

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

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

12FE4M5

Tarkanian For Congress

ADDRESS (number and street) 3008 Campbell Circle

Check if different than previously reported. (ACC)

Las Vegas

NV

89107

2. **FEC IDENTIFICATION NUMBER** ▼

C C00582320

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

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 Year-End Report (YE)

Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:

- Primary (12P) General (12G) Runoff (12R)
- Convention (12C) Special (12S)

Election on / / in the State of

(c) 30-Day **POST**-Election Report for the:

- General (30G) Runoff (30R) Special (30S)

Election on / / in the State of

5. Covering Period

/ /

through

/ /

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 Richard M Egan

Signature of Treasurer Richard M Egan

[Electronically Filed]

Date

/ /

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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SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
Tarkanian For Congress

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	140820.87	498020.89
(b) Total Contribution Refunds (from Line 20(d))	1750.00	1750.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	139070.87	496270.89
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	40790.89	64430.89
(b) Total Offsets to Operating Expenditures (from Line 14).....	17.48	37.39
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	40773.41	64393.50
8. Cash on Hand at Close of Reporting Period (from Line 27).....	432342.91	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	15401.21	

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 3 (Revised 12/2003)

Write or Type Committee Name

Tarkanian For Congress

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

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	126504.44	466389.46
(ii) Unitemized.....	3176.01	10589.01
(iii) TOTAL of contributions from individuals ▶	129680.45	476978.47
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	4000.00	5000.00
(d) The Candidate.....	7140.42	16042.42
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	140820.87	498020.89
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	17.48	37.39
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	140838.35	498058.28

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	40790.89	64430.89
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	1750.00	1750.00
(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 20(a), (b), and (c)).....	1750.00	1750.00
21. OTHER DISBURSEMENTS	0.00	34.48
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	42540.89	66215.37

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	334045.45
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	140838.35
25. SUBTOTAL (add Line 23 and Line 24).....	474883.80
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	42540.89
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	432342.91

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 OF 175
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
Tarkanian For Congress

A. Full Name (Last, First, Middle Initial)
AJ's Armenian Cuisine

Mailing Address 5048 N Maroa Ave

City State Zip Code
Fresno CA 93704-2612

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 03 / 2015

Transaction ID : SA11AI.C4613660

Amount of Each Receipt this Period
250.00

Memo Item

Allocation Below

B. Full Name (Last, First, Middle Initial)
Joe Semerdjian

Mailing Address 5048 N Maroa Ave

City State Zip Code
Fresno CA 93704-2612

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

Name of Employer Occupation
AJ's Armenian Cuisine Owner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 03 / 2015

Transaction ID : SA11AI.A4613660.0

Amount of Each Receipt this Period
250.00

Memo Item

Allocation

C. Full Name (Last, First, Middle Initial)
Francois Alvandi

Mailing Address 3870 E Flamingo Road, Ste A-352

City State Zip Code
Las Vegas NV 89121

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

Name of Employer Occupation
Big Daddy Ichabod's I, Inc Owner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 19 / 2015

Transaction ID : SA11AI.RA4607209.0

Amount of Each Receipt this Period
-2300.00

Memo Item

Reattribution Below

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

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

250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 175
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Tarkanian For Congress

A. Full Name (Last, First, Middle Initial)
Natalie Alvandi

Mailing Address 3870 E Flamingo Road Ste A-352

City Las Vegas	State NV	Zip Code 89121-4320
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FEC ID number of contributing federal political committee. **C**

Name of Employer None	Occupation None
--------------------------	--------------------

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 19 / 2015

Transaction ID : SA11AI.RA4607209.1

Amount of Each Receipt this Period
2300.00

Memo Item

Reattribution

B. Full Name (Last, First, Middle Initial)
Stephen Arcana

Mailing Address 777 Tozzetto Lane

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

Name of Employer Golden Entertainment, Inc.	Occupation Chief Operating Officer
--	---------------------------------------

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 23 / 2015

Transaction ID : SA11AI.C4614057

Amount of Each Receipt this Period
1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Gloria Balaban

Mailing Address 3204 Bel Air Drive

City Las Vegas	State NV	Zip Code 89109-1517
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FEC ID number of contributing federal political committee. **C**

Name of Employer Desert Cab	Occupation Executive
--------------------------------	-------------------------

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 11 / 2015

Transaction ID : SA11AI.C4614618

Amount of Each Receipt this Period
1000.00

Memo Item

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

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

2000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 175
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Tarkanian For Congress

A. Full Name (Last, First, Middle Initial)
Dana Balaban

Mailing Address 3204 Bel Air Drive

City Las Vegas State NV Zip Code 89109-1517

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

Name of Employer Desert Cab Occupation Owner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 11 / 2015

Transaction ID : SA11AI.C4614619

Amount of Each Receipt this Period
 2700.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Brad Balaban

Mailing Address 1100 Broadmoor Avenue

City Las Vegas State NV Zip Code 89109-1555

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

Name of Employer On Demand Sedan and Limousine Occupation President

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 11 / 2015

Transaction ID : SA11AI.C4614620

Amount of Each Receipt this Period
 2700.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Ken Barrett

Mailing Address 6647 Schuster Street

City Las Vegas State NV Zip Code 89118

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

Name of Employer Unique Signs Occupation President

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 21 / 2015

Transaction ID : SA11AI.C4623764

Amount of Each Receipt this Period
 1000.00

Memo Item
 In-Kind: Campaign Yard Signs

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

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

6400.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 175
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Tarkanian For Congress

A. Full Name (Last, First, Middle Initial)
James Bayne

Mailing Address 851 S Rampart Blvd, Ste 105

City Las Vegas State NV Zip Code 89145

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

Name of Employer Peccole Nevada Corp Occupation Vice President

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 31 / 2015

Transaction ID : SA11AI.C4615513

Amount of Each Receipt this Period
 1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Francine Bingham

Mailing Address 6200 Deer Springs

City Las Vegas State NV Zip Code 89131

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

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 03 / 2015

Transaction ID : SA11AI.C4614855

Amount of Each Receipt this Period
 1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Alan Borba

Mailing Address 12679 Ave 392

City Cutler State CA Zip Code 93615

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

Name of Employer Borba Farms Occupation Self-Employed

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 03 / 2015

Transaction ID : SA11AI.C4613397

Amount of Each Receipt this Period
 500.00

Memo Item

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

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

2500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 175
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Tarkanian For Congress

A. Full Name (Last, First, Middle Initial)
Jacob Bournazian

Mailing Address 1435 4th Street SW #B109

City Washington State DC Zip Code 20024

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

Name of Employer U.S. Dept of Energy Occupation Supervisory Statistician

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 09 / 2015

Transaction ID : SA11AI.C4613669

Amount of Each Receipt this Period
500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Cedric Branch

Mailing Address 2299 Malaga Peak

City Las Vegas State NV Zip Code 89135

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

Name of Employer Vegas Sports Apparel Occupation Owner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **1290.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 28 / 2015

Transaction ID : SA11AI.C4623745

Amount of Each Receipt this Period
1290.00

Memo Item
 In-Kind: Campaign T-Shirts

C. Full Name (Last, First, Middle Initial)
Brian Tatarian; Attorney at Law

Mailing Address 1221 Van Ness, Ste 550

City Fresno State CA Zip Code 93721

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 03 / 2015

Transaction ID : SA11AI.C4613658

Amount of Each Receipt this Period
500.00

Memo Item
 Allocation Below

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

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

2290.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 175
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Tarkanian For Congress

A. Full Name (Last, First, Middle Initial)
Brian Tatarian

Mailing Address 549 E Shell Drake Circle

City Fresno	State CA	Zip Code 93730
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FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed	Occupation Attorney
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Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1175.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 03 / 2015

Transaction ID : SA11AI.A4613658.0

Amount of Each Receipt this Period
500.00

Memo Item

Allocation

B. Full Name (Last, First, Middle Initial)
Timothy Cashman

Mailing Address 2300 W Sahara Ave., Ste. 1110-16

City Las Vegas	State NV	Zip Code 89102
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FEC ID number of contributing federal political committee. **C**

Name of Employer Harley Davidson	Occupation CEO
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Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 26 / 2015

Transaction ID : SA11AI.C4615410

Amount of Each Receipt this Period
1500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
David Chavez

Mailing Address 2831 Saint Rose Pkwy, #200

City Henderson	State NV	Zip Code 89052
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FEC ID number of contributing federal political committee. **C**

Name of Employer Assured Strategies	Occupation CEO
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Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
750.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 12 / 2015

Transaction ID : SA11AI.C4614034

Amount of Each Receipt this Period
500.00

Memo Item

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

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

2000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 175
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Tarkanian For Congress

A. Full Name (Last, First, Middle Initial)
David Chavez

Mailing Address 2831 Saint Rose Pkwy, #200

City Henderson	State NV	Zip Code 89052
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FEC ID number of contributing federal political committee. **C**

Name of Employer Assured Strategies	Occupation CEO
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Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
750.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 30 / 2015

Transaction ID : SA11AI.C4615160

Amount of Each Receipt this Period
250.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Ray Chenoweth

Mailing Address 9811 W Charleston Blvd #2-365

City Las Vegas	State NV	Zip Code 89117-7528
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FEC ID number of contributing federal political committee. **C**

Name of Employer Nellis Cab Co.	Occupation President
------------------------------------	-------------------------

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
3850.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 11 / 2015

Transaction ID : SA11AI.C4614623

Amount of Each Receipt this Period
2700.00

Memo Item

Reattribution Below

C. Full Name (Last, First, Middle Initial)
Ray Chenoweth

Mailing Address 9811 W Charleston Blvd #2-365

City Las Vegas	State NV	Zip Code 89117-7528
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FEC ID number of contributing federal political committee. **C**

Name of Employer Nellis Cab Co.	Occupation President
------------------------------------	-------------------------

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
3850.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 11 / 2015

Transaction ID : SA11AI.RA4614623.0

Amount of Each Receipt this Period
-1350.00

Memo Item

Reattribution Below

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

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

2950.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 175
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Tarkanian For Congress

A. Full Name (Last, First, Middle Initial)
Elaine Chenoweth

Mailing Address 5490 Cameron St

City Las Vegas State NV Zip Code 89118

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

Name of Employer Nellis Cab Co Occupation Owner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **3850.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 11 / 2015

Transaction ID : SA11AI.RA4614623.1

Amount of Each Receipt this Period
 1350.00

Memo Item

Reattribution

B. Full Name (Last, First, Middle Initial)
Cort Christie

Mailing Address 59 Damonte Ranch Pkwy B262

City Reno State NV Zip Code 89521

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

Name of Employer Nevada Corporate Headquarters, Inc. Occupation CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 20 / 2015

Transaction ID : SA11AI.C4614046

Amount of Each Receipt this Period
 2000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Marianne Collins-King

Mailing Address 5132 N Palm Ave

City Fresno State CA Zip Code 93704

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

Name of Employer California State University, Fresno Occupation Associate Director of Operations

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 03 / 2015

Transaction ID : SA11AI.C4613406

Amount of Each Receipt this Period
 250.00

Memo Item

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

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

2250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 175
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Tarkanian For Congress

A. Full Name (Last, First, Middle Initial)
Dennis Conway

Mailing Address 3865 W Naples Dr

City Las Vegas	State NV	Zip Code 89103
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FEC ID number of contributing federal political committee. **C**

Name of Employer Commercial Roofers, Inc.	Occupation Construction Manager
--	------------------------------------

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 18 / 2015

Transaction ID : SA11AI.C4614042

Amount of Each Receipt this Period
250.00

Memo Item

B. Full Name (Last, First, Middle Initial)
David Coon

Mailing Address 5257 Jarom St

City Las Vegas	State NV	Zip Code 89120
-------------------	-------------	-------------------

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

Name of Employer Anderson Dairy	Occupation Management
------------------------------------	--------------------------

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 31 / 2015

Transaction ID : SA11AI.C4618264

Amount of Each Receipt this Period
1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
F M Corrigan

Mailing Address 4100 W Flamingo Rd, #1100

City Las Vegas	State NV	Zip Code 89103
-------------------	-------------	-------------------

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

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

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 30 / 2015

Transaction ID : SA11AI.C4615164

Amount of Each Receipt this Period
500.00

Memo Item

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

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

1750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 175
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Tarkanian For Congress

A. Full Name (Last, First, Middle Initial)
Chet Cox

Mailing Address 40 Augusta Canyon Way

City Las Vegas State NV Zip Code 89141

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

Name of Employer Retired Occupation Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 04 / 2015

Transaction ID : SA11AI.C4614029

Amount of Each Receipt this Period
2000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Mark Cram

Mailing Address 5632 Dorian Black Ave

City Las Vegas State NV Zip Code 89139

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

Name of Employer Advanstaff HR Occupation Business Division Manager

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 15 / 2015

Transaction ID : SA11AI.C4614862

Amount of Each Receipt this Period
350.00

Memo Item

C. Full Name (Last, First, Middle Initial)
DKRP Group

Mailing Address 8570 S Cedar Avenue

City Fresno State CA Zip Code 93725

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 03 / 2015

Transaction ID : SA11AI.C4613655

Amount of Each Receipt this Period
500.00

Memo Item

Allocation Below

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

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

2850.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 175
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Tarkanian For Congress

A. Full Name (Last, First, Middle Initial)
Dennis Parnagian

Mailing Address 8570 S Cedar Ave

City State Zip Code
Fresno CA 93725

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

Name of Employer Occupation
DKRP Group Owner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 03 / 2015

Transaction ID : SA11AI.A4613655.0

Amount of Each Receipt this Period
500.00

Memo Item

Allocation

B. Full Name (Last, First, Middle Initial)
Andrea DerManouel

Mailing Address 10661 N Coronado Circle

City State Zip Code
Fresno CA 93730

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

Name of Employer Occupation
MD Manouel Insurance Operations Manager

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1675.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 02 / 2015

Transaction ID : SA11AI.C4607962

Amount of Each Receipt this Period
1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Andrea DerManouel

Mailing Address 10661 N Coronado Circle

City State Zip Code
Fresno CA 93730

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

Name of Employer Occupation
MD Manouel Insurance Operations Manager

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1675.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 18 / 2015

Transaction ID : SA11AI.C4614269

Amount of Each Receipt this Period
675.00

Memo Item

In-Kind: Food and Beverages of 10/18/15 Fundraiser

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

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

1675.00

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

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

FOR LINE NUMBER: PAGE 16 OF 175
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Tarkanian For Congress

A. Full Name (Last, First, Middle Initial)
Michael DerManouel, Jr.

Mailing Address 7447 N First St. Suite, 101

City State Zip Code
Fresno CA 93720

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

Name of Employer Occupation
DerManouel Insurance CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 03 / 2015

Transaction ID : SA11AI.C4623795

Amount of Each Receipt this Period
 1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Dannielle Diamant

Mailing Address 200 Canyon Drive

City State Zip Code
Las Vegas NV 89107

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

Name of Employer Occupation
Maccabi bno Ramat Hen Professional Basketball Athlete

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 02 / 2015

Transaction ID : SA11AI.C4614456

Amount of Each Receipt this Period
 2700.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Josephine Diamant

Mailing Address 200 Canyon Drive

City State Zip Code
Las Vegas NV 89107

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

Name of Employer Occupation
Sahara Surgery Center Nurse

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 31 / 2015

Transaction ID : SA11AI.C4615422

Amount of Each Receipt this Period
 700.00

Memo Item

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

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

4400.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 175
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Tarkanian For Congress

Full Name (Last, First, Middle Initial) A. Robert Dillon		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 13 / 2015
Mailing Address 4508 Buckeye Ave		Transaction ID : SA11AI.C4614617
City State Zip Code Las Vegas NV 89102	Amount of Each Receipt this Period 2250.00	
FEC ID number of contributing federal political committee. C	Name of Employer Occupation Excalibur Bartender and Photographer	In-Kind: Campaign Photography <input type="checkbox"/> Memo Item
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2250.00	

Full Name (Last, First, Middle Initial) B. Robert Dolan		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 24 / 2015
Mailing Address 4171 Autumn Hills		Transaction ID : SA11AI.C4615157
City State Zip Code Winnemucca NV 89445	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C	Name of Employer Occupation Dolan Law, LLC Lawyer	<input type="checkbox"/> Memo Item
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

Full Name (Last, First, Middle Initial) C. EcoWater of Central California		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 03 / 2015
Mailing Address 298 W Fallbrook Ave., Suite 101		Transaction ID : SA11AI.C4613656
City State Zip Code Fresno CA 93711	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C	Name of Employer Occupation	<input type="checkbox"/> Memo Item Allocation Below
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

SUBTOTAL of Receipts This Page (optional).....	3750.00
TOTAL This Period (last page this line number only).....	_____

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 175
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Tarkanian For Congress

A. Full Name (Last, First, Middle Initial)
Ken Steitz

Mailing Address 298 W Fallbrook Ave., Suite 101

City State Zip Code
Fresno CA 93711

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

Name of Employer Occupation
EcoWater of Central California Owner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 03 / 2015

Transaction ID : SA11AI.A4613656.0

Amount of Each Receipt this Period
500.00

Memo Item

Allocation

B. Full Name (Last, First, Middle Initial)
Edwin Suarez Physician Therapy LLC

Mailing Address 3620 E Sunset Road Ste 100

City State Zip Code
Las Vegas NV 89120

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 11 / 2015

Transaction ID : SA11AI.C4614627

Amount of Each Receipt this Period
500.00

Memo Item

Limited Liability Company, Allocation Below

C. Full Name (Last, First, Middle Initial)
Edwin Suarez

Mailing Address 3620 E Sunset Road Ste 100

City State Zip Code
Las Vegas NV 89120

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

Name of Employer Occupation
Self-Employed Physical Therapist

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 11 / 2015

Transaction ID : SA11AI.A4614627.0

Amount of Each Receipt this Period
500.00

Memo Item

Allocation - Member

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

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

500.00

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

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

FOR LINE NUMBER: PAGE 19 OF 175
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Tarkanian For Congress

A. Full Name (Last, First, Middle Initial)
Jose Elgorriaga, Jr.

Mailing Address 2590 W Bluff Ave

City State Zip Code
Fresno CA 93711-0348

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

Name of Employer Occupation
Univision Communications Inc. Regional VP of Ad Sales

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1675.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
11 / 03 / 2015

Transaction ID : SA11AI.C4613409

Amount of Each Receipt this Period
1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Jose Elgorriaga, Jr.

Mailing Address 2590 W Bluff Ave

City State Zip Code
Fresno CA 93711-0348

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

Name of Employer Occupation
Univision Communications Inc. Regional VP of Ad Sales

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1675.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 / 18 / 2015

Transaction ID : SA11AI.C4614271

Amount of Each Receipt this Period
675.00

Memo Item
In-Kind:Food and Beverages of 10/18/15 Fundraiser

C. Full Name (Last, First, Middle Initial)
Gary Ellis

Mailing Address 2347 Dolphin Ct

City State Zip Code
Henderson NV 89074

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

Name of Employer Occupation
Ellis Island Gaming

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
11 / 23 / 2015

Transaction ID : SA11AI.C4614058

Amount of Each Receipt this Period
2700.00

Memo Item

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

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

4375.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 175
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Tarkanian For Congress

A. Full Name (Last, First, Middle Initial)
Irving Epstein

Mailing Address 9121 Golden Eagle Drive

City Las Vegas	State NV	Zip Code 89134-6136
-------------------	-------------	------------------------

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

Name of Employer El Cortez Hotel and Casino	Occupation Owner
--	---------------------

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 23 / 2015

Transaction ID : SA11AI.C4613178

Amount of Each Receipt this Period
500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Edward Eskandarian

Mailing Address 18125 SE Village Circle

City Jupiter	State FL	Zip Code 33469-3401
-----------------	-------------	------------------------

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

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

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 04 / 2015

Transaction ID : SA11AI.C4613661

Amount of Each Receipt this Period
2700.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Lyn Fauntleroy

Mailing Address 4778 W Alluvial

City Fresno	State CA	Zip Code 93722
----------------	-------------	-------------------

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

Name of Employer Der Manouel Insurance	Occupation Senior Commercial Producer
---	--

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 03 / 2015

Transaction ID : SA11AI.C4613405

Amount of Each Receipt this Period
250.00

Memo Item

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

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

3450.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 175
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Tarkanian For Congress

A. Full Name (Last, First, Middle Initial)
Susan Fine

Mailing Address 18 Quail Hollow

City Henderson State NV Zip Code 89014

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

Name of Employer Retired Occupation Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
350.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 03 / 2015

Transaction ID : SA11AI.C4614028

Amount of Each Receipt this Period
 350.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Richard Flaven

Mailing Address 911 San Gabriel Ave

City Henderson State NV Zip Code 89002

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

Name of Employer Boulder Cab Inc Occupation President

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 14 / 2015

Transaction ID : SA11AI.C4612792

Amount of Each Receipt this Period
 1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Joby Flynn

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 Rio Hotel Occupation Casino Floor Supervisor

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 11 / 2015

Transaction ID : SA11AI.C4614630

Amount of Each Receipt this Period
 500.00

Memo Item

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

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

1850.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 175
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Tarkanian For Congress

A. Full Name (Last, First, Middle Initial)
Fresno Distributing Company

Mailing Address P.O. Box 6078

City: Fresno State: CA Zip Code: 93703

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

Name of Employer: Occupation:

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date: 250.00

Date of Receipt: 11 / 03 / 2015

Transaction ID : SA11AI.C4613659

Amount of Each Receipt this Period: 250.00

Memo Item

Allocation Below

B. Full Name (Last, First, Middle Initial)
Steve Cloud

Mailing Address P.O. Box 6078

City: Fresno State: CA Zip Code: 93703

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

Name of Employer: Occupation:
Fresno Distributing Company President

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date: 250.00

Date of Receipt: 11 / 03 / 2015

Transaction ID : SA11AI.A4613659.0

Amount of Each Receipt this Period: 250.00

Memo Item

Allocation

C. Full Name (Last, First, Middle Initial)
Victoria Garcia

Mailing Address 4600 Doig Lane

City: Las Vegas State: NV Zip Code: 89110

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

Name of Employer: Occupation:
G Dallas Horton and Associates Administration

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date: 1500.00

Date of Receipt: 12 / 21 / 2015

Transaction ID : SA11AI.C4614908

Amount of Each Receipt this Period: 1500.00

Memo Item

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

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

1750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 175
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Tarkanian For Congress

A. Full Name (Last, First, Middle Initial)
Ellie Gaykian

Mailing Address 7617 N Van Ness

City: Fresno State: CA Zip Code: 93711

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

Name of Employer: None Occupation: Homemaker

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date: 250.00

Date of Receipt: 11 / 03 / 2015

Transaction ID : SA11AI.C4613394

Amount of Each Receipt this Period: 250.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Harry Gaykian

Mailing Address 7617 N Van Ness Blvd

City: Fresno State: CA Zip Code: 93711

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

Name of Employer: WFA Occupation: Financial Advisor

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date: 250.00

Date of Receipt: 11 / 03 / 2015

Transaction ID : SA11AI.C4613395

Amount of Each Receipt this Period: 250.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Russell Gollard

Mailing Address 2460 W Horizon Ridge Pkwy

City: Henderson State: NV Zip Code: 89052

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

Name of Employer: Cancer and Blood Specialists of Nevada Occupation: Owner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date: 500.00

Date of Receipt: 10 / 05 / 2015

Transaction ID : SA11AI.C4612849

Amount of Each Receipt this Period: 500.00

Memo Item

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

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

1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 175
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Tarkanian For Congress

A. Full Name (Last, First, Middle Initial)
Paul Goulet

Mailing Address 7795 W Rosada Way

City	State	Zip Code
Las Vegas	NV	89149-5227

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

Name of Employer	Occupation
International Church of Las Vegas	Pastor

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 30 / 2015

Transaction ID : SA11AI.C4613367

Amount of Each Receipt this Period
500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Mike Grimmett

Mailing Address 1701 N Green Valley Pkwy, Ste 9C

City	State	Zip Code
Henderson	NV	89074

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

Name of Employer	Occupation
Grimmett and Company	Tax/Accounting Financial Consultant

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 13 / 2015

Transaction ID : SA11AI.C4612850

Amount of Each Receipt this Period
500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Dema Guinn

Mailing Address 3012 Campbell Cr., #878-1883

City	State	Zip Code
Las Vegas	NV	89107

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

Name of Employer	Occupation
Retired	Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 31 / 2015

Transaction ID : SA11AI.C4615420

Amount of Each Receipt this Period
300.00

Memo Item

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

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

1300.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 175
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Tarkanian For Congress

A. Full Name (Last, First, Middle Initial)
George Haines

Mailing Address 1452 European Drive

City Henderson State NV Zip Code 89052

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

Name of Employer Haines and Krieger, LLC Occupation Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 30 / 2015

Transaction ID : SA11AI.C4615163

Amount of Each Receipt this Period
 250.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Stephen Hall

Mailing Address 3841 Keswick Road

City La Canada State CA Zip Code 91011

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

Name of Employer Montecito Financial Services Occupation Accountant

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 22 / 2015

Transaction ID : SA11AI.C4614047

Amount of Each Receipt this Period
 250.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Dennis Hamamjian

Mailing Address 2903 W Decatur

City Fresno State CA Zip Code 93711-0358

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

Name of Employer DK Fresh Occupation Owner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 03 / 2015

Transaction ID : SA11AI.C4613408

Amount of Each Receipt this Period
 500.00

Memo Item

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

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

1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 175
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Tarkanian For Congress

A. Full Name (Last, First, Middle Initial)
John Harris

Mailing Address 23300 W Oakland

City State Zip Code
Coalinga CA 93210

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

Name of Employer Occupation
Harris Farms Self-Employed

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 03 / 2015

Transaction ID : SA11Al.C4613396

Amount of Each Receipt this Period
1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Wayne Hogue

Mailing Address 6320 Wetzel Ct

City State Zip Code
Reno NV 89511

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

Name of Employer Occupation
Retired Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1319.74

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 15 / 2015

Transaction ID : SA11Al.C4614272

Amount of Each Receipt this Period
127.74

Memo Item
In-Kind: Campaign Stickers

C. Full Name (Last, First, Middle Initial)
Arin Hopkins Brandt

Mailing Address 1791 Valenzano Way

City State Zip Code
Henderson NV 89012

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

Name of Employer Occupation
Vegas Viels Self Employed

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
220.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 17 / 2015

Transaction ID : SA11Al.C4615052

Amount of Each Receipt this Period
220.00

Memo Item
In-Kind: Food, Beverage, Invitations and Banner

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

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

1347.74

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 175
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Tarkanian For Congress

A. Full Name (Last, First, Middle Initial)
Gregory Horton

Mailing Address 122 Serramonte Ct

City Henderson State NV Zip Code 89074-7201

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

Name of Employer Retired Occupation Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 21 / 2015

Transaction ID : SA11AI.C4614903

Amount of Each Receipt this Period
500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Vern Jennings

Mailing Address 30 Via Siena Place

City Henderson State NV Zip Code 89011

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

Name of Employer Self-Employed Occupation Consultant

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 27 / 2015

Transaction ID : SA11AI.C4613239

Amount of Each Receipt this Period
1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Donald Jensen

Mailing Address 825 Steneri Way

City Sparks State NV Zip Code 89431

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

Name of Employer Jensen Precast Occupation CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 02 / 2015

Transaction ID : SA11AI.C4614462

Amount of Each Receipt this Period
500.00

Memo Item

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

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

2000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 175
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Tarkanian For Congress

A. Full Name (Last, First, Middle Initial)
Fletcher Jones, Jr.

Mailing Address 7300 W Sahara

City Las Vegas State NV Zip Code 89117

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

Name of Employer Fletcher Jones Auto Group Occupation Self-Employed

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 23 / 2015

Transaction ID : SA11AI.C4614055

Amount of Each Receipt this Period
5400.00

Memo Item

Redesignation Below

B. Full Name (Last, First, Middle Initial)
Fletcher Jones, Jr.

Mailing Address 7300 W Sahara

City Las Vegas State NV Zip Code 89117

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

Name of Employer Fletcher Jones Auto Group Occupation Self-Employed

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 23 / 2015

Transaction ID : SA11AI.RD4614055.0

Amount of Each Receipt this Period
-2700.00

Memo Item

Redesignated

C. Full Name (Last, First, Middle Initial)
Fletcher Jones, Jr.

Mailing Address 7300 W Sahara

City Las Vegas State NV Zip Code 89117

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

Name of Employer Fletcher Jones Auto Group Occupation Self-Employed

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 23 / 2015

Transaction ID : SA11AI.RD4614055.1

Amount of Each Receipt this Period
2700.00

Memo Item

Redesignated

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

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

5400.00

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

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

FOR LINE NUMBER: PAGE 29 OF 175
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Tarkanian For Congress

A. Full Name (Last, First, Middle Initial)
Eleni Karvela

Mailing Address 930 Tahoe Blvd

City Incline Village State NV Zip Code 89451

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

Name of Employer None Occupation None

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 30 / 2015

Transaction ID : SA11AI.C4615418

Amount of Each Receipt this Period
5400.00

Memo Item

Redesignation Below

B. Full Name (Last, First, Middle Initial)
Eleni Karvela

Mailing Address 930 Tahoe Blvd

City Incline Village State NV Zip Code 89451

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

Name of Employer None Occupation None

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 30 / 2015

Transaction ID : SA11AI.RD4615418.0

Amount of Each Receipt this Period
-2700.00

Memo Item

Redesignated

C. Full Name (Last, First, Middle Initial)
Eleni Karvela

Mailing Address 930 Tahoe Blvd

City Incline Village State NV Zip Code 89451

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

Name of Employer None Occupation None

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 30 / 2015

Transaction ID : SA11AI.RD4615418.1

Amount of Each Receipt this Period
2700.00

Memo Item

Redesignated

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

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

5400.00

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

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

FOR LINE NUMBER: PAGE 30 OF 175
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Tarkanian For Congress

A. Full Name (Last, First, Middle Initial)
Betty Kincaid

Mailing Address 9662 Azure Drive

City State Zip Code
Las Vegas NV 89149

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

Name of Employer Occupation
Retired Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 10 2015

Transaction ID : SA11AI.C4614031

Amount of Each Receipt this Period
 250.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Erik King

Mailing Address 2601 Pinto Lane

City State Zip Code
Las Vegas NV 89107-4614

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

Name of Employer Occupation
Retired Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 31 2015

Transaction ID : SA11AI.C4615421

Amount of Each Receipt this Period
 2600.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Justine King

Mailing Address 2601 Pinto Lane

City State Zip Code
Las Vegas NV 89107-4614

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

Name of Employer Occupation
San Diego Chargers Events Manager

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 31 2015

Transaction ID : SA11AI.C4615423

Amount of Each Receipt this Period
 500.00

Memo Item

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

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

3350.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 175
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Tarkanian For Congress

A. Full Name (Last, First, Middle Initial)
Audra King

Mailing Address 2601 Pinto Lane

City Las Vegas State NV Zip Code 89107

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

Name of Employer Square Colour Salon and Spa Occupation Marketing/Events Manager

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 31 / 2015

Transaction ID : SA11AI.C4615426

Amount of Each Receipt this Period
 500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Kittrell Jensen Contractors, LLC

Mailing Address 1919 S Jones Blvd., Suite E

City Las Vegas State NV Zip Code 89146

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

Name of Employer Kittrell Jensen Contractors, LLC Occupation Owner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 03 / 2015

Transaction ID : SA11AI.C4612844

Amount of Each Receipt this Period
 250.00

Memo Item

Limited Liability Company, Allocation Below

C. Full Name (Last, First, Middle Initial)
Ron Jensen

Mailing Address 1919 S Jones Blvd., Suite E

City Las Vegas State NV Zip Code 89146

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

Name of Employer Kittrell Jensen Contractors, LLC Occupation Owner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **83.33**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 03 / 2015

Transaction ID : SA11AI.A4612844.0

Amount of Each Receipt this Period
 83.33

Memo Item

Allocation - Member

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

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

750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 175
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Tarkanian For Congress

A. Full Name (Last, First, Middle Initial)
Justin Kittrell

Mailing Address 1919 S Jones Blvd., Suite E

City Las Vegas	State NV	Zip Code 89146
-------------------	-------------	-------------------

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

Name of Employer Kittrell Jensen Contractors, LLC	Occupation Owner
--	---------------------

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
83.33

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		03		2015

Transaction ID : SA11AI.A4612844.1

Amount of Each Receipt this Period

83.33

Memo Item

Allocation - Member

B. Full Name (Last, First, Middle Initial)
Alan Schrimpf

Mailing Address 1919 S Jones Blvd., Suite E

City Las Vegas	State NV	Zip Code 89146
-------------------	-------------	-------------------

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

Name of Employer Kittrell Jensen Contractors, LLC	Occupation Owner
--	---------------------

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
83.34

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		03		2015

Transaction ID : SA11AI.A4612844.2

Amount of Each Receipt this Period

83.34

Memo Item

Allocation - Member

C. Full Name (Last, First, Middle Initial)
Prem Kittusamy

Mailing Address 9811 W Charleston Blvd, #2542

City Las Vegas	State NV	Zip Code 89117-7528
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FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed	Occupation Medical Doctor
-----------------------------------	------------------------------

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
12		21		2015

Transaction ID : SA11AI.C4614902

Amount of Each Receipt this Period

500.00

Memo Item

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

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

500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 175
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Tarkanian For Congress

A. Full Name (Last, First, Middle Initial)
Samira Knight

Mailing Address 7220 S Cimarron, Ste 110

City Las Vegas	State NV	Zip Code 89113
-------------------	-------------	-------------------

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

Name of Employer Tarkanian and Knight Law group	Occupation Lawyer
--	----------------------

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1260.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 16 / 2015

Transaction ID : SA11AI.C4623763

Amount of Each Receipt this Period
1260.00

Memo Item
In-Kind: Fundraiser supplies

B. Full Name (Last, First, Middle Initial)
Nerses Kopalyan

Mailing Address 8200 Evensham Ct

City Las Vegas	State NV	Zip Code 89129
-------------------	-------------	-------------------

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

Name of Employer Team Focus	Occupation Director
--------------------------------	------------------------

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
275.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 01 / 2015

Transaction ID : SA11AI.C4607614

Amount of Each Receipt this Period
250.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Nerses Kopalyan

Mailing Address 8200 Evensham Ct

City Las Vegas	State NV	Zip Code 89129
-------------------	-------------	-------------------

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

Name of Employer Team Focus	Occupation Director
--------------------------------	------------------------

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
275.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 12 / 2015

Transaction ID : SA11AI.C4614039

Amount of Each Receipt this Period
25.00

Memo Item

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

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

1535.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 175
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Tarkanian For Congress

A. Full Name (Last, First, Middle Initial)
Ted Kunishige

Mailing Address 2062 Buckingham Ave

City Clovis State CA Zip Code 93611-5294

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

Name of Employer Kuni Sama Restaurant Occupation Owner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 03 / 2015

Transaction ID : SA11AI.C4613403

Amount of Each Receipt this Period
 250.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Larson and Zirzow, LLC

Mailing Address 810 Casino Center Blvd, Ste 101

City Las Vegas State NV Zip Code 89101

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 11 / 2015

Transaction ID : SA11AI.C4614622

Amount of Each Receipt this Period
 500.00

Memo Item

Limited Liability Company, Allocation Below

C. Full Name (Last, First, Middle Initial)
Zachariah Larson

Mailing Address 810 S Casino Center Blvd, Ste 101

City Las Vegas State NV Zip Code 89101

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

Name of Employer Larson and Zirzow, LLC Occupation Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 11 / 2015

Transaction ID : SA11AI.A4614622.0

Amount of Each Receipt this Period
 500.00

Memo Item

Allocation - Member

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

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

750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 175
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Tarkanian For Congress

A. Full Name (Last, First, Middle Initial)
Tom Lawyer

Mailing Address 3036 S Valley View

City Las Vegas	State NV	Zip Code 89102
-------------------	-------------	-------------------

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

Name of Employer Lawyer Trane	Occupation CEO
----------------------------------	-------------------

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 07 / 2015

Transaction ID : SA11AI.C4614858

Amount of Each Receipt this Period
1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Alan List

Mailing Address 2000 N Meridian Road

City Lovelock	State NV	Zip Code 89419
------------------	-------------	-------------------

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

Name of Employer List Cattle Company	Occupation Owner
---	---------------------

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 11 / 2015

Transaction ID : SA11AI.C4614629

Amount of Each Receipt this Period
500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Suzanne Lowden

Mailing Address 9004 Greensboro Lane

City Las Vegas	State NV	Zip Code 89134-0500
-------------------	-------------	------------------------

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

Name of Employer Archon Corp	Occupation Businesswoman
---------------------------------	-----------------------------

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2100.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 04 / 2015

Transaction ID : SA11AI.C4613662

Amount of Each Receipt this Period
100.00

Memo Item

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

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

1600.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 175
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Tarkanian For Congress

A. Full Name (Last, First, Middle Initial)
Luna Lounge

Mailing Address 3057 Las Vegas Blvd S

City Las Vegas State NV Zip Code 89109

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 31 / 2015

Transaction ID : SA11AI.C4615516

Amount of Each Receipt this Period
 1000.00

Memo Item

Sole Proprietorship, Allocation Below

B. Full Name (Last, First, Middle Initial)
Maysam Sabitian

Mailing Address 3057 Las Vegas Blvd S

City Las Vegas State NV Zip Code 89109

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

Name of Employer Occupation
Luna Lounge Owner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 31 / 2015

Transaction ID : SA11AI.A4615516.0

Amount of Each Receipt this Period
 1000.00

Memo Item

Allocation - Sole Proprietor

C. Full Name (Last, First, Middle Initial)
Richard Machado

Mailing Address 3236 W Dovewood Lane

City Fresno State CA Zip Code 93711

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

Name of Employer Occupation
Agrian, Inc. President

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 23 / 2015

Transaction ID : SA11AI.C4613177

Amount of Each Receipt this Period
 500.00

Memo Item

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

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

1500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 175
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Tarkanian For Congress

A. Full Name (Last, First, Middle Initial)
George Macricostas

Mailing Address 930 Tahoe Blvd, #802-525

City Incline	State NV	Zip Code 89451
-----------------	-------------	-------------------

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

Name of Employer Raging Wire Data Centers	Occupation Executive Management
--	------------------------------------

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 30 / 2015

Transaction ID : SA11AI.C4615417

Amount of Each Receipt this Period
5400.00

Memo Item

Redesignation Below

B. Full Name (Last, First, Middle Initial)
George Macricostas

Mailing Address 930 Tahoe Blvd, #802-525

City Incline	State NV	Zip Code 89451
-----------------	-------------	-------------------

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

Name of Employer Raging Wire Data Centers	Occupation Executive Management
--	------------------------------------

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 31 / 2015

Transaction ID : SA11AI.RD4615417.0

Amount of Each Receipt this Period
-2700.00

Memo Item

Redesignated

C. Full Name (Last, First, Middle Initial)
George Macricostas

Mailing Address 930 Tahoe Blvd, #802-525

City Incline	State NV	Zip Code 89451
-----------------	-------------	-------------------

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

Name of Employer Raging Wire Data Centers	Occupation Executive Management
--	------------------------------------

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 31 / 2015

Transaction ID : SA11AI.RD4615417.1

Amount of Each Receipt this Period
2700.00

Memo Item

Redesignated

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

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

5400.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 175
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Tarkanian For Congress

A. Full Name (Last, First, Middle Initial)
Nishan Majarian

Mailing Address 10612 N Medinah Circle

City Fresno	State CA	Zip Code 93730
----------------	-------------	-------------------

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

Name of Employer Agrian, Inc.	Occupation CEO
----------------------------------	-------------------

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 28 / 2015

Transaction ID : SA11AI.C4613240

Amount of Each Receipt this Period
 250.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Harry Markus

Mailing Address P.O. Box 6554

City Fresno	State CA	Zip Code 93703
----------------	-------------	-------------------

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

Name of Employer Swift Print Inc	Occupation Owner
-------------------------------------	---------------------

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 02 / 2015

Transaction ID : SA11AI.C4614461

Amount of Each Receipt this Period
 500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Laura Martin

Mailing Address 3395 W Cheyenne Ave, Ste 102

City Las Vegas	State NV	Zip Code 89032
-------------------	-------------	-------------------

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

Name of Employer C Martin Company	Occupation President
--------------------------------------	-------------------------

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 10 / 2015

Transaction ID : SA11AI.C4613664

Amount of Each Receipt this Period
 1000.00

Memo Item

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

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

1750.00

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

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

FOR LINE NUMBER: PAGE 39 OF 175
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Tarkanian For Congress

A. Full Name (Last, First, Middle Initial)
Mid Valley Packing

Mailing Address 5004 S Temperance

City State Zip Code
Fowler CA 93625

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 03 / 2015

Transaction ID : SA11AI.C4613663

Amount of Each Receipt this Period
500.00

Memo Item
This contribution is to be refunded.

Allocation Below

B. Full Name (Last, First, Middle Initial)
Carrie Gahvejian

Mailing Address 2004 S Temperance

City State Zip Code
Fowler CA 93625

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

Name of Employer Occupation
Mid Valley Packing President

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 03 / 2015

Transaction ID : SA11AI.A4613663.0

Amount of Each Receipt this Period
500.00

Memo Item

Allocation

C. Full Name (Last, First, Middle Initial)
Michael Mikaelian

Mailing Address 4805 W Sweet

City State Zip Code
Visalia CA 93291

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

Name of Employer Occupation
Mikaelian and Sons Farmer

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 03 / 2015

Transaction ID : SA11AI.C4613401

Amount of Each Receipt this Period
500.00

Memo Item

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

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

1000.00

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

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

FOR LINE NUMBER: PAGE 40 OF 175
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Tarkanian For Congress

A. Full Name (Last, First, Middle Initial)
Christopher Milford

Mailing Address 9811 W Charleston Blvd Ste 2

City State Zip Code
Las Vegas NV 89117

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

Name of Employer Occupation
Silver State Neurology Doctor

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 02 / 2015

Transaction ID : SA11AI.C4607963

Amount of Each Receipt this Period
5400.00

Memo Item

Reattribution Below

B. Full Name (Last, First, Middle Initial)
Christopher Milford

Mailing Address 9811 W Charleston Blvd Ste 2

City State Zip Code
Las Vegas NV 89117

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

Name of Employer Occupation
Silver State Neurology Doctor

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 02 / 2015

Transaction ID : SA11AI.RA4607963.0

Amount of Each Receipt this Period
-2700.00

Memo Item

Reattribution Below

C. Full Name (Last, First, Middle Initial)
Vicky Milford

Mailing Address 9811 W Charleston Blvd Ste 2

City State Zip Code
Las Vegas NV 89117

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

Name of Employer Occupation
None None

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 02 / 2015

Transaction ID : SA11AI.RA4607963.1

Amount of Each Receipt this Period
2700.00

Memo Item

Reattribution

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

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

5400.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 OF 175
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Tarkanian For Congress

A. Full Name (Last, First, Middle Initial)
Bobbi Miracle

Mailing Address 8048 Maddingley Ave

City Las Vegas	State NV	Zip Code 89117
-------------------	-------------	-------------------

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

Name of Employer Commercial Executives	Occupation Broker
---	----------------------

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
350.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 02 / 2015

Transaction ID : SA11Al.C4607757

Amount of Each Receipt this Period
 350.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Irwin Molasky

Mailing Address 100 N City Parkway, Suite 1700

City Las Vegas	State NV	Zip Code 89106
-------------------	-------------	-------------------

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

Name of Employer The Molasky Group of Companies	Occupation Chairman
--	------------------------

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 02 / 2015

Transaction ID : SA11Al.C4614460

Amount of Each Receipt this Period
 250.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Alan Molasky

Mailing Address 6021 S Fort Apache

City Las Vegas	State NV	Zip Code 89148
-------------------	-------------	-------------------

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

Name of Employer Ovation Development Corporation	Occupation Owner
---	---------------------

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 08 / 2015

Transaction ID : SA11Al.C4614860

Amount of Each Receipt this Period
 2500.00

Memo Item

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

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

3100.00

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

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

FOR LINE NUMBER: PAGE 42 OF 175
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Tarkanian For Congress

A. Full Name (Last, First, Middle Initial)
David Monk

Mailing Address 6647 Schuster Street

City Las Vegas State NV Zip Code 89118

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

Name of Employer Unique Signs Occupation Secretary

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 21 / 2015

Transaction ID : SA11AI.C4623765

Amount of Each Receipt this Period
2500.00

Memo Item
In-Kind: Campaign Yard Signs

B. Full Name (Last, First, Middle Initial)
Halie Moors

Mailing Address 4508 Buckeye Ave

City Las Vegas State NV Zip Code 89102

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

Name of Employer Self-Employed Occupation Photographer

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1100.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 13 / 2015

Transaction ID : SA11AI.C4614616

Amount of Each Receipt this Period
1100.00

Memo Item
In-Kind: Campaign photography

C. Full Name (Last, First, Middle Initial)
David Nalchajian

Mailing Address 3234 W Spruce Ave

City Fresno State CA Zip Code 93711

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

Name of Employer David Nalchajian Inc. Occupation Sales

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 15 / 2015

Transaction ID : SA11AI.C4612851

Amount of Each Receipt this Period
500.00

Memo Item

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

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

4100.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 OF 175
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Tarkanian For Congress

A. Full Name (Last, First, Middle Initial)
Houman Nayeb

Mailing Address 9550 S Eastern Ave, #195

City Las Vegas	State NV	Zip Code 89123
-------------------	-------------	-------------------

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

Name of Employer Kabob Grill	Occupation Owner
---------------------------------	---------------------

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
756.70

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 16 / 2015

Transaction ID : SA11AI.C4623762

Amount of Each Receipt this Period
756.70

Memo Item
In-Kind: Catering Services

B. Full Name (Last, First, Middle Initial)
Frank Nolimal

Mailing Address 5740 S Arville St #204

City Las Vegas	State NV	Zip Code 89118
-------------------	-------------	-------------------

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

Name of Employer Assurance, LTD	Occupation Insurance Sales
------------------------------------	-------------------------------

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 02 / 2015

Transaction ID : SA11AI.C4607754

Amount of Each Receipt this Period
250.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Edward Olliges

Mailing Address 132 Quail Run Road

City Hernderson	State NV	Zip Code 89014-2149
--------------------	-------------	------------------------

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

Name of Employer Friendly Ford	Occupation Chariman
-----------------------------------	------------------------

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 09 / 2015

Transaction ID : SA11AI.C4613670

Amount of Each Receipt this Period
500.00

Memo Item

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

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

1506.70

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

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

FOR LINE NUMBER: PAGE 44 OF 175
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Tarkanian For Congress

A. Full Name (Last, First, Middle Initial)
James Pardini

Mailing Address 2257 W Shaw Ave

City State Zip Code
Fresno CA 93711

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

Name of Employer Occupation
Pardini's Catering Owner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 03 / 2015

Transaction ID : SA11AI.C4613391

Amount of Each Receipt this Period
 300.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Pete Parnagian, Jr.

Mailing Address 7453 N Woodson Ave

City State Zip Code
Fresno CA 93711-0372

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

Name of Employer Occupation
Fowler Packing Co. Produce Sales

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 03 / 2015

Transaction ID : SA11AI.C4613404

Amount of Each Receipt this Period
 500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Frank Parrillo

Mailing Address 1771 E Falingo Rd, #112A

City State Zip Code
Las Vegas NV 89119

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

Name of Employer Occupation
None Actor

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
450.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 22 / 2015

Transaction ID : SA11AI.C4623766

Amount of Each Receipt this Period
 450.00

Memo Item
In-Kind: Campaign Flyers

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

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

1250.00

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

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

FOR LINE NUMBER: PAGE 45 OF 175
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Tarkanian For Congress

A. Full Name (Last, First, Middle Initial)
Radiology Associates of Nevada

Mailing Address 2400 S Cimarron Rd, Ste 100

City Las Vegas State NV Zip Code 89117

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 21 / 2015

Transaction ID : SA11AI.C4614900

Amount of Each Receipt this Period
 500.00

Memo Item

Allocation Below

B. Full Name (Last, First, Middle Initial)
Tarmod Gard

Mailing Address 2400 S Cimarron Rd, Ste 100

City Las Vegas State NV Zip Code 89117

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

Name of Employer Occupation
 Radiology Associates of NV Owner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 21 / 2015

Transaction ID : SA11AI.A4614900.0

Amount of Each Receipt this Period
 500.00

Memo Item

Allocation

C. Full Name (Last, First, Middle Initial)
Ramaks Company

Mailing Address 1705 Rockcrest Dr.

City Las Vegas State NV Zip Code 89108-2532

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 30 / 2015

Transaction ID : SA11AI.C4613365

Amount of Each Receipt this Period
 2000.00

Memo Item

Allocation Below

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

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

2500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 OF 175
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Tarkanian For Congress

A. Full Name (Last, First, Middle Initial)
Ramak Poursamadi

Mailing Address 1705 Rockcrest Dr

City Las Vegas	State NV	Zip Code 89108-2532
-------------------	-------------	------------------------

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

Name of Employer Ramaks Company	Occupation Owner
------------------------------------	---------------------

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 30 / 2015

Transaction ID : SA11AI.A4613365.0

Amount of Each Receipt this Period
2000.00

Memo Item

Allocation

B. Full Name (Last, First, Middle Initial)
Ravi Ramanathan

Mailing Address 2287 Buckingham Ct

City Henderson	State NV	Zip Code 89074-5336
-------------------	-------------	------------------------

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

Name of Employer Self-Employed	Occupation Medical Doctor
-----------------------------------	------------------------------

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 21 / 2015

Transaction ID : SA11AI.C4614901

Amount of Each Receipt this Period
500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Bashir Rashid

Mailing Address 3309 Mission Creek Ct

City Las Vegas	State NV	Zip Code 89103-5183
-------------------	-------------	------------------------

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

Name of Employer Self-Employed	Occupation Medical Doctor
-----------------------------------	------------------------------

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 11 / 2015

Transaction ID : SA11AI.C4614625

Amount of Each Receipt this Period
500.00

Memo Item

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

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

1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 OF 175
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Tarkanian For Congress

A. Full Name (Last, First, Middle Initial)
Sandra Reitz

Mailing Address 4805 W Sweet Ave

City Visalia	State CA	Zip Code 93291
-----------------	-------------	-------------------

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

Name of Employer Real Estate Broker	Occupation Self-Employed
--	-----------------------------

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
750.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 03 / 2015

Transaction ID : SA11AI.C4613402

Amount of Each Receipt this Period
750.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Richard Reviglio

Mailing Address 950 South Rock Blvd

City Sparks	State NV	Zip Code 89431
----------------	-------------	-------------------

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

Name of Employer Western Nevada Supply	Occupation President
---	-------------------------

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 30 / 2015

Transaction ID : SA11AI.C4615161

Amount of Each Receipt this Period
500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Brian Richburg

Mailing Address 420 E Buckingham Way

City Fresno	State CA	Zip Code 93704
----------------	-------------	-------------------

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

Name of Employer Richburg Properties, Inc.	Occupation Self-Employed
---	-----------------------------

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 03 / 2015

Transaction ID : SA11AI.C4613393

Amount of Each Receipt this Period
300.00

Memo Item

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

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

1550.00

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

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

FOR LINE NUMBER: PAGE 48 OF 175
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Tarkanian For Congress

A. Full Name (Last, First, Middle Initial)
Brenda Robertson

Mailing Address 3541 Mont Blanc Court

City Carson City State NV Zip Code 89705

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

Name of Employer RAMAC Industries Occupation Business Owner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 02 / 2015

Transaction ID : SA11AI.C4614463

Amount of Each Receipt this Period
500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Hans Jorg Rosler

Mailing Address 90 Hawk Ridge Drive

City Las Vegas State NV Zip Code 89135

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

Name of Employer Self-Employed Occupation Physician

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 11 / 2015

Transaction ID : SA11AI.C4614626

Amount of Each Receipt this Period
500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Sansone DM Enterprises, LLC

Mailing Address 9017 S Pecos Road, Ste 4500

City Henderson State NV Zip Code 89074

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 31 / 2015

Transaction ID : SA11AI.C4615424

Amount of Each Receipt this Period
1000.00

Memo Item

Limited Liability Company, Allocation Below

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

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

2000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 OF 175
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Tarkanian For Congress

A. Full Name (Last, First, Middle Initial)
Roland Sansone

Mailing Address 9017 S Pecos Road, #4500

City Henderson State NV Zip Code 89074

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

Name of Employer Boulevard Ventures, LLC Occupation Owner/Manager

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 31 / 2015

Transaction ID : SA11AI.A4615424.0

Amount of Each Receipt this Period
 1000.00

Memo Item

Allocation - Member

B. Full Name (Last, First, Middle Initial)
George Saroyan

Mailing Address 2443 Picasso Circle

City Corona State CA Zip Code 92882

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

Name of Employer Homefield Financial Occupation Sales

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **675.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 18 / 2015

Transaction ID : SA11AI.C4614268

Amount of Each Receipt this Period
 675.00

Memo Item

In-Kind:Food and Beverages of 10/18/15 Fundraiser

C. Full Name (Last, First, Middle Initial)
Daniel Simon

Mailing Address 810 Casino Center Blvd

City Las Vegas State NV Zip Code 89101-6719

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

Name of Employer Daniel S Simon Law Office Occupation Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **750.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 23 / 2015

Transaction ID : SA11AI.C4613179

Amount of Each Receipt this Period
 750.00

Memo Item

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

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

1425.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 OF 175
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Tarkanian For Congress

A. Full Name (Last, First, Middle Initial)
Stephen Simsarian

Mailing Address 405 Serrano drive, 8C

City San Francisco	State CA	Zip Code 94132
-----------------------	-------------	-------------------

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

Name of Employer Self-Employed	Occupation Optician
-----------------------------------	------------------------

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
225.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 29 / 2015

Transaction ID : SA11AI.C4613241

Amount of Each Receipt this Period
50.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Stephen Simsarian

Mailing Address 405 Serrano drive, 8C

City San Francisco	State CA	Zip Code 94132
-----------------------	-------------	-------------------

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

Name of Employer Self-Employed	Occupation Optician
-----------------------------------	------------------------

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
225.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 30 / 2015

Transaction ID : SA11AI.C4615158

Amount of Each Receipt this Period
25.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Harvey Singh

Mailing Address 7425 E Dinuba Ave

City Selma	State CA	Zip Code 93662
---------------	-------------	-------------------

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

Name of Employer Self-Employed	Occupation Farming
-----------------------------------	-----------------------

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 23 / 2015

Transaction ID : SA11AI.C4614059

Amount of Each Receipt this Period
250.00

Memo Item

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

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

325.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 OF 175
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Tarkanian For Congress

A. Full Name (Last, First, Middle Initial)
Richard F Spencer

Mailing Address 5286 E Home Ave

City: Fresno State: CA Zip Code: 93727

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

Name of Employer: Spencer Enterprises Occupation: President

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date: 2700.00

Date of Receipt: 12 / 31 / 2015

Transaction ID : SA11AI.RA4606062.0

Amount of Each Receipt this Period: -2000.00

Memo Item

Reattribution Below

B. Full Name (Last, First, Middle Initial)
Karen Spencer

Mailing Address 5286 E Home Ave

City: Fresno State: CA Zip Code: 93727

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

Name of Employer: Requested Occupation: Requested

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date: 2000.00

Date of Receipt: 12 / 31 / 2015

Transaction ID : SA11AI.RA4606062.1

Amount of Each Receipt this Period: 2000.00

Memo Item

Reattribution

C. Full Name (Last, First, Middle Initial)
Richard F Spencer

Mailing Address 5286 E Home Ave

City: Fresno State: CA Zip Code: 93727

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

Name of Employer: Spencer Enterprises Occupation: President

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date: 2700.00

Date of Receipt: 12 / 21 / 2015

Transaction ID : SA11AI.C4614907

Amount of Each Receipt this Period: 2000.00

Memo Item

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

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

2000.00

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

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

FOR LINE NUMBER: PAGE 52 OF 175
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Tarkanian For Congress

A. Full Name (Last, First, Middle Initial)
John Steffen

Mailing Address 2025 Waterbury Lane

City State Zip Code
Las Vegas NV 89134

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

Name of Employer Occupation
Hutchinson and Steffen Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 06 / 2015

Transaction ID : SA11AI.C4614030

Amount of Each Receipt this Period
 250.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Myron Tarkanian

Mailing Address 1220 Rodeo Road

City State Zip Code
Arcadia CA 91006

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

Name of Employer Occupation
Self-Employed Property Management

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 01 / 2015

Transaction ID : SA11AI.C4607964

Amount of Each Receipt this Period
 500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
MaryKay Tarkanian

Mailing Address 7796 Shandon Hills Way

City State Zip Code
Las Vegas NV 89149

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

Name of Employer Occupation
Ruvo Clinic Administration

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 02 / 2015

Transaction ID : SA11AI.C4614464

Amount of Each Receipt this Period
 2600.00

Memo Item

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

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

3350.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 53 OF 175
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Tarkanian For Congress

A. Full Name (Last, First, Middle Initial)
George Tarkanian

Mailing Address 7796 Shandon Hills Way

City Las Vegas	State NV	Zip Code 89149
-------------------	-------------	-------------------

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

Name of Employer CCSN	Occupation Teacher
--------------------------	-----------------------

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 02 / 2015

Transaction ID : SA11AI.C4614465

Amount of Each Receipt this Period
2600.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Pam Tarkanian

Mailing Address 2601 Pinto Lane

City Las Vegas	State NV	Zip Code 89107
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FEC ID number of contributing federal political committee. **C**

Name of Employer Clark County School District	Occupation Administrator
--	-----------------------------

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 31 / 2015

Transaction ID : SA11AI.C4615419

Amount of Each Receipt this Period
2600.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Paul Tatarian

Mailing Address 549 E Shell Drake Circle

City Fresno	State CA	Zip Code 93730-1232
----------------	-------------	------------------------

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

Name of Employer Fort Washington Fitness	Occupation Personal Training
---	---------------------------------

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 03 / 2015

Transaction ID : SA11AI.C4613392

Amount of Each Receipt this Period
500.00

Memo Item

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

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

5700.00

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

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

FOR LINE NUMBER: PAGE 54 OF 175
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Tarkanian For Congress

A. Full Name (Last, First, Middle Initial)
Brian Tatarian

Mailing Address 549 E Shell Drake Circle

City State Zip Code
Fresno CA 93730

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

Name of Employer Occupation
Self-Employed Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1175.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 18 / 2015

Transaction ID : SA11AI.C4614270

Amount of Each Receipt this Period
675.00

Memo Item
In-Kind: Food and Beverages of 10/18/15 Fundraiser

B. Full Name (Last, First, Middle Initial)
Robert Too koian

Mailing Address 2520 W Magill

City State Zip Code
Fresno CA 93711

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

Name of Employer Occupation
Integrated Prescription Management Business Development Officer

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 03 / 2015

Transaction ID : SA11AI.C4613407

Amount of Each Receipt this Period
250.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Triple B Ranch

Mailing Address 10152 N Peach

City State Zip Code
Clovis CA 93612

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 03 / 2015

Transaction ID : SA11AI.C4613657

Amount of Each Receipt this Period
500.00

Memo Item

Allocation Below

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

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

1425.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 55 OF 175
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Tarkanian For Congress

A. Full Name (Last, First, Middle Initial)
William Smittcamp

Mailing Address 10152 N Peach

City Clovis State CA Zip Code 93612

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

Name of Employer Triple B Ranch Occupation Owner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
11 / 03 / 2015

Transaction ID : SA11AI.A4613657.0

Amount of Each Receipt this Period
500.00

Memo Item

Allocation

B. Full Name (Last, First, Middle Initial)
Carl Ueland

Mailing Address 7529 W Shaw Ave

City Fresno State CA Zip Code 93723

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

Name of Employer Retired Occupation Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
12 / 08 / 2015

Transaction ID : SA11AI.C4614859

Amount of Each Receipt this Period
1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Mark Warkentien

Mailing Address 13657 Provincial Hill Way

City Lake Oswego State OR Zip Code 97035

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

Name of Employer MSG , Inc. Occupation Director of Player Personnel

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
12 / 11 / 2015

Transaction ID : SA11AI.C4614624

Amount of Each Receipt this Period
100.00

Memo Item

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

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

1100.00

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

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

FOR LINE NUMBER: PAGE 56 OF 175
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Tarkanian For Congress

A. Full Name (Last, First, Middle Initial)
Maynard Wiens, Jr.

Mailing Address 2300 Mohigan Way

City Las Vegas State NV Zip Code 89169

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

Name of Employer Ted Wiens Tire and Auto Centers Occupation Tire Dealer

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 30 / 2015

Transaction ID : SA11AI.C4615162

Amount of Each Receipt this Period
1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Ronnie Williams

Mailing Address 1369 Harvard Place

City Hanford State CA Zip Code 93230-2540

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

Name of Employer Self Insured Solutions Occupation Sales

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 03 / 2015

Transaction ID : SA11AI.C4613398

Amount of Each Receipt this Period
500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Vahe Ter Zakarian

Mailing Address 3044 Emerald Isle Drive

City Glendale State CA Zip Code 91206-1010

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

Name of Employer Heart to Heart Health Care, Inc. Occupation Principal

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 11 / 2015

Transaction ID : SA11AI.C4614628

Amount of Each Receipt this Period
1000.00

Memo Item

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

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

2500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 57 OF 175
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Tarkanian For Congress

A. Full Name (Last, First, Middle Initial)
Clem Zirolì, Jr.

Mailing Address 2689 Red Arrow

City Las Vegas State NV Zip Code 89135

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

Name of Employer First Mortgage Corporation Occupation Mortgage Banker

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 23 / 2015

Transaction ID : SA11AI.C4613237

Amount of Each Receipt this Period
 2700.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Pete Zopolos

Mailing Address 3008 Campbell Circle

City Las Vegas State NV Zip Code 89107

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

Name of Employer JAMD LLC Occupation Property Management

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 31 / 2015

Transaction ID : SA11AI.C4615425

Amount of Each Receipt this Period
 1000.00

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)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

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

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

3700.00

126504.44

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 58 OF 175
<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
		<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Tarkanian For Congress

A. Boyd Political Action Committee
 Full Name (Last, First, Middle Initial)
 Mailing Address 6465 S Rainbow Blvd
 City Las Vegas State NV Zip Code 89118
 FEC ID number of contributing federal political committee. **C** C00142315
 Name of Employer Occupation
 Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 21 / 2015
Transaction ID : SA11C.C4614898
 Amount of Each Receipt this Period
 1000.00
 Memo Item

B. Caesars Entertainment Corporation Political Action Committee
 Full Name (Last, First, Middle Initial)
 Mailing Address One Caesars Palace Drive
 City Las Vegas State NV Zip Code 89109
 FEC ID number of contributing federal political committee. **C** C00239947
 Name of Employer Occupation
 Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date 2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 21 / 2015
Transaction ID : SA11C.C4614899
 Amount of Each Receipt this Period
 1500.00
 Memo Item

C. Zuffa PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 2350 Kerner Blvd, Suite 250
 City San Rafael State CA Zip Code 94901
 FEC ID number of contributing federal political committee. **C** C00459693
 Name of Employer Occupation
 Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date 1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 02 / 2015
Transaction ID : SA11C.C4614455
 Amount of Each Receipt this Period
 1500.00
 Memo Item

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

4000.00
 4000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 59 OF 175
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input checked="" type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Tarkanian For Congress

A. Full Name (Last, First, Middle Initial)
Danny Tarkanian

Mailing Address 3008 Campbell Circle

City Las Vegas State NV Zip Code 89107

FEC ID number of contributing federal political committee. **C H2NV04045**

Name of Employer Danny Tarkanian Occupation Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **16042.42**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 02 / 2015

Transaction ID : SA11D.C4613674

Amount of Each Receipt this Period
 _____ 76.94

Memo Item
 In-Kind: In-Kind to be reimbursed; Meals

B. Full Name (Last, First, Middle Initial)
Danny Tarkanian

Mailing Address 3008 Campbell Circle

City Las Vegas State NV Zip Code 89107

FEC ID number of contributing federal political committee. **C H2NV04045**

Name of Employer Danny Tarkanian Occupation Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **16042.42**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 04 / 2015

Transaction ID : SA11D.C4613675

Amount of Each Receipt this Period
 _____ 7.00

Memo Item
 In-Kind: In-Kind to be reimbursed; Meal

C. Full Name (Last, First, Middle Initial)
Danny Tarkanian

Mailing Address 3008 Campbell Circle

City Las Vegas State NV Zip Code 89107

FEC ID number of contributing federal political committee. **C H2NV04045**

Name of Employer Danny Tarkanian Occupation Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **16042.42**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 04 / 2015

Transaction ID : SA11D.C4613676

Amount of Each Receipt this Period
 _____ 378.36

Memo Item
 In-Kind: Candidate Travel. Spirit Airlines: 3200 East Airfield Drive Dallas TX 75261

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

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

_____ 462.30

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 60 OF 175
<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input checked="" type="checkbox"/> 11d 14
			<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Tarkanian For Congress

A. Full Name (Last, First, Middle Initial)
Danny Tarkanian

Mailing Address 3008 Campbell Circle

City Las Vegas State NV Zip Code 89107

FEC ID number of contributing federal political committee. **C H2NV04045**

Name of Employer Danny Tarkanian Occupation Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **16042.42**

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 02 / 2015

Transaction ID : SA11D.C4613677

Amount of Each Receipt this Period
2.00

Memo Item
In-Kind:In-Kind to be reimbursed; Parking

B. Full Name (Last, First, Middle Initial)
Danny Tarkanian

Mailing Address 3008 Campbell Circle

City Las Vegas State NV Zip Code 89107

FEC ID number of contributing federal political committee. **C H2NV04045**

Name of Employer Danny Tarkanian Occupation Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **16042.42**

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 12 / 2015

Transaction ID : SA11D.C4613678

Amount of Each Receipt this Period
28.04

Memo Item
In-Kind:In-Kind to be reimbursed; Parking

C. Full Name (Last, First, Middle Initial)
Danny Tarkanian

Mailing Address 3008 Campbell Circle

City Las Vegas State NV Zip Code 89107

FEC ID number of contributing federal political committee. **C H2NV04045**

Name of Employer Danny Tarkanian Occupation Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **16042.42**

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 15 / 2015

Transaction ID : SA11D.C4613679

Amount of Each Receipt this Period
54.72

Memo Item
In-Kind:In-Kind to be reimbursed; travel

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

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

84.76

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 61 OF 175
<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input checked="" type="checkbox"/> 11d 14
			<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Tarkanian For Congress

A. Full Name (Last, First, Middle Initial)
Danny Tarkanian

Mailing Address 3008 Campbell Circle

City Las Vegas State NV Zip Code 89107

FEC ID number of contributing federal political committee. **C H2NV04045**

Name of Employer Danny Tarkanian Occupation Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **16042.42**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 16 / 2015

Transaction ID : SA11D.C4613680

Amount of Each Receipt this Period
 _____ 57.89

Memo Item
 In-Kind: In-Kind to be reimbursed; travel

B. Full Name (Last, First, Middle Initial)
Danny Tarkanian

Mailing Address 3008 Campbell Circle

City Las Vegas State NV Zip Code 89107

FEC ID number of contributing federal political committee. **C H2NV04045**

Name of Employer Danny Tarkanian Occupation Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **16042.42**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 16 / 2015

Transaction ID : SA11D.C4613681

Amount of Each Receipt this Period
 _____ 29.19

Memo Item
 In-Kind: In-Kind to be reimbursed; meal

C. Full Name (Last, First, Middle Initial)
Danny Tarkanian

Mailing Address 3008 Campbell Circle

City Las Vegas State NV Zip Code 89107

FEC ID number of contributing federal political committee. **C H2NV04045**

Name of Employer Danny Tarkanian Occupation Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **16042.42**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 17 / 2015

Transaction ID : SA11D.C4613682

Amount of Each Receipt this Period
 _____ 12.83

Memo Item
 In-Kind: In-Kind to be reimbursed; meal

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

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

_____ 99.91

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 62 OF 175
<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input checked="" type="checkbox"/> 11d 14
			<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Tarkanian For Congress

A. Full Name (Last, First, Middle Initial)
Danny Tarkanian

Mailing Address 3008 Campbell Circle

City Las Vegas State NV Zip Code 89107

FEC ID number of contributing federal political committee. **C H2NV04045**

Name of Employer Danny Tarkanian Occupation Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **16042.42**

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 17 / 2015

Transaction ID : SA11D.C4613683

Amount of Each Receipt this Period
11.91

Memo Item
In-Kind: In-Kind to be reimbursed; meal

B. Full Name (Last, First, Middle Initial)
Danny Tarkanian

Mailing Address 3008 Campbell Circle

City Las Vegas State NV Zip Code 89107

FEC ID number of contributing federal political committee. **C H2NV04045**

Name of Employer Danny Tarkanian Occupation Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **16042.42**

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 18 / 2015

Transaction ID : SA11D.C4613684

Amount of Each Receipt this Period
33.95

Memo Item
In-Kind: In-Kind to be reimbursed; travel

C. Full Name (Last, First, Middle Initial)
Danny Tarkanian

Mailing Address 3008 Campbell Circle

City Las Vegas State NV Zip Code 89107

FEC ID number of contributing federal political committee. **C H2NV04045**

Name of Employer Danny Tarkanian Occupation Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **16042.42**

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 18 / 2015

Transaction ID : SA11D.C4613685

Amount of Each Receipt this Period
12.78

Memo Item
In-Kind: In-Kind to be reimbursed; meal

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

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

58.64

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 63 OF 175
<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input checked="" type="checkbox"/> 11d 14
			<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Tarkanian For Congress

A. Full Name (Last, First, Middle Initial)
Danny Tarkanian

Mailing Address 3008 Campbell Circle

City Las Vegas State NV Zip Code 89107

FEC ID number of contributing federal political committee. **C H2NV04045**

Name of Employer Danny Tarkanian Occupation Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **16042.42**

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 18 / 2015

Transaction ID : SA11D.C4613686

Amount of Each Receipt this Period
6.46

Memo Item
In-Kind: In-Kind to be reimbursed; meal

B. Full Name (Last, First, Middle Initial)
Danny Tarkanian

Mailing Address 3008 Campbell Circle

City Las Vegas State NV Zip Code 89107

FEC ID number of contributing federal political committee. **C H2NV04045**

Name of Employer Danny Tarkanian Occupation Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **16042.42**

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 19 / 2015

Transaction ID : SA11D.C4613687

Amount of Each Receipt this Period
6.43

Memo Item
In-Kind: In-Kind to be reimbursed; meal

C. Full Name (Last, First, Middle Initial)
Danny Tarkanian

Mailing Address 3008 Campbell Circle

City Las Vegas State NV Zip Code 89107

FEC ID number of contributing federal political committee. **C H2NV04045**

Name of Employer Danny Tarkanian Occupation Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **16042.42**

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 20 / 2015

Transaction ID : SA11D.C4613688

Amount of Each Receipt this Period
18.00

Memo Item
In-Kind: In-Kind to be reimbursed; taxi fare

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

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

30.89

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 64 OF 175
<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input checked="" type="checkbox"/> 11d 14
			<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Tarkanian For Congress

A. Full Name (Last, First, Middle Initial)
Danny Tarkanian

Mailing Address 3008 Campbell Circle

City Las Vegas State NV Zip Code 89107

FEC ID number of contributing federal political committee. **C H2NV04045**

Name of Employer Danny Tarkanian Occupation Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **16042.42**

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 20 / 2015

Transaction ID : SA11D.C4613689

Amount of Each Receipt this Period
20.00

Memo Item
In-Kind: In-Kind to be reimbursed; Taxi fare

B. Full Name (Last, First, Middle Initial)
Danny Tarkanian

Mailing Address 3008 Campbell Circle

City Las Vegas State NV Zip Code 89107

FEC ID number of contributing federal political committee. **C H2NV04045**

Name of Employer Danny Tarkanian Occupation Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **16042.42**

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 20 / 2015

Transaction ID : SA11D.C4613690

Amount of Each Receipt this Period
7.28

Memo Item
In-Kind: In-Kind to be reimbursed; taxi fare

C. Full Name (Last, First, Middle Initial)
Danny Tarkanian

Mailing Address 3008 Campbell Circle

City Las Vegas State NV Zip Code 89107

FEC ID number of contributing federal political committee. **C H2NV04045**

Name of Employer Danny Tarkanian Occupation Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **16042.42**

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 20 / 2015

Transaction ID : SA11D.C4613691

Amount of Each Receipt this Period
5.95

Memo Item
In-Kind: In-Kind to be reimbursed; meal

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

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

33.23

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 65 OF 175
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a
	<input type="checkbox"/> 11c 13b	<input checked="" type="checkbox"/> 11d 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Tarkanian For Congress

A. Full Name (Last, First, Middle Initial)
Danny Tarkanian

Mailing Address 3008 Campbell Circle

City Las Vegas State NV Zip Code 89107

FEC ID number of contributing federal political committee. **C H2NV04045**

Name of Employer Danny Tarkanian Occupation Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **16042.42**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 20 / 2015

Transaction ID : SA11D.C4613692

Amount of Each Receipt this Period
 _____ 15.46

Memo Item
 In-Kind: In-Kind to be reimbursed; meal

B. Full Name (Last, First, Middle Initial)
Danny Tarkanian

Mailing Address 3008 Campbell Circle

City Las Vegas State NV Zip Code 89107

FEC ID number of contributing federal political committee. **C H2NV04045**

Name of Employer Danny Tarkanian Occupation Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **16042.42**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 21 / 2015

Transaction ID : SA11D.C4613693

Amount of Each Receipt this Period
 _____ 18.70

Memo Item
 In-Kind: In-Kind to be reimbursed; meal

C. Full Name (Last, First, Middle Initial)
Danny Tarkanian

Mailing Address 3008 Campbell Circle

City Las Vegas State NV Zip Code 89107

FEC ID number of contributing federal political committee. **C H2NV04045**

Name of Employer Danny Tarkanian Occupation Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **16042.42**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 21 / 2015

Transaction ID : SA11D.C4613694

Amount of Each Receipt this Period
 _____ 12.32

Memo Item
 In-Kind: In-Kind to be reimbursed; meal

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

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

_____ 46.48

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 66 OF 175
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input checked="" type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Tarkanian For Congress

A. Full Name (Last, First, Middle Initial)
Danny Tarkanian

Mailing Address 3008 Campbell Circle

City Las Vegas State NV Zip Code 89107

FEC ID number of contributing federal political committee. **C H2NV04045**

Name of Employer Danny Tarkanian Occupation Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **16042.42**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 21 / 2015

Transaction ID : SA11D.C4613695

Amount of Each Receipt this Period
 _____ 20.00

Memo Item
 In-Kind: In-Kind to be reimbursed; taxi fare

B. Full Name (Last, First, Middle Initial)
Danny Tarkanian

Mailing Address 3008 Campbell Circle

City Las Vegas State NV Zip Code 89107

FEC ID number of contributing federal political committee. **C H2NV04045**

Name of Employer Danny Tarkanian Occupation Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **16042.42**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 21 / 2015

Transaction ID : SA11D.C4613696

Amount of Each Receipt this Period
 _____ 87.75

Memo Item
 In-Kind: In-Kind to be reimbursed; meals

C. Full Name (Last, First, Middle Initial)
Danny Tarkanian

Mailing Address 3008 Campbell Circle

City Las Vegas State NV Zip Code 89107

FEC ID number of contributing federal political committee. **C H2NV04045**

Name of Employer Danny Tarkanian Occupation Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **16042.42**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 21 / 2015

Transaction ID : SA11D.C4613697

Amount of Each Receipt this Period
 _____ 7.70

Memo Item
 In-Kind: In-Kind to be reimbursed; beverage

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

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

_____ 115.45

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 67 OF 175
<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input checked="" type="checkbox"/> 11d 14
			<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Tarkanian For Congress

A. Full Name (Last, First, Middle Initial)
Danny Tarkanian

Mailing Address 3008 Campbell Circle

City Las Vegas	State NV	Zip Code 89107
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** H2NV04045

Name of Employer Danny Tarkanian	Occupation Attorney
-------------------------------------	------------------------

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
16042.42

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		21		2015

Transaction ID : SA11D.C4613698

Amount of Each Receipt this Period
124.90

Memo Item
In-Kind: In-Kind to be reimbursed; taxi fare

B. Full Name (Last, First, Middle Initial)
Danny Tarkanian

Mailing Address 3008 Campbell Circle

City Las Vegas	State NV	Zip Code 89107
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** H2NV04045

Name of Employer Danny Tarkanian	Occupation Attorney
-------------------------------------	------------------------

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
16042.42

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		21		2015

Transaction ID : SA11D.C4613699

Amount of Each Receipt this Period
8.09

Memo Item
In-Kind: In-Kind to be reimbursed; beverage

C. Full Name (Last, First, Middle Initial)
Danny Tarkanian

Mailing Address 3008 Campbell Circle

City Las Vegas	State NV	Zip Code 89107
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** H2NV04045

Name of Employer Danny Tarkanian	Occupation Attorney
-------------------------------------	------------------------

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
16042.42

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		21		2015

Transaction ID : SA11D.C4613700

Amount of Each Receipt this Period
17.30

Memo Item
In-Kind: In-Kind to be reimbursed; taxi fare

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

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

150.29

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 68 OF 175
<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input checked="" type="checkbox"/> 11d 14
			<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Tarkanian For Congress

A. Full Name (Last, First, Middle Initial)
Danny Tarkanian

Mailing Address 3008 Campbell Circle

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FEC ID number of contributing federal political committee. **C H2NV04045**

Name of Employer Danny Tarkanian Occupation Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
16042.42

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 21 / 2015

Transaction ID : SA11D.C4613701

Amount of Each Receipt this Period
10.82

Memo Item
In-Kind: In-Kind to be reimbursed; taxi fare

B. Full Name (Last, First, Middle Initial)
Danny Tarkanian

Mailing Address 3008 Campbell Circle

City Las Vegas State NV Zip Code 89107

FEC ID number of contributing federal political committee. **C H2NV04045**

Name of Employer Danny Tarkanian Occupation Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
16042.42

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 21 / 2015

Transaction ID : SA11D.C4613702

Amount of Each Receipt this Period
13.27

Memo Item
In-Kind: In-Kind to be reimbursed; taxi fare

C. Full Name (Last, First, Middle Initial)
Danny Tarkanian

Mailing Address 3008 Campbell Circle

City Las Vegas State NV Zip Code 89107

FEC ID number of contributing federal political committee. **C H2NV04045**

Name of Employer Danny Tarkanian Occupation Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
16042.42

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 22 / 2015

Transaction ID : SA11D.C4613703

Amount of Each Receipt this Period
7.87

Memo Item
In-Kind: In-Kind to be reimbursed; meal

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

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

31.96

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 69 OF 175
<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input checked="" type="checkbox"/> 11d 14
			<input type="checkbox"/> 15

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Tarkanian For Congress

A. Full Name (Last, First, Middle Initial)
Danny Tarkanian

Mailing Address 3008 Campbell Circle

City Las Vegas State NV Zip Code 89107

FEC ID number of contributing federal political committee. **C H2NV04045**

Name of Employer Danny Tarkanian Occupation Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **16042.42**

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 22 / 2015

Transaction ID : SA11D.C4613704

Amount of Each Receipt this Period
113.73

Memo Item
In-Kind:In-Kind to be reimbursed; taxi fare

B. Full Name (Last, First, Middle Initial)
Danny Tarkanian

Mailing Address 3008 Campbell Circle

City Las Vegas State NV Zip Code 89107

FEC ID number of contributing federal political committee. **C H2NV04045**

Name of Employer Danny Tarkanian Occupation Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **16042.42**

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 22 / 2015

Transaction ID : SA11D.C4613705

Amount of Each Receipt this Period
5.58

Memo Item
In-Kind:In-Kind to be reimbursed; taxi fare

C. Full Name (Last, First, Middle Initial)
Danny Tarkanian

Mailing Address 3008 Campbell Circle

City Las Vegas State NV Zip Code 89107

FEC ID number of contributing federal political committee. **C H2NV04045**

Name of Employer Danny Tarkanian Occupation Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **16042.42**

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 22 / 2015

Transaction ID : SA11D.C4613706

Amount of Each Receipt this Period
22.01

Memo Item
In-Kind:In-Kind to be reimbursed; meal

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

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

141.32

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 70 OF 175
<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input checked="" type="checkbox"/> 11d 14
			<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Tarkanian For Congress

A. Full Name (Last, First, Middle Initial)
Danny Tarkanian

Mailing Address 3008 Campbell Circle

City Las Vegas State NV Zip Code 89107

FEC ID number of contributing federal political committee. **C H2NV04045**

Name of Employer Danny Tarkanian Occupation Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **16042.42**

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 22 / 2015

Transaction ID : SA11D.C4613707

Amount of Each Receipt this Period
48.29

Memo Item
In-Kind: In-Kind to be reimbursed; meal

B. Full Name (Last, First, Middle Initial)
Danny Tarkanian

Mailing Address 3008 Campbell Circle

City Las Vegas State NV Zip Code 89107

FEC ID number of contributing federal political committee. **C H2NV04045**

Name of Employer Danny Tarkanian Occupation Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **16042.42**

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 23 / 2015

Transaction ID : SA11D.C4613708

Amount of Each Receipt this Period
57.23

Memo Item
In-Kind: In-Kind to be reimbursed; meal

C. Full Name (Last, First, Middle Initial)
Danny Tarkanian

Mailing Address 3008 Campbell Circle

City Las Vegas State NV Zip Code 89107

FEC ID number of contributing federal political committee. **C H2NV04045**

Name of Employer Danny Tarkanian Occupation Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **16042.42**

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 23 / 2015

Transaction ID : SA11D.C4613709

Amount of Each Receipt this Period
77.08

Memo Item
In-Kind: In-Kind to be reimbursed; office supplies from Office Depot

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

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

182.60

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 71 OF 175
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input checked="" type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Tarkanian For Congress

A. Full Name (Last, First, Middle Initial)
Danny Tarkanian

Mailing Address 3008 Campbell Circle

City Las Vegas State NV Zip Code 89107

FEC ID number of contributing federal political committee. **C H2NV04045**

Name of Employer Danny Tarkanian Occupation Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **16042.42**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 24 / 2015

Transaction ID : SA11D.C4613710

Amount of Each Receipt this Period
 _____ 58.75

Memo Item
 In-Kind: In-Kind to be reimbursed; travel

B. Full Name (Last, First, Middle Initial)
Danny Tarkanian

Mailing Address 3008 Campbell Circle

City Las Vegas State NV Zip Code 89107

FEC ID number of contributing federal political committee. **C H2NV04045**

Name of Employer Danny Tarkanian Occupation Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **16042.42**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 26 / 2015

Transaction ID : SA11D.C4613711

Amount of Each Receipt this Period
 _____ 540.00

Memo Item
 In-Kind: Radio Ad. Battle Born Radio; 6163 Arbor Alley Ave. Las Vegas NV 89139

C. Full Name (Last, First, Middle Initial)
Danny Tarkanian

Mailing Address 3008 Campbell Circle

City Las Vegas State NV Zip Code 89107

FEC ID number of contributing federal political committee. **C H2NV04045**

Name of Employer Danny Tarkanian Occupation Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **16042.42**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 27 / 2015

Transaction ID : SA11D.C4613712

Amount of Each Receipt this Period
 _____ 22.81

Memo Item
 In-Kind: In-Kind to be reimbursed; meal

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

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

_____ 621.56

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 72 OF 175
<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input checked="" type="checkbox"/> 11d 14
			<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Tarkanian For Congress

A. Full Name (Last, First, Middle Initial)
Danny Tarkanian

Mailing Address 3008 Campbell Circle

City Las Vegas State NV Zip Code 89107

FEC ID number of contributing federal political committee. **C H2NV04045**

Name of Employer Danny Tarkanian Occupation Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **16042.42**

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 27 / 2015

Transaction ID : SA11D.C4613713

Amount of Each Receipt this Period
13.50

Memo Item
In-Kind: In-Kind to be reimbursed; meal

B. Full Name (Last, First, Middle Initial)
Danny Tarkanian

Mailing Address 3008 Campbell Circle

City Las Vegas State NV Zip Code 89107

FEC ID number of contributing federal political committee. **C H2NV04045**

Name of Employer Danny Tarkanian Occupation Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **16042.42**

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 27 / 2015

Transaction ID : SA11D.C4613714

Amount of Each Receipt this Period
60.00

Memo Item
In-Kind: In-Kind to be reimbursed; meal

C. Full Name (Last, First, Middle Initial)
Danny Tarkanian

Mailing Address 3008 Campbell Circle

City Las Vegas State NV Zip Code 89107

FEC ID number of contributing federal political committee. **C H2NV04045**

Name of Employer Danny Tarkanian Occupation Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **16042.42**

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 02 / 2015

Transaction ID : SA11D.C4613715

Amount of Each Receipt this Period
30.00

Memo Item
In-Kind: In-Kind to be reimbursed; meal

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

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

103.50

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 73 OF 175
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input checked="" type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Tarkanian For Congress

A. Full Name (Last, First, Middle Initial)
Danny Tarkanian

Mailing Address 3008 Campbell Circle

City Las Vegas State NV Zip Code 89107

FEC ID number of contributing federal political committee. **C H2NV04045**

Name of Employer Danny Tarkanian Occupation Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **16042.42**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
11 / 03 / 2015

Transaction ID : SA11D.C4613716

Amount of Each Receipt this Period
 _____ **16.97**

Memo Item
 In-Kind: In-Kind to be reimbursed; meal

B. Full Name (Last, First, Middle Initial)
Danny Tarkanian

Mailing Address 3008 Campbell Circle

City Las Vegas State NV Zip Code 89107

FEC ID number of contributing federal political committee. **C H2NV04045**

Name of Employer Danny Tarkanian Occupation Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **16042.42**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
11 / 14 / 2015

Transaction ID : SA11D.C4613717

Amount of Each Receipt this Period
 _____ **15.00**

Memo Item
 In-Kind: In-Kind to be reimbursed; meal

C. Full Name (Last, First, Middle Initial)
Danny Tarkanian

Mailing Address 3008 Campbell Circle

City Las Vegas State NV Zip Code 89107

FEC ID number of contributing federal political committee. **C H2NV04045**

Name of Employer Danny Tarkanian Occupation Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **16042.42**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
11 / 09 / 2015

Transaction ID : SA11D.C4613718

Amount of Each Receipt this Period
 _____ **1786.00**

Memo Item
 In-Kind: Campaign Materials. Vegas Sports Apparel: 2299 Malaga Peak Las Vegas NV 8913

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

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

_____ **1817.97**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 74 OF 175
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input checked="" type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Tarkanian For Congress

A. Full Name (Last, First, Middle Initial)
Danny Tarkanian

Mailing Address 3008 Campbell Circle

City Las Vegas State NV Zip Code 89107

FEC ID number of contributing federal political committee. **C H2NV04045**

Name of Employer Danny Tarkanian Occupation Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **16042.42**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 16 / 2015

Transaction ID : SA11D.C4614631

Amount of Each Receipt this Period
 _____ 7.59

Memo Item
 In-Kind: In-Kind to be reimbursed; travel

B. Full Name (Last, First, Middle Initial)
Danny Tarkanian

Mailing Address 3008 Campbell Circle

City Las Vegas State NV Zip Code 89107

FEC ID number of contributing federal political committee. **C H2NV04045**

Name of Employer Danny Tarkanian Occupation Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **16042.42**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 16 / 2015

Transaction ID : SA11D.C4614632

Amount of Each Receipt this Period
 _____ 8.78

Memo Item
 In-Kind: In-Kind to be reimbursed; meal

C. Full Name (Last, First, Middle Initial)
Danny Tarkanian

Mailing Address 3008 Campbell Circle

City Las Vegas State NV Zip Code 89107

FEC ID number of contributing federal political committee. **C H2NV04045**

Name of Employer Danny Tarkanian Occupation Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **16042.42**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 16 / 2015

Transaction ID : SA11D.C4614633

Amount of Each Receipt this Period
 _____ 2.00

Memo Item
 In-Kind: In-Kind to be reimbursed; media

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

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

_____ 18.37

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 75 OF 175
<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input checked="" type="checkbox"/> 11d 14
			<input type="checkbox"/> 15

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)
Tarkanian For Congress

A. Full Name (Last, First, Middle Initial)
Danny Tarkanian

Mailing Address 3008 Campbell Circle

City Las Vegas State NV Zip Code 89107

FEC ID number of contributing federal political committee. **C H2NV04045**

Name of Employer Danny Tarkanian Occupation Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **16042.42**

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 16 / 2015

Transaction ID : SA11D.C4614634

Amount of Each Receipt this Period
25.00

Memo Item
In-Kind: In-Kind to be reimbursed; travel

B. Full Name (Last, First, Middle Initial)
Danny Tarkanian

Mailing Address 3008 Campbell Circle

City Las Vegas State NV Zip Code 89107

FEC ID number of contributing federal political committee. **C H2NV04045**

Name of Employer Danny Tarkanian Occupation Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **16042.42**

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 16 / 2015

Transaction ID : SA11D.C4614635

Amount of Each Receipt this Period
15.00

Memo Item
In-Kind: In-Kind to be reimbursed; parking

C. Full Name (Last, First, Middle Initial)
Danny Tarkanian

Mailing Address 3008 Campbell Circle

City Las Vegas State NV Zip Code 89107

FEC ID number of contributing federal political committee. **C H2NV04045**

Name of Employer Danny Tarkanian Occupation Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **16042.42**

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 16 / 2015

Transaction ID : SA11D.C4614637

Amount of Each Receipt this Period
38.90

Memo Item
In-Kind: In-Kind to be reimbursed; car rental

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

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

78.90

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 76 OF 175
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input checked="" type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
Tarkanian For Congress

A. Full Name (Last, First, Middle Initial)
Danny Tarkanian

Mailing Address 3008 Campbell Circle

City Las Vegas State NV Zip Code 89107

FEC ID number of contributing federal political committee. **C H2NV04045**

Name of Employer Danny Tarkanian Occupation Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **16042.42**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 12 / 2015

Transaction ID : SA11D.C4614638

Amount of Each Receipt this Period
 439.96

Memo Item
 In-Kind:Candidate Travel. Southwest Airlines: 2702 Love Field Drive Dallas TX 75235

B. Full Name (Last, First, Middle Initial)
Danny Tarkanian

Mailing Address 3008 Campbell Circle

City Las Vegas State NV Zip Code 89107

FEC ID number of contributing federal political committee. **C H2NV04045**

Name of Employer Danny Tarkanian Occupation Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **16042.42**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 07 / 2015

Transaction ID : SA11D.C4614642

Amount of Each Receipt this Period
 1200.00

Memo Item
 In-Kind:Radio Ad. Battle Born Radio: 6163 Arbor Alley Ave. Las Vegas NV 89139

C. Full Name (Last, First, Middle Initial)
Danny Tarkanian

Mailing Address 3008 Campbell Circle

City Las Vegas State NV Zip Code 89107

FEC ID number of contributing federal political committee. **C H2NV04045**

Name of Employer Danny Tarkanian Occupation Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **16042.42**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 11 / 2015

Transaction ID : SA11D.C4615611

Amount of Each Receipt this Period
 64.60

Memo Item
 In-Kind:In-Kind to be reimbursed; postage

SUBTOTAL of Receipts This Page (optional).....	1704.56
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 77 OF 175
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input checked="" type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
Tarkanian For Congress

Full Name (Last, First, Middle Initial) Danny Tarkanian		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 29 / 2015
Mailing Address 3008 Campbell Circle		Transaction ID : SA11D.C4615612
City Las Vegas	State NV	
FEC ID number of contributing federal political committee. C H2NV04045		Amount of Each Receipt this Period 55.00
Name of Employer Danny Tarkanian	Occupation Attorney	<input type="checkbox"/> Memo Item
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 16042.42	In-Kind: In-Kind to be reimbursed; Website Services

Full Name (Last, First, Middle Initial) Danny Tarkanian		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 15 / 2015
Mailing Address 3008 Campbell Circle		Transaction ID : SA11D.C4615613
City Las Vegas	State NV	
FEC ID number of contributing federal political committee. C H2NV04045		Amount of Each Receipt this Period 21.00
Name of Employer Danny Tarkanian	Occupation Attorney	<input type="checkbox"/> Memo Item
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 16042.42	In-Kind: In-Kind to be reimbursed; meal

Full Name (Last, First, Middle Initial) Danny Tarkanian		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 20 / 2015
Mailing Address 3008 Campbell Circle		Transaction ID : SA11D.C4615614
City Las Vegas	State NV	
FEC ID number of contributing federal political committee. C H2NV04045		Amount of Each Receipt this Period 42.03
Name of Employer Danny Tarkanian	Occupation Attorney	<input type="checkbox"/> Memo Item
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 16042.42	In-Kind: In-Kind to be reimbursed; stationary

SUBTOTAL of Receipts This Page (optional).....	118.03
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 78 OF 175
<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input checked="" type="checkbox"/> 11d 14
			<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Tarkanian For Congress

A. Full Name (Last, First, Middle Initial)
Danny Tarkanian

Mailing Address 3008 Campbell Circle

City Las Vegas State NV Zip Code 89107

FEC ID number of contributing federal political committee. **C H2NV04045**

Name of Employer Danny Tarkanian Occupation Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **16042.42**

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 31 / 2015

Transaction ID : SA11D.C4615615

Amount of Each Receipt this Period
200.25

Memo Item
In-Kind: Campaign Materials. Vegas Sports Apparel: 2299 Malaga Peak Las Vegas NV 89135

B. Full Name (Last, First, Middle Initial)
Danny Tarkanian

Mailing Address 3008 Campbell Circle

City Las Vegas State NV Zip Code 89107

FEC ID number of contributing federal political committee. **C H2NV04045**

Name of Employer Danny Tarkanian Occupation Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **16042.42**

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 31 / 2015

Transaction ID : SA11D.C4615616

Amount of Each Receipt this Period
120.00

Memo Item
In-Kind: In-Kind to be reimbursed; Campaign Logo Materials

C. Full Name (Last, First, Middle Initial)
Danny Tarkanian

Mailing Address 3008 Campbell Circle

City Las Vegas State NV Zip Code 89107

FEC ID number of contributing federal political committee. **C H2NV04045**

Name of Employer Danny Tarkanian Occupation Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **16042.42**

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 31 / 2015

Transaction ID : SA11D.C4615617

Amount of Each Receipt this Period
141.05

Memo Item
In-Kind: In-Kind to be reimbursed; Fundraiser Food

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

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

461.30

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 79 OF 175
<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input checked="" type="checkbox"/> 11d 14
			<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Tarkanian For Congress

A. Full Name (Last, First, Middle Initial)
Danny Tarkanian

Mailing Address 3008 Campbell Circle

City Las Vegas State NV Zip Code 89107

FEC ID number of contributing federal political committee. **C H2NV04045**

Name of Employer Danny Tarkanian Occupation Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
16042.42

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		08		2015

Transaction ID : SA11D.C4615618

Amount of Each Receipt this Period
55.00

Memo Item
In-Kind:In-Kind to be reimbursed; website services

B. Full Name (Last, First, Middle Initial)
Danny Tarkanian

Mailing Address 3008 Campbell Circle

City Las Vegas State NV Zip Code 89107

FEC ID number of contributing federal political committee. **C H2NV04045**

Name of Employer Danny Tarkanian Occupation Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
16042.42

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		14		2015

Transaction ID : SA11D.C4615619

Amount of Each Receipt this Period
55.00

Memo Item
In-Kind:In-Kind to be reimbursed; website services

C. Full Name (Last, First, Middle Initial)
Danny Tarkanian

Mailing Address 3008 Campbell Circle

City Las Vegas State NV Zip Code 89107

FEC ID number of contributing federal political committee. **C H2NV04045**

Name of Employer Danny Tarkanian Occupation Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
16042.42

Date of Receipt

M M	/	D D	/	Y Y Y Y
12		04		2015

Transaction ID : SA11D.C4615620

Amount of Each Receipt this Period
30.47

Memo Item
In-Kind:In-Kind to be reimbursed; meal

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

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

140.47

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 80 OF 175
<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input checked="" type="checkbox"/> 11d 14
			<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Tarkanian For Congress

A. Full Name (Last, First, Middle Initial)
Danny Tarkanian

Mailing Address 3008 Campbell Circle

City Las Vegas State NV Zip Code 89107

FEC ID number of contributing federal political committee. **C H2NV04045**

Name of Employer Danny Tarkanian Occupation Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **16042.42**

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 05 / 2015

Transaction ID : SA11D.C4615621

Amount of Each Receipt this Period
49.75

Memo Item
In-Kind: In-Kind to be reimbursed; travel

B. Full Name (Last, First, Middle Initial)
Danny Tarkanian

Mailing Address 3008 Campbell Circle

City Las Vegas State NV Zip Code 89107

FEC ID number of contributing federal political committee. **C H2NV04045**

Name of Employer Danny Tarkanian Occupation Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **16042.42**

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 05 / 2015

Transaction ID : SA11D.C4615622

Amount of Each Receipt this Period
26.77

Memo Item
In-Kind: In-Kind to be reimbursed; meal

C. Full Name (Last, First, Middle Initial)
Danny Tarkanian

Mailing Address 3008 Campbell Circle

City Las Vegas State NV Zip Code 89107

FEC ID number of contributing federal political committee. **C H2NV04045**

Name of Employer Danny Tarkanian Occupation Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **16042.42**

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 06 / 2015

Transaction ID : SA11D.C4615623

Amount of Each Receipt this Period
53.52

Memo Item
In-Kind: In-Kind to be reimbursed; travel

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

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

130.04

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 81 OF 175
<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input checked="" type="checkbox"/> 11d 14
			<input type="checkbox"/> 15

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)
Tarkanian For Congress

A. Full Name (Last, First, Middle Initial)
Danny Tarkanian

Mailing Address 3008 Campbell Circle

City Las Vegas	State NV	Zip Code 89107
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FEC ID number of contributing federal political committee. **C** H2NV04045

Name of Employer Danny Tarkanian	Occupation Attorney
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Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
16042.42

Date of Receipt

M M	/	D D	/	Y Y Y Y
12		04		2015

Transaction ID : SA11D.C4615624

Amount of Each Receipt this Period
46.02

Memo Item
In-Kind: In-Kind to be reimbursed; travel

B. Full Name (Last, First, Middle Initial)
Danny Tarkanian

Mailing Address 3008 Campbell Circle

City Las Vegas	State NV	Zip Code 89107
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FEC ID number of contributing federal political committee. **C** H2NV04045

Name of Employer Danny Tarkanian	Occupation Attorney
-------------------------------------	------------------------

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
16042.42

Date of Receipt

M M	/	D D	/	Y Y Y Y
12		03		2015

Transaction ID : SA11D.C4615625

Amount of Each Receipt this Period
17.67

Memo Item
In-Kind: In-Kind to be reimbursed; meal

C. Full Name (Last, First, Middle Initial)
Danny Tarkanian

Mailing Address 3008 Campbell Circle

City Las Vegas	State NV	Zip Code 89107
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FEC ID number of contributing federal political committee. **C** H2NV04045

Name of Employer Danny Tarkanian	Occupation Attorney
-------------------------------------	------------------------

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
16042.42

Date of Receipt

M M	/	D D	/	Y Y Y Y
12		04		2015

Transaction ID : SA11D.C4615626

Amount of Each Receipt this Period
11.20

Memo Item
In-Kind: In-Kind to be reimbursed; meal

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

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

74.89

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 82 OF 175
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input checked="" type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Tarkanian For Congress

A. Full Name (Last, First, Middle Initial)
Danny Tarkanian

Mailing Address 3008 Campbell Circle

City Las Vegas State NV Zip Code 89107

FEC ID number of contributing federal political committee. **C H2NV04045**

Name of Employer Danny Tarkanian Occupation Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **16042.42**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 19 / 2015

Transaction ID : SA11D.C4623736

Amount of Each Receipt this Period
 378.00

Memo Item
 In-Kind:Candidate Travel. Southwest Airlines: 2702 Love Field Drive Dallas TX 75235

B. Full Name (Last, First, Middle Initial)
Danny Tarkanian

Mailing Address 3008 Campbell Circle

City Las Vegas State NV Zip Code 89107

FEC ID number of contributing federal political committee. **C H2NV04045**

Name of Employer Danny Tarkanian Occupation Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **16042.42**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 08 / 2015

Transaction ID : SA11D.C4624867

Amount of Each Receipt this Period
 55.00

Memo Item
 In-Kind:In-Kind to be reimbursed; Website Services

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)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

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

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

433.00

7140.42

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)		PAGE 83 OF 175	
<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input checked="" type="checkbox"/> 11d 14
		<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Tarkanian For Congress

A. Full Name (Last, First, Middle Initial)
Bank of Nevada

Mailing Address **2700 West Sahara Avenue**

City **Las Vegas** State **NV** Zip Code **89102**

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

Name of Employer _____ Occupation _____

Receipt For: 2016
 Primary General
 Other (specify) _____

Election Cycle-to-Date **37.39**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
10 / 06 / 2015

Transaction ID : SA14.I26926

Amount of Each Receipt this Period
 _____ **17.48**

Memo Item
 Bank Charge Refund

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) _____

Election Cycle-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

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) _____

Election Cycle-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).....

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

_____ **17.48**

_____ **17.48**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 84 OF 175			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Tarkanian For Congress

Full Name (Last, First, Middle Initial) A. Ken Barrett		Date of Disbursement M M / D D / Y Y Y Y 12 / 21 / 2015
Mailing Address 6647 Schuster Street		Amount of Each Disbursement this Period 1000.00 <input type="checkbox"/> Memo Item Transaction ID : SB17.C4623764
City Las Vegas	State NV Zip Code 89118	
Purpose of Disbursement Contribution In-Kind: Campaign Yard Signs		Category/Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Cedric Branch		Date of Disbursement M M / D D / Y Y Y Y 12 / 28 / 2015
Mailing Address 2299 Malaga Peak		Amount of Each Disbursement this Period 1290.00 <input type="checkbox"/> Memo Item Transaction ID : SB17.C4623745
City Las Vegas	State NV Zip Code 89135	
Purpose of Disbursement Contribution In-Kind: Campaign T-Shirts		Category/Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Andrea DerManouel		Date of Disbursement M M / D D / Y Y Y Y 10 / 18 / 2015
Mailing Address 10661 N Coronado Circle		Amount of Each Disbursement this Period 675.00 <input type="checkbox"/> Memo Item Transaction ID : SB17.C4614269
City Fresno	State CA Zip Code 93730	
Purpose of Disbursement Contribution In-Kind: Food and Beverages of 10/18/15 Fundraiser		Category/Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2965.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 85 OF 175			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Tarkanian For Congress

Full Name (Last, First, Middle Initial) A. Robert Dillon		Date of Disbursement M M / D D / Y Y Y Y 12 / 13 / 2015
Mailing Address 4508 Buckeye Ave		Amount of Each Disbursement this Period 2250.00
City Las Vegas	State NV	
Zip Code 89102	Purpose of Disbursement Contribution In-Kind: Campaign Photography	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type	Transaction ID : SB17.C4614617
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Jose Elgorriaga, Jr.		Date of Disbursement M M / D D / Y Y Y Y 10 / 18 / 2015
Mailing Address 2590 W Bluff Ave		Amount of Each Disbursement this Period 675.00
City Fresno	State CA	
Zip Code 93711-0348	Purpose of Disbursement Contribution In-Kind: Food and Beverages of 10/18/15 Fundraiser	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type	Transaction ID : SB17.C4614271
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Wayne Hogue		Date of Disbursement M M / D D / Y Y Y Y 10 / 15 / 2015
Mailing Address 6320 Wetzel Ct		Amount of Each Disbursement this Period 127.74
City Reno	State NV	
Zip Code 89511	Purpose of Disbursement Contribution In-Kind: Campaign Stickers	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type	Transaction ID : SB17.C4614272
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	3052.74
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 86 OF 175			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Tarkanian For Congress

Full Name (Last, First, Middle Initial) A. Arin Hopkins Brandt			Date of Disbursement M M / D D / Y Y Y Y 12 / 17 / 2015		
Mailing Address 1791 Valenzano Way			Amount of Each Disbursement this Period 220.00		
City Henderson	State NV	Zip Code 89012	Memo Item <input type="checkbox"/>		
Purpose of Disbursement Contribution In-Kind: Food, Beverage, Invitations and Banner		Category/ Type	Transaction ID : SB17.C4615052		
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:				

Full Name (Last, First, Middle Initial) B. Samira Knight			Date of Disbursement M M / D D / Y Y Y Y 12 / 16 / 2015		
Mailing Address 7220 S Cimarron, Ste 110			Amount of Each Disbursement this Period 1260.00		
City Las Vegas	State NV	Zip Code 89113	Memo Item <input type="checkbox"/>		
Purpose of Disbursement Contribution In-Kind: Fundraiser supplies		Category/ Type	Transaction ID : SB17.C4623763		
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:				

Full Name (Last, First, Middle Initial) C. David Monk			Date of Disbursement M M / D D / Y Y Y Y 12 / 21 / 2015		
Mailing Address 6647 Schuster Street			Amount of Each Disbursement this Period 2500.00		
City Las Vegas	State NV	Zip Code 89118	Memo Item <input type="checkbox"/>		
Purpose of Disbursement Contribution In-Kind: Campaign Yard Signs		Category/ Type	Transaction ID : SB17.C4623765		
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:				

SUBTOTAL of Disbursements This Page (optional).....	3980.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 87 OF 175			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Tarkanian For Congress

Full Name (Last, First, Middle Initial) A. Halie Moors		Date of Disbursement M M / D D / Y Y Y Y 12 / 13 / 2015
Mailing Address 4508 Buckeye Ave		Amount of Each Disbursement this Period 1100.00
City Las Vegas	State NV	
Zip Code 89102	Purpose of Disbursement Contribution In-Kind: Campaign photography	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type	Transaction ID : SB17.C4614616
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Houman Nayeb		Date of Disbursement M M / D D / Y Y Y Y 12 / 16 / 2015
Mailing Address 9550 S Eastern Ave, #195		Amount of Each Disbursement this Period 756.70
City Las Vegas	State NV	
Zip Code 89123	Purpose of Disbursement Contribution In-Kind: Catering Services	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type	Transaction ID : SB17.C4623762
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Frank Parrillo		Date of Disbursement M M / D D / Y Y Y Y 12 / 22 / 2015
Mailing Address 1771 E Falingo Rd, #112A		Amount of Each Disbursement this Period 450.00
City Las Vegas	State NV	
Zip Code 89119	Purpose of Disbursement Contribution In-Kind: Campaign Flyers	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type	Transaction ID : SB17.C4623766
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2306.70
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 88 OF 175			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)
Tarkanian For Congress

Full Name (Last, First, Middle Initial) A. George Saroyan		Date of Disbursement M M / D D / Y Y Y Y 10 / 18 / 2015
Mailing Address 2443 Picasso Circle		Amount of Each Disbursement this Period 675.00
City Corona State CA Zip Code 92882	<input type="checkbox"/> Memo Item	
Purpose of Disbursement Contribution In-Kind: Food and Beverages of 10/18/15 Fundraiser	Category/Type	Transaction ID : SB17.C4614268
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Danny Tarkanian		Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2015
Mailing Address 3008 Campbell Circle		Amount of Each Disbursement this Period 76.94
City Las Vegas State NV Zip Code 89107	<input type="checkbox"/> Memo Item	
Purpose of Disbursement Contribution In-Kind: In-Kind to be reimbursed; Meals	Category/Type	Transaction ID : SB17.C4613674
Candidate Name Danny Tarkanian		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Danny Tarkanian		Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2015
Mailing Address 3008 Campbell Circle		Amount of Each Disbursement this Period 7.00
City Las Vegas State NV Zip Code 89107	<input type="checkbox"/> Memo Item	
Purpose of Disbursement Contribution In-Kind: In-Kind to be reimbursed; Meal	Category/Type	Transaction ID : SB17.C4613675
Candidate Name Danny Tarkanian		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional)	758.94
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 89 OF 175			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Tarkanian For Congress

Full Name (Last, First, Middle Initial) A. Danny Tarkanian		Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2015
Mailing Address 3008 Campbell Circle		Amount of Each Disbursement this Period 378.36
City Las Vegas State NV Zip Code 89107	Purpose of Disbursement Contribution In-Kind: Candidate Travel. Spirit Airlines: 3200 East Airfield Drive Dallas TX 75261	
Candidate Name Danny Tarkanian	Category/Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.C4613676
State: District:		

Full Name (Last, First, Middle Initial) B. Danny Tarkanian		Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2015
Mailing Address 3008 Campbell Circle		Amount of Each Disbursement this Period 2.00
City Las Vegas State NV Zip Code 89107	Purpose of Disbursement Contribution In-Kind: In-Kind to be reimbursed; Parking	
Candidate Name Danny Tarkanian	Category/Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.C4613677
State: District:		

Full Name (Last, First, Middle Initial) c. Danny Tarkanian		Date of Disbursement M M / D D / Y Y Y Y 10 / 12 / 2015
Mailing Address 3008 Campbell Circle		Amount of Each Disbursement this Period 28.04
City Las Vegas State NV Zip Code 89107	Purpose of Disbursement Contribution In-Kind: In-Kind to be reimbursed; Parking	
Candidate Name Danny Tarkanian	Category/Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.C4613678
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	408.40
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 90 OF 175			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Tarkanian For Congress

Full Name (Last, First, Middle Initial) A. Danny Tarkanian		Date of Disbursement M M / D D / Y Y Y Y 10 / 15 / 2015
Mailing Address 3008 Campbell Circle		Amount of Each Disbursement this Period 54.72
City Las Vegas State NV Zip Code 89107	Purpose of Disbursement Contribution In-Kind: In-Kind to be reimbursed; travel	
Candidate Name Danny Tarkanian	Category/Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.C4613679
State: District:		

Full Name (Last, First, Middle Initial) B. Danny Tarkanian		Date of Disbursement M M / D D / Y Y Y Y 10 / 16 / 2015
Mailing Address 3008 Campbell Circle		Amount of Each Disbursement this Period 57.89
City Las Vegas State NV Zip Code 89107	Purpose of Disbursement Contribution In-Kind: In-Kind to be reimbursed; travel	
Candidate Name Danny Tarkanian	Category/Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.C4613680
State: District:		

Full Name (Last, First, Middle Initial) c. Danny Tarkanian		Date of Disbursement M M / D D / Y Y Y Y 10 / 16 / 2015
Mailing Address 3008 Campbell Circle		Amount of Each Disbursement this Period 29.19
City Las Vegas State NV Zip Code 89107	Purpose of Disbursement Contribution In-Kind: In-Kind to be reimbursed; meal	
Candidate Name Danny Tarkanian	Category/Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.C4613681
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	141.80
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 91 OF 175			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Tarkanian For Congress

Full Name (Last, First, Middle Initial) A. Danny Tarkanian		Date of Disbursement M M / D D / Y Y Y Y 10 / 17 / 2015
Mailing Address 3008 Campbell Circle		Amount of Each Disbursement this Period 12.83
City Las Vegas State NV Zip Code 89107	Purpose of Disbursement Contribution In-Kind: In-Kind to be reimbursed; meal	<input type="checkbox"/> Memo Item
Candidate Name Danny Tarkanian	Category/Type	Transaction ID : SB17.C4613682
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Danny Tarkanian		Date of Disbursement M M / D D / Y Y Y Y 10 / 17 / 2015
Mailing Address 3008 Campbell Circle		Amount of Each Disbursement this Period 11.91
City Las Vegas State NV Zip Code 89107	Purpose of Disbursement Contribution In-Kind: In-Kind to be reimbursed; meal	<input type="checkbox"/> Memo Item
Candidate Name Danny Tarkanian	Category/Type	Transaction ID : SB17.C4613683
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Danny Tarkanian		Date of Disbursement M M / D D / Y Y Y Y 10 / 18 / 2015
Mailing Address 3008 Campbell Circle		Amount of Each Disbursement this Period 33.95
City Las Vegas State NV Zip Code 89107	Purpose of Disbursement Contribution In-Kind: In-Kind to be reimbursed; travel	<input type="checkbox"/> Memo Item
Candidate Name Danny Tarkanian	Category/Type	Transaction ID : SB17.C4613684
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	58.69
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 92 OF 175			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Tarkanian For Congress

Full Name (Last, First, Middle Initial) A. Danny Tarkanian		Date of Disbursement M M / D D / Y Y Y Y 10 / 18 / 2015
Mailing Address 3008 Campbell Circle		Amount of Each Disbursement this Period 12.78
City Las Vegas State NV Zip Code 89107	Purpose of Disbursement Contribution In-Kind: In-Kind to be reimbursed; meal	
Candidate Name Danny Tarkanian	Category/Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.C4613685
State: District:		

Full Name (Last, First, Middle Initial) B. Danny Tarkanian		Date of Disbursement M M / D D / Y Y Y Y 10 / 18 / 2015
Mailing Address 3008 Campbell Circle		Amount of Each Disbursement this Period 6.46
City Las Vegas State NV Zip Code 89107	Purpose of Disbursement Contribution In-Kind: In-Kind to be reimbursed; meal	
Candidate Name Danny Tarkanian	Category/Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.C4613686
State: District:		

Full Name (Last, First, Middle Initial) c. Danny Tarkanian		Date of Disbursement M M / D D / Y Y Y Y 10 / 19 / 2015
Mailing Address 3008 Campbell Circle		Amount of Each Disbursement this Period 6.43
City Las Vegas State NV Zip Code 89107	Purpose of Disbursement Contribution In-Kind: In-Kind to be reimbursed; meal	
Candidate Name Danny Tarkanian	Category/Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.C4613687
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	25.67
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 93 OF 175	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Tarkanian For Congress

Full Name (Last, First, Middle Initial) A. Danny Tarkanian		Date of Disbursement M M / D D / Y Y Y Y 10 / 20 / 2015
Mailing Address 3008 Campbell Circle		Amount of Each Disbursement this Period 18.00
City Las Vegas State NV Zip Code 89107	Purpose of Disbursement Contribution In-Kind: In-Kind to be reimbursed; taxi fare	
Candidate Name Danny Tarkanian	Category/Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.C4613688
State: District:		

Full Name (Last, First, Middle Initial) B. Danny Tarkanian		Date of Disbursement M M / D D / Y Y Y Y 10 / 20 / 2015
Mailing Address 3008 Campbell Circle		Amount of Each Disbursement this Period 20.00
City Las Vegas State NV Zip Code 89107	Purpose of Disbursement Contribution In-Kind: In-Kind to be reimbursed; Taxi fare	
Candidate Name Danny Tarkanian	Category/Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.C4613689
State: District:		

Full Name (Last, First, Middle Initial) c. Danny Tarkanian		Date of Disbursement M M / D D / Y Y Y Y 10 / 20 / 2015
Mailing Address 3008 Campbell Circle		Amount of Each Disbursement this Period 7.28
City Las Vegas State NV Zip Code 89107	Purpose of Disbursement Contribution In-Kind: In-Kind to be reimbursed; taxi fare	
Candidate Name Danny Tarkanian	Category/Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.C4613690
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	45.28
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 94 OF 175			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Tarkanian For Congress

Full Name (Last, First, Middle Initial) A. Danny Tarkanian		Date of Disbursement M M / D D / Y Y Y Y 10 / 20 / 2015
Mailing Address 3008 Campbell Circle		Amount of Each Disbursement this Period 5.95
City Las Vegas	State NV	
Zip Code 89107	Purpose of Disbursement Contribution In-Kind: In-Kind to be reimbursed; meal	<input type="checkbox"/> Memo Item
Candidate Name Danny Tarkanian	Category/Type	Transaction ID : SB17.C4613691
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Danny Tarkanian		Date of Disbursement M M / D D / Y Y Y Y 10 / 20 / 2015
Mailing Address 3008 Campbell Circle		Amount of Each Disbursement this Period 15.46
City Las Vegas	State NV	
Zip Code 89107	Purpose of Disbursement Contribution In-Kind: In-Kind to be reimbursed; meal	<input type="checkbox"/> Memo Item
Candidate Name Danny Tarkanian	Category/Type	Transaction ID : SB17.C4613692
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Danny Tarkanian		Date of Disbursement M M / D D / Y Y Y Y 10 / 21 / 2015
Mailing Address 3008 Campbell Circle		Amount of Each Disbursement this Period 18.70
City Las Vegas	State NV	
Zip Code 89107	Purpose of Disbursement Contribution In-Kind: In-Kind to be reimbursed; meal	<input type="checkbox"/> Memo Item
Candidate Name Danny Tarkanian	Category/Type	Transaction ID : SB17.C4613693
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	40.11
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 95 OF 175			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Tarkanian For Congress

Full Name (Last, First, Middle Initial) A. Danny Tarkanian		Date of Disbursement M M / D D / Y Y Y Y 10 / 21 / 2015
Mailing Address 3008 Campbell Circle		Amount of Each Disbursement this Period 12.32
City Las Vegas State NV Zip Code 89107	Purpose of Disbursement Contribution In-Kind: In-Kind to be reimbursed; meal	
Candidate Name Danny Tarkanian	Category/Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.C4613694
State: District:		

Full Name (Last, First, Middle Initial) B. Danny Tarkanian		Date of Disbursement M M / D D / Y Y Y Y 10 / 21 / 2015
Mailing Address 3008 Campbell Circle		Amount of Each Disbursement this Period 20.00
City Las Vegas State NV Zip Code 89107	Purpose of Disbursement Contribution In-Kind: In-Kind to be reimbursed; taxi fare	
Candidate Name Danny Tarkanian	Category/Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.C4613695
State: District:		

Full Name (Last, First, Middle Initial) c. Danny Tarkanian		Date of Disbursement M M / D D / Y Y Y Y 10 / 21 / 2015
Mailing Address 3008 Campbell Circle		Amount of Each Disbursement this Period 87.75
City Las Vegas State NV Zip Code 89107	Purpose of Disbursement Contribution In-Kind: In-Kind to be reimbursed; meals	
Candidate Name Danny Tarkanian	Category/Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.C4613696
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	120.07
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 96 OF 175			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Tarkanian For Congress

Full Name (Last, First, Middle Initial) A. Danny Tarkanian		Date of Disbursement M M / D D / Y Y Y Y 10 / 21 / 2015
Mailing Address 3008 Campbell Circle		Amount of Each Disbursement this Period 7.70
City Las Vegas State NV Zip Code 89107	Purpose of Disbursement Contribution In-Kind: In-Kind to be reimbursed; beverage	
Candidate Name Danny Tarkanian	Category/Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.C4613697
State: District:		

Full Name (Last, First, Middle Initial) B. Danny Tarkanian		Date of Disbursement M M / D D / Y Y Y Y 10 / 21 / 2015
Mailing Address 3008 Campbell Circle		Amount of Each Disbursement this Period 124.90
City Las Vegas State NV Zip Code 89107	Purpose of Disbursement Contribution In-Kind: In-Kind to be reimbursed; taxi fare	
Candidate Name Danny Tarkanian	Category/Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.C4613698
State: District:		

Full Name (Last, First, Middle Initial) c. Danny Tarkanian		Date of Disbursement M M / D D / Y Y Y Y 10 / 21 / 2015
Mailing Address 3008 Campbell Circle		Amount of Each Disbursement this Period 8.09
City Las Vegas State NV Zip Code 89107	Purpose of Disbursement Contribution In-Kind: In-Kind to be reimbursed; beverage	
Candidate Name Danny Tarkanian	Category/Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.C4613699
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	140.69
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 97 OF 175			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Tarkanian For Congress

Full Name (Last, First, Middle Initial) A. Danny Tarkanian		Date of Disbursement M M / D D / Y Y Y Y 10 / 21 / 2015
Mailing Address 3008 Campbell Circle		Amount of Each Disbursement this Period 17.30
City Las Vegas	State NV	
Zip Code 89107	Purpose of Disbursement Contribution In-Kind: In-Kind to be reimbursed; taxi fare	<input type="checkbox"/> Memo Item
Candidate Name Danny Tarkanian	Category/Type	Transaction ID : SB17.C4613700
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Danny Tarkanian		Date of Disbursement M M / D D / Y Y Y Y 10 / 21 / 2015
Mailing Address 3008 Campbell Circle		Amount of Each Disbursement this Period 10.82
City Las Vegas	State NV	
Zip Code 89107	Purpose of Disbursement Contribution In-Kind: In-Kind to be reimbursed; taxi fare	<input type="checkbox"/> Memo Item
Candidate Name Danny Tarkanian	Category/Type	Transaction ID : SB17.C4613701
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Danny Tarkanian		Date of Disbursement M M / D D / Y Y Y Y 10 / 21 / 2015
Mailing Address 3008 Campbell Circle		Amount of Each Disbursement this Period 13.27
City Las Vegas	State NV	
Zip Code 89107	Purpose of Disbursement Contribution In-Kind: In-Kind to be reimbursed; taxi fare	<input type="checkbox"/> Memo Item
Candidate Name Danny Tarkanian	Category/Type	Transaction ID : SB17.C4613702
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	41.39
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 98 OF 175			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Tarkanian For Congress

Full Name (Last, First, Middle Initial) A. Danny Tarkanian		Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2015
Mailing Address 3008 Campbell Circle		Amount of Each Disbursement this Period 7.87
City Las Vegas State NV Zip Code 89107	Purpose of Disbursement Contribution In-Kind: In-Kind to be reimbursed; meal	
Candidate Name Danny Tarkanian	Category/Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.C4613703
State: District:		

Full Name (Last, First, Middle Initial) B. Danny Tarkanian		Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2015
Mailing Address 3008 Campbell Circle		Amount of Each Disbursement this Period 113.73
City Las Vegas State NV Zip Code 89107	Purpose of Disbursement Contribution In-Kind: In-Kind to be reimbursed; taxi fare	
Candidate Name Danny Tarkanian	Category/Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.C4613704
State: District:		

Full Name (Last, First, Middle Initial) c. Danny Tarkanian		Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2015
Mailing Address 3008 Campbell Circle		Amount of Each Disbursement this Period 5.58
City Las Vegas State NV Zip Code 89107	Purpose of Disbursement Contribution In-Kind: In-Kind to be reimbursed; taxi fare	
Candidate Name Danny Tarkanian	Category/Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.C4613705
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	127.18
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 99 OF 175			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Tarkanian For Congress

Full Name (Last, First, Middle Initial) A. Danny Tarkanian		Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2015
Mailing Address 3008 Campbell Circle		Amount of Each Disbursement this Period 22.01
City Las Vegas State NV Zip Code 89107	Purpose of Disbursement Contribution In-Kind: In-Kind to be reimbursed; meal	
Candidate Name Danny Tarkanian	Category/Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.C4613706
State: District:		

Full Name (Last, First, Middle Initial) B. Danny Tarkanian		Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2015
Mailing Address 3008 Campbell Circle		Amount of Each Disbursement this Period 48.29
City Las Vegas State NV Zip Code 89107	Purpose of Disbursement Contribution In-Kind: In-Kind to be reimbursed; meal	
Candidate Name Danny Tarkanian	Category/Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.C4613707
State: District:		

Full Name (Last, First, Middle Initial) c. Danny Tarkanian		Date of Disbursement M M / D D / Y Y Y Y 10 / 23 / 2015
Mailing Address 3008 Campbell Circle		Amount of Each Disbursement this Period 57.23
City Las Vegas State NV Zip Code 89107	Purpose of Disbursement Contribution In-Kind: In-Kind to be reimbursed; meal	
Candidate Name Danny Tarkanian	Category/Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.C4613708
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	127.53
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 100 OF 175			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Tarkanian For Congress

Full Name (Last, First, Middle Initial) A. Danny Tarkanian		Date of Disbursement M M / D D / Y Y Y Y 10 / 23 / 2015
Mailing Address 3008 Campbell Circle		Amount of Each Disbursement this Period 77.08 <input type="checkbox"/> Memo Item Transaction ID : SB17.C4613709
City Las Vegas State NV Zip Code 89107	Purpose of Disbursement Contribution In-Kind: In-Kind to be reimbursed; office supplies from Office Depot	
Candidate Name Danny Tarkanian	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Danny Tarkanian		Date of Disbursement M M / D D / Y Y Y Y 10 / 24 / 2015
Mailing Address 3008 Campbell Circle		Amount of Each Disbursement this Period 58.75 <input type="checkbox"/> Memo Item Transaction ID : SB17.C4613710
City Las Vegas State NV Zip Code 89107	Purpose of Disbursement Contribution In-Kind: In-Kind to be reimbursed; travel	
Candidate Name Danny Tarkanian	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Danny Tarkanian		Date of Disbursement M M / D D / Y Y Y Y 10 / 26 / 2015
Mailing Address 3008 Campbell Circle		Amount of Each Disbursement this Period 540.00 <input type="checkbox"/> Memo Item Transaction ID : SB17.C4613711
City Las Vegas State NV Zip Code 89107	Purpose of Disbursement Contribution In-Kind: Radio Ad. Battle Born Radio; 6163 Arbor Alley Ave. Las Vegas NV 89139	
Candidate Name Danny Tarkanian	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	675.83
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 101 OF 175	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Tarkanian For Congress

Full Name (Last, First, Middle Initial) A. Danny Tarkanian		Date of Disbursement M M / D D / Y Y Y Y 10 / 27 / 2015
Mailing Address 3008 Campbell Circle		Amount of Each Disbursement this Period 22.81 <input type="checkbox"/> Memo Item Transaction ID : SB17.C4613712
City Las Vegas State NV Zip Code 89107	Purpose of Disbursement Contribution In-Kind: In-Kind to be reimbursed; meal	
Candidate Name Danny Tarkanian	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Danny Tarkanian		Date of Disbursement M M / D D / Y Y Y Y 10 / 27 / 2015
Mailing Address 3008 Campbell Circle		Amount of Each Disbursement this Period 13.50 <input type="checkbox"/> Memo Item Transaction ID : SB17.C4613713
City Las Vegas State NV Zip Code 89107	Purpose of Disbursement Contribution In-Kind: In-Kind to be reimbursed; meal	
Candidate Name Danny Tarkanian	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Danny Tarkanian		Date of Disbursement M M / D D / Y Y Y Y 10 / 27 / 2015
Mailing Address 3008 Campbell Circle		Amount of Each Disbursement this Period 60.00 <input type="checkbox"/> Memo Item Transaction ID : SB17.C4613714
City Las Vegas State NV Zip Code 89107	Purpose of Disbursement Contribution In-Kind: In-Kind to be reimbursed; meal	
Candidate Name Danny Tarkanian	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	96.31
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 102 OF 175	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Tarkanian For Congress

Full Name (Last, First, Middle Initial) A. Danny Tarkanian		Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2015
Mailing Address 3008 Campbell Circle		Amount of Each Disbursement this Period 30.00 <input type="checkbox"/> Memo Item Transaction ID : SB17.C4613715
City Las Vegas State NV Zip Code 89107	Purpose of Disbursement Contribution In-Kind: In-Kind to be reimbursed; meal	
Candidate Name Danny Tarkanian	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Danny Tarkanian		Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2015
Mailing Address 3008 Campbell Circle		Amount of Each Disbursement this Period 16.97 <input type="checkbox"/> Memo Item Transaction ID : SB17.C4613716
City Las Vegas State NV Zip Code 89107	Purpose of Disbursement Contribution In-Kind: In-Kind to be reimbursed; meal	
Candidate Name Danny Tarkanian	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Danny Tarkanian		Date of Disbursement M M / D D / Y Y Y Y 11 / 14 / 2015
Mailing Address 3008 Campbell Circle		Amount of Each Disbursement this Period 15.00 <input type="checkbox"/> Memo Item Transaction ID : SB17.C4613717
City Las Vegas State NV Zip Code 89107	Purpose of Disbursement Contribution In-Kind: In-Kind to be reimbursed; meal	
Candidate Name Danny Tarkanian	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	61.97
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 103 OF 175	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Tarkanian For Congress

Full Name (Last, First, Middle Initial) A. Danny Tarkanian		Date of Disbursement M M / D D / Y Y Y Y 11 / 09 / 2015
Mailing Address 3008 Campbell Circle		Amount of Each Disbursement this Period 1786.00
City Las Vegas State NV Zip Code 89107	Purpose of Disbursement Contribution In-Kind: Campaign Materials. Vegas Sports Apparel:2299 Malaga Peak Las Vegas NV 8913	<input type="checkbox"/> Memo Item
Candidate Name Danny Tarkanian	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Transaction ID : SB17.C4613718
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Danny Tarkanian		Date of Disbursement M M / D D / Y Y Y Y 11 / 16 / 2015
Mailing Address 3008 Campbell Circle		Amount of Each Disbursement this Period 7.59
City Las Vegas State NV Zip Code 89107	Purpose of Disbursement Contribution In-Kind: In-Kind to be reimbursed; travel	<input type="checkbox"/> Memo Item
Candidate Name Danny Tarkanian	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Transaction ID : SB17.C4614631
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Danny Tarkanian		Date of Disbursement M M / D D / Y Y Y Y 11 / 16 / 2015
Mailing Address 3008 Campbell Circle		Amount of Each Disbursement this Period 8.78
City Las Vegas State NV Zip Code 89107	Purpose of Disbursement Contribution In-Kind: In-Kind to be reimbursed; meal	<input type="checkbox"/> Memo Item
Candidate Name Danny Tarkanian	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Transaction ID : SB17.C4614632
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	1802.37
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 104 OF 175	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Tarkanian For Congress

Full Name (Last, First, Middle Initial) A. Danny Tarkanian		Date of Disbursement M M / D D / Y Y Y Y 11 / 16 / 2015
Mailing Address 3008 Campbell Circle		Amount of Each Disbursement this Period 2.00
City Las Vegas State NV Zip Code 89107	Purpose of Disbursement Contribution In-Kind: In-Kind to be reimbursed; media	
Candidate Name Danny Tarkanian	Category/Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.C4614633
State: District:		

Full Name (Last, First, Middle Initial) B. Danny Tarkanian		Date of Disbursement M M / D D / Y Y Y Y 11 / 16 / 2015
Mailing Address 3008 Campbell Circle		Amount of Each Disbursement this Period 25.00
City Las Vegas State NV Zip Code 89107	Purpose of Disbursement Contribution In-Kind: In-Kind to be reimbursed; travel	
Candidate Name Danny Tarkanian	Category/Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.C4614634
State: District:		

Full Name (Last, First, Middle Initial) c. Danny Tarkanian		Date of Disbursement M M / D D / Y Y Y Y 11 / 16 / 2015
Mailing Address 3008 Campbell Circle		Amount of Each Disbursement this Period 15.00
City Las Vegas State NV Zip Code 89107	Purpose of Disbursement Contribution In-Kind: In-Kind to be reimbursed; parking	
Candidate Name Danny Tarkanian	Category/Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.C4614635
State: District:		

SUBTOTAL of Disbursements This Page (optional)	42.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 105 OF 175			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Tarkanian For Congress

Full Name (Last, First, Middle Initial) A. Danny Tarkanian		Date of Disbursement M M / D D / Y Y Y Y 11 / 16 / 2015
Mailing Address 3008 Campbell Circle		Amount of Each Disbursement this Period 38.90
City Las Vegas	State NV	
Zip Code 89107	Purpose of Disbursement Contribution In-Kind: In-Kind to be reimbursed; car rental	<input type="checkbox"/> Memo Item
Candidate Name Danny Tarkanian	Category/Type	Transaction ID : SB17.C4614637
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Danny Tarkanian		Date of Disbursement M M / D D / Y Y Y Y 11 / 12 / 2015
Mailing Address 3008 Campbell Circle		Amount of Each Disbursement this Period 439.96
City Las Vegas	State NV	
Zip Code 89107	Purpose of Disbursement Contribution In-Kind: Candidate Travel. Southwest Airlines: 2702 Love Field Drive Dallas TX 75235	<input type="checkbox"/> Memo Item
Candidate Name Danny Tarkanian	Category/Type	Transaction ID : SB17.C4614638
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Danny Tarkanian		Date of Disbursement M M / D D / Y Y Y Y 12 / 07 / 2015
Mailing Address 3008 Campbell Circle		Amount of Each Disbursement this Period 1200.00
City Las Vegas	State NV	
Zip Code 89107	Purpose of Disbursement Contribution In-Kind: Radio Ad. Battle Born Radio: 6163 Arbor Alley Ave. Las Vegas NV 89139	<input type="checkbox"/> Memo Item
Candidate Name Danny Tarkanian	Category/Type	Transaction ID : SB17.C4614642
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1678.86
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 106 OF 175	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Tarkanian For Congress

Full Name (Last, First, Middle Initial) A. Danny Tarkanian		Date of Disbursement M M / D D / Y Y Y Y 12 / 11 / 2015
Mailing Address 3008 Campbell Circle		Amount of Each Disbursement this Period 64.60
City Las Vegas State NV Zip Code 89107	Purpose of Disbursement Contribution In-Kind: In-Kind to be reimbursed; postage	
Candidate Name Danny Tarkanian	Category/Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.C4615611
State: District:		

Full Name (Last, First, Middle Initial) B. Danny Tarkanian		Date of Disbursement M M / D D / Y Y Y Y 10 / 29 / 2015
Mailing Address 3008 Campbell Circle		Amount of Each Disbursement this Period 55.00
City Las Vegas State NV Zip Code 89107	Purpose of Disbursement Contribution In-Kind: In-Kind to be reimbursed; Website Services	
Candidate Name Danny Tarkanian	Category/Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.C4615612
State: District:		

Full Name (Last, First, Middle Initial) c. Danny Tarkanian		Date of Disbursement M M / D D / Y Y Y Y 12 / 15 / 2015
Mailing Address 3008 Campbell Circle		Amount of Each Disbursement this Period 21.00
City Las Vegas State NV Zip Code 89107	Purpose of Disbursement Contribution In-Kind: In-Kind to be reimbursed; meal	
Candidate Name Danny Tarkanian	Category/Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.C4615613
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	140.60
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 107 OF 175			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Tarkanian For Congress

Full Name (Last, First, Middle Initial) A. Danny Tarkanian		Date of Disbursement M M / D D / Y Y Y Y 12 / 20 / 2015
Mailing Address 3008 Campbell Circle		Amount of Each Disbursement this Period 42.03
City Las Vegas	State NV	
Zip Code 89107	Purpose of Disbursement Contribution In-Kind: In-Kind to be reimbursed; stationary	<input type="checkbox"/> Memo Item
Candidate Name Danny Tarkanian	Category/Type	Transaction ID : SB17.C4615614
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Danny Tarkanian		Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2015
Mailing Address 3008 Campbell Circle		Amount of Each Disbursement this Period 200.25
City Las Vegas	State NV	
Zip Code 89107	Purpose of Disbursement Contribution In-Kind: Campaign Materials. Vegas Sports Apparel: 2299 Malaga Peak Las Vegas NV 89135	<input type="checkbox"/> Memo Item
Candidate Name Danny Tarkanian	Category/Type	Transaction ID : SB17.C4615615
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Danny Tarkanian		Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2015
Mailing Address 3008 Campbell Circle		Amount of Each Disbursement this Period 120.00
City Las Vegas	State NV	
Zip Code 89107	Purpose of Disbursement Contribution In-Kind: In-Kind to be reimbursed; Campaign Logo Materials	<input type="checkbox"/> Memo Item
Candidate Name Danny Tarkanian	Category/Type	Transaction ID : SB17.C4615616
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	362.28
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 108 OF 175			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Tarkanian For Congress

Full Name (Last, First, Middle Initial) A. Danny Tarkanian		Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2015
Mailing Address 3008 Campbell Circle		Amount of Each Disbursement this Period 141.05 <input type="checkbox"/> Memo Item
City State Zip Code Las Vegas NV 89107	Purpose of Disbursement Contribution In-Kind: In-Kind to be reimbursed; Fundraiser Food	
Candidate Name Danny Tarkanian	Category/Type	Transaction ID : SB17.C4615617
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Danny Tarkanian		Date of Disbursement M M / D D / Y Y Y Y 11 / 08 / 2015
Mailing Address 3008 Campbell Circle		Amount of Each Disbursement this Period 55.00 <input type="checkbox"/> Memo Item
City State Zip Code Las Vegas NV 89107	Purpose of Disbursement Contribution In-Kind: In-Kind to be reimbursed; website services	
Candidate Name Danny Tarkanian	Category/Type	Transaction ID : SB17.C4615618
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Danny Tarkanian		Date of Disbursement M M / D D / Y Y Y Y 11 / 14 / 2015
Mailing Address 3008 Campbell Circle		Amount of Each Disbursement this Period 55.00 <input type="checkbox"/> Memo Item
City State Zip Code Las Vegas NV 89107	Purpose of Disbursement Contribution In-Kind: In-Kind to be reimbursed; website services	
Candidate Name Danny Tarkanian	Category/Type	Transaction ID : SB17.C4615619
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional)	251.05
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 109 OF 175	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Tarkanian For Congress

Full Name (Last, First, Middle Initial) A. Danny Tarkanian		Date of Disbursement M M / D D / Y Y Y Y 12 / 04 / 2015
Mailing Address 3008 Campbell Circle		Amount of Each Disbursement this Period 30.47 <input type="checkbox"/> Memo Item Transaction ID : SB17.C4615620
City State Zip Code Las Vegas NV 89107	Purpose of Disbursement Contribution In-Kind: In-Kind to be reimbursed; meal	
Candidate Name Danny Tarkanian	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Danny Tarkanian		Date of Disbursement M M / D D / Y Y Y Y 12 / 05 / 2015
Mailing Address 3008 Campbell Circle		Amount of Each Disbursement this Period 49.75 <input type="checkbox"/> Memo Item Transaction ID : SB17.C4615621
City State Zip Code Las Vegas NV 89107	Purpose of Disbursement Contribution In-Kind: In-Kind to be reimbursed; travel	
Candidate Name Danny Tarkanian	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Danny Tarkanian		Date of Disbursement M M / D D / Y Y Y Y 12 / 05 / 2015
Mailing Address 3008 Campbell Circle		Amount of Each Disbursement this Period 26.77 <input type="checkbox"/> Memo Item Transaction ID : SB17.C4615622
City State Zip Code Las Vegas NV 89107	Purpose of Disbursement Contribution In-Kind: In-Kind to be reimbursed; meal	
Candidate Name Danny Tarkanian	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	106.99
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 110 OF 175	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Tarkanian For Congress

Full Name (Last, First, Middle Initial) A. Danny Tarkanian		Date of Disbursement M M / D D / Y Y Y Y 12 / 06 / 2015
Mailing Address 3008 Campbell Circle		Amount of Each Disbursement this Period 53.52 <input type="checkbox"/> Memo Item Transaction ID : SB17.C4615623
City Las Vegas State NV Zip Code 89107	Purpose of Disbursement Contribution In-Kind: In-Kind to be reimbursed; travel	
Candidate Name Danny Tarkanian	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Danny Tarkanian		Date of Disbursement M M / D D / Y Y Y Y 12 / 04 / 2015
Mailing Address 3008 Campbell Circle		Amount of Each Disbursement this Period 46.02 <input type="checkbox"/> Memo Item Transaction ID : SB17.C4615624
City Las Vegas State NV Zip Code 89107	Purpose of Disbursement Contribution In-Kind: In-Kind to be reimbursed; travel	
Candidate Name Danny Tarkanian	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Danny Tarkanian		Date of Disbursement M M / D D / Y Y Y Y 12 / 03 / 2015
Mailing Address 3008 Campbell Circle		Amount of Each Disbursement this Period 17.67 <input type="checkbox"/> Memo Item Transaction ID : SB17.C4615625
City Las Vegas State NV Zip Code 89107	Purpose of Disbursement Contribution In-Kind: In-Kind to be reimbursed; meal	
Candidate Name Danny Tarkanian	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	117.21
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 111 OF 175			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Tarkanian For Congress

Full Name (Last, First, Middle Initial) A. Danny Tarkanian		Date of Disbursement M M / D D / Y Y Y Y 12 / 04 / 2015
Mailing Address 3008 Campbell Circle		Amount of Each Disbursement this Period 11.20
City Las Vegas	State NV	
Zip Code 89107	Purpose of Disbursement Contribution In-Kind: In-Kind to be reimbursed; meal	<input type="checkbox"/> Memo Item
Candidate Name Danny Tarkanian	Category/Type	Transaction ID : SB17.C4615626
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Danny Tarkanian		Date of Disbursement M M / D D / Y Y Y Y 10 / 19 / 2015
Mailing Address 3008 Campbell Circle		Amount of Each Disbursement this Period 378.00
City Las Vegas	State NV	
Zip Code 89107	Purpose of Disbursement Contribution In-Kind: Candidate Travel. Southwest Airlines: 2702 Love Field Drive Dallas TX 75235	<input type="checkbox"/> Memo Item
Candidate Name Danny Tarkanian	Category/Type	Transaction ID : SB17.C4623736
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Danny Tarkanian		Date of Disbursement M M / D D / Y Y Y Y 12 / 08 / 2015
Mailing Address 3008 Campbell Circle		Amount of Each Disbursement this Period 55.00
City Las Vegas	State NV	
Zip Code 89107	Purpose of Disbursement Contribution In-Kind: In-Kind to be reimbursed; Website Services	<input type="checkbox"/> Memo Item
Candidate Name Danny Tarkanian	Category/Type	Transaction ID : SB17.C4624867
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	444.20
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 112 OF 175	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Tarkanian For Congress

Full Name (Last, First, Middle Initial) A. Brian Tatarian		Date of Disbursement M M / D D / Y Y Y Y 10 / 18 / 2015
Mailing Address 549 E Shell Drake Circle		Amount of Each Disbursement this Period 675.00
City Fresno State CA Zip Code 93730	Purpose of Disbursement Contribution In-Kind: Food and Beverages of 10/18/15 Fundraiser	
Candidate Name	Category/Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.C4614270
State: District:		

Full Name (Last, First, Middle Initial) B. US Merchant Systems Compliance - USMSC		Date of Disbursement M M / D D / Y Y Y Y 11 / 18 / 2015
Mailing Address 48001 Fremont Blvd		Amount of Each Disbursement this Period 7.95
City Fremont State CA Zip Code 94538	Purpose of Disbursement Credit Card Contribution Processing Fee	
Candidate Name	Category/Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.E1621257
State: CA District:		

Full Name (Last, First, Middle Initial) c. US Merchant Systems Compliance - USMSC		Date of Disbursement M M / D D / Y Y Y Y 10 / 21 / 2015
Mailing Address 48001 Fremont Blvd		Amount of Each Disbursement this Period 7.95
City Fremont State CA Zip Code 94538	Purpose of Disbursement Credit Card Contribution Processing Fee	
Candidate Name	Category/Type 001	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.E1618258
State: CA District:		

SUBTOTAL of Disbursements This Page (optional).....	690.90
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 113 OF 175	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Tarkanian For Congress

Full Name (Last, First, Middle Initial) A. US Merchant Systems Compliance - USMSC		Date of Disbursement M M / D D / Y Y Y Y 12 / 18 / 2015
Mailing Address 48001 Fremont Blvd		Amount of Each Disbursement this Period 19.95
City Fremont State CA Zip Code 94538	Purpose of Disbursement Credit Card Contribution Processing Fee	
Candidate Name	Category/Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.E1622385
State: CA District:		

Full Name (Last, First, Middle Initial) B. Targeted Victory Funding Credit Card Processing		Date of Disbursement M M / D D / Y Y Y Y 12 / 11 / 2015
Mailing Address 1033 N Fairfax St #40		Amount of Each Disbursement this Period 177.50
City Alexandria State VA Zip Code 22314	Purpose of Disbursement Credit Card Processing Fee	
Candidate Name	Category/Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.E1622373
State: VA District:		

Full Name (Last, First, Middle Initial) c. Targeted Victory Funding Credit Card Processing		Date of Disbursement M M / D D / Y Y Y Y 12 / 10 / 2015
Mailing Address 1033 N Fairfax St #40		Amount of Each Disbursement this Period 41.00
City Alexandria State VA Zip Code 22314	Purpose of Disbursement Credit Card Processing Fee	
Candidate Name	Category/Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.E1622371
State: VA District:		

SUBTOTAL of Disbursements This Page (optional).....	238.45
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 114 OF 175	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Tarkanian For Congress

Full Name (Last, First, Middle Initial) A. Targeted Victory Funding Credit Card Processing		Date of Disbursement M M / D D / Y Y Y Y 12 / 10 / 2015
Mailing Address 1033 N Fairfax St #40		Amount of Each Disbursement this Period 41.00
City Alexandria State VA Zip Code 22314	Purpose of Disbursement Credit Card Processing Fee	
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.E1622369
State: VA District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Targeted Victory Funding Credit Card Processing		Date of Disbursement M M / D D / Y Y Y Y 12 / 09 / 2015
Mailing Address 1033 N Fairfax St #40		Amount of Each Disbursement this Period 14.20
City Alexandria State VA Zip Code 22314	Purpose of Disbursement Credit Card Processing Fee	
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.E1622367
State: VA District:	Category/Type	

Full Name (Last, First, Middle Initial) c. Targeted Victory Funding Credit Card Processing		Date of Disbursement M M / D D / Y Y Y Y 12 / 29 / 2015
Mailing Address 1033 N Fairfax St #40		Amount of Each Disbursement this Period 71.00
City Alexandria State VA Zip Code 22314	Purpose of Disbursement Credit Card Processing Fee	
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.E1622379
State: VA District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	126.20
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 115 OF 175	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Tarkanian For Congress

Full Name (Last, First, Middle Initial) A. Targeted Victory Funding Credit Card Processing		Date of Disbursement M M / D D / Y Y Y Y 12 / 17 / 2015
Mailing Address 1033 N Fairfax St #40		Amount of Each Disbursement this Period 14.35
City Alexandria State VA Zip Code 22314	Purpose of Disbursement Credit Card Processing Fee	
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.E1622377
State: VA District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Targeted Victory Funding Credit Card Processing		Date of Disbursement M M / D D / Y Y Y Y 12 / 15 / 2015
Mailing Address 1033 N Fairfax St #40		Amount of Each Disbursement this Period 3.55
City Alexandria State VA Zip Code 22314	Purpose of Disbursement Credit Card Processing Fee	
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.E1622375
State: VA District:	Category/Type	

Full Name (Last, First, Middle Initial) c. Targeted Victory Funding Credit Card Processing		Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2015
Mailing Address 1033 N Fairfax St #40		Amount of Each Disbursement this Period 0.04
City Alexandria State VA Zip Code 22314	Purpose of Disbursement Credit Card Processing Fee	
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.E1621196
State: VA District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	17.94
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 116 OF 175			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Tarkanian For Congress

Full Name (Last, First, Middle Initial) A. Targeted Victory Funding Credit Card Processing		Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2015
Mailing Address 1033 N Fairfax St #40		Amount of Each Disbursement this Period 0.04
City Alexandria State VA Zip Code 22314	Category/Type	
Purpose of Disbursement Credit Card Processing Fee	Candidate Name	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.E1621194
State: VA District:		

Full Name (Last, First, Middle Initial) B. Targeted Victory Funding Credit Card Processing		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2015
Mailing Address 1033 N Fairfax St #40		Amount of Each Disbursement this Period 1.03
City Alexandria State VA Zip Code 22314	Category/Type	
Purpose of Disbursement Credit Card Contribution Processing Fee	Candidate Name	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.E1618492
State: VA District:		

Full Name (Last, First, Middle Initial) c. Targeted Victory Funding Credit Card Processing		Date of Disbursement M M / D D / Y Y Y Y 10 / 28 / 2015
Mailing Address 1033 N Fairfax St #40		Amount of Each Disbursement this Period 10.25
City Alexandria State VA Zip Code 22314	Category/Type	
Purpose of Disbursement Credit Card Contribution Processing Fee	Candidate Name	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.E1618486
State: VA District:		

SUBTOTAL of Disbursements This Page (optional).....	11.32
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 117 OF 175	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Tarkanian For Congress

Full Name (Last, First, Middle Initial) A. Targeted Victory Funding Credit Card Processing		Date of Disbursement M M / D D / Y Y Y Y 10 / 27 / 2015
Mailing Address 1033 N Fairfax St #40		Amount of Each Disbursement this Period 71.00
City Alexandria State VA Zip Code 22314	Purpose of Disbursement Credit Card Contribution Processing Fee	
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.E1618484
State: VA District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Targeted Victory Funding Credit Card Processing		Date of Disbursement M M / D D / Y Y Y Y 10 / 26 / 2015
Mailing Address 1033 N Fairfax St #40		Amount of Each Disbursement this Period 3.55
City Alexandria State VA Zip Code 22314	Purpose of Disbursement Credit Card Contribution Processing Fee	
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.E1618482
State: VA District:	Category/Type	

Full Name (Last, First, Middle Initial) c. Targeted Victory Funding Credit Card Processing		Date of Disbursement M M / D D / Y Y Y Y 10 / 29 / 2015
Mailing Address 1033 N Fairfax St #40		Amount of Each Disbursement this Period 1.78
City Alexandria State VA Zip Code 22314	Purpose of Disbursement Credit Card Contribution Processing Fee	
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.E1618490
State: VA District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	76.33
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 118 OF 175	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Tarkanian For Congress

Full Name (Last, First, Middle Initial) A. Targeted Victory Funding Credit Card Processing		Date of Disbursement M M / D D / Y Y Y Y 10 / 23 / 2015
Mailing Address 1033 N Fairfax St #40		Amount of Each Disbursement this Period 191.70
City Alexandria State VA Zip Code 22314	Purpose of Disbursement Credit Card Processing Fee	
Candidate Name	Category/Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.E1618480
State: VA District:		

Full Name (Last, First, Middle Initial) B. Targeted Victory Funding Credit Card Processing		Date of Disbursement M M / D D / Y Y Y Y 10 / 17 / 2015
Mailing Address 1033 N Fairfax St #40		Amount of Each Disbursement this Period 3.55
City Alexandria State VA Zip Code 22314	Purpose of Disbursement Credit Card Contribution Processing Fee	
Candidate Name	Category/Type 001	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.E1618252
State: VA District:		

Full Name (Last, First, Middle Initial) c. Targeted Victory Funding Credit Card Processing		Date of Disbursement M M / D D / Y Y Y Y 10 / 17 / 2015
Mailing Address 1033 N Fairfax St #40		Amount of Each Disbursement this Period 1.78
City Alexandria State VA Zip Code 22314	Purpose of Disbursement Credit Card Contribution Processing Fee	
Candidate Name	Category/Type 001	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.E1618250
State: VA District:		

SUBTOTAL of Disbursements This Page (optional).....	197.03
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 119 OF 175	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Tarkanian For Congress

Full Name (Last, First, Middle Initial) A. Targeted Victory Funding Credit Card Processing		Date of Disbursement M M / D D / Y Y Y Y 10 / 05 / 2015
Mailing Address 1033 N Fairfax St #40		Amount of Each Disbursement this Period 20.50
City Alexandria State VA Zip Code 22314	Purpose of Disbursement Credit Card Contribution Processing Fee 001 Category/Type	
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.E1618242
State: VA District:		

Full Name (Last, First, Middle Initial) B. Targeted Victory Funding Credit Card Processing		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2015
Mailing Address 1033 N Fairfax St #40		Amount of Each Disbursement this Period 17.75
City Alexandria State VA Zip Code 22314	Purpose of Disbursement Credit Card Contribution Processing Fee 001 Category/Type	
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.E1618238
State: VA District:		

Full Name (Last, First, Middle Initial) c. Targeted Victory Funding Credit Card Processing		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2015
Mailing Address 1033 N Fairfax St #40		Amount of Each Disbursement this Period 7.10
City Alexandria State VA Zip Code 22314	Purpose of Disbursement Credit Card Contribution Processing Fee 001 Category/Type	
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.E1618240
State: VA District:		

SUBTOTAL of Disbursements This Page (optional).....	45.35
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 120 OF 175	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Tarkanian For Congress

Full Name (Last, First, Middle Initial)		Date of Disbursement
A. Targeted Victory Funding Credit Card Processing		M M / D D / Y Y Y Y 12 / 03 / 2015
Mailing Address 1033 N Fairfax St #40		Amount of Each Disbursement this Period
City Alexandria	State VA	Zip Code 22314
Purpose of Disbursement Credit Card Processing Fee	Category/Type	10.65
Candidate Name	Disbursement For: 2016	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	Transaction ID : SB17.E1622363
State: VA District:	<input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial)		Date of Disbursement
B. Targeted Victory Funding Credit Card Processing		M M / D D / Y Y Y Y 12 / 07 / 2015
Mailing Address 1033 N Fairfax St #40		Amount of Each Disbursement this Period
City Alexandria	State VA	Zip Code 22314
Purpose of Disbursement Credit Card Processing Fee	Category/Type	41.00
Candidate Name	Disbursement For: 2016	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	Transaction ID : SB17.E1622365
State: VA District:	<input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial)		Date of Disbursement
C. Targeted Victory Funding Credit Card Processing		M M / D D / Y Y Y Y 10 / 01 / 2015
Mailing Address 1033 N Fairfax St #40		Amount of Each Disbursement this Period
City Alexandria	State VA	Zip Code 22314
Purpose of Disbursement Credit Card Contribution Processing Fee	Category/Type	6.15
Candidate Name	Disbursement For: 2016	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	Transaction ID : SB17.E1618236
State: VA District:	<input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	57.80
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 121 OF 175			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Tarkanian For Congress

Full Name (Last, First, Middle Initial) A. Targeted Victory Funding Credit Card Processing		Date of Disbursement M M / D D / Y Y Y Y 11 / 18 / 2015
Mailing Address 1033 N Fairfax St #40		Amount of Each Disbursement this Period 7.10
City Alexandria State VA Zip Code 22314	Purpose of Disbursement Credit Card Processing Fee	
Candidate Name	Category/Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.E1621235
State: VA District:		

Full Name (Last, First, Middle Initial) B. Targeted Victory Funding Credit Card Processing		Date of Disbursement M M / D D / Y Y Y Y 11 / 18 / 2015
Mailing Address 1033 N Fairfax St #40		Amount of Each Disbursement this Period 1.78
City Alexandria State VA Zip Code 22314	Purpose of Disbursement Credit Card Processing Fee	
Candidate Name	Category/Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.E1621233
State: VA District:		

Full Name (Last, First, Middle Initial) C. Targeted Victory Funding Credit Card Processing		Date of Disbursement M M / D D / Y Y Y Y 11 / 18 / 2015
Mailing Address 1033 N Fairfax St #40		Amount of Each Disbursement this Period 17.75
City Alexandria State VA Zip Code 22314	Purpose of Disbursement Credit Card Processing Fee	
Candidate Name	Category/Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.E1621231
State: VA District:		

SUBTOTAL of Disbursements This Page (optional).....	26.63
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 122 OF 175	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Tarkanian For Congress

Full Name (Last, First, Middle Initial) A. Targeted Victory Funding Credit Card Processing		Date of Disbursement M M / D D / Y Y Y Y 11 / 16 / 2015
Mailing Address 1033 N Fairfax St #40		Amount of Each Disbursement this Period 0.71
City Alexandria State VA Zip Code 22314	Purpose of Disbursement Credit Card Processing Fee	
Candidate Name	Category/Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.E1621229
State: VA District:		

Full Name (Last, First, Middle Initial) B. Targeted Victory Funding Credit Card Processing		Date of Disbursement M M / D D / Y Y Y Y 11 / 13 / 2015
Mailing Address 1033 N Fairfax St #40		Amount of Each Disbursement this Period 0.71
City Alexandria State VA Zip Code 22314	Purpose of Disbursement Credit Card Processing Fee	
Candidate Name	Category/Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.E1621227
State: VA District:		

Full Name (Last, First, Middle Initial) c. Targeted Victory Funding Credit Card Processing		Date of Disbursement M M / D D / Y Y Y Y 11 / 12 / 2015
Mailing Address 1033 N Fairfax St #40		Amount of Each Disbursement this Period 1.78
City Alexandria State VA Zip Code 22314	Purpose of Disbursement Credit Card Processing Fee	
Candidate Name	Category/Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.E1621225
State: VA District:		

SUBTOTAL of Disbursements This Page (optional).....	3.20
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 123 OF 175			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Tarkanian For Congress

Full Name (Last, First, Middle Initial)		Date of Disbursement										
A. Targeted Victory Funding Credit Card Processing		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>11</td> <td></td> <td>12</td> <td></td> <td>2015</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	11		12		2015
M M	/	D D	/	Y Y Y Y								
11		12		2015								
Mailing Address 1033 N Fairfax St #40		Amount of Each Disbursement this Period										
City Alexandria	State VA Zip Code 22314											
Purpose of Disbursement Credit Card Processing Fee	Category/Type	<table border="1"> <tr> <td>1.78</td> </tr> </table>	1.78									
1.78												
Candidate Name	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<input type="checkbox"/> Memo Item										
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Transaction ID : SB17.E1621223										
State: VA District:												

Full Name (Last, First, Middle Initial)		Date of Disbursement										
B. Targeted Victory Funding Credit Card Processing		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>11</td> <td></td> <td>12</td> <td></td> <td>2015</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	11		12		2015
M M	/	D D	/	Y Y Y Y								
11		12		2015								
Mailing Address 1033 N Fairfax St #40		Amount of Each Disbursement this Period										
City Alexandria	State VA Zip Code 22314											
Purpose of Disbursement Credit Card Processing Fee	Category/Type	<table border="1"> <tr> <td>7.03</td> </tr> </table>	7.03									
7.03												
Candidate Name	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<input type="checkbox"/> Memo Item										
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Transaction ID : SB17.E1621221										
State: VA District:												

Full Name (Last, First, Middle Initial)		Date of Disbursement										
C. Targeted Victory Funding Credit Card Processing		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>11</td> <td></td> <td>12</td> <td></td> <td>2015</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	11		12		2015
M M	/	D D	/	Y Y Y Y								
11		12		2015								
Mailing Address 1033 N Fairfax St #40		Amount of Each Disbursement this Period										
City Alexandria	State VA Zip Code 22314											
Purpose of Disbursement Credit Card Processing Fee	Category/Type	<table border="1"> <tr> <td>3.55</td> </tr> </table>	3.55									
3.55												
Candidate Name	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<input type="checkbox"/> Memo Item										
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Transaction ID : SB17.E1621219										
State: VA District:												

SUBTOTAL of Disbursements This Page (optional).....	<table border="1"> <tr> <td>12.36</td> </tr> </table>	12.36
12.36		
TOTAL This Period (last page this line number only).....	<table border="1"> <tr> <td></td> </tr> </table>	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 124 OF 175	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Tarkanian For Congress

Full Name (Last, First, Middle Initial) A. Targeted Victory Funding Credit Card Processing		Date of Disbursement M M / D D / Y Y Y Y 11 / 12 / 2015
Mailing Address 1033 N Fairfax St #40		Amount of Each Disbursement this Period 1.78
City Alexandria State VA Zip Code 22314	Purpose of Disbursement Credit Card Processing Fee	
Candidate Name	Category/Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.E1621217
State: VA District:		

Full Name (Last, First, Middle Initial) B. Targeted Victory Funding Credit Card Processing		Date of Disbursement M M / D D / Y Y Y Y 11 / 12 / 2015
Mailing Address 1033 N Fairfax St #40		Amount of Each Disbursement this Period 35.50
City Alexandria State VA Zip Code 22314	Purpose of Disbursement Credit Card Processing Fee	
Candidate Name	Category/Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.E1621215
State: VA District:		

Full Name (Last, First, Middle Initial) c. Targeted Victory Funding Credit Card Processing		Date of Disbursement M M / D D / Y Y Y Y 11 / 12 / 2015
Mailing Address 1033 N Fairfax St #40		Amount of Each Disbursement this Period 3.55
City Alexandria State VA Zip Code 22314	Purpose of Disbursement Credit Card Processing Fee	
Candidate Name	Category/Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.E1621213
State: VA District:		

SUBTOTAL of Disbursements This Page (optional).....	40.83
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 125 OF 175	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Tarkanian For Congress

Full Name (Last, First, Middle Initial) A. Targeted Victory Funding Credit Card Processing		Date of Disbursement M M / D D / Y Y Y Y 11 / 11 / 2015
Mailing Address 1033 N Fairfax St #40		Amount of Each Disbursement this Period 3.55
City Alexandria State VA Zip Code 22314	Purpose of Disbursement Credit Card Processing Fee	
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.E1621211
State: VA District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Targeted Victory Funding Credit Card Processing		Date of Disbursement M M / D D / Y Y Y Y 11 / 10 / 2015
Mailing Address 1033 N Fairfax St #40		Amount of Each Disbursement this Period 17.75
City Alexandria State VA Zip Code 22314	Purpose of Disbursement Credit Card Processing Fee	
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.E1621208
State: VA District:	Category/Type	

Full Name (Last, First, Middle Initial) c. Targeted Victory Funding Credit Card Processing		Date of Disbursement M M / D D / Y Y Y Y 11 / 06 / 2015
Mailing Address 1033 N Fairfax St #40		Amount of Each Disbursement this Period 17.75
City Alexandria State VA Zip Code 22314	Purpose of Disbursement Credit Card Processing Fee	
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.E1621204
State: VA District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	39.05
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 126 OF 175	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Tarkanian For Congress

Full Name (Last, First, Middle Initial) A. Targeted Victory Funding Credit Card Processing		Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2015
Mailing Address 1033 N Fairfax St #40		Amount of Each Disbursement this Period 82.00
City Alexandria State VA Zip Code 22314	Purpose of Disbursement Credit Card Processing Fee	
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.E1621200
State: VA District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Targeted Victory Funding Credit Card Processing		Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2015
Mailing Address 1033 N Fairfax St #40		Amount of Each Disbursement this Period 4.10
City Alexandria State VA Zip Code 22314	Purpose of Disbursement Credit Card Processing Fee	
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.E1621982
State: VA District:	Category/Type	

Full Name (Last, First, Middle Initial) c. Targeted Victory Funding Credit Card Processing		Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2015
Mailing Address 1033 N Fairfax St #40		Amount of Each Disbursement this Period 7.10
City Alexandria State VA Zip Code 22314	Purpose of Disbursement Credit Card Processing Fee	
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.E1621980
State: VA District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	93.20
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 127 OF 175	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Tarkanian For Congress

Full Name (Last, First, Middle Initial)		Date of Disbursement
A. Targeted Victory Funding Credit Card Processing		M M / D D / Y Y Y Y 10 / 02 / 2015
Mailing Address 1033 N Fairfax St #40		Amount of Each Disbursement this Period
City Alexandria	State VA	Zip Code 22314
Purpose of Disbursement Credit Card Processing Fee	Category/Type	10.25
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.E1621976
State: VA District:		

Full Name (Last, First, Middle Initial)		Date of Disbursement
B. Targeted Victory Funding Credit Card Processing		M M / D D / Y Y Y Y 10 / 02 / 2015
Mailing Address 1033 N Fairfax St #40		Amount of Each Disbursement this Period
City Alexandria	State VA	Zip Code 22314
Purpose of Disbursement Credit Card Processing Fee	Category/Type	10.25
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.E1621974
State: VA District:		

Full Name (Last, First, Middle Initial)		Date of Disbursement
C. Targeted Victory Funding Credit Card Processing		M M / D D / Y Y Y Y 10 / 02 / 2015
Mailing Address 1033 N Fairfax St #40		Amount of Each Disbursement this Period
City Alexandria	State VA	Zip Code 22314
Purpose of Disbursement Credit Card Processing Fee	Category/Type	4.10
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.E1621972
State: VA District:		

SUBTOTAL of Disbursements This Page (optional).....	24.60
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 128 OF 175	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Tarkanian For Congress

Full Name (Last, First, Middle Initial) A. Targeted Victory Funding Credit Card Processing		Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2015
Mailing Address 1033 N Fairfax St #40		Amount of Each Disbursement this Period 0.71
City Alexandria State VA Zip Code 22314	Purpose of Disbursement Credit Card Processing Fee	
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.E1621970
State: VA District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Targeted Victory Funding Credit Card Processing		Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2015
Mailing Address 1033 N Fairfax St #40		Amount of Each Disbursement this Period 3.55
City Alexandria State VA Zip Code 22314	Purpose of Disbursement Credit Card Processing Fee	
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.E1621966
State: VA District:	Category/Type	

Full Name (Last, First, Middle Initial) c. Targeted Victory Funding Credit Card Processing		Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2015
Mailing Address 1033 N Fairfax St #40		Amount of Each Disbursement this Period 5.32
City Alexandria State VA Zip Code 22314	Purpose of Disbursement Credit Card Processing Fee	
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.E1621962
State: VA District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	9.58
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 129 OF 175	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Tarkanian For Congress

Full Name (Last, First, Middle Initial) A. Targeted Victory Funding Credit Card Processing		Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2015
Mailing Address 1033 N Fairfax St #40		Amount of Each Disbursement this Period 35.50
City Alexandria State VA Zip Code 22314	Purpose of Disbursement Credit Card Processing Fee	
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.E1621958
State: VA District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Targeted Victory Funding Credit Card Processing		Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2015
Mailing Address 1033 N Fairfax St #40		Amount of Each Disbursement this Period 3.55
City Alexandria State VA Zip Code 22314	Purpose of Disbursement Credit Card Processing Fee	
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.E1621956
State: VA District:	Category/Type	

Full Name (Last, First, Middle Initial) c. Targeted Victory Funding Credit Card Processing		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2015
Mailing Address 1033 N Fairfax St #40		Amount of Each Disbursement this Period 71.00
City Alexandria State VA Zip Code 22314	Purpose of Disbursement Credit Card Processing Fee	
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.E1621954
State: VA District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	110.05
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 130 OF 175	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Tarkanian For Congress

Full Name (Last, First, Middle Initial) A. Targeted Victory Funding Credit Card Processing		Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2015
Mailing Address 1033 N Fairfax St #40		Amount of Each Disbursement this Period 7.10
City Alexandria State VA Zip Code 22314	Purpose of Disbursement Credit Card Processing Fee	
Candidate Name	Category/Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.E1621952
State: VA District:		

Full Name (Last, First, Middle Initial) B. Targeted Victory Funding Credit Card Processing		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2015
Mailing Address 1033 N Fairfax St #40		Amount of Each Disbursement this Period 7.10
City Alexandria State VA Zip Code 22314	Purpose of Disbursement Credit Card Processing Fee	
Candidate Name	Category/Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.E1621950
State: VA District:		

Full Name (Last, First, Middle Initial) c. Targeted Victory Funding Credit Card Processing		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2015
Mailing Address 1033 N Fairfax St #40		Amount of Each Disbursement this Period 7.10
City Alexandria State VA Zip Code 22314	Purpose of Disbursement Credit Card Processing Fee	
Candidate Name	Category/Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.E1621948
State: VA District:		

SUBTOTAL of Disbursements This Page (optional).....	21.30
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 131 OF 175	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Tarkanian For Congress

Full Name (Last, First, Middle Initial) A. Targeted Victory Funding Credit Card Processing		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2015
Mailing Address 1033 N Fairfax St #40		Amount of Each Disbursement this Period 7.10
City Alexandria State VA Zip Code 22314	Purpose of Disbursement Credit Card Processing Fee	
Candidate Name	Category/Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: VA District:	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.E1621946

Full Name (Last, First, Middle Initial) B. Targeted Victory Funding Credit Card Processing		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2015
Mailing Address 1033 N Fairfax St #40		Amount of Each Disbursement this Period 3.55
City Alexandria State VA Zip Code 22314	Purpose of Disbursement Credit Card Processing Fee	
Candidate Name	Category/Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: VA District:	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.E1621944

Full Name (Last, First, Middle Initial) c. Targeted Victory Funding Credit Card Processing		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2015
Mailing Address 1033 N Fairfax St #40		Amount of Each Disbursement this Period 0.07
City Alexandria State VA Zip Code 22314	Purpose of Disbursement Credit Card Processing Fee	
Candidate Name	Category/Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: VA District:	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.E1621942

SUBTOTAL of Disbursements This Page (optional).....	10.72
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 132 OF 175			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Tarkanian For Congress

Full Name (Last, First, Middle Initial) A. Targeted Victory Funding Credit Card Processing		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2015
Mailing Address 1033 N Fairfax St #40		Amount of Each Disbursement this Period 3.55
City Alexandria State VA Zip Code 22314	Purpose of Disbursement Credit Card Processing Fee	
Candidate Name	Category/Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.E1621939
State: VA District:		

Full Name (Last, First, Middle Initial) B. Targeted Victory Funding Credit Card Processing		Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2015
Mailing Address 1033 N Fairfax St #40		Amount of Each Disbursement this Period 3.55
City Alexandria State VA Zip Code 22314	Purpose of Disbursement Credit Card Processing Fee	
Candidate Name	Category/Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.E1621921
State: VA District:		

Full Name (Last, First, Middle Initial) c. Targeted Victory Funding Credit Card Processing		Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2015
Mailing Address 1033 N Fairfax St #40		Amount of Each Disbursement this Period 71.00
City Alexandria State VA Zip Code 22314	Purpose of Disbursement Credit Card Processing Fee	
Candidate Name	Category/Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.E1621919
State: VA District:		

SUBTOTAL of Disbursements This Page (optional).....	78.10
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 133 OF 175	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Tarkanian For Congress

Full Name (Last, First, Middle Initial) A. Targeted Victory Funding Credit Card Processing		Date of Disbursement M M / D D / Y Y Y Y 10 / 15 / 2015
Mailing Address 1033 N Fairfax St #40		Amount of Each Disbursement this Period 20.50 <input type="checkbox"/> Memo Item Transaction ID : SB17.E1618246
City Alexandria State VA Zip Code 22314	Purpose of Disbursement Credit Card Contribution Processing Fee Category/Type 001	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: VA District:		

Full Name (Last, First, Middle Initial) B. Targeted Victory Funding Credit Card Processing		Date of Disbursement M M / D D / Y Y Y Y 10 / 13 / 2015
Mailing Address 1033 N Fairfax St #40		Amount of Each Disbursement this Period 20.50 <input type="checkbox"/> Memo Item Transaction ID : SB17.E1618244
City Alexandria State VA Zip Code 22314	Purpose of Disbursement Credit Card Contribution Processing Fee Category/Type 001	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: VA District:		

Full Name (Last, First, Middle Initial) c. Targeted Victory Funding Credit Card Processing		Date of Disbursement M M / D D / Y Y Y Y 10 / 05 / 2015
Mailing Address 1033 N Fairfax St #40		Amount of Each Disbursement this Period 3.55 <input type="checkbox"/> Memo Item Transaction ID : SB17.E1622010
City Alexandria State VA Zip Code 22314	Purpose of Disbursement Credit Card Processing Fee Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: VA District:		

SUBTOTAL of Disbursements This Page (optional).....	44.55
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 134 OF 175	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Tarkanian For Congress

Full Name (Last, First, Middle Initial) A. Targeted Victory Funding Credit Card Processing		Date of Disbursement M M / D D / Y Y Y Y 10 / 05 / 2015
Mailing Address 1033 N Fairfax St #40		Amount of Each Disbursement this Period 3.55
City Alexandria State VA Zip Code 22314	Purpose of Disbursement Credit Card Processing Fee	
Candidate Name	Category/Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.E1621990
State: VA District:		

Full Name (Last, First, Middle Initial) B. Targeted Victory Funding Credit Card Processing		Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2015
Mailing Address 1033 N Fairfax St #40		Amount of Each Disbursement this Period 71.00
City Alexandria State VA Zip Code 22314	Purpose of Disbursement Credit Card Processing Fee	
Candidate Name	Category/Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.E1621988
State: VA District:		

Full Name (Last, First, Middle Initial) c. Targeted Victory Funding Credit Card Processing		Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2015
Mailing Address 1033 N Fairfax St #40		Amount of Each Disbursement this Period 191.70
City Alexandria State VA Zip Code 22314	Purpose of Disbursement Credit Card Processing Fee	
Candidate Name	Category/Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.E1621986
State: VA District:		

SUBTOTAL of Disbursements This Page (optional).....	266.25
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 135 OF 175	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Tarkanian For Congress

Full Name (Last, First, Middle Initial) A. Targeted Victory Funding Credit Card Processing		Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2015
Mailing Address 1033 N Fairfax St #40		Amount of Each Disbursement this Period 4.10
City Alexandria State VA Zip Code 22314	Purpose of Disbursement Credit Card Processing Fee	
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.E1621984
State: VA District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Targeted Victory Funding Credit Card Processing		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2015
Mailing Address 1033 N Fairfax St #40		Amount of Each Disbursement this Period 41.00
City Alexandria State VA Zip Code 22314	Purpose of Disbursement Credit Card Processing Fee	
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.E1621931
State: VA District:	Category/Type	

Full Name (Last, First, Middle Initial) c. Targeted Victory Funding Credit Card Processing		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2015
Mailing Address 1033 N Fairfax St #40		Amount of Each Disbursement this Period 3.55
City Alexandria State VA Zip Code 22314	Purpose of Disbursement Credit Card Processing Fee	
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.E1621929
State: VA District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	48.65
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 136 OF 175			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Tarkanian For Congress

Full Name (Last, First, Middle Initial) A. Targeted Victory Funding Credit Card Processing		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2015
Mailing Address 1033 N Fairfax St #40		Amount of Each Disbursement this Period 17.75
City Alexandria State VA Zip Code 22314	Purpose of Disbursement Credit Card Processing Fee	
Candidate Name	Category/Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.E1621927
State: VA District:		

Full Name (Last, First, Middle Initial) B. Targeted Victory Funding Credit Card Processing		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2015
Mailing Address 1033 N Fairfax St #40		Amount of Each Disbursement this Period 3.55
City Alexandria State VA Zip Code 22314	Purpose of Disbursement Credit Card Processing Fee	
Candidate Name	Category/Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.E1621925
State: VA District:		

Full Name (Last, First, Middle Initial) c. Targeted Victory Funding Credit Card Processing		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2015
Mailing Address 1033 N Fairfax St #40		Amount of Each Disbursement this Period 35.50
City Alexandria State VA Zip Code 22314	Purpose of Disbursement Credit Card Processing Fee	
Candidate Name	Category/Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.E1621923
State: VA District:		

SUBTOTAL of Disbursements This Page (optional).....	56.80
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 137 OF 175	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Tarkanian For Congress

Full Name (Last, First, Middle Initial) A. Targeted Victory Funding Credit Card Processing		Date of Disbursement M M / D D / Y Y Y Y 10 / 19 / 2015
Mailing Address 1033 N Fairfax St #40		Amount of Each Disbursement this Period 7.10
City Alexandria State VA Zip Code 22314	Purpose of Disbursement Credit Card Processing Fee	
Candidate Name	Category/Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: VA District:	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.E1621349

Full Name (Last, First, Middle Initial) B. Targeted Victory Funding Credit Card Processing		Date of Disbursement M M / D D / Y Y Y Y 11 / 22 / 2015
Mailing Address 1033 N Fairfax St #40		Amount of Each Disbursement this Period 10.25
City Alexandria State VA Zip Code 22314	Purpose of Disbursement Credit Card Processing Fee	
Candidate Name	Category/Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: VA District:	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.E1621241

Full Name (Last, First, Middle Initial) c. Targeted Victory Funding Credit Card Processing		Date of Disbursement M M / D D / Y Y Y Y 11 / 20 / 2015
Mailing Address 1033 N Fairfax St #40		Amount of Each Disbursement this Period 142.00
City Alexandria State VA Zip Code 22314	Purpose of Disbursement Credit Card Processing Fee	
Candidate Name	Category/Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: VA District:	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.E1621239

SUBTOTAL of Disbursements This Page (optional).....	159.35
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 138 OF 175	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Tarkanian For Congress

Full Name (Last, First, Middle Initial) A. Targeted Victory Funding Credit Card Processing		Date of Disbursement M M / D D / Y Y Y Y 11 / 19 / 2015
Mailing Address 1033 N Fairfax St #40		Amount of Each Disbursement this Period 3.55
City Alexandria State VA Zip Code 22314	Purpose of Disbursement Credit Card Processing Fee	
Candidate Name	Category/Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.E1621237
State: VA District:		

Full Name (Last, First, Middle Initial) B. Targeted Victory Funding Credit Card Processing		Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2015
Mailing Address 1033 N Fairfax St #40		Amount of Each Disbursement this Period 14.35
City Alexandria State VA Zip Code 22314	Purpose of Disbursement Credit Card Processing Fee	
Candidate Name	Category/Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.E1621198
State: VA District:		

Full Name (Last, First, Middle Initial) C. Just Win Strategies		Date of Disbursement M M / D D / Y Y Y Y 11 / 16 / 2015
Mailing Address P.O. Box 2561		Amount of Each Disbursement this Period 5000.00
City Alexandria State VA Zip Code 22301	Purpose of Disbursement Professional Campaign Consulting Services	
Candidate Name	Category/Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.E1621394
State: VA District:		

SUBTOTAL of Disbursements This Page (optional).....	5017.90
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 139 OF 175	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Tarkanian For Congress

Full Name (Last, First, Middle Initial) A. FBM, Inc.		Date of Disbursement M M / D D / Y Y Y Y 10 / 28 / 2015
Mailing Address 955 Vegas Valley Drive, Apt. A		Amount of Each Disbursement this Period 813.33
City Las Vegas	State NV	Zip Code 89109
Purpose of Disbursement Fundraising Consulting	Category/Type	
Candidate Name	Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.E1618616
State: NV	District:	

Full Name (Last, First, Middle Initial) B. DirectFile		Date of Disbursement M M / D D / Y Y Y Y 11 / 16 / 2015
Mailing Address 504 Van Ness Ave		Amount of Each Disbursement this Period 12136.56
City Fresno	State CA	Zip Code 93721
Purpose of Disbursement Treasury Services	Category/Type 001	
Candidate Name	Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.E1621243
State: CA	District:	

Full Name (Last, First, Middle Initial) c. Authorize.net		Date of Disbursement M M / D D / Y Y Y Y 11 / 13 / 2015
Mailing Address 808 East Utah Valley Drive		Amount of Each Disbursement this Period 35.10
City American Fork	State UT	Zip Code 84003
Purpose of Disbursement Credit Card Processing Fee	Category/Type	
Candidate Name	Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.E1622030
State: UT	District:	

SUBTOTAL of Disbursements This Page (optional).....	12984.99
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 140 OF 175	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Tarkanian For Congress

Full Name (Last, First, Middle Initial) A. Authorize.net		Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2015
Mailing Address 808 East Utah Valley Drive		Amount of Each Disbursement this Period 21.61
City American Fork	State UT	
Zip Code 84003	Purpose of Disbursement Credit Card Processing Fee	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type	Transaction ID : SB17.E1621917
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: UT District:		

Full Name (Last, First, Middle Initial) B. Authorize.net		Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2015
Mailing Address 808 East Utah Valley Drive		Amount of Each Disbursement this Period 9.43
City American Fork	State UT	
Zip Code 84003	Purpose of Disbursement Credit Card Processing Fee	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type	Transaction ID : SB17.E1621788
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: UT District:		

Full Name (Last, First, Middle Initial) c. Authorize.net		Date of Disbursement M M / D D / Y Y Y Y 10 / 19 / 2015
Mailing Address 808 East Utah Valley Drive		Amount of Each Disbursement this Period 28.10
City American Fork	State UT	
Zip Code 84003	Purpose of Disbursement Credit Card Processing Fee	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type	Transaction ID : SB17.E1622012
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: UT District:		

SUBTOTAL of Disbursements This Page (optional).....	59.14
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 141 OF 175	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Tarkanian For Congress

Full Name (Last, First, Middle Initial) A. Authorize.net		Date of Disbursement M M / D D / Y Y Y Y 12 / 02 / 2015
Mailing Address 808 East Utah Valley Drive		Amount of Each Disbursement this Period 29.97
City American Fork	State UT Zip Code 84003	
Purpose of Disbursement Credit Card Processing Fee		<input type="checkbox"/> Memo Item
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.E1622383
State: UT District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Authorize.net		Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2015
Mailing Address 808 East Utah Valley Drive		Amount of Each Disbursement this Period 21.83
City American Fork	State UT Zip Code 84003	
Purpose of Disbursement Credit Card Contribution Processing Fee		<input type="checkbox"/> Memo Item
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.E1621253
State: UT District:	Category/Type	

Full Name (Last, First, Middle Initial) C. Authorize.net		Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2015
Mailing Address 808 East Utah Valley Drive		Amount of Each Disbursement this Period 9.80
City American Fork	State UT Zip Code 84003	
Purpose of Disbursement Credit Card Contribution Processing Fee		<input type="checkbox"/> Memo Item
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.E1621251
State: UT District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	61.60
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 142 OF 175	
	<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Tarkanian For Congress

Full Name (Last, First, Middle Initial) A. AuthNet Gateway Billing		Date of Disbursement M M / D D / Y Y Y Y 12 / 02 / 2015
Mailing Address P.O. Box 947		Amount of Each Disbursement this Period 9.60
City American Fork	State UT	
Zip Code 84003-0947	Purpose of Disbursement Credit Card Processing Fee	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type	Transaction ID : SB17.E1622381
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: UT District:		

Full Name (Last, First, Middle Initial) B. AuthNet Gateway Billing		Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2015
Mailing Address P.O. Box 947		Amount of Each Disbursement this Period 10.00
City American Fork	State UT	
Zip Code 84003-0947	Purpose of Disbursement Credit Card Processing Fee	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type	Transaction ID : SB17.E1621915
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: UT District:		

Full Name (Last, First, Middle Initial) C. American Express		Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2015
Mailing Address 200 Vesey Street		Amount of Each Disbursement this Period 13.31
City New York	State NY	
Zip Code 10285	Purpose of Disbursement Credit Card Contribution Processing Fee	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type	Transaction ID : SB17.E1621255
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY District:		

SUBTOTAL of Disbursements This Page (optional).....	32.91
TOTAL This Period (last page this line number only).....	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 143 OF 175	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Tarkanian For Congress

Full Name (Last, First, Middle Initial) A. American Express			Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2015	
Mailing Address 200 Vesey Street			Amount of Each Disbursement this Period 7.95	
City New York	State NY	Zip Code 10285	<input type="checkbox"/> Memo Item	
Purpose of Disbursement Credit Card Contribution Processing Fee		Category/ Type 001	Transaction ID : SB17.E1621249	
Candidate Name		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: NY	District:		

Full Name (Last, First, Middle Initial) B.			Date of Disbursement M M / D D / Y Y Y Y	
Mailing Address			Amount of Each Disbursement this Period	
City	State	Zip Code	<input type="checkbox"/> Memo Item	
Purpose of Disbursement		Category/ Type		
Candidate Name		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State:	District:		

Full Name (Last, First, Middle Initial) C.			Date of Disbursement M M / D D / Y Y Y Y	
Mailing Address			Amount of Each Disbursement this Period	
City	State	Zip Code	<input type="checkbox"/> Memo Item	
Purpose of Disbursement		Category/ Type		
Candidate Name		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State:	District:		

SUBTOTAL of Disbursements This Page (optional)	7.95
TOTAL This Period (last page this line number only)	40790.89

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 144 OF 175			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)
Tarkanian For Congress

Full Name (Last, First, Middle Initial) A. Breslin Builders		Date of Disbursement M M / D D / Y Y Y Y 11 / 16 / 2015
Mailing Address 5525 Polaris Avenue, Suite B		Amount of Each Disbursement this Period 250.00 <input type="checkbox"/> Memo Item Transaction ID : SB20A.C1621598
City Las Vegas	State NV	
Zip Code 89118	Purpose of Disbursement Contribution Refund	Category/ Type 010
Candidate Name		
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:		

Full Name (Last, First, Middle Initial) B. Advanstaff HR - Client Services Inc.		Date of Disbursement M M / D D / Y Y Y Y 11 / 16 / 2015
Mailing Address 5632 Dorian Black Ave		Amount of Each Disbursement this Period 250.00 <input type="checkbox"/> Memo Item Transaction ID : SB20A.C1621599
City Las Vegas	State NV	
Zip Code 89139-7477	Purpose of Disbursement Contribution Refund	Category/ Type 010
Candidate Name		
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:		

Full Name (Last, First, Middle Initial) c. Boulevard Ventures LLC		Date of Disbursement M M / D D / Y Y Y Y 12 / 17 / 2015
Mailing Address 3528 S Maryland Parkway		Amount of Each Disbursement this Period 1000.00 <input type="checkbox"/> Memo Item Transaction ID : SB20A.C1621694
City Las Vegas	State NV	
Zip Code 89169	Purpose of Disbursement Contribution Refund	Category/ Type 010
Candidate Name		
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:		

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 145 OF 175	
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Tarkanian For Congress

Full Name (Last, First, Middle Initial) A. Michael R. Pontoni, LTD.		Date of Disbursement M M / D D / Y Y Y Y 11 / 16 / 2015
Mailing Address 64 N Pecos Rd Ste 100		Amount of Each Disbursement this Period 250.00 <input type="checkbox"/> Memo Item
City Henderson State NV Zip Code 89074	Purpose of Disbursement Contribution Refund Category/Type 010	
Candidate Name	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)	Transaction ID : SB20A.C1621600
State: District:		

Full Name (Last, First, Middle Initial) B.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period <input type="checkbox"/> Memo Item
City	State Zip Code	
Purpose of Disbursement	Category/Type	
Candidate Name	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:		

Full Name (Last, First, Middle Initial) C.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period <input type="checkbox"/> Memo Item
City	State Zip Code	
Purpose of Disbursement	Category/Type	
Candidate Name	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:		

SUBTOTAL of Disbursements This Page (optional)	250.00
TOTAL This Period (last page this line number only)	1750.00

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

NAME OF COMMITTEE (In Full)
Tarkanian For Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Danny Tarkanian	Nature of Debt (Purpose): In-Kind to be reimbursed; Meal
Mailing Address 3008 Campbell Circle	
City State Zip Code Las Vegas NV 89107	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.E1619312	
Amount Incurred This Period 7.87	Payment This Period 0.00	Outstanding Balance at Close of This Period 7.87

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Danny Tarkanian	Nature of Debt (Purpose): In-Kind to be reimbursed; taxi fare
Mailing Address 3008 Campbell Circle	
City State Zip Code Las Vegas NV 89107	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.E1619311	
Amount Incurred This Period 13.27	Payment This Period 0.00	Outstanding Balance at Close of This Period 13.27

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Danny Tarkanian	Nature of Debt (Purpose): In-Kind to be reimbursed; Meals
Mailing Address 3008 Campbell Circle	
City State Zip Code Las Vegas NV 89107	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.E1619290	
Amount Incurred This Period 29.19	Payment This Period 0.00	Outstanding Balance at Close of This Period 29.19

1) SUBTOTALS This Period This Page (optional)	50.33
2) TOTALS This Period (last page this line number only)	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

NAME OF COMMITTEE (In Full)
Tarkanian For Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Danny Tarkanian		Nature of Debt (Purpose): In-Kind to be reimbursed; Meal
Mailing Address 3008 Campbell Circle		
City	State	Zip Code
Las Vegas	NV	89107

Outstanding Balance Beginning This Period	Transaction ID : SD10.E1619295	
<input type="text" value="0.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="6.46"/>	<input type="text" value="0.00"/>	<input type="text" value="6.46"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Danny Tarkanian		Nature of Debt (Purpose): In-Kind to be reimbursed; Website Hosting Fee
Mailing Address 3008 Campbell Circle		
City	State	Zip Code
Las Vegas	NV	89107

Outstanding Balance Beginning This Period	Transaction ID : SD10.E1617638	
<input type="text" value="59.88"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="59.88"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Danny Tarkanian		Nature of Debt (Purpose): In-Kind to be reimbursed; Website Services
Mailing Address 3008 Campbell Circle		
City	State	Zip Code
Las Vegas	NV	89107

Outstanding Balance Beginning This Period	Transaction ID : SD10.E1622645	
<input type="text" value="0.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="55.00"/>	<input type="text" value="0.00"/>	<input type="text" value="55.00"/>

1) SUBTOTALS This Period This Page (optional)	<input type="text" value="121.34"/>
2) TOTALS This Period (last page this line number only)	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

NAME OF COMMITTEE (In Full)
Tarkanian For Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Danny Tarkanian	Nature of Debt (Purpose): In-Kind to be reimbursed
Mailing Address 3008 Campbell Circle	
City State Zip Code Las Vegas NV 89107	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.E1619320	
Amount Incurred This Period 540.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 540.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Danny Tarkanian	Nature of Debt (Purpose): In-Kind to be reimbursed
Mailing Address 3008 Campbell Circle	
City State Zip Code Las Vegas NV 89107	

Outstanding Balance Beginning This Period 195.00	Transaction ID : SD10.E1617642	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 195.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Danny Tarkanian	Nature of Debt (Purpose): In-Kind to be reimbursed; Travel
Mailing Address 3008 Campbell Circle	
City State Zip Code Las Vegas NV 89107	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.E1619289	
Amount Incurred This Period 57.89	Payment This Period 0.00	Outstanding Balance at Close of This Period 57.89

1) SUBTOTALS This Period This Page (optional)	792.89
2) TOTALS This Period (last page this line number only)	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

NAME OF COMMITTEE (In Full)
Tarkanian For Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Danny Tarkanian	Nature of Debt (Purpose): In-Kind to be reimbursed; Taxi Fare
Mailing Address 3008 Campbell Circle	
City State Zip Code Las Vegas NV 89107	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.E1619304	
Amount Incurred This Period 20.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 20.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Danny Tarkanian	Nature of Debt (Purpose): In-Kind to be reimbursed; Meal
Mailing Address 3008 Campbell Circle	
City State Zip Code Las Vegas NV 89107	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.E1619322	
Amount Incurred This Period 22.81	Payment This Period 0.00	Outstanding Balance at Close of This Period 22.81

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Danny Tarkanian	Nature of Debt (Purpose): In-Kind to be reimbursed; Meal
Mailing Address 3008 Campbell Circle	
City State Zip Code Las Vegas NV 89107	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.E1619324	
Amount Incurred This Period 60.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 60.00

1) SUBTOTALS This Period This Page (optional)	102.81
2) TOTALS This Period (last page this line number only)	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

NAME OF COMMITTEE (In Full)
Tarkanian For Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Danny Tarkanian		Nature of Debt (Purpose): In-Kind to be reimbursed; Meal
Mailing Address 3008 Campbell Circle		
City	State	Zip Code
Las Vegas	NV	89107

Outstanding Balance Beginning This Period	Transaction ID : SD10.E1619301	
<input type="text" value="0.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="15.46"/>	<input type="text" value="0.00"/>	<input type="text" value="15.46"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Danny Tarkanian		Nature of Debt (Purpose): In-Kind to be reimbursed
Mailing Address 3008 Campbell Circle		
City	State	Zip Code
Las Vegas	NV	89107

Outstanding Balance Beginning This Period	Transaction ID : SD10.E1617644	
<input type="text" value="179.99"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="179.99"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Danny Tarkanian		Nature of Debt (Purpose): In-Kind to be reimbursed; Meals
Mailing Address 3008 Campbell Circle		
City	State	Zip Code
Las Vegas	NV	89107

Outstanding Balance Beginning This Period	Transaction ID : SD10.E1619283	
<input type="text" value="0.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="76.94"/>	<input type="text" value="0.00"/>	<input type="text" value="76.94"/>

1) SUBTOTALS This Period This Page (optional)	<input type="text" value="272.39"/>
2) TOTALS This Period (last page this line number only)	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)

Tarkanian For Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Danny Tarkanian

Nature of Debt (Purpose):

In-Kind to be reimbursed; Meal

Mailing Address 3008 Campbell Circle

City State Zip Code
Las Vegas NV 89107

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.E1619315

Amount Incurred This Period

22.01

Payment This Period

0.00

Outstanding Balance at Close of This Period

22.01

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Danny Tarkanian

Nature of Debt (Purpose):

In-Kind to be reimbursed; Meal

Mailing Address 3008 Campbell Circle

City State Zip Code
Las Vegas NV 89107

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.E1619294

Amount Incurred This Period

12.78

Payment This Period

0.00

Outstanding Balance at Close of This Period

12.78

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Danny Tarkanian

Nature of Debt (Purpose):

In-Kind to be reimbursed; taxi fare

Mailing Address 3008 Campbell Circle

City State Zip Code
Las Vegas NV 89107

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.E1619309

Amount Incurred This Period

17.30

Payment This Period

0.00

Outstanding Balance at Close of This Period

17.30

1) **SUBTOTALS** This Period This Page (optional) ▶

52.09

2) **TOTALS** This Period (last page this line number only) ▶

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

NAME OF COMMITTEE (In Full)
Tarkanian For Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Danny Tarkanian	Nature of Debt (Purpose): In-Kind to be reimbursed; Meal
Mailing Address 3008 Campbell Circle	
City State Zip Code Las Vegas NV 89107	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.E1619327	
Amount Incurred This Period 15.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 15.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Danny Tarkanian	Nature of Debt (Purpose): In-Kind to be reimbursed; Communications
Mailing Address 3008 Campbell Circle	
City State Zip Code Las Vegas NV 89107	

Outstanding Balance Beginning This Period 34.78	Transaction ID : SD10.E1617640	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 34.78

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Danny Tarkanian	Nature of Debt (Purpose):
Mailing Address 3008 Campbell Circle	
City State Zip Code Las Vegas NV 89107	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.E1619278	
Amount Incurred This Period 439.98	Payment This Period 0.00	Outstanding Balance at Close of This Period 439.98

1) SUBTOTALS This Period This Page (optional)	489.76
2) TOTALS This Period (last page this line number only)	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 153 OF 175
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
Tarkanian For Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Danny Tarkanian	Nature of Debt (Purpose): In-Kind to be reimbursed; parking
Mailing Address 3008 Campbell Circle	
City State Zip Code Las Vegas NV 89107	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.E1619282	
Amount Incurred This Period 2.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 2.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Danny Tarkanian	Nature of Debt (Purpose): In-Kind to be reimbursed; Office supplies from Office Depot
Mailing Address 3008 Campbell Circle	
City State Zip Code Las Vegas NV 89107	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.E1619318	
Amount Incurred This Period 77.08	Payment This Period 0.00	Outstanding Balance at Close of This Period 77.08

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Danny Tarkanian	Nature of Debt (Purpose): In-Kind to be reimbursed; Taxi Fare
Mailing Address 3008 Campbell Circle	
City State Zip Code Las Vegas NV 89107	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.E1619297	
Amount Incurred This Period 18.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 18.00

1) SUBTOTALS This Period This Page (optional)	97.08
2) TOTALS This Period (last page this line number only)	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

NAME OF COMMITTEE (In Full)
Tarkanian For Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Danny Tarkanian	Nature of Debt (Purpose): In-Kind to be reimbursed; Communications
Mailing Address 3008 Campbell Circle	
City State Zip Code Las Vegas NV 89107	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.E1621707	
Amount Incurred This Period 50.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 50.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Danny Tarkanian	Nature of Debt (Purpose): In-Kind to be reimbursed; Radio Air Time
Mailing Address 3008 Campbell Circle	
City State Zip Code Las Vegas NV 89107	

Outstanding Balance Beginning This Period 6741.50	Transaction ID : SD10.E1617646	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 6741.50

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Danny Tarkanian	Nature of Debt (Purpose): In-Kind to be reimbursed; Meal
Mailing Address 3008 Campbell Circle	
City State Zip Code Las Vegas NV 89107	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.E1622639	
Amount Incurred This Period 21.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 21.00

1) SUBTOTALS This Period This Page (optional)	6812.50
2) TOTALS This Period (last page this line number only)	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

NAME OF COMMITTEE (In Full)
Tarkanian For Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Danny Tarkanian	Nature of Debt (Purpose): In-Kind to be reimbursed; Website Registration
Mailing Address 3008 Campbell Circle	
City State Zip Code Las Vegas NV 89107	

Outstanding Balance Beginning This Period 24.98	Transaction ID : SD10.E1617637	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 24.98

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Danny Tarkanian	Nature of Debt (Purpose): In-Kind to be reimbursed; Meal
Mailing Address 3008 Campbell Circle	
City State Zip Code Las Vegas NV 89107	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.E1619296	
Amount Incurred This Period 6.43	Payment This Period 0.00	Outstanding Balance at Close of This Period 6.43

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Danny Tarkanian	Nature of Debt (Purpose): In-Kind to be reimbursed
Mailing Address 3008 Campbell Circle	
City State Zip Code Las Vegas NV 89107	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.E1619285	
Amount Incurred This Period 378.36	Payment This Period 0.00	Outstanding Balance at Close of This Period 378.36

1) SUBTOTALS This Period This Page (optional)	409.77
2) TOTALS This Period (last page this line number only)	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

NAME OF COMMITTEE (In Full)
Tarkanian For Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Danny Tarkanian	Nature of Debt (Purpose): In-Kind to be reimbursed; parking
Mailing Address 3008 Campbell Circle	
City State Zip Code Las Vegas NV 89107	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.E1621701	
Amount Incurred This Period 15.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 15.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Danny Tarkanian	Nature of Debt (Purpose): In-Kind to be reimbursed; Republican Women's Event
Mailing Address 3008 Campbell Circle	
City State Zip Code Las Vegas NV 89107	

Outstanding Balance Beginning This Period 130.00	Transaction ID : SD10.E1617636	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 130.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Danny Tarkanian	Nature of Debt (Purpose): In-Kind to be reimbursed; Meal
Mailing Address 3008 Campbell Circle	
City State Zip Code Las Vegas NV 89107	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.E1619316	
Amount Incurred This Period 48.29	Payment This Period 0.00	Outstanding Balance at Close of This Period 48.29

1) SUBTOTALS This Period This Page (optional)	193.29
2) TOTALS This Period (last page this line number only)	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)

Tarkanian For Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Danny Tarkanian

Nature of Debt (Purpose):
In-Kind to be reimbursed; Meal

Mailing Address 3008 Campbell Circle

City State Zip Code
Las Vegas NV 89107

Outstanding Balance Beginning This Period
0.00

Transaction ID : SD10.E1619326

Amount Incurred This Period
16.97

Payment This Period
0.00

Outstanding Balance at Close of This Period
16.97

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Danny Tarkanian

Nature of Debt (Purpose):
In-Kind to be reimbursed; Meal

Mailing Address 3008 Campbell Circle

City State Zip Code
Las Vegas NV 89107

Outstanding Balance Beginning This Period
0.00

Transaction ID : SD10.E1622652

Amount Incurred This Period
11.20

Payment This Period
0.00

Outstanding Balance at Close of This Period
11.20

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Danny Tarkanian

Nature of Debt (Purpose):
In-Kind to be reimbursed; travel

Mailing Address 3008 Campbell Circle

City State Zip Code
Las Vegas NV 89107

Outstanding Balance Beginning This Period
0.00

Transaction ID : SD10.E1622647

Amount Incurred This Period
49.75

Payment This Period
0.00

Outstanding Balance at Close of This Period
49.75

- 1) **SUBTOTALS** This Period This Page (optional) ▶
- 2) **TOTALS** This Period (last page this line number only) ▶
- 3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶
- 4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

77.92

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

NAME OF COMMITTEE (In Full)
Tarkanian For Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Danny Tarkanian	Nature of Debt (Purpose): In-Kind to be reimbursed; Website Services
Mailing Address 3008 Campbell Circle	
City State Zip Code Las Vegas NV 89107	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.E1622638	
Amount Incurred This Period 55.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 55.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Danny Tarkanian	Nature of Debt (Purpose): In-Kind to be reimbursed; Meal
Mailing Address 3008 Campbell Circle	
City State Zip Code Las Vegas NV 89107	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.E1619284	
Amount Incurred This Period 7.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 7.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Danny Tarkanian	Nature of Debt (Purpose): In-Kind to be reimbursed; taxi fare
Mailing Address 3008 Campbell Circle	
City State Zip Code Las Vegas NV 89107	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.E1619310	
Amount Incurred This Period 10.82	Payment This Period 0.00	Outstanding Balance at Close of This Period 10.82

1) SUBTOTALS This Period This Page (optional)	72.82
2) TOTALS This Period (last page this line number only)	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

NAME OF COMMITTEE (In Full)
Tarkanian For Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Danny Tarkanian	Nature of Debt (Purpose): In-Kind to be reimbursed
Mailing Address 3008 Campbell Circle	
City State Zip Code Las Vegas NV 89107	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.E1621708	
Amount Incurred This Period 1200.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1200.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Danny Tarkanian	Nature of Debt (Purpose): In-Kind to be reimbursed; Meal
Mailing Address 3008 Campbell Circle	
City State Zip Code Las Vegas NV 89107	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.E1619317	
Amount Incurred This Period 57.23	Payment This Period 0.00	Outstanding Balance at Close of This Period 57.23

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Danny Tarkanian	Nature of Debt (Purpose): In-Kind to be reimbursed; Republican Women's Event
Mailing Address 3008 Campbell Circle	
City State Zip Code Las Vegas NV 89107	

Outstanding Balance Beginning This Period 130.00	Transaction ID : SD10.E1617635	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 130.00

1) SUBTOTALS This Period This Page (optional)	1387.23
2) TOTALS This Period (last page this line number only)	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

NAME OF COMMITTEE (In Full)
Tarkanian For Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Danny Tarkanian	Nature of Debt (Purpose): In-Kind to be reimbursed; 2015 Henderson Chamber of Commerce Event
Mailing Address 3008 Campbell Circle	
City State Zip Code Las Vegas NV 89107	

Outstanding Balance Beginning This Period 150.00	Transaction ID : SD10.E1617643	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 150.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Danny Tarkanian	Nature of Debt (Purpose): In-Kind to be reimbursed
Mailing Address 3008 Campbell Circle	
City State Zip Code Las Vegas NV 89107	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.E1621705	
Amount Incurred This Period 19.99	Payment This Period 0.00	Outstanding Balance at Close of This Period 19.99

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Danny Tarkanian	Nature of Debt (Purpose): In-Kind to be reimbursed; Taxi fare
Mailing Address 3008 Campbell Circle	
City State Zip Code Las Vegas NV 89107	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.E1619299	
Amount Incurred This Period 7.28	Payment This Period 0.00	Outstanding Balance at Close of This Period 7.28

1) SUBTOTALS This Period This Page (optional)	177.27
2) TOTALS This Period (last page this line number only)	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 161 OF 175
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
Tarkanian For Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Danny Tarkanian	Nature of Debt (Purpose): In-Kind to be reimbursed; travel
Mailing Address 3008 Campbell Circle	
City State Zip Code Las Vegas NV 89107	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.E1622649	
Amount Incurred This Period 53.52	Payment This Period 0.00	Outstanding Balance at Close of This Period 53.52

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Danny Tarkanian	Nature of Debt (Purpose): In-Kind to be reimbursed; Meal
Mailing Address 3008 Campbell Circle	
City State Zip Code Las Vegas NV 89107	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.E1619291	
Amount Incurred This Period 12.83	Payment This Period 0.00	Outstanding Balance at Close of This Period 12.83

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Danny Tarkanian	Nature of Debt (Purpose): In-Kind to be reimbursed; Website Services
Mailing Address 3008 Campbell Circle	
City State Zip Code Las Vegas NV 89107	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.E1622644	
Amount Incurred This Period 55.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 55.00

1) SUBTOTALS This Period This Page (optional)	121.35
2) TOTALS This Period (last page this line number only)	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

NAME OF COMMITTEE (In Full)
Tarkanian For Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Danny Tarkanian		Nature of Debt (Purpose): In-Kind to be reimbursed; travel
Mailing Address 3008 Campbell Circle		
City	State	Zip Code
Las Vegas	NV	89107

Outstanding Balance Beginning This Period	Transaction ID : SD10.E1619319	
<input type="text" value="0.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="58.75"/>	<input type="text" value="0.00"/>	<input type="text" value="58.75"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Danny Tarkanian		Nature of Debt (Purpose): In-Kind to be reimbursed
Mailing Address 3008 Campbell Circle		
City	State	Zip Code
Las Vegas	NV	89107

Outstanding Balance Beginning This Period	Transaction ID : SD10.E1619328	
<input type="text" value="0.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="1786.00"/>	<input type="text" value="0.00"/>	<input type="text" value="1786.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Danny Tarkanian		Nature of Debt (Purpose): In-Kind to be reimbursed; car rental
Mailing Address 3008 Campbell Circle		
City	State	Zip Code
Las Vegas	NV	89107

Outstanding Balance Beginning This Period	Transaction ID : SD10.E1621702	
<input type="text" value="0.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="38.90"/>	<input type="text" value="0.00"/>	<input type="text" value="38.90"/>

1) SUBTOTALS This Period This Page (optional)	<input type="text" value="1883.65"/>
2) TOTALS This Period (last page this line number only)	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

NAME OF COMMITTEE (In Full)

Tarkanian For Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Danny Tarkanian		Nature of Debt (Purpose): In-Kind to be reimbursed; Taxi fare
Mailing Address 3008 Campbell Circle		
City	State	Zip Code
Las Vegas	NV	89107

Outstanding Balance Beginning This Period	Transaction ID : SD10.E1619298	
<input type="text" value="0.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="20.00"/>	<input type="text" value="0.00"/>	<input type="text" value="20.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Danny Tarkanian		Nature of Debt (Purpose): In-Kind to be reimbursed; Communications
Mailing Address 3008 Campbell Circle		
City	State	Zip Code
Las Vegas	NV	89107

Outstanding Balance Beginning This Period	Transaction ID : SD10.E1617639	
<input type="text" value="16.25"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="16.25"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Danny Tarkanian		Nature of Debt (Purpose): In-Kind to be reimbursed; beverage
Mailing Address 3008 Campbell Circle		
City	State	Zip Code
Las Vegas	NV	89107

Outstanding Balance Beginning This Period	Transaction ID : SD10.E1619308	
<input type="text" value="0.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="8.09"/>	<input type="text" value="0.00"/>	<input type="text" value="8.09"/>

1) SUBTOTALS This Period This Page (optional)	<input type="text" value="44.34"/>
2) TOTALS This Period (last page this line number only)	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

NAME OF COMMITTEE (In Full)
Tarkanian For Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Danny Tarkanian	Nature of Debt (Purpose): In-Kind to be reimbursed; Media
Mailing Address 3008 Campbell Circle	
City State Zip Code Las Vegas NV 89107	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.E1621699	
Amount Incurred This Period 2.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 2.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Danny Tarkanian	Nature of Debt (Purpose): In-Kind to be reimbursed; travel
Mailing Address 3008 Campbell Circle	
City State Zip Code Las Vegas NV 89107	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.E1622650	
Amount Incurred This Period 46.02	Payment This Period 0.00	Outstanding Balance at Close of This Period 46.02

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Danny Tarkanian	Nature of Debt (Purpose): In-Kind to be reimbursed; Meal
Mailing Address 3008 Campbell Circle	
City State Zip Code Las Vegas NV 89107	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.E1622651	
Amount Incurred This Period 17.67	Payment This Period 0.00	Outstanding Balance at Close of This Period 17.67

1) SUBTOTALS This Period This Page (optional)	65.69
2) TOTALS This Period (last page this line number only)	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

NAME OF COMMITTEE (In Full)
Tarkanian For Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Danny Tarkanian	Nature of Debt (Purpose): In-kind to be reimbursed; NV Policy Research Institute Event
Mailing Address 3008 Campbell Circle	
City State Zip Code Las Vegas NV 89107	

Outstanding Balance Beginning This Period 275.00	Transaction ID : SD10.E1617645	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 275.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Danny Tarkanian	Nature of Debt (Purpose): In-Kind to be reimbursed; travel
Mailing Address 3008 Campbell Circle	
City State Zip Code Las Vegas NV 89107	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.E1621697	
Amount Incurred This Period 7.59	Payment This Period 0.00	Outstanding Balance at Close of This Period 7.59

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Danny Tarkanian	Nature of Debt (Purpose): In-Kind to be reimbursed; Meal
Mailing Address 3008 Campbell Circle	
City State Zip Code Las Vegas NV 89107	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.E1619323	
Amount Incurred This Period 13.50	Payment This Period 0.00	Outstanding Balance at Close of This Period 13.50

1) SUBTOTALS This Period This Page (optional)	296.09
2) TOTALS This Period (last page this line number only)	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 166 OF 175
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
Tarkanian For Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Danny Tarkanian	Nature of Debt (Purpose): In-Kind to be reimbursed; Meal
Mailing Address 3008 Campbell Circle	
City State Zip Code Las Vegas NV 89107	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.E1619325	
Amount Incurred This Period 30.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 30.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Danny Tarkanian	Nature of Debt (Purpose): In-Kind to be reimbursed
Mailing Address 3008 Campbell Circle	
City State Zip Code Las Vegas NV 89107	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.E1621704	
Amount Incurred This Period 34.02	Payment This Period 0.00	Outstanding Balance at Close of This Period 34.02

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Danny Tarkanian	Nature of Debt (Purpose): In-Kind to be reimbursed; Website Services
Mailing Address 3008 Campbell Circle	
City State Zip Code Las Vegas NV 89107	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.E1624662	
Amount Incurred This Period 55.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 55.00

1) SUBTOTALS This Period This Page (optional)	119.02
2) TOTALS This Period (last page this line number only)	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 167 OF 175
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)

Tarkanian For Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Danny Tarkanian		Nature of Debt (Purpose): In-Kind to be reimbursed; fundraiser supplies/food
Mailing Address 3008 Campbell Circle		
City	State	Zip Code
Las Vegas	NV	89107

Outstanding Balance Beginning This Period	Transaction ID : SD10.E1622643	
<input type="text" value="0.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="141.05"/>	<input type="text" value="0.00"/>	<input type="text" value="141.05"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Danny Tarkanian		Nature of Debt (Purpose): In-Kind to be reimbursed; taxi fare
Mailing Address 3008 Campbell Circle		
City	State	Zip Code
Las Vegas	NV	89107

Outstanding Balance Beginning This Period	Transaction ID : SD10.E1619313	
<input type="text" value="0.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="113.73"/>	<input type="text" value="0.00"/>	<input type="text" value="113.73"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Danny Tarkanian		Nature of Debt (Purpose): In-Kind to be reimbursed; Postage
Mailing Address 3008 Campbell Circle		
City	State	Zip Code
Las Vegas	NV	89107

Outstanding Balance Beginning This Period	Transaction ID : SD10.E1622637	
<input type="text" value="0.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="64.60"/>	<input type="text" value="0.00"/>	<input type="text" value="64.60"/>

1) SUBTOTALS This Period This Page (optional)	<input type="text" value="319.38"/>
2) TOTALS This Period (last page this line number only)	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

NAME OF COMMITTEE (In Full)
Tarkanian For Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Danny Tarkanian	Nature of Debt (Purpose): In-Kind to be reimbursed. Campaign Logo Materials
Mailing Address 3008 Campbell Circle	
City State Zip Code Las Vegas NV 89107	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.E1622642	
Amount Incurred This Period 120.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 120.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Danny Tarkanian	Nature of Debt (Purpose): In-Kind to be reimbursed; Meal
Mailing Address 3008 Campbell Circle	
City State Zip Code Las Vegas NV 89107	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.E1619303	
Amount Incurred This Period 12.32	Payment This Period 0.00	Outstanding Balance at Close of This Period 12.32

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Danny Tarkanian	Nature of Debt (Purpose): In-Kind to be reimbursed; beverage
Mailing Address 3008 Campbell Circle	
City State Zip Code Las Vegas NV 89107	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.E1619306	
Amount Incurred This Period 7.70	Payment This Period 0.00	Outstanding Balance at Close of This Period 7.70

1) SUBTOTALS This Period This Page (optional)	140.02
2) TOTALS This Period (last page this line number only)	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

NAME OF COMMITTEE (In Full)
Tarkanian For Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Danny Tarkanian	Nature of Debt (Purpose): In-Kind to be reimbursed; Meal
Mailing Address 3008 Campbell Circle	
City State Zip Code Las Vegas NV 89107	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.E1619287	
Amount Incurred This Period 28.04	Payment This Period 0.00	Outstanding Balance at Close of This Period 28.04

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Danny Tarkanian	Nature of Debt (Purpose): In-Kind to be reimbursed; stationary
Mailing Address 3008 Campbell Circle	
City State Zip Code Las Vegas NV 89107	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.E1622640	
Amount Incurred This Period 42.03	Payment This Period 0.00	Outstanding Balance at Close of This Period 42.03

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Danny Tarkanian	Nature of Debt (Purpose): In-Kind to be reimbursed; Meal
Mailing Address 3008 Campbell Circle	
City State Zip Code Las Vegas NV 89107	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.E1619305	
Amount Incurred This Period 87.75	Payment This Period 0.00	Outstanding Balance at Close of This Period 87.75

1) SUBTOTALS This Period This Page (optional)	157.82
2) TOTALS This Period (last page this line number only)	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)

Tarkanian For Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Danny Tarkanian

Nature of Debt (Purpose):

In-Kind to be reimbursed; Meal

Mailing Address 3008 Campbell Circle

City State Zip Code
Las Vegas NV 89107

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.E1621698

Amount Incurred This Period

8.78

Payment This Period

0.00

Outstanding Balance at Close of This Period

8.78

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Danny Tarkanian

Nature of Debt (Purpose):

In-Kind to be reimbursed; Communications

Mailing Address 3008 Campbell Circle

City State Zip Code
Las Vegas NV 89107

Outstanding Balance Beginning This Period

35.00

Transaction ID : SD10.E1617641

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

35.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Danny Tarkanian

Nature of Debt (Purpose):

In-Kind to be reimbursed; taxi fare

Mailing Address 3008 Campbell Circle

City State Zip Code
Las Vegas NV 89107

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.E1619314

Amount Incurred This Period

5.58

Payment This Period

0.00

Outstanding Balance at Close of This Period

5.58

1) **SUBTOTALS** This Period This Page (optional) ▶

49.36

2) **TOTALS** This Period (last page this line number only) ▶

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

NAME OF COMMITTEE (In Full)
Tarkanian For Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Danny Tarkanian	Nature of Debt (Purpose): In-Kind to be reimbursed; travel
Mailing Address 3008 Campbell Circle	
City State Zip Code Las Vegas NV 89107	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.E1621700	
Amount Incurred This Period 25.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 25.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Danny Tarkanian	Nature of Debt (Purpose): In-Kind to be reimbursed; travel
Mailing Address 3008 Campbell Circle	
City State Zip Code Las Vegas NV 89107	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.E1619281	
Amount Incurred This Period 49.35	Payment This Period 0.00	Outstanding Balance at Close of This Period 49.35

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Danny Tarkanian	Nature of Debt (Purpose): In-Kind to be reimbursed; Meal
Mailing Address 3008 Campbell Circle	
City State Zip Code Las Vegas NV 89107	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.E1622646	
Amount Incurred This Period 30.47	Payment This Period 0.00	Outstanding Balance at Close of This Period 30.47

1) SUBTOTALS This Period This Page (optional)	104.82
2) TOTALS This Period (last page this line number only)	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

NAME OF COMMITTEE (In Full)
Tarkanian For Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Danny Tarkanian	Nature of Debt (Purpose): In-Kind to be reimbursed; Website Registration
Mailing Address 3008 Campbell Circle	
City State Zip Code Las Vegas NV 89107	

Outstanding Balance Beginning This Period 208.98	Transaction ID : SD10.E1617634	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 208.98

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Danny Tarkanian	Nature of Debt (Purpose): In-Kind to be reimbursed; Parking
Mailing Address 3008 Campbell Circle	
City State Zip Code Las Vegas NV 89107	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.E1619286	
Amount Incurred This Period 2.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 2.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Danny Tarkanian	Nature of Debt (Purpose): In-Kind to be reimbursed; Meal
Mailing Address 3008 Campbell Circle	
City State Zip Code Las Vegas NV 89107	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.E1619302	
Amount Incurred This Period 18.70	Payment This Period 0.00	Outstanding Balance at Close of This Period 18.70

1) SUBTOTALS This Period This Page (optional)	229.68
2) TOTALS This Period (last page this line number only)	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

NAME OF COMMITTEE (In Full)
Tarkanian For Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Danny Tarkanian		Nature of Debt (Purpose): In-Kind to be reimbursed
Mailing Address 3008 Campbell Circle		
City	State	Zip Code
Las Vegas	NV	89107

Outstanding Balance Beginning This Period	Transaction ID : SD10.E1622723	
<input type="text" value="0.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="378.00"/>	<input type="text" value="0.00"/>	<input type="text" value="378.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Danny Tarkanian		Nature of Debt (Purpose): In-Kind to be reimbursed; Meal
Mailing Address 3008 Campbell Circle		
City	State	Zip Code
Las Vegas	NV	89107

Outstanding Balance Beginning This Period	Transaction ID : SD10.E1619300	
<input type="text" value="0.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="5.95"/>	<input type="text" value="0.00"/>	<input type="text" value="5.95"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Danny Tarkanian		Nature of Debt (Purpose): In-Kind to be reimbursed; Taxi fare
Mailing Address 3008 Campbell Circle		
City	State	Zip Code
Las Vegas	NV	89107

Outstanding Balance Beginning This Period	Transaction ID : SD10.E1619307	
<input type="text" value="0.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="124.90"/>	<input type="text" value="0.00"/>	<input type="text" value="124.90"/>

1) SUBTOTALS This Period This Page (optional)	<input type="text" value="508.85"/>
2) TOTALS This Period (last page this line number only)	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

NAME OF COMMITTEE (In Full)
Tarkanian For Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Danny Tarkanian	Nature of Debt (Purpose): In-Kind to be reimbursed; Communications
Mailing Address 3008 Campbell Circle	
City State Zip Code Las Vegas NV 89107	

Outstanding Balance Beginning This Period 101.35	Transaction ID : SD10.E1617647	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 101.35

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Danny Tarkanian	Nature of Debt (Purpose): In-Kind to be reimbursed; Meal
Mailing Address 3008 Campbell Circle	
City State Zip Code Las Vegas NV 89107	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.E1622648	
Amount Incurred This Period 26.77	Payment This Period 0.00	Outstanding Balance at Close of This Period 26.77

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Danny Tarkanian	Nature of Debt (Purpose): In-Kind to be reimbursed; Website Hosting Fee
Mailing Address 3008 Campbell Circle	
City State Zip Code Las Vegas NV 89107	

Outstanding Balance Beginning This Period 22.95	Transaction ID : SD10.E1617648	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 22.95

1) SUBTOTALS This Period This Page (optional)	151.07
2) TOTALS This Period (last page this line number only)	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

NAME OF COMMITTEE (In Full)
Tarkanian For Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Danny Tarkanian	Nature of Debt (Purpose): In-Kind to be reimbursed; Meal
Mailing Address 3008 Campbell Circle	
City State Zip Code Las Vegas NV 89107	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.E1619292	
Amount Incurred This Period 11.91	Payment This Period 0.00	Outstanding Balance at Close of This Period 11.91

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Danny Tarkanian	Nature of Debt (Purpose): In-Kind to be reimbursed; Travel
Mailing Address 3008 Campbell Circle	
City State Zip Code Las Vegas NV 89107	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.E1619288	
Amount Incurred This Period 54.72	Payment This Period 0.00	Outstanding Balance at Close of This Period 54.72

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Danny Tarkanian	Nature of Debt (Purpose): In-Kind to be reimbursed; Travel
Mailing Address 3008 Campbell Circle	
City State Zip Code Las Vegas NV 89107	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.E1619293	
Amount Incurred This Period 33.95	Payment This Period 0.00	Outstanding Balance at Close of This Period 33.95

1) SUBTOTALS This Period This Page (optional)	100.58
2) TOTALS This Period (last page this line number only)	15401.21
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	0.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	15401.21