

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 Las Vegas NV 89107 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER C C00465963 3. IS THIS REPORT NEW (N) OR AMENDED (A) NV

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15 Quarterly Report (Q1) (b) 12-Day PRE-Election Report for the: Primary (12P) General (12G) Runoff (12R) Convention (12C) Special (12S) (c) 30-Day POST-Election Report for the: General (30G) Runoff (30R) Special (30S)

5. Covering Period 01 / 01 / 2013 through 03 / 31 / 2013

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 Danny Tarkanian Signature of Treasurer Danny Tarkanian [Electronically Filed] Date 04 / 15 / 2013

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

**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))....	6272.00	7272.00
(b) Total Contribution Refunds (from Line 20(d)) .....	0.00	7000.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	6272.00	272.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	7840.00	122171.08
(b) Total Offsets to Operating Expenditures (from Line 14).....	99.97	99.97
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	7740.03	122071.11
8. Cash on Hand at Close of Reporting Period (from Line 27).....	0.71	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	9704.81	

**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

Write or Type Committee Name

**Tarkanian for Congress**

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

<b>I. RECEIPTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	1272.00	2272.00
(ii) Unitemized.....	0.00	0.00
(iii) TOTAL of contributions from individuals ▶	1272.00	2272.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) The Candidate.....	5000.00	5000.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	6272.00	7272.00
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>	0.00	0.00
<b>13. LOANS:</b>		
(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
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....</b>	99.97	99.97
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.) .....</b>	0.00	0.00
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶</b>	6371.97	7371.97

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	7840.00	122171.08
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 .....	0.00	7000.00
(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)).....	0.00	7000.00
21. OTHER DISBURSEMENTS .....	0.00	0.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	7840.00	129171.08

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	1468.74
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	6371.97
25. SUBTOTAL (add Line 23 and Line 24).....	7840.71
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	7840.00
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	0.71

**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 10
	<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)  
**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: 2012  
 Primary  General  
 Other (specify) General 2012 Debt

Election Cycle-to-Date  
-3728.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 20 / 2013

**Transaction ID : 30404.C43644**

Amount of Each Receipt this Period  
 Receipt 1272.00

**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 / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

**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

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

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

1272.00

1272.00

**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 10
	<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 89106

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify) General 2012 Debt

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 21 / 2013

**Transaction ID : 30404.C43646**

Amount of Each Receipt this Period  
 Receipt 5000.00

**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 / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

**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

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

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

5000.00

5000.00

**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 7 OF 10			
	<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) <b>A. IN Compliance Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 04 / 2013
Mailing Address PO Box 751271		Amount of Each Disbursement this Period 1000.00
City Las Vegas	State NV	Zip Code 89136-
Purpose of Disbursement Consulting Treasury	Transaction ID : 30404.E2348	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	CONSULTING TREASURY
State: District:		

Full Name (Last, First, Middle Initial) <b>B. IN Compliance Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 20 / 2013
Mailing Address PO Box 751271		Amount of Each Disbursement this Period 1500.00
City Las Vegas	State NV	Zip Code 89136-
Purpose of Disbursement Consulting Treasury	Transaction ID : 30326.E2344	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	CONSULTING TREASURY
State: District:		

Full Name (Last, First, Middle Initial) <b>c. IN Compliance Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 20 / 2013
Mailing Address PO Box 751271		Amount of Each Disbursement this Period 140.00
City Las Vegas	State NV	Zip Code 89136-
Purpose of Disbursement Printing	Transaction ID : 30326.E2345	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	PRINTING
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2640.00
<b>TOTAL</b> 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 8 OF 10	
	<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) <b>A. IN Compliance Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y <b>03 / 21 / 2013</b>
Mailing Address <b>PO Box 751271</b>		Amount of Each Disbursement this Period <b>5100.00</b>
City <b>Las Vegas</b>	State <b>NV</b> Zip Code <b>89136-</b>	
Purpose of Disbursement <b>Consulting Treasury</b>	Category/Type	<b>Transaction ID : 30326.E2346</b>
Candidate Name	CONSULTING TREASURY	
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>B.</b>		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
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) <b>C.</b>		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>5100.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	<b>7740.00</b>



**SCHEDULE C (FEC Form 3)**  
**LOANS**

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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)  
**Tarkanian for Congress**

Transaction ID : **LS30226.C43568**

LOAN SOURCE Full Name (Last, First, Middle Initial)

**Danny Tarkanian**

Election:

Primary  
 General  
 Other (specify) ▼

Mailing Address  
3008 Campbell Circle

City State ZIP Code  
Las Vegas NV 89106-

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period  
7700.00 1995.19 5704.81

**TERMS**

Date Incurred Date Due Interest Rate Secured:  
M 05 / D 06 / Y 2011 M M / D D / ONDEMAND 0.00 % (apr)  Yes  No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

**SUBTOTALS** This Period This Page (optional)..... ▶ 5704.81  
**TOTALS** This Period (last page in this line only)..... ▶ 5704.81

**Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.**

**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  
**IN Compliance Inc.**

Nature of Debt (Purpose):  
Consulting Treasury

Mailing Address PO Box 751271

City State Zip Code  
Las Vegas NV 89136-

Outstanding Balance Beginning This Period

0.00

Transaction ID : LS30415.E2357

Amount Incurred This Period

4000.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

4000.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City State Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City State Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

- 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) ▶

4000.00  
4000.00  
5704.81  
9704.81