind to be reimbursed; Campaign materials
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	Zip Code 89107-3214	

Outstanding Balance Beginning This Period <input type="text" value="1786.00"/>	Transaction ID : <b>D3BF0F5393E6243EBA38</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="1786.00"/>

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	<input type="text" value="1856.00"/>
2) <b>TOTALS</b> This Period (last page this line number only) .....	<input type="text"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) .....	<input type="text"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) .....	<input type="text"/>



**SCHEDULE D (FEC Form 3)**  
**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 153 OF 193
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**Tarkanian for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Tarkanian, Danny, , ,</b>			Nature of Debt (Purpose): In-Kind to be reimbursed; Website Services
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	Zip Code 89107-3214	

Outstanding Balance Beginning This Period 55.00	Transaction ID : <b>DB69F739C93724A6DA92</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 55.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Tarkanian, Danny, , ,</b>			Nature of Debt (Purpose): In-Kind to be reimbursed; travel
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	Zip Code 89107-3214	

Outstanding Balance Beginning This Period 25.00	Transaction ID : <b>D0561DB86129947DFBBO</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 25.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Tarkanian, Danny, , ,</b>			Nature of Debt (Purpose): In-Kind to be reimbursed; Meal
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	Zip Code 89107-3214	

Outstanding Balance Beginning This Period 8.78	Transaction ID : <b>D406639B3ED5E42D0BF5</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 8.78

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	88.78
2) <b>TOTALS</b> This Period (last page this line number only) .....	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) .....	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) .....	

**SCHEDULE D (FEC Form 3)**  
**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

NAME OF COMMITTEE (In Full)  
**Tarkanian for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Tarkanian, Danny, , ,</b>			Nature of Debt (Purpose): In-Kind to be reimbursed; parking
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	Zip Code 89107-3214	

Outstanding Balance Beginning This Period <input type="text" value="15.00"/>	Transaction ID : <b>D7AEE3544F8664B249E9</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="15.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Tarkanian, Danny, , ,</b>			Nature of Debt (Purpose): In-Kind to be reimbursed; car rental
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	Zip Code 89107-3214	

Outstanding Balance Beginning This Period <input type="text" value="38.90"/>	Transaction ID : <b>DD037DC92830C442E874</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="38.90"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Tarkanian, Danny, , ,</b>			Nature of Debt (Purpose): In-Kind to be reimbursed; travel
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	Zip Code 89107-3214	

Outstanding Balance Beginning This Period <input type="text" value="7.59"/>	Transaction ID : <b>DA7BFE3C0ED2543F99BA</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="7.59"/>

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	<input type="text" value="61.49"/>
2) <b>TOTALS</b> This Period (last page this line number only) .....	<input type="text"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) .....	<input type="text"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) .....	<input type="text"/>

**SCHEDULE D (FEC Form 3)**  
**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 155 OF 193
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**Tarkanian for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Tarkanian, Danny, , ,</b>			Nature of Debt (Purpose): In-Kind to be reimbursed; Media
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	Zip Code 89107-3214	

Outstanding Balance Beginning This Period <input type="text" value="2.00"/>		Transaction ID : <b>DDAF316DC6EED4534B6A</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="2.00"/>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Tarkanian, Danny, , ,</b>			Nature of Debt (Purpose): In-Kind to be reimbursed; Meal
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	Zip Code 89107-3214	

Outstanding Balance Beginning This Period <input type="text" value="17.67"/>		Transaction ID : <b>DF01B74CCA0BE485DB87</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="17.67"/>	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Tarkanian, Danny, , ,</b>			Nature of Debt (Purpose): In-Kind to be reimbursed; travel
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	Zip Code 89107-3214	

Outstanding Balance Beginning This Period <input type="text" value="46.02"/>		Transaction ID : <b>D60C7D02DCFD74030BF2</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="46.02"/>	

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	<input type="text" value="65.69"/>
2) <b>TOTALS</b> This Period (last page this line number only) .....	<input type="text"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) .....	<input type="text"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) .....	<input type="text"/>

**SCHEDULE D (FEC Form 3)**  
**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

NAME OF COMMITTEE (In Full)  
**Tarkanian for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Tarkanian, Danny, , ,</b>			Nature of Debt (Purpose): In-Kind to be reimbursed; Meal
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	Zip Code 89107-3214	

Outstanding Balance Beginning This Period <input type="text" value="30.47"/>		Transaction ID : <b>D7FD5B2EFA4EE4995810</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="30.47"/>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Tarkanian, Danny, , ,</b>			Nature of Debt (Purpose): In-Kind to be reimbursed; Meal
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	Zip Code 89107-3214	

Outstanding Balance Beginning This Period <input type="text" value="11.20"/>		Transaction ID : <b>D6FD4708FFE2B4B55BE6</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="11.20"/>	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Tarkanian, Danny, , ,</b>			Nature of Debt (Purpose): In-Kind to be reimbursed; Meal
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	Zip Code 89107-3214	

Outstanding Balance Beginning This Period <input type="text" value="26.77"/>		Transaction ID : <b>D60C4798EBD2B42C987D</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="26.77"/>	

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	<input type="text" value="68.44"/>
2) <b>TOTALS</b> This Period (last page this line number only) .....	<input type="text"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) .....	<input type="text"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) .....	<input type="text"/>

**SCHEDULE D (FEC Form 3)**  
**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

NAME OF COMMITTEE (In Full)  
**Tarkanian for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Tarkanian, Danny, , ,</b>			Nature of Debt (Purpose): In-Kind to be reimbursed; travel
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	Zip Code 89107-3214	

Outstanding Balance Beginning This Period <input type="text" value="49.75"/>		Transaction ID : <b>DF219D37AAF8743518D7</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="49.75"/>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Tarkanian, Danny, , ,</b>			Nature of Debt (Purpose): In-Kind to be reimbursed; travel
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	Zip Code 89107-3214	

Outstanding Balance Beginning This Period <input type="text" value="53.52"/>		Transaction ID : <b>DD9BF77EC5148423FB4C</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="53.52"/>	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Tarkanian, Danny, , ,</b>			Nature of Debt (Purpose): In-Kind to be reimbursed; Radio-air time
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	Zip Code 89107-3214	

Outstanding Balance Beginning This Period <input type="text" value="1200.00"/>		Transaction ID : <b>DC7BF4E8270954FC2ACC</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="1200.00"/>	

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	<input type="text" value="1303.27"/>
2) <b>TOTALS</b> This Period (last page this line number only) .....	<input type="text"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) .....	<input type="text"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) .....	<input type="text"/>

**SCHEDULE D (FEC Form 3)**  
**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 158 OF 193
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**Tarkanian for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Tarkanian, Danny, , ,</b>			Nature of Debt (Purpose): In-Kind to be reimbursed; Website Services
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	Zip Code 89107-3214	

Outstanding Balance Beginning This Period <input type="text" value="55.00"/>	Transaction ID : <b>DB10247390A084B68BAF</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="55.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Tarkanian, Danny, , ,</b>			Nature of Debt (Purpose): In-Kind to be reimbursed; Postage
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	Zip Code 89107-3214	

Outstanding Balance Beginning This Period <input type="text" value="64.60"/>	Transaction ID : <b>D2605AE33C4634BAFA07</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="64.60"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Tarkanian, Danny, , ,</b>			Nature of Debt (Purpose): In-Kind to be reimbursed; Meal
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	Zip Code 89107-3214	

Outstanding Balance Beginning This Period <input type="text" value="21.00"/>	Transaction ID : <b>D5C07834BF8C446EE989</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="21.00"/>

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	<input type="text" value="140.60"/>
2) <b>TOTALS</b> This Period (last page this line number only) .....	<input type="text"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) .....	<input type="text"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) .....	<input type="text"/>

**SCHEDULE D (FEC Form 3)**  
**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 159 OF 193
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**Tarkanian for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Tarkanian, Danny, , ,</b>			Nature of Debt (Purpose): In-Kind to be reimbursed; stationary
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	Zip Code 89107-3214	

Outstanding Balance Beginning This Period 42.03	Transaction ID : <b>D7E1C4A0899C54B36BB4</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 42.03

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Tarkanian, Danny, , ,</b>			Nature of Debt (Purpose): In-Kind to be reimbursed; fundraiser supplies/food
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	Zip Code 89107-3214	

Outstanding Balance Beginning This Period 141.05	Transaction ID : <b>DBDCD451CD3F1468BA7D</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 141.05

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Tarkanian, Danny, , ,</b>			Nature of Debt (Purpose): In-Kind to be reimbursed. Campaign Logo Materials
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	Zip Code 89107-3214	

Outstanding Balance Beginning This Period 120.00	Transaction ID : <b>DC3872272143C4851A41</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 120.00

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	▶	303.08
2) <b>TOTALS</b> This Period (last page this line number only) .....	▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) .....	▶	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) .....	▶	

**SCHEDULE D (FEC Form 3)**  
**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

NAME OF COMMITTEE (In Full)  
**Tarkanian for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Tarkanian, Danny, , ,</b>			Nature of Debt (Purpose): In-Kind to be reimbursed; Radio Air Time
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	Zip Code 89107-3214	

Outstanding Balance Beginning This Period <input type="text" value="6531.90"/>	Transaction ID : <b>D62CBC6E275A64B639B4</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="6531.90"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Tarkanian, Danny, , ,</b>			Nature of Debt (Purpose): In-Kind to be reimbursed; Radio Air Time
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	Zip Code 89107-3214	

Outstanding Balance Beginning This Period <input type="text" value="1959.57"/>	Transaction ID : <b>DA6AA7FD6A19640E4954</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="1959.57"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Tarkanian, Danny, , ,</b>			Nature of Debt (Purpose): In-Kind to be reimbursed; Meals
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	Zip Code 89107-3214	

Outstanding Balance Beginning This Period <input type="text" value="75.67"/>	Transaction ID : <b>DDC41FE3AF7334AA7983</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="75.67"/>

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	<input type="text" value="8567.14"/>
2) <b>TOTALS</b> This Period (last page this line number only) .....	<input type="text"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) .....	<input type="text"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) .....	<input type="text"/>



**SCHEDULE D (FEC Form 3)**  
**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 161 OF 193
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**Tarkanian for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Tarkanian, Danny, , ,</b>			Nature of Debt (Purpose): In-Kind to be reimbursed; Postage
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	Zip Code 89107-3214	

Outstanding Balance Beginning This Period 49.00	Transaction ID : <b>D42A243563FA74722BE1</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 49.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Tarkanian, Danny, , ,</b>			Nature of Debt (Purpose): In-Kind to be reimbursed; Meal
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	Zip Code 89107-3214	

Outstanding Balance Beginning This Period 39.75	Transaction ID : <b>DE73E5890015A4852893</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 39.75

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Tarkanian, Danny, , ,</b>			Nature of Debt (Purpose): In-Kind to be reimbursed; State of the City 2016 Event
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	Zip Code 89107-3214	

Outstanding Balance Beginning This Period 45.00	Transaction ID : <b>DC8AD62D0F42D43FE970</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 45.00

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	▶	133.75
2) <b>TOTALS</b> This Period (last page this line number only) .....	▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) .....	▶	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) .....	▶	

**SCHEDULE D (FEC Form 3)**  
**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

NAME OF COMMITTEE (In Full)  
**Tarkanian for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Tarkanian, Danny, , ,</b>			Nature of Debt (Purpose): In-Kind to be reimbursed; State of the City 2016 Event
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	Zip Code 89107-3214	

Outstanding Balance Beginning This Period <input type="text" value="45.00"/>	Transaction ID : <b>DA3F531103E344CD4AA3</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="45.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Tarkanian, Danny, , ,</b>			Nature of Debt (Purpose): In-Kind to be reimbursed; Active Rep. Women's Meeting. Entry for Charisa Williams.
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	Zip Code 89107-3214	

Outstanding Balance Beginning This Period <input type="text" value="35.00"/>	Transaction ID : <b>D7D5A252E946241AE898</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="35.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Tarkanian, Danny, , ,</b>			Nature of Debt (Purpose): In-Kind to be reimbursed; Active Rep. Women's Meeting. Entry for Candidate.
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	Zip Code 89107-3214	

Outstanding Balance Beginning This Period <input type="text" value="35.00"/>	Transaction ID : <b>D20C4C7CF8DB9439C9C7</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="35.00"/>

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	<input type="text" value="115.00"/>
2) <b>TOTALS</b> This Period (last page this line number only) .....	<input type="text"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) .....	<input type="text"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) .....	<input type="text"/>

**SCHEDULE D (FEC Form 3)**  
**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 163 OF 193
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**Tarkanian for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Tarkanian, Danny, , ,</b>			Nature of Debt (Purpose): In-Kind to be reimbursed; Active Rep. Women's Meeting. Entry for Judy Flynn.
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	Zip Code 89107-3214	

Outstanding Balance Beginning This Period <input type="text" value="35.00"/>	Transaction ID : D22E5A513193E4CA0AD6	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="35.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Tarkanian, Danny, , ,</b>			Nature of Debt (Purpose): In-Kind to be reimbursed; Voter Registration Forms
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	Zip Code 89107-3214	

Outstanding Balance Beginning This Period <input type="text" value="14.00"/>	Transaction ID : D62D5EB7FF90143C8969	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="14.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Tarkanian, Danny, , ,</b>			Nature of Debt (Purpose): In-Kind to be reimbursed; ACC Luncheon
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	Zip Code 89107-3214	

Outstanding Balance Beginning This Period <input type="text" value="45.00"/>	Transaction ID : DC54ECC77DF574097A49	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="45.00"/>

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	<input type="text" value="94.00"/>
2) <b>TOTALS</b> This Period (last page this line number only) .....	<input type="text"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) .....	<input type="text"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) .....	<input type="text"/>

**SCHEDULE D (FEC Form 3)**  
**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

NAME OF COMMITTEE (In Full)  
**Tarkanian for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Tarkanian, Danny, , ,</b>			Nature of Debt (Purpose): In-Kind to be reimbursed; travel
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	Zip Code 89107-3214	

Outstanding Balance Beginning This Period 45.00	Transaction ID : <b>D408F0DF76BDB49F8AB7</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 45.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Tarkanian, Danny, , ,</b>			Nature of Debt (Purpose): In-Kind to be reimbursed; Meal
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	Zip Code 89107-3214	

Outstanding Balance Beginning This Period 24.50	Transaction ID : <b>DF23F4D6891C344EDB52</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 24.50

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Tarkanian, Danny, , ,</b>			Nature of Debt (Purpose): In-Kind to be reimbursed; Beverages
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	Zip Code 89107-3214	

Outstanding Balance Beginning This Period 18.39	Transaction ID : <b>DFC3238B334924AC7BF4</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 18.39

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	▶	87.89
2) <b>TOTALS</b> This Period (last page this line number only) .....	▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) .....	▶	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) .....	▶	

**SCHEDULE D (FEC Form 3)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

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

FOR LINE NUMBER: (check only one)

9  
 10

NAME OF COMMITTEE (In Full)

**Tarkanian for Congress**

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

Tarkanian, Danny, , ,

Nature of Debt (Purpose):

In-Kind to be reimbursed; travel

Mailing Address 3008 Campbell Circle

City  
Las Vegas

State  
NV

Zip Code  
89107-3214

Outstanding Balance Beginning This Period

30.00

Transaction ID : DD8AA46E3E9684598878

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

30.00

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

Tarkanian, Danny, , ,

Nature of Debt (Purpose):

In-Kind to be reimbursed; travel

Mailing Address 3008 Campbell Circle

City  
Las Vegas

State  
NV

Zip Code  
89107-3214

Outstanding Balance Beginning This Period

40.00

Transaction ID : D87799767C7E04474B1D

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

40.00

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

Tarkanian, Danny, , ,

Nature of Debt (Purpose):

In-Kind to be reimbursed; meals

Mailing Address 3008 Campbell Circle

City  
Las Vegas

State  
NV

Zip Code  
89107-3214

Outstanding Balance Beginning This Period

14.09

Transaction ID : D960BC5F235104ED6B06

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

14.09

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

84.09

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

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

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

**SCHEDULE D (FEC Form 3)**  
**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

NAME OF COMMITTEE (In Full)  
**Tarkanian for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Tarkanian, Danny, , ,</b>			Nature of Debt (Purpose): In-Kind to be reimbursed; Meals
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	Zip Code 89107-3214	

Outstanding Balance Beginning This Period <input type="text" value="18.34"/>	Transaction ID : <b>D73983F686D76494F886</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="18.34"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Tarkanian, Danny, , ,</b>			Nature of Debt (Purpose): In-Kind to be reimbursed; beverage
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	Zip Code 89107-3214	

Outstanding Balance Beginning This Period <input type="text" value="7.00"/>	Transaction ID : <b>D32A898E3C1E348E4B0C</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="7.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Tarkanian, Danny, , ,</b>			Nature of Debt (Purpose): In-Kind to be reimbursed; Travel
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	Zip Code 89107-3214	

Outstanding Balance Beginning This Period <input type="text" value="30.00"/>	Transaction ID : <b>D8ED923B2161B4B128A9</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="30.00"/>

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	<input type="text" value="55.34"/>
2) <b>TOTALS</b> This Period (last page this line number only) .....	<input type="text"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) .....	<input type="text"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) .....	<input type="text"/>

**SCHEDULE D (FEC Form 3)**  
**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

NAME OF COMMITTEE (In Full)  
**Tarkanian for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Tarkanian, Danny, , ,</b>			Nature of Debt (Purpose): In-Kind to be reimbursed; travel
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	Zip Code 89107-3214	

Outstanding Balance Beginning This Period 40.00		Transaction ID : <b>DBDC9B3C72E6945B388B</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 40.00	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Tarkanian, Danny, , ,</b>			Nature of Debt (Purpose): In-Kind to be reimbursed; Parking
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	Zip Code 89107-3214	

Outstanding Balance Beginning This Period 7.00		Transaction ID : <b>D271673F42855430EB32</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 7.00	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Tarkanian, Danny, , ,</b>			Nature of Debt (Purpose): In-Kind to be reimbursed; Parking
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	Zip Code 89107-3214	

Outstanding Balance Beginning This Period 5.00		Transaction ID : <b>DBD317467AF49404F80A</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 5.00	

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	▶	52.00
2) <b>TOTALS</b> This Period (last page this line number only) .....	▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) .....	▶	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) .....	▶	

**SCHEDULE D (FEC Form 3)**  
**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

NAME OF COMMITTEE (In Full)  
**Tarkanian for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Tarkanian, Danny, , ,</b>			Nature of Debt (Purpose): In-Kind to be reimbursed; Meal
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	Zip Code 89107-3214	

Outstanding Balance Beginning This Period <input type="text" value="7.36"/>	Transaction ID : <b>D1723BAFC0611488FBC1</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="7.36"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Tarkanian, Danny, , ,</b>			Nature of Debt (Purpose): In-Kind to be reimbursed; Campaign materials.
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	Zip Code 89107-3214	

Outstanding Balance Beginning This Period <input type="text" value="200.25"/>	Transaction ID : <b>DD170DBF874D14A9FA69</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="200.25"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Tarkanian, Danny, , ,</b>			Nature of Debt (Purpose): In-Kind to be reimbursed; Airline Ticket Fee for Candidate Travel
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	Zip Code 89107-3214	

Outstanding Balance Beginning This Period <input type="text" value="439.96"/>	Transaction ID : <b>DDE0B664396D540ECA4F</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="439.96"/>

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	<input type="text" value="647.57"/>
2) <b>TOTALS</b> This Period (last page this line number only) .....	<input type="text"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) .....	<input type="text"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) .....	<input type="text"/>



**SCHEDULE D (FEC Form 3)**  
**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

NAME OF COMMITTEE (In Full)  
**Tarkanian for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Tarkanian, Danny, , ,</b>			Nature of Debt (Purpose): In-Kind to be reimbursed; purchase of duplicate office keys
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	Zip Code 89107-3214	

Outstanding Balance Beginning This Period 5.78	Transaction ID : DAE594836B5C641FF967	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 5.78

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Tarkanian, Danny, , ,</b>			Nature of Debt (Purpose): In-Kind to be reimbursed; Active Rep. Women's Meeting. Entry for Amy Tarkanian.
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	Zip Code 89107-3214	

Outstanding Balance Beginning This Period 35.00	Transaction ID : DBAD1944B03F340E7B1B	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 35.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Tarkanian, Danny, , ,</b>			Nature of Debt (Purpose): In-Kind to be reimbursed; Boulder City Republican Women's Luncheon
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	Zip Code 89107-3214	

Outstanding Balance Beginning This Period 21.00	Transaction ID : DC3DF7B7C36A44B23B66	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 21.00

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	61.78
2) <b>TOTALS</b> This Period (last page this line number only) .....	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) .....	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) .....	

**SCHEDULE D (FEC Form 3)**  
**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

NAME OF COMMITTEE (In Full)  
**Tarkanian for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Tarkanian, Danny, , ,</b>			Nature of Debt (Purpose): In-Kind to be reimbursed; travel
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	Zip Code 89107-3214	

Outstanding Balance Beginning This Period 38.00	Transaction ID : <b>DF0A77402A40540B39A9</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 38.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Tarkanian, Danny, , ,</b>			Nature of Debt (Purpose): In-Kind to be reimbursed; SHRW February Lunch. Entry for Candidate's guest
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	Zip Code 89107-3214	

Outstanding Balance Beginning This Period 32.49	Transaction ID : <b>D01BB70677B194B6AAAC</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 32.49

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Tarkanian, Danny, , ,</b>			Nature of Debt (Purpose): In-Kind to be reimbursed; Meal
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	Zip Code 89107-3214	

Outstanding Balance Beginning This Period 15.97	Transaction ID : <b>DF0C7ED00FB004C0B8EF</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 15.97

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	▶	86.46
2) <b>TOTALS</b> This Period (last page this line number only) .....	▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) .....	▶	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) .....	▶	

**SCHEDULE D (FEC Form 3)**  
**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 171 OF 193
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**Tarkanian for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Tarkanian, Danny, , ,</b>			Nature of Debt (Purpose): In-Kind to be reimbursed; SHRW February Lunch. Candidate entry.
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	Zip Code 89107-3214	

Outstanding Balance Beginning This Period 32.49	Transaction ID : D3A37D02C404C4CBDBAA	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 32.49

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Tarkanian, Danny, , ,</b>			Nature of Debt (Purpose): In-Kind to be reimbursed; travel
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	Zip Code 89107-3214	

Outstanding Balance Beginning This Period 38.21	Transaction ID : DD80A75D7B84F4771BC9	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 38.21

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Tarkanian, Danny, , ,</b>			Nature of Debt (Purpose): In-Kind to be reimbursed; Meals
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	Zip Code 89107-3214	

Outstanding Balance Beginning This Period 145.35	Transaction ID : DD77A030A2FD94615928	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 145.35

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	▶	216.05
2) <b>TOTALS</b> This Period (last page this line number only) .....	▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) .....	▶	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) .....	▶	

**SCHEDULE D (FEC Form 3)**  
**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 172 OF 193
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**Tarkanian for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Tarkanian, Danny, , ,</b>			Nature of Debt (Purpose): In-Kind to be reimbursed; travel
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	Zip Code 89107-3214	

Outstanding Balance Beginning This Period <input type="text" value="28.87"/>	Transaction ID : <b>D32D570A9F30E4AF0B1E</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="28.87"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Tarkanian, Danny, , ,</b>			Nature of Debt (Purpose): In-Kind to be reimbursed; Meal
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	Zip Code 89107-3214	

Outstanding Balance Beginning This Period <input type="text" value="18.07"/>	Transaction ID : <b>D44F406BF0995485CB47</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="18.07"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Tarkanian, Danny, , ,</b>			Nature of Debt (Purpose): In-Kind to be reimbursed; office supplies purchased from Walmart
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	Zip Code 89107-3214	

Outstanding Balance Beginning This Period <input type="text" value="7.16"/>	Transaction ID : <b>D4D38560A0F684E65ABC</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="7.16"/>

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	<input type="text" value="54.10"/>
2) <b>TOTALS</b> This Period (last page this line number only) .....	<input type="text"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) .....	<input type="text"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) .....	<input type="text"/>

**SCHEDULE D (FEC Form 3)**  
**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

NAME OF COMMITTEE (In Full)  
**Tarkanian for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Tarkanian, Danny, , ,</b>			Nature of Debt (Purpose): In-Kind to be reimbursed; Beverage
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	Zip Code 89107-3214	

Outstanding Balance Beginning This Period <input type="text" value="2.19"/>	Transaction ID : <b>D14C4A6AC4FCE4030AE2</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="2.19"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Tarkanian, Danny, , ,</b>			Nature of Debt (Purpose): In-Kind to be reimbursed; Catering for 2/26/16 Fundraiser
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	Zip Code 89107-3214	

Outstanding Balance Beginning This Period <input type="text" value="920.70"/>	Transaction ID : <b>D57A9AFD90FAE4F21853</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="920.70"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Tarkanian, Danny, , ,</b>			Nature of Debt (Purpose): In-Kind to be reimbursed; Meal
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	Zip Code 89107-3214	

Outstanding Balance Beginning This Period <input type="text" value="30.22"/>	Transaction ID : <b>D5D1938E2FEB44C03A7F</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="30.22"/>

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	<input type="text" value="953.11"/>
2) <b>TOTALS</b> This Period (last page this line number only) .....	<input type="text"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) .....	<input type="text"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) .....	<input type="text"/>

**SCHEDULE D (FEC Form 3)**  
**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 174 OF 193
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**Tarkanian for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Tarkanian, Danny, , ,</b>			Nature of Debt (Purpose): In-Kind to be reimbursed; travel
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	Zip Code 89107-3214	

Outstanding Balance Beginning This Period <input type="text" value="10.01"/>		Transaction ID : <b>D50FA83027A0946C4840</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="10.01"/>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Tarkanian, Danny, , ,</b>			Nature of Debt (Purpose): In-Kind to be reimbursed; Beverage
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	Zip Code 89107-3214	

Outstanding Balance Beginning This Period <input type="text" value="4.48"/>		Transaction ID : <b>DCFB4BC532C9E4977A9A</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="4.48"/>	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Tarkanian, Danny, , ,</b>			Nature of Debt (Purpose): In-Kind to be reimbursed; Office supplies purchased from Big Lots!
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	Zip Code 89107-3214	

Outstanding Balance Beginning This Period <input type="text" value="11.57"/>		Transaction ID : <b>DC6FBB638ABD48C987D</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="11.57"/>	

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	<input type="text" value="26.06"/>
2) <b>TOTALS</b> This Period (last page this line number only) .....	<input type="text"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) .....	<input type="text"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) .....	<input type="text"/>

**SCHEDULE D (FEC Form 3)**  
**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

NAME OF COMMITTEE (In Full)  
**Tarkanian for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Tarkanian, Danny, , ,</b>			Nature of Debt (Purpose): In-Kind to be reimbursed; office supplies purchased from Family Dollar
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	Zip Code 89107-3214	

Outstanding Balance Beginning This Period <input type="text" value="56.45"/>	Transaction ID : <b>DD6207C76F2ED4777AB3</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="56.45"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Tarkanian, Danny, , ,</b>			Nature of Debt (Purpose): In-Kind to be reimbursed; travel
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	Zip Code 89107-3214	

Outstanding Balance Beginning This Period <input type="text" value="99.00"/>	Transaction ID : <b>D6436AAA6C7B84F2C9CF</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="99.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Tarkanian, Danny, , ,</b>			Nature of Debt (Purpose): In-Kind to be reimbursed; travel
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	Zip Code 89107-3214	

Outstanding Balance Beginning This Period <input type="text" value="31.00"/>	Transaction ID : <b>D86B4E07EA09B41218A7</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="31.00"/>

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	<input type="text" value="186.45"/>
2) <b>TOTALS</b> This Period (last page this line number only) .....	<input type="text"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) .....	<input type="text"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) .....	<input type="text"/>

**SCHEDULE D (FEC Form 3)**  
**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

NAME OF COMMITTEE (In Full)  
**Tarkanian for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Tarkanian, Danny, , ,</b>			Nature of Debt (Purpose): In-Kind to be reimbursed; travel
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	Zip Code 89107-3214	

Outstanding Balance Beginning This Period 31.60	Transaction ID : <b>D5374C470E6D5483E899</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 31.60

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Tarkanian, Danny, , ,</b>			Nature of Debt (Purpose): In-Kind to be reimbursed; Clark County GOP Convention. Candidate Entry.
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	Zip Code 89107-3214	

Outstanding Balance Beginning This Period 40.00	Transaction ID : <b>D59D1789A43F145DBB43</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 40.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Tarkanian, Danny, , ,</b>			Nature of Debt (Purpose): In-Kind to be reimbursed; Clark County GOP Convention. Entry for Candidate's Guest.
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	Zip Code 89107-3214	

Outstanding Balance Beginning This Period 40.00	Transaction ID : <b>D0A90BECB09554AEFB15</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 40.00

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	▶	111.60
2) <b>TOTALS</b> This Period (last page this line number only) .....	▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) .....	▶	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) .....	▶	



**SCHEDULE D (FEC Form 3)**  
**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

NAME OF COMMITTEE (In Full)  
**Tarkanian for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Tarkanian, Danny, , ,</b>			Nature of Debt (Purpose): In-Kind to be reimbursed; 2016 Chinese New Year Gala
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	Zip Code 89107-3214	

Outstanding Balance Beginning This Period 88.00	Transaction ID : <b>D2B15377B8DA241949A6</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 88.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Tarkanian, Danny, , ,</b>			Nature of Debt (Purpose): In-Kind to be reimbursed; supplies purchased for office repairs
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	Zip Code 89107-3214	

Outstanding Balance Beginning This Period 4.28	Transaction ID : <b>D2F07FB410874460C938</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 4.28

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Tarkanian, Danny, , ,</b>			Nature of Debt (Purpose): In-Kind to be reimbursed; Valet Parking service for 2/26/16 Fundraiser
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	Zip Code 89107-3214	

Outstanding Balance Beginning This Period 810.00	Transaction ID : <b>D44D7157B3ADB44E58EA</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 810.00

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	▶	902.28
2) <b>TOTALS</b> This Period (last page this line number only) .....	▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) .....	▶	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) .....	▶	

**SCHEDULE D (FEC Form 3)**  
**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

NAME OF COMMITTEE (In Full)  
**Tarkanian for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Tarkanian, Danny, , ,</b>			Nature of Debt (Purpose): In-Kind to be reimbursed; Call Center snacks
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	Zip Code 89107-3214	

Outstanding Balance Beginning This Period <input type="text" value="13.96"/>	Transaction ID : <b>D5701E9574C34410FA4A</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="13.96"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Tarkanian, Danny, , ,</b>			Nature of Debt (Purpose): In-Kind to be reimbursed; Voter registration forms
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	Zip Code 89107-3214	

Outstanding Balance Beginning This Period <input type="text" value="14.00"/>	Transaction ID : <b>DAD79FB10FDC84AD6A0D</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="14.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Tarkanian, Danny, , ,</b>			Nature of Debt (Purpose): In-Kind to be reimbursed; Office snacks
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	Zip Code 89107-3214	

Outstanding Balance Beginning This Period <input type="text" value="7.59"/>	Transaction ID : <b>D83B8A25373CE4DBB9ED</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="7.59"/>

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	<input type="text" value="35.55"/>
2) <b>TOTALS</b> This Period (last page this line number only) .....	<input type="text"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) .....	<input type="text"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) .....	<input type="text"/>

**SCHEDULE D (FEC Form 3)**  
**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

NAME OF COMMITTEE (In Full)  
**Tarkanian for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Tarkanian, Danny, , ,</b>			Nature of Debt (Purpose): In-Kind to be reimbursed; Meals
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	Zip Code 89107-3214	

Outstanding Balance Beginning This Period <input type="text" value="30.68"/>	Transaction ID : <b>DF2E44EB245E043FEA77</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="30.68"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Tarkanian, Danny, , ,</b>			Nature of Debt (Purpose): In-Kind to be reimbursed; Henderson Chamber of Commerce Network Breakfast
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	Zip Code 89107-3214	

Outstanding Balance Beginning This Period <input type="text" value="28.00"/>	Transaction ID : <b>D8306415BC41C4785901</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="28.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Tarkanian, Danny, , ,</b>			Nature of Debt (Purpose): In-Kind to be reimbursed; Meal
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	Zip Code 89107-3214	

Outstanding Balance Beginning This Period <input type="text" value="10.80"/>	Transaction ID : <b>D18EE1FD18E4E4EECA25</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="10.80"/>

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	<input type="text" value="69.48"/>
2) <b>TOTALS</b> This Period (last page this line number only) .....	<input type="text"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) .....	<input type="text"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) .....	<input type="text"/>

**SCHEDULE D (FEC Form 3)**  
**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

NAME OF COMMITTEE (In Full)  
**Tarkanian for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Tarkanian, Danny, , ,</b>			Nature of Debt (Purpose): In-Kind to be reimbursed; Meal
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	Zip Code 89107-3214	

Outstanding Balance Beginning This Period <input type="text" value="36.12"/>	Transaction ID : D2CEE5AAABC14CAB9FB	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="36.12"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Tarkanian, Danny, , ,</b>			Nature of Debt (Purpose): In-Kind to be reimbursed; Travel
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	Zip Code 89107-3214	

Outstanding Balance Beginning This Period <input type="text" value="30.00"/>	Transaction ID : DFBC5F9DAB54F45E082C	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="30.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Tarkanian, Danny, , ,</b>			Nature of Debt (Purpose): In-Kind to be reimbursed; Meals
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	Zip Code 89107-3214	

Outstanding Balance Beginning This Period <input type="text" value="21.75"/>	Transaction ID : D518B70297BD147139BD	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="21.75"/>

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	<input type="text" value="87.87"/>
2) <b>TOTALS</b> This Period (last page this line number only) .....	<input type="text"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) .....	<input type="text"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) .....	<input type="text"/>

**SCHEDULE D (FEC Form 3)**  
**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

NAME OF COMMITTEE (In Full)  
**Tarkanian for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Tarkanian, Danny, , ,</b>			Nature of Debt (Purpose): In-Kind to be reimbursed; Meals
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	Zip Code 89107-3214	

Outstanding Balance Beginning This Period <input type="text" value="11.62"/>	Transaction ID : <b>D90D8A2513B6644A487E</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="11.62"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Tarkanian, Danny, , ,</b>			Nature of Debt (Purpose): In-Kind to be reimbursed; Travel
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	Zip Code 89107-3214	

Outstanding Balance Beginning This Period <input type="text" value="40.00"/>	Transaction ID : <b>DC3BDFFA423DC4081980</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="40.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Tarkanian, Danny, , ,</b>			Nature of Debt (Purpose): In-Kind to be reimbursed; fuel for candidate travel
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	Zip Code 89107-3214	

Outstanding Balance Beginning This Period <input type="text" value="30.01"/>	Transaction ID : <b>D0271B4CAADB34495B88</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="30.01"/>

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	<input type="text" value="81.63"/>
2) <b>TOTALS</b> This Period (last page this line number only) .....	<input type="text"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) .....	<input type="text"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) .....	<input type="text"/>

**SCHEDULE D (FEC Form 3)**  
**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

NAME OF COMMITTEE (In Full)  
**Tarkanian for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Tarkanian, Danny, , ,</b>			Nature of Debt (Purpose): In-Kind to be reimbursed; mel
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	Zip Code 89107-3214	

Outstanding Balance Beginning This Period <input type="text" value="21.36"/>	Transaction ID : <b>D3B6E8EC69A77461B8DC</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="21.36"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Tarkanian, Danny, , ,</b>			Nature of Debt (Purpose): In-Kind to be reimbursed; meal
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	Zip Code 89107-3214	

Outstanding Balance Beginning This Period <input type="text" value="11.78"/>	Transaction ID : <b>D1DD22E8E2BCA4AD7832</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="11.78"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Tarkanian, Danny, , ,</b>			Nature of Debt (Purpose): In-Kind to be reimbursed; meal
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	Zip Code 89107-3214	

Outstanding Balance Beginning This Period <input type="text" value="11.12"/>	Transaction ID : <b>DF53B2FE67EBA4B79996</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="11.12"/>

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	<input type="text" value="44.26"/>
2) <b>TOTALS</b> This Period (last page this line number only) .....	<input type="text"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) .....	<input type="text"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) .....	<input type="text"/>

**SCHEDULE D (FEC Form 3)**  
**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 183 OF 193
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**Tarkanian for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Tarkanian, Danny, , ,</b>			Nature of Debt (Purpose): In-Kind to be reimbursed; fuel for candidate travel
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	Zip Code 89107-3214	

Outstanding Balance Beginning This Period 45.00	Transaction ID : <b>D83ABD557D1554FC6B7A</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 45.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Tarkanian, Danny, , ,</b>			Nature of Debt (Purpose): In-Kind to be reimbursed; meal
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	Zip Code 89107-3214	

Outstanding Balance Beginning This Period 18.87	Transaction ID : <b>D63B231F55C56446C946</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 18.87

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Tarkanian, Danny, , ,</b>			Nature of Debt (Purpose): In-Kind to be reimbursed; meal
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	Zip Code 89107-3214	

Outstanding Balance Beginning This Period 9.19	Transaction ID : <b>D764D4F0F8D8249499E8</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 9.19

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	73.06
2) <b>TOTALS</b> This Period (last page this line number only) .....	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) .....	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) .....	

**SCHEDULE D (FEC Form 3)**  
**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

NAME OF COMMITTEE (In Full)  
**Tarkanian for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Tarkanian, Danny, , ,</b>			Nature of Debt (Purpose): In-Kind to be reimbursed; meal
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	Zip Code 89107-3214	

Outstanding Balance Beginning This Period <input type="text" value="19.06"/>	Transaction ID : <b>D931472CCC5C6421DA53</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="19.06"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Tarkanian, Danny, , ,</b>			Nature of Debt (Purpose): In-Kind to be reimbursed; meal
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	Zip Code 89107-3214	

Outstanding Balance Beginning This Period <input type="text" value="15.74"/>	Transaction ID : <b>D2A974C09EDDA4294ACC</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="15.74"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Tarkanian, Danny, , ,</b>			Nature of Debt (Purpose): In-Kind to be reimbursed; meal
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	Zip Code 89107-3214	

Outstanding Balance Beginning This Period <input type="text" value="21.14"/>	Transaction ID : <b>DBD3DB38825734B56A09</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="21.14"/>

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	<input type="text" value="55.94"/>
2) <b>TOTALS</b> This Period (last page this line number only) .....	<input type="text"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) .....	<input type="text"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) .....	<input type="text"/>



**SCHEDULE D (FEC Form 3)**  
**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 185 OF 193
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**Tarkanian for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Tarkanian, Danny, , ,</b>			Nature of Debt (Purpose): In-Kind to be reimbursed; Fuel for Candidate travel
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	Zip Code 89107-3214	

Outstanding Balance Beginning This Period <input type="text" value="48.63"/>	Transaction ID : <b>D0E956839E11F4793A5B</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="48.63"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Tarkanian, Danny, , ,</b>			Nature of Debt (Purpose): In-Kind to be reimbursed; fuel for candidate travel
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	Zip Code 89107-3214	

Outstanding Balance Beginning This Period <input type="text" value="54.22"/>	Transaction ID : <b>D51E9A765AA1349F7A96</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="54.22"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Tarkanian, Danny, , ,</b>			Nature of Debt (Purpose): In-Kind to be reimbursed; meal
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	Zip Code 89107-3214	

Outstanding Balance Beginning This Period <input type="text" value="11.45"/>	Transaction ID : <b>DD1DC4CC772404027885</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="11.45"/>

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	<input type="text" value="114.30"/>
2) <b>TOTALS</b> This Period (last page this line number only) .....	<input type="text"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) .....	<input type="text"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) .....	<input type="text"/>

**SCHEDULE D (FEC Form 3)**  
**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

NAME OF COMMITTEE (In Full)  
**Tarkanian for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Tarkanian, Danny, , ,</b>			Nature of Debt (Purpose): In-Kind to be reimbursed; meal
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	Zip Code 89107-3214	

Outstanding Balance Beginning This Period <input type="text" value="35.17"/>	Transaction ID : <b>D826CB3415019437AAF4</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="35.17"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Tarkanian, Danny, , ,</b>			Nature of Debt (Purpose): In-Kind to be reimbursed; South Henderson Republican Women's Luncheon
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	Zip Code 89107-3214	

Outstanding Balance Beginning This Period <input type="text" value="30.00"/>	Transaction ID : <b>D5ADE327EEB4E449BB7C</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="30.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Tarkanian, Danny, , ,</b>			Nature of Debt (Purpose): In-Kind to be reimbursed; meal
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	Zip Code 89107-3214	

Outstanding Balance Beginning This Period <input type="text" value="22.67"/>	Transaction ID : <b>D846563EEEA4048B5A04</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="22.67"/>

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	<input type="text" value="87.84"/>
2) <b>TOTALS</b> This Period (last page this line number only) .....	<input type="text"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) .....	<input type="text"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) .....	<input type="text"/>

**SCHEDULE D (FEC Form 3)**  
**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 187 OF 193
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**Tarkanian for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Tarkanian, Danny, , ,</b>			Nature of Debt (Purpose): In Kind to be reimbursed; Gas for Candidate Travel
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	Zip Code 89107-3214	

Outstanding Balance Beginning This Period 40.00	Transaction ID : DE4D43772DEBA4E5699D	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 40.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Tarkanian, Danny, , ,</b>			Nature of Debt (Purpose): In Kind to be reimbursed; Nevada Republican Men's Club Luncheon
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	Zip Code 89107-3214	

Outstanding Balance Beginning This Period 55.00	Transaction ID : D92D24C48D500414D9A4	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 55.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Tarkanian, Danny, , ,</b>			Nature of Debt (Purpose): In-Kind to be reimbursed; Meal
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	Zip Code 89107-3214	

Outstanding Balance Beginning This Period 11.90	Transaction ID : DD1508078B02F4515AD0	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 11.90

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	▶	106.90
2) <b>TOTALS</b> This Period (last page this line number only) .....	▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) .....	▶	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) .....	▶	

**SCHEDULE D (FEC Form 3)**  
**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

NAME OF COMMITTEE (In Full)  
**Tarkanian for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Tarkanian, Danny, , ,</b>			Nature of Debt (Purpose): In Kind to be reimbursed; Meal
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	Zip Code 89107-3214	

Outstanding Balance Beginning This Period 25.95		Transaction ID : <b>DB2781BD6B1AB492EA67</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 25.95	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Tarkanian, Danny, , ,</b>			Nature of Debt (Purpose): In Kind to be reimbursed; Snacks for voter registration drive
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	Zip Code 89107-3214	

Outstanding Balance Beginning This Period 10.26		Transaction ID : <b>D22FA72A6037344618F2</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 10.26	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Tarkanian, Danny, , ,</b>			Nature of Debt (Purpose): In Kind to be reimbursed; Gas for Candidate Travel
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	Zip Code 89107-3214	

Outstanding Balance Beginning This Period 28.75		Transaction ID : <b>DDA90141E94E94B1D894</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 28.75	

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	▶	64.96
2) <b>TOTALS</b> This Period (last page this line number only) .....	▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) .....	▶	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) .....	▶	

**SCHEDULE D (FEC Form 3)**  
**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

NAME OF COMMITTEE (In Full)  
**Tarkanian for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Tarkanian, Danny, , ,</b>			Nature of Debt (Purpose): In Kind to be reimbursed; Meal
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	Zip Code 89107-3214	

Outstanding Balance Beginning This Period <input type="text" value="18.02"/>		Transaction ID : D5043AB8AF5EB4441A11	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="18.02"/>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Tarkanian, Danny, , ,</b>			Nature of Debt (Purpose): In Kind to be reimbursed; Meal
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	Zip Code 89107-3214	

Outstanding Balance Beginning This Period <input type="text" value="37.23"/>		Transaction ID : DC27C26B6C52644D8BBD	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="37.23"/>	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Tarkanian, Danny, , ,</b>			Nature of Debt (Purpose): In Kind to be reimbursed; Meal
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	Zip Code 89107-3214	

Outstanding Balance Beginning This Period <input type="text" value="16.57"/>		Transaction ID : D6DE1B3951DA64F8DBF6	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="16.57"/>	

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	<input type="text" value="71.82"/>
2) <b>TOTALS</b> This Period (last page this line number only) .....	<input type="text"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) .....	<input type="text"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) .....	<input type="text"/>

**SCHEDULE D (FEC Form 3)**  
**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

NAME OF COMMITTEE (In Full)  
**Tarkanian for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Tarkanian, Danny, , ,</b>			Nature of Debt (Purpose): In Kind to be reimbursed; Gas fro Candidate Travel
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	Zip Code 89107-3214	

Outstanding Balance Beginning This Period <input type="text" value="35.33"/>	<b>Transaction ID : DEE7DAFF257824A9AA0B</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="35.33"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Tarkanian, Danny, , ,</b>			Nature of Debt (Purpose): In Kind to be reimbursed; Meal
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	Zip Code 89107-3214	

Outstanding Balance Beginning This Period <input type="text" value="23.70"/>	<b>Transaction ID : DCC90D4CAB56944AD8A0</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="23.70"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Tarkanian, Danny, , ,</b>			Nature of Debt (Purpose): In Kind to be reimbursed; Meal
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	Zip Code 89107-3214	

Outstanding Balance Beginning This Period <input type="text" value="26.03"/>	<b>Transaction ID : D2ADFEA2BD20B442FAF8</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="26.03"/>

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	<input type="text" value="85.06"/>
2) <b>TOTALS</b> This Period (last page this line number only) .....	<input type="text"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) .....	<input type="text"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) .....	<input type="text"/>

**SCHEDULE D (FEC Form 3)**  
**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

NAME OF COMMITTEE (In Full)  
**Tarkanian for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Tarkanian, Danny, , ,</b>			Nature of Debt (Purpose): In Kind to be reimbursed; Food for volunteers
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	Zip Code 89107-3214	

Outstanding Balance Beginning This Period <input type="text" value="114.24"/>	Transaction ID : <b>DE925160FF94D448FA80</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="114.24"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Tarkanian, Danny, , ,</b>			Nature of Debt (Purpose): In Kind to be reimbursed; Meal
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	Zip Code 89107-3214	

Outstanding Balance Beginning This Period <input type="text" value="18.98"/>	Transaction ID : <b>D90610486875F4452BD0</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="18.98"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Tarkanian, Danny, , ,</b>			Nature of Debt (Purpose): Inkind to be reimbursed; Website Services
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	Zip Code 89107-3214	

Outstanding Balance Beginning This Period <input type="text" value="55.00"/>	Transaction ID : <b>DB299D14568414166B5E</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="55.00"/>

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	<input type="text" value="188.22"/>
2) <b>TOTALS</b> This Period (last page this line number only) .....	<input type="text"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) .....	<input type="text"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) .....	<input type="text"/>

**SCHEDULE D (FEC Form 3)**  
**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

NAME OF COMMITTEE (In Full)  
**Tarkanian for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Tarkanian, Danny, , ,</b>			Nature of Debt (Purpose): InKind to be reimbursed;Mtg Registration Fees
Mailing Address 3008 Campbell Circle			
City Las Vegas	State NV	Zip Code 89107-3214	

Outstanding Balance Beginning This Period 250.00	Transaction ID : DC5F52A1065D84688AB4	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 250.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Khayat, Mary, , ,</b>			Nature of Debt (Purpose): Fundraising Svcs
Mailing Address 4340 Lowell Ave.			
City La Crescenta	State CA	Zip Code 91214-2363	

Outstanding Balance Beginning This Period 7500.00	Transaction ID : DA2C6180AE4204F21ADC	
Amount Incurred This Period 0.00	Payment This Period 7500.00	Outstanding Balance at Close of This Period 0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>The Tarrance Group</b>			Nature of Debt (Purpose): Polling Svcs
Mailing Address 201 N Union Street #410			
City Alexandria	State VA	Zip Code 22314-2649	

Outstanding Balance Beginning This Period 0.00	Transaction ID : DDDD71770496049A8AB9	
Amount Incurred This Period 10171.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 10171.00

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	▶	10421.00
2) <b>TOTALS</b> This Period (last page this line number only) .....	▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) .....	▶	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) .....	▶	



**SCHEDULE D (FEC Form 3)**  
**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

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

FOR LINE NUMBER: (check only one)  9  10

NAME OF COMMITTEE (In Full)

**Tarkanian for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>The Tarrance Group</b>			Nature of Debt (Purpose): Travel
Mailing Address 201 N Union Street #410			
City Alexandria	State VA	Zip Code 22314-2649	

Outstanding Balance Beginning This Period		Transaction ID : DD87D6424FF16469B87B	
0.00			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
750.00	0.00	750.00	

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) <b>SUBTOTALS</b> This Period This Page (optional) .....	750.00
2) <b>TOTALS</b> This Period (last page this line number only) .....	40173.77
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) .....	69371.20
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) .....	109544.97