

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 213 OF 498
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
MGM RESORTS INTERNATIONAL PAC

A. MORTON, RANDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 77711

City LAS VEGAS	State NV	Zip Code 89177
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) BELLAGIO, LLC	Occupation (for Individual) PRESIDENT & COO
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 17 / 2017

Transaction ID : INCA64336

Amount of Each Receipt this Period
100.00

Memo Item

B. MURREN, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9101 W. SAHARA AVE. # 105-H9

City LAS VEGAS	State NV	Zip Code 89117
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MGM RESORTS INTERNATIONAL	Occupation (for Individual) CHAIRMAN, PRESIDENT & CEO
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2499.90

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 17 / 2017

Transaction ID : INCA64268

Amount of Each Receipt this Period
192.30

Memo Item

C. NEUBECKER, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 316 CANYON RIVER COURT

City HENDERSON	State NV	Zip Code 89012
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MGM GRAND HOTEL LAS VEGAS	Occupation (for Individual) SVP FINANCE/CFO
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
650.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 17 / 2017

Transaction ID : INCA64315

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	342.30
TOTAL This Period (last page this line number only).....	