

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

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

Searchlight Leadership Fund

ADDRESS (number and street) 607 14th Street, NW, Suite 800

Check if different than previously reported. (ACC)

Washington DC 20005

2. **FEC IDENTIFICATION NUMBER** C00327395

3. IS THIS REPORT  NEW (N) OR  AMENDED (A)

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 Quarterly Report(YE)
- July 31 Mid-Year Report(Non-election Year Only) (MY)
- Termination Report (TER)

(b) Monthly Report Due On:

<input type="checkbox"/> Feb 20 (M2)	<input type="checkbox"/> May 20 (M5)	<input type="checkbox"/> Aug 20 (M8)	<input type="checkbox"/> Nov 20 (M11) (Non-Election Year Only)
<input type="checkbox"/> Mar 20 (M3)	<input type="checkbox"/> Jun 20 (M6)	<input type="checkbox"/> Sep 20 (M9)	<input type="checkbox"/> Dec 20 (M12) (Non-Election Year Only)
<input type="checkbox"/> Apr 20 (M4)	<input type="checkbox"/> Jul 20 (M7)	<input checked="" type="checkbox"/> Oct 20 (M10)	<input type="checkbox"/> Jan 31 (YE)

(c) 12-Day PRE-Election Report for the:

<input type="checkbox"/> Primary (12P)	<input type="checkbox"/> General (12G)	<input type="checkbox"/> Runoff (12R)
<input type="checkbox"/> Convention (12C)	<input type="checkbox"/> Special (12S)	

Election on \_\_\_\_\_ in the State of \_\_\_\_\_

(d) 30-Day Post -Election Report for the:

<input type="checkbox"/> General (30G)	<input type="checkbox"/> Runoff (30R)	<input type="checkbox"/> Special (30S)
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Election on \_\_\_\_\_ in the State of \_\_\_\_\_

5. Covering Period 09 01 2010 through 09 30 2010

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

Type or Print Name of Treasurer Claude Zobell

Signature of Treasurer Electronically Filed by Claude Zobell Date 10 20 2010

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

Office Use Only							
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**FEC FORM 3X**  
(Rev. 12/2004)

**SUMMARY PAGE**  
**OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
Searchlight Leadership Fund

Report Covering the Period: From: 

M	M
0	9

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To: 

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	Y	Y	Y	Y	2	0	1	0		164320.30
Y	Y	Y	Y							
2	0	1	0							
(b) Cash on Hand at Beginning of Reporting Period .....	237936.68									
(c) Total Receipts (from Line 19) .....	45000.00	359917.32								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	282936.68	524237.62								
7. Total Disbursements (from Line 31) .....	65560.11	306861.05								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	217376.57	217376.57								
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) .....	0.00									

This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

**For further information contact:**

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

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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name  
Searchlight Leadership Fund

Report Covering the Period: From: 

M	M
0	9

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To: 

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	1	0

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A) .....	0.00	20000.00
(ii) Unitemized .....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	0.00	20000.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	45000.00	308500.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	45000.00	328500.00
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	55.52
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	26500.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	4861.80
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	45000.00	359917.32
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	45000.00	359917.32

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	4710.11	90011.05
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	4710.11	90011.05
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	25000.00	155500.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	0.00
29. Other Disbursements.....	35850.00	61350.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	65560.11	306861.05
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	65560.11	306861.05

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

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III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	45000.00	328500.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	45000.00	328500.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	4710.11	90011.05
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	55.52
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	4710.11	89955.53

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 29  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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)  
Searchlight Leadership Fund

**A.**

Full Name (Last, First, Middle Initial)  
AFLAC PAC

Mailing Address 1932 Wynnton Road

City Columbus State GA Zip Code 31999

FEC ID number of contributing federal political committee. **C** C00034157

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: 09 / 13 / 2010  
**Transaction ID:** C18879630  
Amount of Each Receipt this Period: 5000.00

**B.**

Full Name (Last, First, Middle Initial)  
American Assoc. of Nurse Anesthetists PAC

Mailing Address 222 South Prospect Avenue

City Park Ridge State IL Zip Code 60068

FEC ID number of contributing federal political committee. **C** C00173153

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: 09 / 21 / 2010  
**Transaction ID:** C18887199  
Amount of Each Receipt this Period: 5000.00

**C.**

Full Name (Last, First, Middle Initial)  
American Association for Justice PAC

Mailing Address 777 6th Street, NW Suite 200

City Washington State DC Zip Code 20007

FEC ID number of contributing federal political committee. **C** C00024521

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: 09 / 15 / 2010  
**Transaction ID:** C18882141  
Amount of Each Receipt this Period: 5000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 15000.00

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

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

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

FOR LINE NUMBER: PAGE 7 / 29  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
Searchlight Leadership Fund

**A.** Full Name (Last, First, Middle Initial)  
American Bankers Association PAC

Mailing Address 1120 Connecticut Avenue NW  
Suite 600

City State Zip Code  
Washington DC 20036

FEC ID number of contributing federal political committee. **C** C00004275

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	5	/	2	0	1	0

**Transaction ID:** C18882143

Amount of Each Receipt this Period  
5000.00

**B.** Full Name (Last, First, Middle Initial)  
CULAC the PAC of the Credit Union National Assoc.

Mailing Address 601 Pennsylvania Avenue, NW  
South Building, Suite 600

City State Zip Code  
Washington DC 20004

FEC ID number of contributing federal political committee. **C** C00007880

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	0	7	/	2	0	1	0

**Transaction ID:** C18876974

Amount of Each Receipt this Period  
5000.00

**C.** Full Name (Last, First, Middle Initial)  
JPMorgan Chase & Company PAC

Mailing Address 10 South Dearborn Street  
IL 1-0520

City State Zip Code  
Chicago IL 60603

FEC ID number of contributing federal political committee. **C** C00128512

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

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

**Transaction ID:** C18876977

Amount of Each Receipt this Period  
5000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **15000.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 / 29  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Searchlight Leadership Fund

**A.** Full Name (Last, First, Middle Initial)  
NEA Fund for Children & Public Education

Mailing Address 1201 16th St NW Ste 420

City State Zip Code  
Washington DC 20036

FEC ID number of contributing federal political committee. **C** C00003251

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
MM / DD / YYYY  
09 / 15 / 2010

**Transaction ID:** C18882137

Amount of Each Receipt this Period  
5000.00

**B.** Full Name (Last, First, Middle Initial)  
Real Estate Roundtable PAC

Mailing Address 801 Pennsylvania Avenue, NW  
Suite 720

City State Zip Code  
Washington DC 20004

FEC ID number of contributing federal political committee. **C** C00033779

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
MM / DD / YYYY  
09 / 15 / 2010

**Transaction ID:** C18882139

Amount of Each Receipt this Period  
5000.00

**C.** Full Name (Last, First, Middle Initial)  
Visa Inc. Political Action Committee

Mailing Address 1300 Connecticut Avenue, NW  
Suite 900

City State Zip Code  
Washington DC 20036

FEC ID number of contributing federal political committee. **C** C00365122

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
MM / DD / YYYY  
09 / 09 / 2010

**Transaction ID:** C18876965

Amount of Each Receipt this Period  
5000.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	15000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	45000.00



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

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Searchlight Leadership Fund

A.

Full Name (Last, First, Middle Initial)  
Joshua Alcorn

Transaction ID: D423638  
Date of Disbursement

Mailing Address 1449 A Street NE  
Apt. D

09 / 01 / 2010

City Washington State DC Zip Code 20002

Amount of Each Disbursement this Period

272.05

Purpose of Disbursement  
Salary

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)  
Joshua Alcorn

Transaction ID: D424997  
Date of Disbursement

Mailing Address 1449 A Street NE  
Apt. D

09 / 15 / 2010

City Washington State DC Zip Code 20002

Amount of Each Disbursement this Period

272.05

Purpose of Disbursement  
Salary

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)  
American Express

Transaction ID: D430328  
Date of Disbursement

Mailing Address P.O. Box 1270

09 / 03 / 2010

City Newark State NJ Zip Code 07101

Amount of Each Disbursement this Period

7.95

Purpose of Disbursement  
Credit Card Processing Fees

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ▶

552.05

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

PAGE 10 / 29

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Searchlight Leadership Fund

A.	Full Name (Last, First, Middle Initial) Christopher D. Anderson	Transaction ID: D425002 Date of Disbursement 09 / 15 / 2010
	Mailing Address 9550 West Sahara Avenue Apartment 1033	Amount of Each Disbursement this Period 230.87
	City Las Vegas State NV Zip Code 89117	
	Purpose of Disbursement Salary Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Christopher D. Anderson	Transaction ID: D423639 Date of Disbursement 09 / 01 / 2010
	Mailing Address 9550 West Sahara Avenue Apartment 1033	Amount of Each Disbursement this Period 230.87
	City Las Vegas State NV Zip Code 89117	
	Purpose of Disbursement Salary Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Capitol Associates	Transaction ID: D426232 Date of Disbursement 09 / 15 / 2010
	Mailing Address 426 C Street NE	Amount of Each Disbursement this Period 261.20
	City Washington State DC Zip Code 20002-5818	
	Purpose of Disbursement Rent Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President 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) .....	<b>722.94</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Searchlight Leadership Fund

A.	Full Name (Last, First, Middle Initial) Hartford	Transaction ID: D423805 Date of Disbursement 09 / 01 / 2010
	Mailing Address PO Box 2907	Amount of Each Disbursement this Period 951.00
	City Hartford State CT Zip Code 06104-2907	
	Purpose of Disbursement Insurance Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Philip W. Hoon	Transaction ID: D423640 Date of Disbursement 09 / 01 / 2010
	Mailing Address 1150 K Steet, NW Apt 508	Amount of Each Disbursement this Period 115.44
	City Washington State DC Zip Code 20005	
	Purpose of Disbursement Salary Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Philip W. Hoon	Transaction ID: D425006 Date of Disbursement 09 / 15 / 2010
	Mailing Address 1150 K Steet, NW Apt 508	Amount of Each Disbursement this Period 115.44
	City Washington State DC Zip Code 20005	
	Purpose of Disbursement Salary Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

**SUBTOTAL** of Disbursements This Page (optional) ..... ► **1181.88**

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Searchlight Leadership Fund

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Paychex</p> <p>Mailing Address PO Box 2950</p> <p>City Merrifield State VA Zip Code 22116-2950</p> <p>Purpose of Disbursement Payroll Taxes</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D423637</p> <p>Date of Disbursement 09 / 01 / 2010</p> <p>Amount of Each Disbursement this Period 249.85</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Paychex</p> <p>Mailing Address PO Box 2950</p> <p>City Merrifield State VA Zip Code 22116-2950</p> <p>Purpose of Disbursement Payroll Taxes</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D424994</p> <p>Date of Disbursement 09 / 15 / 2010</p> <p>Amount of Each Disbursement this Period 249.85</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Paychex</p> <p>Mailing Address PO Box 2950</p> <p>City Merrifield State VA Zip Code 22116-2950</p> <p>Purpose of Disbursement Payroll Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D430329</p> <p>Date of Disbursement 09 / 10 / 2010</p> <p>Amount of Each Disbursement this Period 75.99</p>

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

575.69

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

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Searchlight Leadership Fund

A.	Full Name (Last, First, Middle Initial) Pepco	Transaction ID: D426875 Date of Disbursement 09 / 24 / 2010
	Mailing Address 701 9th St NW	Amount of Each Disbursement this Period 5.67
	City Washington State DC Zip Code 20068-0001	
	Purpose of Disbursement Utilities	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Pepco	Transaction ID: D426876 Date of Disbursement 09 / 24 / 2010
	Mailing Address 701 9th St NW	Amount of Each Disbursement this Period 10.34
	City Washington State DC Zip Code 20068-0001	
	Purpose of Disbursement Utilities	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) David J. Perry	Transaction ID: D425008 Date of Disbursement 09 / 15 / 2010
	Mailing Address 1664-D Beekman Place, NW	Amount of Each Disbursement this Period 679.62
	City Washington State DC Zip Code 20009	
	Purpose of Disbursement Salary	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President 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) .....	<b>695.63</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Searchlight Leadership Fund

A.	Full Name (Last, First, Middle Initial) David J. Perry	Transaction ID: D423641 Date of Disbursement 09 / 01 / 2010
	Mailing Address 1664-D Beekman Place, NW	Amount of Each Disbursement this Period 679.62
	City Washington State DC Zip Code 20009	
	Purpose of Disbursement Salary Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B.	Full Name (Last, First, Middle Initial) Claude E. Zobell, Jr.	Transaction ID: D426872 Date of Disbursement 09 / 24 / 2010
	Mailing Address 4115 Blackheath Drive	Amount of Each Disbursement this Period 250.00
	City Memphis State TN Zip Code 38135	
	Purpose of Disbursement Treasurer Services Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

929.62

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

4657.81

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

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Searchlight Leadership Fund

A.

Full Name (Last, First, Middle Initial)  
Alexi for Illinois

Transaction ID: D426233  
Date of Disbursement

Mailing Address PO Box 7254

/   /

City Chicago State IL Zip Code 60680

Amount of Each Disbursement this Period

Purpose of Disbursement  
Contribution

Candidate Name  
Alexander Giannoulis

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: IL District:

Special

B.

Full Name (Last, First, Middle Initial)  
Elaine Marshall Committee

Transaction ID: D426871  
Date of Disbursement

Mailing Address 324 S. Wilmington Street  
Suite 420

/   /

City Raleigh State NC Zip Code 27601

Amount of Each Disbursement this Period

Purpose of Disbursement  
Contribution

Candidate Name  
Elaine F. Marshall

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: NC District:

C.

Full Name (Last, First, Middle Initial)  
Feingold Senate Committee

Transaction ID: D424092  
Date of Disbursement

Mailing Address PO Box 620062

/   /

City Middleton State WI Zip Code 53562

Amount of Each Disbursement this Period

Purpose of Disbursement  
Contribution

Candidate Name  
Russell D. Feingold

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: WI District:

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

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 16 / 29

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Searchlight Leadership Fund

A.

Full Name (Last, First, Middle Initial)  
Feingold Senate Committee

Transaction ID: D424093

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	3		2	0	1	0

Mailing Address PO Box 620062

Amount of Each Disbursement this Period

5000.00
---------

City Middleton State WI Zip Code 53562

Purpose of Disbursement  
Contribution

Category/  
Type

Candidate Name  
Russell D. Feingold

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: WI District:

B.

Full Name (Last, First, Middle Initial)  
Scott McAdams for United States Senate

Transaction ID: D426230

Date of Disbursement

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

Mailing Address PO Box 200569

Amount of Each Disbursement this Period

5000.00
---------

City Anchorage State AK Zip Code 99520

Purpose of Disbursement  
Contribution

Category/  
Type

Candidate Name  
Scott McAdams

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: AK District:

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

10000.00
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TOTAL This Period (last page this line number only) .....

25000.00
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# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Searchlight Leadership Fund

<p><b>A.</b> Full Name (Last, First, Middle Initial) Anderson for Nevada State Assembly</p> <p>Mailing Address 438 E. Sahara Ave.,</p> <p>City Las Vegas State NV Zip Code 89104</p> <p>Purpose of Disbursement Nonfederal Contribution</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D425049</p> <p>Date of Disbursement</p> <p><input type="text" value="09"/> <input type="text" value="03"/> / <input type="text" value="20"/> <input type="text" value="10"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="500.00"/></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Angie Taylor 4 Assembly 26</p> <p>Mailing Address 1841 Star Pine Country</p> <p>City Reno State NV Zip Code 89523</p> <p>Purpose of Disbursement Nonfederal Contribution</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D425071</p> <p>Date of Disbursement</p> <p><input type="text" value="09"/> <input type="text" value="03"/> / <input type="text" value="20"/> <input type="text" value="10"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="250.00"/></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Benny for Nevada</p> <p>Mailing Address 10620 Southern Highlands Pkwy</p> <p>City Las Vegas State NV Zip Code 89141</p> <p>Purpose of Disbursement Nonfederal Contribution</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D425084</p> <p>Date of Disbursement</p> <p><input type="text" value="09"/> <input type="text" value="03"/> / <input type="text" value="20"/> <input type="text" value="10"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="2500.00"/></p>

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

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Searchlight Leadership Fund

<p><b>A.</b> Full Name (Last, First, Middle Initial) Brian Kunzi for Nye County District Attorney</p> <p>Mailing Address 2200 Valentine Avenue</p> <p>City Pahrump State NV Zip Code 89048</p> <p>Purpose of Disbursement Nonfederal Contribution</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D425095 <b>Date of Disbursement</b> 09 / 03 / 2010</p> <p>Amount of Each Disbursement this Period 250.00</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Campaign to Elect Teresa Benitez- Thompson</p> <p>Mailing Address 1201 Joshua Drive</p> <p>City Reno State NV Zip Code 89509</p> <p>Purpose of Disbursement Nonfederal Contribution</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D425073 <b>Date of Disbursement</b> 09 / 03 / 2010</p> <p>Amount of Each Disbursement this Period 500.00</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Campaign to Elect Vincent Ochoa</p> <p>Mailing Address 430 South 7th Street</p> <p>City Las Vegas State NV Zip Code 89101</p> <p>Purpose of Disbursement Nonfederal Contribution</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D425097 <b>Date of Disbursement</b> 09 / 03 / 2010</p> <p>Amount of Each Disbursement this Period 1000.00</p>

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

1750.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Searchlight Leadership Fund

A.

Full Name (Last, First, Middle Initial)  
Committee To Elect Aaron Ford

Transaction ID: D425085

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	3		2	0	1	0

Mailing Address PO Box 96003

Amount of Each Disbursement this Period

2500.00
---------

City Las Vegas State NV Zip Code 89193

Purpose of Disbursement  
Nonfederal Contribution

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)  
Committee to Elect Diana Alba

Transaction ID: D425091

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	3		2	0	1	0

Mailing Address PO Box 334

Amount of Each Disbursement this Period

250.00
--------

City Las Vegas State NV Zip Code 89125

Purpose of Disbursement  
Nonfederal Contribution

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)  
Committee to Elect Mark Manendo

Transaction ID: D425082

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	3		2	0	1	0

Mailing Address 401 South Carson Street  
Room 3160

Amount of Each Disbursement this Period

1000.00
---------

City Carson City State NV Zip Code 89701

Purpose of Disbursement  
Nonfederal Contribution

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

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

3750.00

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

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

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Searchlight Leadership Fund

<b>A.</b> Full Name (Last, First, Middle Initial) Committee to Elect Olivia Diaz Mailing Address PO Box 365072 City North Las Vegas State NV Zip Code 89036 Purpose of Disbursement Nonfederal Contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: D425044 Date of Disbursement 09 / 03 / 2010
	Amount of Each Disbursement this Period 500.00 Category/Type
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>B.</b> Full Name (Last, First, Middle Initial) Committee To Elect Tammy Peterson Mailing Address 8550 W Desert Inn, Suite 102 City Las Vegas State NV Zip Code 89117 Purpose of Disbursement Nonfederal Contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: D425086 Date of Disbursement 09 / 03 / 2010
	Amount of Each Disbursement this Period 2500.00 Category/Type
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>C.</b> Full Name (Last, First, Middle Initial) Daly for Assembly District 31 Mailing Address 2180 4th Street City Sparks State NV Zip Code 89431 Purpose of Disbursement Nonfederal Contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: D425075 Date of Disbursement 09 / 03 / 2010
	Amount of Each Disbursement this Period 250.00 Category/Type
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	3250.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 21 / 29

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Searchlight Leadership Fund

<b>A.</b>	Full Name (Last, First, Middle Initial) Democratic Party of Wisconsin  Mailing Address 110 King Street, Suite 203  City Madison State WI Zip Code 53703  Purpose of Disbursement 2010 Federal Contribution Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D424094 Date of Disbursement 09 / 03 / 2010  Amount of Each Disbursement this Period 5000.00  Category/ Type
<b>B.</b>	Full Name (Last, First, Middle Initial) DeSalvio For Nevada  Mailing Address 8429 Vivid Violet Avenue  City Las Vegas State NV Zip Code 89143  Purpose of Disbursement Nonfederal Contribution Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D425045 Date of Disbursement 09 / 03 / 2010  Amount of Each Disbursement this Period 500.00  Category/ Type
<b>C.</b>	Full Name (Last, First, Middle Initial) Elect Dina Neal  Mailing Address 3435 W Cheyenne Ave  City Las Vegas State NV Zip Code 89032  Purpose of Disbursement Nonfederal Contribution Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D425037 Date of Disbursement 09 / 03 / 2010  Amount of Each Disbursement this Period 500.00  Category/ Type

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

6000.00

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

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Searchlight Leadership Fund

**A.**

Full Name (Last, First, Middle Initial)  
Elect Irene Bustamante Adams

**Transaction ID:** D425081

Date of Disbursement

Mailing Address 3800 Reflection Way

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	3		2	0	1	0

City Las Vegas State NV Zip Code 89147

Amount of Each Disbursement this Period

500.00
--------

Purpose of Disbursement  
Nonfederal Contribution

Category/ Type
-------------------

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

**B.**

Full Name (Last, First, Middle Initial)  
Elect JoEtta Brown

**Transaction ID:** D425079

Date of Disbursement

Mailing Address 225 Autmn Hills Road

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	3		2	0	1	0

City Gardnerville State NV Zip Code 89460

Amount of Each Disbursement this Period

250.00
--------

Purpose of Disbursement  
Nonfederal Contribution

Category/ Type
-------------------

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

**C.**

Full Name (Last, First, Middle Initial)  
Elect Mary Beth Scow

**Transaction ID:** D425088

Date of Disbursement

Mailing Address 326 Medio Court

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	3		2	0	1	0

City Henderson State NV Zip Code 89014

Amount of Each Disbursement this Period

1000.00
---------

Purpose of Disbursement  
Nonfederal Contribution

Category/ Type
-------------------

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

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

1750.00
---------

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

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# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 23 / 29

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Searchlight Leadership Fund

A.	Full Name (Last, First, Middle Initial) Elect Ron Hibble	Transaction ID: D425077 Date of Disbursement
	Mailing Address PO Box 448	<input type="text" value="09"/> <input type="text" value="03"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Pioche State NV Zip Code 89043	Amount of Each Disbursement this Period
	Purpose of Disbursement Nonfederal Contribution	<input type="text" value="250.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Elect Steven Brooks	Transaction ID: D425056 Date of Disbursement
	Mailing Address 6007 Turtle River Avenue	<input type="text" value="09"/> <input type="text" value="03"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Las Vegas State NV Zip Code 89156	Amount of Each Disbursement this Period
	Purpose of Disbursement Nonfederal Contribution	<input type="text" value="250.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Friends for Carolyn Edwards	Transaction ID: D425090 Date of Disbursement
	Mailing Address 3275 S Tioga Way	<input type="text" value="09"/> <input type="text" value="03"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Las Vegas State NV Zip Code 89117-3254	Amount of Each Disbursement this Period
	Purpose of Disbursement Nonfederal Contribution	<input type="text" value="500.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President 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) .....	<input type="text" value="1000.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 24 / 29

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Searchlight Leadership Fund

<b>A.</b>	Full Name (Last, First, Middle Initial) Friends for Flores <hr/> Mailing Address 2601 Vana Avenue <hr/> City North Las Vegas State NV Zip Code 89030 <hr/> Purpose of Disbursement Nonfederal Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> D425074 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 3 / 2 0 1 0 <hr/> Amount of Each Disbursement this Period 500.00
<b>B.</b>	Full Name (Last, First, Middle Initial) Friends for McFarlane <hr/> Mailing Address 268 Cliff Place <hr/> City Spring Creek State NV Zip Code 89815 <hr/> Purpose of Disbursement Nonfederal Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> D425076 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 3 / 2 0 1 0 <hr/> Amount of Each Disbursement this Period 250.00
<b>C.</b>	Full Name (Last, First, Middle Initial) Friends of Alison Edwards <hr/> Mailing Address 870 Sage View Drive <hr/> City Sparks State NV Zip Code 89434 <hr/> Purpose of Disbursement Nonfederal Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> D425053 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 3 / 2 0 1 0 <hr/> Amount of Each Disbursement this Period 2500.00

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	3250.00
<b>TOTAL</b> This Period (last page this line number only) .....	



# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Searchlight Leadership Fund

A.

Full Name (Last, First, Middle Initial)  
Friends to Elect Robin Williamson 2010

Transaction ID: D425080

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	3		2	0	1	0

Mailing Address 3752 Meadow Wood Road

Amount of Each Disbursement this Period

500.00
--------

City Carson City State NV Zip Code 89703

Purpose of Disbursement  
Nonfederal Contribution

Category/ Type
-------------------

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)  
Goya for Nevada

Transaction ID: D425059

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	3		2	0	1	0

Mailing Address PO Box 60102

Amount of Each Disbursement this Period

250.00
--------

City Boulder City State NV Zip Code 89006

Purpose of Disbursement  
Nonfederal Contribution

Category/ Type
-------------------

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)  
Jason Frierson for Assembly District 8

Transaction ID: D425041

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	3		2	0	1	0

Mailing Address PO Box 31623

Amount of Each Disbursement this Period

500.00
--------

City Las Vegas State NV Zip Code 89173

Purpose of Disbursement  
Nonfederal Contribution

Category/ Type
-------------------

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

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

1250.00
---------

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

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# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Searchlight Leadership Fund

<p><b>A.</b> Full Name (Last, First, Middle Initial) Joyce Woodhouse for Nevada State Senate</p> <p>Mailing Address 401 South Carson Street</p> <p>City Carson City State NV Zip Code 89701</p> <p>Purpose of Disbursement Nonfederal Contribution</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D425087</p> <p>Date of Disbursement</p> <p><input type="text" value="09"/> <input type="text" value="03"/> / <input type="text" value="20"/> <input type="text" value="10"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="2500.00"/></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Keith Harrison for Humboldt County School Board</p> <p>Mailing Address 4037 Estate Rd</p> <p>City Winnemucca State NV Zip Code 89445</p> <p>Purpose of Disbursement Nonfederal Contribution</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D425094</p> <p>Date of Disbursement</p> <p><input type="text" value="09"/> <input type="text" value="03"/> / <input type="text" value="20"/> <input type="text" value="10"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="250.00"/></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Kevinn Donovan for State Assembly</p> <p>Mailing Address 9017 South Pecos Road Suite 4300</p> <p>City Henderson State NV Zip Code 89074</p> <p>Purpose of Disbursement Nonfederal Contribution</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D425060</p> <p>Date of Disbursement</p> <p><input type="text" value="09"/> <input type="text" value="03"/> / <input type="text" value="20"/> <input type="text" value="10"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="250.00"/></p>

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

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Searchlight Leadership Fund

<p><b>A.</b> Full Name (Last, First, Middle Initial) Lange for Regent</p> <p>Mailing Address 144 Lost Ball Court</p> <p>City Henderson State NV Zip Code 89074</p> <p>Purpose of Disbursement Nonfederal Contribution</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D425093 <b>Date of Disbursement</b> 09 / 03 / 2010</p> <p>Amount of Each Disbursement this Period 250.00</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Lorraine Murray for Nye County Commissioner</p> <p>Mailing Address 6820 S. Surrey</p> <p>City Pahrump State NV Zip Code 89048</p> <p>Purpose of Disbursement Nonfederal Contribution</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D425096 <b>Date of Disbursement</b> 09 / 03 / 2010</p> <p>Amount of Each Disbursement this Period 250.00</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Maggie Carlton for Assembly</p> <p>Mailing Address 5540 E. Cartwright Avenue</p> <p>City Las Vegas State NV Zip Code 89110</p> <p>Purpose of Disbursement Nonfederal Contribution</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D425048 <b>Date of Disbursement</b> 09 / 03 / 2010</p> <p>Amount of Each Disbursement this Period 500.00</p>

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

1000.00

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Searchlight Leadership Fund

**A.** Full Name (Last, First, Middle Initial)  
Monica Leija Bean for Assembly District 23

Mailing Address 981 Beagle Point Avenue

City Henderson State NV Zip Code 89015

Purpose of Disbursement  
Nonfederal Contribution

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: D425066

Date of Disbursement

09 / 03 / 2010

Amount of Each Disbursement this Period

500.00

**B.** Full Name (Last, First, Middle Initial)  
Richard Carrillo for Nevada Assembly District 18

Mailing Address 4819 Diza Court

City Las Vegas State NV Zip Code 89122

Purpose of Disbursement  
Nonfederal Contribution

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: D425051

Date of Disbursement

09 / 03 / 2010

Amount of Each Disbursement this Period

250.00

**C.** Full Name (Last, First, Middle Initial)  
Richard Hill for Searchlight Township

Mailing Address PO Box 72

City Searchlight State NV Zip Code 89046

Purpose of Disbursement  
Nonfederal Contribution

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: D425092

Date of Disbursement

09 / 03 / 2010

Amount of Each Disbursement this Period

350.00

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

1100.00

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 29 / 29

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Searchlight Leadership Fund

A.	Full Name (Last, First, Middle Initial) Robert Townsend for Nevada Assembly 25	Transaction ID: D425067 Date of Disbursement																			
	Mailing Address 550 W. Plumb Lane #B432	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>9</td><td></td><td>0</td><td>3</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		0	3		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	9		0	3		2	0	1	0												
	City State Zip Code Reno NV 89509	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Nonfederal Contribution	<table border="1"><tr><td>250.00</td></tr></table>	250.00																		
250.00																					
	Candidate Name	Category/ Type																			
	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.	Full Name (Last, First, Middle Initial) Ross Miller for Secretary of State	Transaction ID: D421975 Date of Disbursement																			
	Mailing Address 2290 S Jones Blvd Ste 100	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>9</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		1	5		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	9		1	5		2	0	1	0												
	City State Zip Code Las Vegas NV 89146-3170	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Nonfederal Contribution	<table border="1"><tr><td>5000.00</td></tr></table>	5000.00																		
5000.00																					
	Candidate Name	Category/ Type																			
	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:																				

C.	Full Name (Last, First, Middle Initial) Trujillo for School Board	Transaction ID: D425089 Date of Disbursement																			
	Mailing Address PO Box 232004	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>9</td><td></td><td>0</td><td>3</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		0	3		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	9		0	3		2	0	1	0												
	City State Zip Code Las Vegas NV 89105	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Nonfederal Contribution	<table border="1"><tr><td>250.00</td></tr></table>	250.00																		
250.00																					
	Candidate Name	Category/ Type																			
	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) .....	<table border="1"><tr><td>5500.00</td></tr></table>	5500.00
5500.00		
<b>TOTAL</b> This Period (last page this line number only) .....	<table border="1"><tr><td>35850.00</td></tr></table>	35850.00
35850.00		