

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Clark County Republican Central Committee

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2016"/>	<input type="text" value="2006.15"/>	<input type="text" value="2006.15"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="2006.15"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="29888.15"/>	<input type="text" value="29888.15"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="31894.30"/>	<input type="text" value="31894.30"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="18423.08"/>	<input type="text" value="18423.08"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="13471.22"/>	<input type="text" value="13471.22"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

Clark County Republican Central Committee

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

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).....	14175.00	14175.00
(ii) Unitemized	14580.00	14580.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	28755.00	28755.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	125.00	125.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	28880.00	28880.00
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	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	1008.15	1008.15
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	1008.15	1008.15
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	29888.15	29888.15
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	28880.00	28880.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	570.69	570.69
(ii) Non-Federal Share.....	1014.56	1014.56
(b) Other Federal Operating Expenditures	16837.83	16837.83
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	18423.08	18423.08
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (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	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated 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)) ..	18423.08	18423.08
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	17408.52	17408.52

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

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)	28880.00	28880.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	28880.00	28880.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ▶	17408.52	17408.52
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)▶	17408.52	17408.52

**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 6 OF 41
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input 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)
Clark County Republican Central Committee

A. BARBARA ALTMAN
Full Name (Last, First, Middle Initial)
Mailing Address 10439 ABISSO DR.
City LAS VEGAS State NV Zip Code 89135-
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 245.00

Date of Receipt 01 / 31 / 2016
Transaction ID : SA11.1058
Amount of Each Receipt this Period 125.00
 Memo Item
CONTRIBUTION
DONATION

B. BARBARA ALTMAN
Full Name (Last, First, Middle Initial)
Mailing Address 10439 ABISSO DR.
City LAS VEGAS State NV Zip Code 89135-
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 245.00

Date of Receipt 01 / 31 / 2016
Transaction ID : SA11.1061
Amount of Each Receipt this Period 120.00
 Memo Item
CONTRIBUTION
DONATION

C. KERRY BOWERS
Full Name (Last, First, Middle Initial)
Mailing Address 1140 HIGHBURY GROVE ST
City HENDERSON State NV Zip Code 89002-0522
FEC ID number of contributing federal political committee. **C**
Name of Employer INFORMATION REQUESTED PER BEST EFF Occupation INFORMATION REQUESTED PER BEST EFF
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 250.00

Date of Receipt 01 / 31 / 2016
Transaction ID : SA11.1178
Amount of Each Receipt this Period 250.00
 Memo Item
CONTRIBUTION
DONATION

SUBTOTAL of Receipts This Page (optional)..... **495.00**
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: (check only one)	PAGE 7 OF 41
	<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)
Clark County Republican Central Committee

A. MICHAEL CHAMBERLAIN
 Full Name (Last, First, Middle Initial)
 Mailing Address 6158 HIGHLAND GARDENS DR.
 City N. LAS VEGAS State NV Zip Code 89031-2051
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CH MEDIA Occupation WRITER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 290.00

Date of Receipt 01 / 31 / 2016
Transaction ID : SA11.1171
 Amount of Each Receipt this Period 250.00
 Memo Item
 CONTRIBUTION
 DONATION

B. MICHAEL CHAMBERLAIN
 Full Name (Last, First, Middle Initial)
 Mailing Address 6158 HIGHLAND GARDENS DR.
 City N. LAS VEGAS State NV Zip Code 89031-2051
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CH MEDIA Occupation WRITER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 290.00

Date of Receipt 01 / 31 / 2016
Transaction ID : SA11.991
 Amount of Each Receipt this Period 40.00
 Memo Item
 CONTRIBUTION
 DONATION

C. MICHAEL COLLETTI
 Full Name (Last, First, Middle Initial)
 Mailing Address 10626 FAIRFIELD AVE
 City LAS VEGAS State NV Zip Code 89183-4600
 FEC ID number of contributing federal political committee. **C**
 Name of Employer INFORMATION REQUESTED PER BEST EFF(Occupation INFORMATION REQUESTED PER BEST EFF()
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 31 / 2016
Transaction ID : SA11.1249
 Amount of Each Receipt this Period 250.00
 Memo Item
 CONTRIBUTION
 DONATION

SUBTOTAL of Receipts This Page (optional).....▶	540.00
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: (check only one)	PAGE 8 OF 41
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Clark County Republican Central Committee

A. JUDITH FLYNN
Full Name (Last, First, Middle Initial)

Mailing Address 5246 LISAGAYLE CT #115

City LAS VEGAS State NV Zip Code 89103-

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

Name of Employer INFORMATION REQUESTED PER BEST EFFC Occupation INFORMATION REQUESTED PER BEST EFFC

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 31 / 2016
Transaction ID : SA11.1176

Amount of Each Receipt this Period 250.00

Memo Item
CONTRIBUTION
DONATION

B. MR. DAVID GIBBS
Full Name (Last, First, Middle Initial)

Mailing Address 1003 INDIAN HOLLOW AVENUE

City NORTH LAS VEGAS State NV Zip Code 89031-

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

Name of Employer BATTLESPACE FLIGHT SERVICES Occupation DIRECTOR, PROGRAM SUPPORT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 31 / 2016
Transaction ID : SA11.1238

Amount of Each Receipt this Period 250.00

Memo Item
CONTRIBUTION
DONATION

C. MR. FRED GIBSON
Full Name (Last, First, Middle Initial)

Mailing Address 3204 PLAZA DE RAFAEL

City LAS VEGAS State NV Zip Code 89102-4024

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

Name of Employer INFORMATION REQUESTED PER BEST EFFC Occupation INFORMATION REQUESTED PER BEST EFFC

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 01 / 31 / 2016
Transaction ID : SA11.1189

Amount of Each Receipt this Period 500.00

Memo Item
CONTRIBUTION
DONATION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1000.00

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: (check only one)	PAGE 9 OF 41
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Clark County Republican Central Committee

A. JAMES GREEN
 Full Name (Last, First, Middle Initial)
 Mailing Address 1061 DESERT OLIVE COURT
 City HENDERSON State NV Zip Code 89002-6559
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **500.00**

Date of Receipt **01 / 31 / 2016**
Transaction ID : SA11.1010
 Amount of Each Receipt this Period **500.00**
 Memo Item
 CONTRIBUTION
 DONATION

B. MICHELE GUARINO
 Full Name (Last, First, Middle Initial)
 Mailing Address 10120 W FLAMINGO RD STE4192
 City LAS VEGAS State NV Zip Code 89147-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFF
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **625.00**

Date of Receipt **01 / 31 / 2016**
Transaction ID : SA11.1143
 Amount of Each Receipt this Period **625.00**
 Memo Item
 CONTRIBUTION
 DONATION

C. LEE HOFFMAN
 Full Name (Last, First, Middle Initial)
 Mailing Address 1085 BARRINGTON AVE.
 City ELKO State NV Zip Code 89801-2565
 FEC ID number of contributing federal political committee. **C**
 Name of Employer INFORMATION REQUESTED PER BEST EFF Occupation INFORMATION REQUESTED PER BEST EFF
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **250.00**

Date of Receipt **01 / 31 / 2016**
Transaction ID : SA11.1253
 Amount of Each Receipt this Period **250.00**
 Memo Item
 CONTRIBUTION
 DONATION

SUBTOTAL of Receipts This Page (optional).....	1375.00
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: (check only one)	PAGE 10 OF 41
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Clark County Republican Central Committee

A. LYNNE HOFFMAN
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
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 31 / 2016
Transaction ID : SA11.1177

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION
DONATION

B. MARK HOWELLS
Full Name (Last, First, Middle Initial)

Mailing Address 185 SUDBURY CT

City State Zip Code
HENDERSON NV 89074-0614

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

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 31 / 2016
Transaction ID : SA11.1293

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION
DONATION

C. KARL L. JOHNSON
Full Name (Last, First, Middle Initial)

Mailing Address 2377 ORANGEBURG

City State Zip Code
HENDERSON NV 89044-4530

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 31 / 2016
Transaction ID : SA11.1272

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION
DONATION

SUBTOTAL of Receipts This Page (optional).....▶	750.00
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: (check only one)	PAGE 11 OF 41
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input 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)
Clark County Republican Central Committee

A. MS. JUDY KELLY
 Full Name (Last, First, Middle Initial)
 Mailing Address 6220 LULLABY PINE CT.
 City LAS VEGAS State NV Zip Code 89130-1404
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFFC
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 31 / 2016
Transaction ID : SA11.1239
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION
 DONATION

B. ROBERT R. KESSLER
 Full Name (Last, First, Middle Initial)
 Mailing Address 9309 FRESH SPRING DR.
 City LAS VEGAS State NV Zip Code 89134-8957
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 RETIRED RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 31 / 2016
Transaction ID : SA11.1235
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION
 DONATION

C. BRIAN LEE
 Full Name (Last, First, Middle Initial)
 Mailing Address 3511 E HARMON AVE
 City LAS VEGAS State NV Zip Code 89121-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFFC
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 31 / 2016
Transaction ID : SA11.1276
 Amount of Each Receipt this Period
 1250.00
 Memo Item
 CONTRIBUTION
 DONATION

SUBTOTAL of Receipts This Page (optional).....▶	1750.00
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: (check only one)	PAGE 12 OF 41
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input 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)
Clark County Republican Central Committee

A. DENISE MEHOCIC
Full Name (Last, First, Middle Initial)
Mailing Address 420 ST. ANDREW'S COURT

City LAS VEGAS	State NV	Zip Code 89144-0815
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FEC ID number of contributing federal political committee. **C**

Name of Employer SELF	Occupation HOMEMAKER
--------------------------	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 31 / 2016
Transaction ID : SA11.1175

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION
DONATION

B. ULRICA MIYASHIRO
Full Name (Last, First, Middle Initial)
Mailing Address 2912 SITTING SUN ST

City LAS VEGAS	State NV	Zip Code 89117-0655
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FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFF
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
475.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 31 / 2016
Transaction ID : SA11.1146

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION
DONATION

C. ULRICA MIYASHIRO
Full Name (Last, First, Middle Initial)
Mailing Address 2912 SITTING SUN ST

City LAS VEGAS	State NV	Zip Code 89117-0655
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FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFF	Occupation INFORMATION REQUESTED PER BEST EFF
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
475.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 31 / 2016
Transaction ID : SA11.1246

Amount of Each Receipt this Period
125.00

Memo Item
CONTRIBUTION
DONATION

SUBTOTAL of Receipts This Page (optional).....	875.00
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: (check only one)	PAGE 13 OF 41
	<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)
Clark County Republican Central Committee

A. ULRIKA MIYASHIRO
 Full Name (Last, First, Middle Initial)
 Mailing Address 2912 SITTING SUN ST
 City LAS VEGAS State NV Zip Code 89117-0655
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 31 / 2016
Transaction ID : SA11.982
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION
 DONATION

B. MICHAEL NATIVO
 Full Name (Last, First, Middle Initial)
 Mailing Address 7628 SUDAN CT.
 City LAS VEGAS State NV Zip Code 89149-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF
 EFFORTS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 31 / 2016
Transaction ID : SA11.1008
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION
 DONATION

C. SWADEEP NIGAM
 Full Name (Last, First, Middle Initial)
 Mailing Address 30 CONTRA COSTA PL
 City HENDERSON State NV Zip Code 89052-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 31 / 2016
Transaction ID : SA11.1250
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION
 DONATION

SUBTOTAL of Receipts This Page (optional).....▶	600.00
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: (check only one)	PAGE 14 OF 41
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<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)
Clark County Republican Central Committee

A. MATTHEW PARKINS
Full Name (Last, First, Middle Initial)

Mailing Address 3030 S HIGHLAND DRIVE

City LAS VEGAS State NV Zip Code 89109-

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

Name of Employer INFORMATION REQUESTED PER BEST EFF Occupation INFORMATION REQUESTED PER BEST EFF

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date **500.00**

Date of Receipt **01 / 31 / 2016**

Transaction ID : SA11.1247

Amount of Each Receipt this Period **500.00**

Memo Item

CONTRIBUTION

DONATION

B. PHILIP PERINE
Full Name (Last, First, Middle Initial)

Mailing Address 4183 CASCADA PLAZZA LANE

City LAS VEGAS State NV Zip Code 89135-

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

Name of Employer SELF EMPLOYEED Occupation REALTOR

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date **250.00**

Date of Receipt **01 / 31 / 2016**

Transaction ID : SA11.1056

Amount of Each Receipt this Period **250.00**

Memo Item

CONTRIBUTION

DONATION

C. FRANK RICCHIAZZI
Full Name (Last, First, Middle Initial)

Mailing Address 2000 HOT OAK RIDGE ST

City LAS VEGAS State NV Zip Code 89134-5516

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date **750.00**

Date of Receipt **01 / 31 / 2016**

Transaction ID : SA11.1009

Amount of Each Receipt this Period **750.00**

Memo Item

CONTRIBUTION

DONATION

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

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: (check only one)	PAGE 15 OF 41
	<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)
Clark County Republican Central Committee

A. NORMAN M. ROSS
 Full Name (Last, First, Middle Initial)
 Mailing Address 7322 S RAINBOW BLVD #54
 City LAS VEGAS State NV Zip Code 89139-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer ENCORE RESORTS Occupation CEO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date 250.00

Date of Receipt 01 / 31 / 2016
Transaction ID : SA11.1055
 Amount of Each Receipt this Period 250.00
 Memo Item
 CONTRIBUTION
 DONATION

B. MS. BETTY RUMFORD
 Full Name (Last, First, Middle Initial)
 Mailing Address 2144 SIERRA HEIGHTS DR.
 City LAS VEGAS State NV Zip Code 89134-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date 290.00

Date of Receipt 01 / 31 / 2016
Transaction ID : SA11.1214
 Amount of Each Receipt this Period 40.00
 Memo Item
 CONTRIBUTION
 DONATION

C. MS. BETTY RUMFORD
 Full Name (Last, First, Middle Initial)
 Mailing Address 2144 SIERRA HEIGHTS DR.
 City LAS VEGAS State NV Zip Code 89134-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date 290.00

Date of Receipt 01 / 31 / 2016
Transaction ID : SA11.1244
 Amount of Each Receipt this Period 250.00
 Memo Item
 CONTRIBUTION
 DONATION

SUBTOTAL of Receipts This Page (optional).....	540.00
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: (check only one)	PAGE 16 OF 41
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Clark County Republican Central Committee

A. STEVE SANSON
Full Name (Last, First, Middle Initial)
Mailing Address P.O. BOX 28211

City LAS VEGAS	State NV	Zip Code 86126-
FEC ID number of contributing federal political committee. C		
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Date of Receipt
01 / 31 / 2016
Transaction ID : SA11.1007

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION
DONATION

B. CONSUELO SCHROERLUCKE
Full Name (Last, First, Middle Initial)
Mailing Address 1350 N TOWN CENTER DRIVE #1095

City LAS VEGAS	State NV	Zip Code 89144-
FEC ID number of contributing federal political committee. C		
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Date of Receipt
01 / 31 / 2016
Transaction ID : SA11.1278

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION
DONATION

C. VICTORIA SEAMAN
Full Name (Last, First, Middle Initial)
Mailing Address 8808 ROZETTA COURT

City LAS VEGAS	State NV	Zip Code 89134-6179
FEC ID number of contributing federal political committee. C		
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Date of Receipt
01 / 31 / 2016
Transaction ID : SA11.1082

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION
DONATION

SUBTOTAL of Receipts This Page (optional).....▶	750.00
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: (check only one)	PAGE 17 OF 41
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Clark County Republican Central Committee

A. QUINTON SINGLETON
Full Name (Last, First, Middle Initial)

Mailing Address 1431 FOOTHILLS VILLAGE DR.

City HENDERSON	State NV	Zip Code 89012-
-------------------	-------------	--------------------

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

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
01		31		2016

Transaction ID : SA11.1248

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

DONATION

B. YOLANDA SMITH
Full Name (Last, First, Middle Initial)

Mailing Address 2101 TWIN FALLS DR.

City HENDERSON	State NV	Zip Code 89044-0125
-------------------	-------------	------------------------

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

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
01		31		2016

Transaction ID : SA11.1145

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

DONATION

C. KYLE STEPHENS
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 81048

City LAS VEGAS	State NV	Zip Code 89180-1048
-------------------	-------------	------------------------

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

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
01		31		2016

Transaction ID : SA11.1020

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

DONATION

SUBTOTAL of Receipts This Page (optional).....	750.00
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: (check only one)	PAGE 18 OF 41
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Clark County Republican Central Committee

A. ROBERT B. SULLIMAN
Full Name (Last, First, Middle Initial)

Mailing Address 2153 FARMINGTON BAY COURT

City HENDERSON State NV Zip Code 89044-0192

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

Name of Employer ALARMCO SECURITY Occupation SECURITY DIRECTOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 31 / 2016
Transaction ID : SA11.1252

Amount of Each Receipt this Period 250.00

Memo Item
CONTRIBUTION
DONATION

B. RAVEENDRA SURYADEVARA
Full Name (Last, First, Middle Initial)

Mailing Address 8295 MOZLEY PARK ST

City LAS VEGAS State NV Zip Code 89113-4633

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

Name of Employer SELF Occupation PHYSICIAN

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 01 / 31 / 2016
Transaction ID : SA11.1172

Amount of Each Receipt this Period 500.00

Memo Item
CONTRIBUTION
DONATION

C. SHEILA TAYLOR
Full Name (Last, First, Middle Initial)

Mailing Address 3750 LAS VEGAS BLVD. SOUTH #2406

City LAS VEGAS State NV Zip Code 89158-

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

Name of Employer SELF EMPLOYEED Occupation SOMMELIER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 31 / 2016
Transaction ID : SA11.1273

Amount of Each Receipt this Period 250.00

Memo Item
CONTRIBUTION
DONATION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1000.00

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: (check only one)	PAGE 19 OF 41
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Clark County Republican Central Committee

A. ARSEN TER-PETROSYAN
 Full Name (Last, First, Middle Initial)
 Mailing Address 2116 MERGANSER CT.
 City NORTH LAS VEGAS State NV Zip Code 89084-2843
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 31 / 2016
Transaction ID : SA11.1280
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION
 DONATION

B. DAVID THOMAS
 Full Name (Last, First, Middle Initial)
 Mailing Address 8713 CASTLE RIDGE AVE
 City LAS VEGAS State NV Zip Code 89129-8306
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF
 EFFORTS
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 31 / 2016
Transaction ID : SA11.1243
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION
 DONATION

C. TIGER TODD
 Full Name (Last, First, Middle Initial)
 Mailing Address 3065 S JONES BLVD, STE201
 City LASD VEGAS State NV Zip Code 89146-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 31 / 2016
Transaction ID : SA11.1256
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION
 DONATION

SUBTOTAL of Receipts This Page (optional)..... ▶ 750.00
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: (check only one)	PAGE 20 OF 41
	<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)
Clark County Republican Central Committee

A. PATRICIA TROWBRIDGE
 Full Name (Last, First, Middle Initial)
 Mailing Address 7812 RIVIERA BEACH DR.
 City LAS VEGAS State NV Zip Code 89128-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 31 / 2016
Transaction ID : SA11.1241
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION
 DONATION

B. MR. BRUCE WOODBURY
 Full Name (Last, First, Middle Initial)
 Mailing Address 1501 SAN FELIPE DRIVE
 City BOULDER CITY State NV Zip Code 89005-3408
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 JOLLEY URG A WOODBURY ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 31 / 2016
Transaction ID : SA11.1188
 Amount of Each Receipt this Period
 1250.00
 Memo Item
 CONTRIBUTION
 DONATION

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) ▼
 Aggregate Year-to-Date ▼

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 Amount of Each Receipt this Period
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	1500.00
TOTAL This Period (last page this line number only).....▶	14175.00

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

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

FOR LINE NUMBER: PAGE 21 OF 41
(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)
Clark County Republican Central Committee

A. HELLER FOR SENATE
Full Name (Last, First, Middle Initial)
Mailing Address P.O. BOX 751271

City LAS VEGAS	State NV	Zip Code 89137-
-------------------	-------------	--------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
125.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
01	/	31	/	2016

Transaction ID : SA11.1237

Amount of Each Receipt this Period
125.00

Memo Item
CONTRIBUTION
DONATION

B.
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) ▼

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

Memo Item

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) ▼

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	125.00
TOTAL This Period (last page this line number only).....▶	125.00

**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)
Clark County Republican Central Committee

Full Name (Last, First, Middle Initial)

A. STRIPE

Mailing Address 3180 18TH STREET

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement
CREDIT CARD FEE

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
01 / 04 / 2016

Transaction ID : **SB21B.I633**

Amount of Each Disbursement this Period

10.22

Memo Item

Full Name (Last, First, Middle Initial)

B. SILVERTON CASINO, LLC

Mailing Address 3333 BLUE DIAMOND RD.

City LAS VEGAS State NV Zip Code 89139

Purpose of Disbursement
MEETING VENUE

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
01 / 05 / 2016

Transaction ID : **SB21B.I652**

Amount of Each Disbursement this Period

500.00

Memo Item

Full Name (Last, First, Middle Initial)

C. STRIPE

Mailing Address 3180 18TH STREET

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement
CREDIT CARD FEE

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
01 / 05 / 2016

Transaction ID : **SB21B.I634**

Amount of Each Disbursement this Period

13.14

Memo Item

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

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

523.36

**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)
Clark County Republican Central Committee

Full Name (Last, First, Middle Initial)

A. ANEDOT FEES

Mailing Address 5555 HILTON AVE STE 106

City State Zip Code
BATON ROUGE LA 70808

Purpose of Disbursement
CREDIT CARD FEE

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 06 / 2016

Transaction ID : SB21B.I627

Amount of Each Disbursement this Period

1.27

Memo Item

Full Name (Last, First, Middle Initial)

B. ANEDOT FEES

Mailing Address 5555 HILTON AVE STE 106

City State Zip Code
BATON ROUGE LA 70808

Purpose of Disbursement
CREDIT CARD FEE

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 06 / 2016

Transaction ID : SB21B.I628

Amount of Each Disbursement this Period

3.72

Memo Item

Full Name (Last, First, Middle Initial)

C. STRIPE

Mailing Address 3180 18TH STREET

City State Zip Code
SAN FRANCISCO CA 94110

Purpose of Disbursement
CREDIT CARD FEE

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 06 / 2016

Transaction ID : SB21B.I635

Amount of Each Disbursement this Period

31.67

Memo Item

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

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

36.66

**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)
Clark County Republican Central Committee

Full Name (Last, First, Middle Initial)

A. STRIPE

Mailing Address 3180 18TH STREET

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement
CREDIT CARD FEE

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 06 / 2016

Transaction ID : SB21B.I636

Amount of Each Disbursement this Period

41.79

Memo Item

Full Name (Last, First, Middle Initial)

B. REVCO LEASING

Mailing Address P.O. BOX 65598

City SALT LAKE CITY State UT Zip Code 84165

Purpose of Disbursement
EQUIPMENT RENT

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 07 / 2016

Transaction ID : SB21B.I653

Amount of Each Disbursement this Period

538.00

Memo Item

Full Name (Last, First, Middle Initial)

C. STRIPE

Mailing Address 3180 18TH STREET

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement
CREDIT CARD FEE

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 07 / 2016

Transaction ID : SB21B.I637

Amount of Each Disbursement this Period

75.12

Memo Item

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

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

654.91

**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)
Clark County Republican Central Committee

Full Name (Last, First, Middle Initial)

A. ANEDOT FEES

Mailing Address 5555 HILTON AVE STE 106

City State Zip Code
BATON ROUGE LA 70808

Purpose of Disbursement
CREDIT CARD FEE

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 08 / 2016

Transaction ID : **SB21B.I629**

Amount of Each Disbursement this Period

4.20

Memo Item

Full Name (Last, First, Middle Initial)

B. STRIPE

Mailing Address 3180 18TH STREET

City State Zip Code
SAN FRANCISCO CA 94110

Purpose of Disbursement
CREDIT CARD FEE

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 08 / 2016

Transaction ID : **SB21B.I638**

Amount of Each Disbursement this Period

25.07

Memo Item

Full Name (Last, First, Middle Initial)

C. ANEDOT FEES

Mailing Address 5555 HILTON AVE STE 106

City State Zip Code
BATON ROUGE LA 70808

Purpose of Disbursement
CREDIT CARD FEE

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 11 / 2016

Transaction ID : **SB21B.I630**

Amount of Each Disbursement this Period

3.72

Memo Item

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

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

32.99

**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)
Clark County Republican Central Committee

Full Name (Last, First, Middle Initial)

A. STRIPE

Mailing Address 3180 18TH STREET

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement
CREDIT CARD FEE

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
01 / 11 / 2016

Transaction ID : SB21B.I639

Amount of Each Disbursement this Period

61.92

Memo Item

Full Name (Last, First, Middle Initial)

B. STRIPE

Mailing Address 3180 18TH STREET

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement
CREDIT CARD FEE

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
01 / 12 / 2016

Transaction ID : SB21B.I640

Amount of Each Disbursement this Period

24.62

Memo Item

Full Name (Last, First, Middle Initial)

C. STRIPE

Mailing Address 3180 18TH STREET

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement
CREDIT CARD FEE

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
01 / 13 / 2016

Transaction ID : SB21B.I641

Amount of Each Disbursement this Period

58.45

Memo Item

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

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

144.99

**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)

Clark County Republican Central Committee

Full Name (Last, First, Middle Initial)

A. CMDI POWER IN DATA MANAGEMENT

Mailing Address 1593 SPRING HILL ROAD, STE. 400

City TYSONS CORNER State IN Zip Code 22182

Purpose of Disbursement
FEC SOFTWARE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 14 / 2016

Transaction ID : **SB21B.I656**

Amount of Each Disbursement this Period

800.00

Memo Item

Full Name (Last, First, Middle Initial)

B. SILVERTON CASINO, LLC

Mailing Address 3333 BLUE DIAMOND RD.

City LAS VEGAS State NV Zip Code 89139

Purpose of Disbursement
MEETING VENUE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 14 / 2016

Transaction ID : **SB21B.I655**

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. STRIPE

Mailing Address 3180 18TH STREET

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement
CREDIT CARD FEE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 14 / 2016

Transaction ID : **SB21B.I642**

Amount of Each Disbursement this Period

24.62

Memo Item

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

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

1824.62

**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)

Clark County Republican Central Committee

Full Name (Last, First, Middle Initial)

A. TEXAS STATION GAMBLING HALL & HOTEL

Mailing Address 2101TEXAS STAR LANE

City LAS VEGAS State NV Zip Code 89032

Purpose of Disbursement
MEETING VENUE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 14 / 2016

Transaction ID : SB21B.I654

Amount of Each Disbursement this Period

287.85

Memo Item

Full Name (Last, First, Middle Initial)

B. ANEDOT FEES

Mailing Address 5555 HILTON AVE STE 106

City BATON ROUGE State LA Zip Code 70808

Purpose of Disbursement
CREDIT CARD FEE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 15 / 2016

Transaction ID : SB21B.I631

Amount of Each Disbursement this Period

7.44

Memo Item

Full Name (Last, First, Middle Initial)

C. STRIPE

Mailing Address 3180 18TH STREET

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement
CREDIT CARD FEE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 15 / 2016

Transaction ID : SB21B.I643

Amount of Each Disbursement this Period

36.75

Memo Item

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

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

332.04

**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)
Clark County Republican Central Committee

Full Name (Last, First, Middle Initial)

A. RINGIO

Mailing Address 1751 PINNACLE DRIVE SUITE 600

City MCLEAN State VA Zip Code 22102

Purpose of Disbursement
TELEPHONE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 19 / 2016

Transaction ID : **SB21B.I657**

Amount of Each Disbursement this Period

49.00

Memo Item

Full Name (Last, First, Middle Initial)

B. STRIPE

Mailing Address 3180 18TH STREET

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement
CREDIT CARD FEE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 19 / 2016

Transaction ID : **SB21B.I644**

Amount of Each Disbursement this Period

27.74

Memo Item

Full Name (Last, First, Middle Initial)

C. STRIPE

Mailing Address 3180 18TH STREET

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement
CREDIT CARD FEE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 21 / 2016

Transaction ID : **SB21B.I645**

Amount of Each Disbursement this Period

56.99

Memo Item

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

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

133.73

**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)
Clark County Republican Central Committee

Full Name (Last, First, Middle Initial)

A. BLACK MOUNTAIN REC CENTER

Mailing Address 599 GREENWAY RD

City HENDERSON State NV Zip Code 89015

Purpose of Disbursement
VENUE RENT

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 22 / 2016

Transaction ID : **SB21B.I658**

Amount of Each Disbursement this Period

40.00

Memo Item

Full Name (Last, First, Middle Initial)

B. SANDY VALLEY RECREATION CENTER

Mailing Address 690 W. QUARTZ AVE.

City SANDY VALLEY State NV Zip Code 89019

Purpose of Disbursement
VENUE RENT

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 22 / 2016

Transaction ID : **SB21B.I659**

Amount of Each Disbursement this Period

100.00

Memo Item

Full Name (Last, First, Middle Initial)

C. STRIPE

Mailing Address 3180 18TH STREET

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement
CREDIT CARD FEE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 22 / 2016

Transaction ID : **SB21B.I646**

Amount of Each Disbursement this Period

52.11

Memo Item

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

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

192.11

**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)
Clark County Republican Central Committee

Full Name (Last, First, Middle Initial)

A. REGUS MANAGEMENT GROUP, LLC

Mailing Address 2911 TURTLE CREEK BLVD # 300

City DALLAS State TX Zip Code 75284

Purpose of Disbursement
OFFICE RENT

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 23 / 2016

Transaction ID : SB21B.I660

Amount of Each Disbursement this Period

962.98

Memo Item

Full Name (Last, First, Middle Initial)

B. STRIPE

Mailing Address 3180 18TH STREET

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement
CREDIT CARD FEE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 25 / 2016

Transaction ID : SB21B.I647

Amount of Each Disbursement this Period

50.59

Memo Item

Full Name (Last, First, Middle Initial)

C. U-HAUL MOVING & STORAGE OF SPRING VALLEY

Mailing Address 5220 SOUTH JONES BLVD.

City LAS VEGAS State NV Zip Code 89118

Purpose of Disbursement
STORAGE UNIT RENT

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 25 / 2016

Transaction ID : SB21B.I661

Amount of Each Disbursement this Period

84.95

Memo Item

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

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

1098.52

**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)

Clark County Republican Central Committee

Full Name (Last, First, Middle Initial)

A. CAPITAL PREMIUM FINANCING

Mailing Address 12235 S 800 E.

City DRAPER State UT Zip Code 84020

Purpose of Disbursement
INSURANCE

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 26 / 2016

Transaction ID : SB21B.I662

Amount of Each Disbursement this Period

443.14

Memo Item

Full Name (Last, First, Middle Initial)

B. STRIPE

Mailing Address 3180 18TH STREET

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement
CREDIT CARD FEE

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 26 / 2016

Transaction ID : SB21B.I648

Amount of Each Disbursement this Period

35.34

Memo Item

Full Name (Last, First, Middle Initial)

C. STRIPE

Mailing Address 3180 18TH STREET

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement
CREDIT CARD FEE

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 27 / 2016

Transaction ID : SB21B.I649

Amount of Each Disbursement this Period

100.84

Memo Item

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

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

579.32

**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)
Clark County Republican Central Committee

Full Name (Last, First, Middle Initial)

A. AWARDS WEST

Mailing Address 1957 DECATUR BLVD

City LAS VEGAS State NV Zip Code 89108

Purpose of Disbursement
TROPHIES AND AWARDS

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 28 / 2016

Transaction ID : SB21B.I664

Amount of Each Disbursement this Period

189.44

Memo Item

Full Name (Last, First, Middle Initial)

B. GOLD COAST HOTEL & CASINO

Mailing Address 4000 W FLAMINGO RD

City LAS VEGAS State NV Zip Code 89103

Purpose of Disbursement
MEETING VENUE

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 28 / 2016

Transaction ID : SB21B.I663

Amount of Each Disbursement this Period

10425.76

Memo Item

Full Name (Last, First, Middle Initial)

C. STRIPE

Mailing Address 3180 18TH STREET

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement
CREDIT CARD FEE

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 28 / 2016

Transaction ID : SB21B.I650

Amount of Each Disbursement this Period

44.66

Memo Item

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

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

10659.86

**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)

Clark County Republican Central Committee

Full Name (Last, First, Middle Initial)

A. CRAIG PATTENGILL

Mailing Address 8073 MICHELENA AVE

City LAS VEGAS State NV Zip Code 89147

Purpose of Disbursement
VENUE EXPENSE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 29 / 2016

Transaction ID : SB21B.I666

Amount of Each Disbursement this Period

500.00

Memo Item

Full Name (Last, First, Middle Initial)

B. ANEDOT FEES

Mailing Address 5555 HILTON AVE STE 106

City BATON ROUGE State LA Zip Code 70808

Purpose of Disbursement
CREDIT CARD FEE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 29 / 2016

Transaction ID : SB21B.I632

Amount of Each Disbursement this Period

18.00

Memo Item

Full Name (Last, First, Middle Initial)

C. GOLDEN CATALYSTS, LLC

Mailing Address P.O. BOX 401506

City LAS VEGAS State NV Zip Code 89140

Purpose of Disbursement
PARADE FEE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 29 / 2016

Transaction ID : SB21B.I665

Amount of Each Disbursement this Period

75.00

Memo Item

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

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

593.00

**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

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)
Clark County Republican Central Committee

Full Name (Last, First, Middle Initial)

A. STRIPE

Mailing Address 3180 18TH STREET

City State Zip Code
SAN FRANCISCO CA 94110

Purpose of Disbursement
CREDIT CARD FEE

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
01 / 29 / 2016

Transaction ID : SB21B.I651

Amount of Each Disbursement this Period

31.72

Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

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

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

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

Amount of Each Disbursement this Period

Memo Item

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

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

31.72

16837.83

**SCHEDULE H3 (FEC Form 3X)
 TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
 ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
 Clark County Republican Central Committee

NAME OF ACCOUNT WF Allocation	DATE OF RECEIPT MM / DD / YYYY 01 / 04 / 2016	TOTAL AMOUNT TRANSFERRED 216.00
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BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative	216.00
Transaction ID : H3.0116A	
ii) Generic Voter Drive	
iii) Exempt Activities	
iv) Direct Fundraising (List Activity or Event Identifier)	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Fundraising	
v) Direct Candidate Support (List Activity or Event Identifier)	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Candidate Support.....	
vi) Public Communications Referring Only to Party (Made by PAC)	

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)	
TOTAL This Period (Generic Voter Drive)	
TOTAL This Period (Exempt Activities)	
TOTAL This Period (Direct Fundraising)	
TOTAL This Period (Direct Candidate Support)	
TOTAL This Period (Public Communications Referring Only to Party)	
TOTAL This Period (Total Amount Transferred).....	

**SCHEDULE H3 (FEC Form 3X)
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
Clark County Republican Central Committee

NAME OF ACCOUNT WF Allocation	DATE OF RECEIPT MM / DD / YYYY 01 / 05 / 2016	TOTAL AMOUNT TRANSFERRED 320.00
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BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative	320.00
Transaction ID : H3.0116B	
ii) Generic Voter Drive	
iii) Exempt Activities	
iv) Direct Fundraising (List Activity or Event Identifier)	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Fundraising	
v) Direct Candidate Support (List Activity or Event Identifier)	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Candidate Support.....	
vi) Public Communications Referring Only to Party (Made by PAC)	

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)	
TOTAL This Period (Generic Voter Drive)	
TOTAL This Period (Exempt Activities)	
TOTAL This Period (Direct Fundraising)	
TOTAL This Period (Direct Candidate Support)	
TOTAL This Period (Public Communications Referring Only to Party)	
TOTAL This Period (Total Amount Transferred).....	

**SCHEDULE H3 (FEC Form 3X)
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
Clark County Republican Central Committee

NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
WF Allocation	MM / DD / YYYY 01 / 05 / 2016	294.00

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative	294.28
Transaction ID : H3.0116C	
ii) Generic Voter Drive	
iii) Exempt Activities	
iv) Direct Fundraising (List Activity or Event Identifier)	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Fundraising	
v) Direct Candidate Support (List Activity or Event Identifier)	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Candidate Support.....	
vi) Public Communications Referring Only to Party (Made by PAC)	

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)	
TOTAL This Period (Generic Voter Drive)	
TOTAL This Period (Exempt Activities)	
TOTAL This Period (Direct Fundraising)	
TOTAL This Period (Direct Candidate Support)	
TOTAL This Period (Public Communications Referring Only to Party)	
TOTAL This Period (Total Amount Transferred).....	

**SCHEDULE H3 (FEC Form 3X)
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
Clark County Republican Central Committee

NAME OF ACCOUNT WF Allocation	DATE OF RECEIPT MM / DD / YYYY 01 / 22 / 2016	TOTAL AMOUNT TRANSFERRED 177.87
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BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative	177.87
Transaction ID : H3.0116D	
ii) Generic Voter Drive	
iii) Exempt Activities	
iv) Direct Fundraising (List Activity or Event Identifier)	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Fundraising	
v) Direct Candidate Support (List Activity or Event Identifier)	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Candidate Support.....	
vi) Public Communications Referring Only to Party (Made by PAC)	

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)	1008.15
TOTAL This Period (Generic Voter Drive)	0.00
TOTAL This Period (Exempt Activities)	0.00
TOTAL This Period (Direct Fundraising)	0.00
TOTAL This Period (Direct Candidate Support)	0.00
TOTAL This Period (Public Communications Referring Only to Party)	0.00
TOTAL This Period (Total Amount Transferred).....	1007.87

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Clark County Republican Central Committee

A. Full Name (Last, First, Middle Initial) **Transaction ID : SB21A.670** Memo Item
RICK HOUGHTELLING
Mailing Address 10388 FUJI COURT

City State Zip Code
LAS VEGAS. NV 89129

Purpose of Disbursement:
REGISTRATION EXPENSE

Activity or Event Identifier:

Allocated Activity or Event:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
277.93

Date / /

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
100.05		177.88		277.93

B. Full Name (Last, First, Middle Initial) **Transaction ID : SB21A.667** Memo Item
CHAUNCY INSURANCE
Mailing Address 10120 S. EASTERN AVE. STE. # 213

City State Zip Code
HENDERSON NV 89052

Purpose of Disbursement:
INSURANCE EXPENSE

Activity or Event Identifier:

Allocated Activity or Event:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
747.75

Date / /

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
169.14		300.68		469.82

C. Full Name (Last, First, Middle Initial) **Transaction ID : SB21A.669** Memo Item
GOLD COAST HOTEL & CASINO
Mailing Address 4000 W FLAMINGO RD

City State Zip Code
LAS VEGAS NV 89103

Purpose of Disbursement:
MEETING VENUE

Activity or Event Identifier:

Allocated Activity or Event:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
1247.75

Date / /

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
180.00		320.00		500.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
449.19		798.56		1247.75

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Clark County Republican Central Committee

A. Full Name (Last, First, Middle Initial) **Transaction ID : SB21A.668** Memo Item

MAIL CHIMP

Mailing Address 512 MEANS STREET SUITE 404
C/O THE ROCKET SCIENCE GROUP, LLC

City ATLANTA State GA Zip Code 30318

Purpose of Disbursement: COMMUNICATION EXPENSE

Activity or Event Identifier:

Allocated Activity or Event:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date: 1585.25

Date: 01 / 05 / 2016

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
121.50		216.00		337.50

B. Full Name (Last, First, Middle Initial) Memo Item

Mailing Address

City State Zip Code

Purpose of Disbursement:

Activity or Event Identifier:

Allocated Activity or Event:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date:

Date: / /

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT

C. Full Name (Last, First, Middle Initial) Memo Item

Mailing Address

City State Zip Code

Purpose of Disbursement:

Activity or Event Identifier:

Allocated Activity or Event:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date:

Date: / /

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
121.50		216.00		337.50

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
570.69	1014.56	1585.25