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FEDERAL CENTER
2009 NOV 17 AM 11:19

503 N. Division St. • Carson City, NV 89703

775.283.5555 • fax 775.283.0494

www.wealthcarecpas.com

SECRETARY OF THE SENATE
09 NOV 19 PM 3:12

Federal Election Commission
Washington, D.C. 20463

November 10, 2009

Identification Number: C00467365

Reference: Statement of Organization

Dear Reports Analysis Division:

Attached is the amended Statement of Organization for Amodei for Nevada requested by Lauren Lien, Senior Campaign Finance Analyst. This amended statement includes the candidate's party affiliation. If you have any questions please contact Nicola Neilon, Treasurer at (775) 283-5555.

Sincerely,

A handwritten signature in black ink, appearing to read "Nicola Neilon".

Nicola Neilon, Treasurer

29020432794

ALLIOTT
GROUP

A WORLDWIDE ALLIANCE OF INDEPENDENT FIRMS

CIRCULAR 230 DISCLAIMER: To ensure compliance with Treasury Regulations governing written tax advice, please be advised that any tax advice included in this communication, including any attachments, is not intended, and cannot be used, for the purpose of (i) avoiding any federal tax penalty or (ii) promoting, marketing or recommending any transaction or matter to another person.

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FEC
FORM 1

STATEMENT OF
ORGANIZATION

SECRETARY OF THE SENATE

09 NOV 19 PM 3:12

Office Use Only

1. NAME OF
COMMITTEE (in full)



(Check if name
is changed)

Example: If typing, type
over the lines.

12FE4M5

AMODEL FOR NEVADA

ADDRESS (number and street)

503 N DIVISION ST



(Check if address
is changed)

CARSON CITY

NV

89703

CITY

STATE

ZIP CODE

COMMITTEE'S E-MAIL ADDRESS (Please provide only one e-mail address)



(Check if address
is changed)

INNEILON@WEALTHCARECPAS.COM

COMMITTEE'S WEB PAGE ADDRESS (URL)



(Check if address
is changed)

WWW.AMODELANEVADA.COM

2. DATE

11

10

2009

3. FEC IDENTIFICATION NUMBER

C00467365

4. IS THIS STATEMENT



NEW (N)

OR



AMENDED (A)

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

Type or Print Name of Treasurer

NICOLA NEILON

Signature of Treasurer

Nicola Neilon

Date

11

10

2009

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

ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.

Office
Use
Only

For further information contact:
Federal Election Commission
Toll Free 800-424-9530
Local 202-694-1100

FEC FORM 1
(Revised 02/2009)

28020432795

5. TYPE OF COMMITTEE

Candidate Committee:

- (a) ☒ This committee is a principal campaign committee. (Complete the candidate information below.)
- (b) ☐ This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)

Name of Candidate

MARK E AMODEI

Candidate Party Affiliation

REP

Office Sought:

☐

House

☒

Senate

☐

President

State

NV

District

- (c) ☐ This committee supports/opposes only one candidate, and is NOT an authorized committee.

Name of Candidate

Party Committee:

- (d) ☐ This committee is a (National, State or subordinate) committee of the (Democratic, Republican, etc.) Party.

Political Action Committee (PAC):

- (e) ☐ This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is a:
- ☐ Corporation ☐ Corporation w/o Capital Stock ☐ Labor Organization
- ☐ Membership Organization ☐ Trade Association ☐ Cooperative
- ☐ In addition, this committee is a Lobbyist/Registrant PAC.
- (f) ☐ This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee. (i.e., nonconnected committee)
- ☐ In addition, this committee is a Lobbyist/Registrant PAC.
- ☐ In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)

Joint Fundraising Representative:

- (g) ☐ This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.
- (h) ☐ This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.

Committees Participating in Joint Fundraiser

1.	<input type="text"/>	FEC ID number	<input type="text"/>
2.	<input type="text"/>	FEC ID number	<input type="text"/>
3.	<input type="text"/>	FEC ID number	<input type="text"/>
4.	<input type="text"/>	FEC ID number	<input type="text"/>

29020432796

Write or Type Committee Name

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

Mailing Address

CITY

STATE

ZIP CODE

Relationship: ☐ Connected Organization ☐ Affiliated Committee ☐ Joint Fundraising Representative ☐ Leadership PAC Sponsor

7. Custodian of Records: Identify by name, address (phone number -- optional) and position of the person in possession of committee books and records.

Full Name

Mailing Address

Title or Position

CITY

STATE

ZIP CODE

TREASURER

Telephone number

775-283-5555

8. Treasurer: List the name and address (phone number -- optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

Full Name
of Treasurer

Mailing Address

Title or Position

TREASURER

Telephone number

775-283-5555

29020432797

Full Name of
Designated
Agent

Mailing Address

Title or Position

Telephone number

9. **Banks or Other Depositories:** List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.

WELLS FARGO BANK

Mailing Address

12424 E CARSON ST

CARSON CITY

IN

89703

CITY

STATE

ZIP CODE

Name of Bank, Depository, etc.

Mailing Address

CITY

STATE

ZIP CODE

29020432798

NANCY ERICKSON
SECRETARY

PAMELA B. GAVIN
SUPERINTENDENT

HART SENATE OFFICE BUILDING
SUITE 232
WASHINGTON, DC 20510-2116
PHONE: (202) 224-0322

United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

THE PRECEDING DOCUMENT WAS:

HAND DELIVERED _____

Date of Receipt

USPS FIRST CLASS MAIL _____

Postmark

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Postmark

11-12-09

USPS PRIORITY MAIL _____

Postmark

DELIVERY CONFIRMATION OR SIGNATURE CONFIRMATION LABEL ☐

USPS EXPRESS MAIL _____

Postmark

OVERNIGHT DELIVERY SERVICE:

SHIPPING DATE

NEXT BUSINESS DAY DELIVERY

FEDERAL EXPRESS _____

☐

UPS _____

☐

DHL _____

☐

AIRBORNE EXPRESS _____

☐

RECEIVED FROM FEDERAL ELECTION COMMISSION _____

Date of Receipt

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POSTMARK ILLEGIBLE ☐

NO POSTMARK ☐

FAX _____

Date of Receipt

OTHER _____

Date of Receipt or Postmark

11-12-09

PREPARER

DH

DATE PREPARED

11-19-09

29020432799

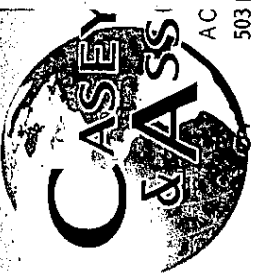
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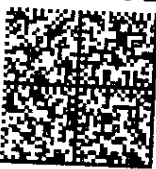
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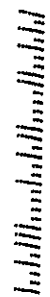
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Federal Election Commission
Washington D.C. 204603

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