

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

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

FOR LINE NUMBER: PAGE 7 OF 32

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

BHFS-E, PC PAC (Brownstein Hyatt Farber Schreck Political Action Committee)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Ament, Nicole, R., ,

Mailing Address 410 17th Street
Suite 2200

City
Denver

State
CO

Zip Code
80202

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Brownstein Hyatt Farber Schreck

Occupation (for Individual)
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 28 / 2017

Transaction ID : 2017022810435-17

Amount of Each Receipt this Period

200.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Arraji, David, R., ,

Mailing Address 100 North City Parkway
Suite 1600

City

Las Vegas

State

NV

Zip Code

89106

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Brownstein Hyatt Farber Schreck

Occupation (for Individual)
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 28 / 2017

Transaction ID : 2017022810435-47

Amount of Each Receipt this Period

350.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Barad, Edward, N., ,

Mailing Address 410 17th Street
Suite 2200

City

Denver

State

CO

Zip Code

80202

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Brownstein Hyatt Farber Schreck

Occupation (for Individual)
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 28 / 2017

Transaction ID : 2017022810435-3

Amount of Each Receipt this Period

200.00

☐ Memo Item

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

750.00

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