

# 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  
**Crescent Hardy for Congress**

ADDRESS (number and street) PO Box 753941  
 Check if different than previously reported. (ACC) Las Vegas NV 89136

2. **FEC IDENTIFICATION NUMBER** C00550608 CITY STATE ZIP CODE STATE DISTRICT  
3. IS THIS REPORT  NEW (N) OR  AMENDED (A) NV 04

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 M M / D D / Y Y Y Y in the State of    
(c) 30-Day **POST**-Election Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on M M / D D / Y Y Y Y in the State of  

5. Covering Period M M / D D / Y Y Y Y through M M / D D / Y Y Y Y  
01 / 01 / 2014 through 03 / 31 / 2014

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 Chrissie Hastie  
Signature of Treasurer Chrissie Hastie [Electronically Filed] Date M M / D D / Y Y Y Y  
04 / 15 / 2014

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

**Crescent Hardy 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))....	45658.72	169394.92
(b) Total Contribution Refunds (from Line 20(d)) .....	50.00	50.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	45608.72	169344.92
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	48880.41	66954.24
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	48880.41	66954.24
8. Cash on Hand at Close of Reporting Period (from Line 27).....	102390.68	
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).....	0.00	

**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

**Crescent Hardy 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).....	39813.72	152249.92
(ii) Unitemized.....	2345.00	3145.00
(iii) TOTAL of contributions from individuals ▶	42158.72	155394.92
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	3500.00	14000.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	45658.72	169394.92
<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>	0.00	0.00
<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>	45658.72	169394.92

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	48880.41	66954.24
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 .....	50.00	50.00
(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)).....	50.00	50.00
21. OTHER DISBURSEMENTS .....	0.00	0.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	48930.41	67004.24

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	105662.37
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	45658.72
25. SUBTOTAL (add Line 23 and Line 24).....	151321.09
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	48930.41
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	102390.68

**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 31
	<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)  
**Crescent Hardy for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Shelley Adams**

Mailing Address **PO Box 1662**

City **Logandale** State **NV** Zip Code **89021**

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

Name of Employer **Homemaker** Occupation **Homemaker**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2000.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**03 / 21 / 2014**

**Transaction ID : 40321.C339**

Amount of Each Receipt this Period  
**2000.00**

Receipt

**B.** Full Name (Last, First, Middle Initial)  
**Weston Adams**

Mailing Address **PO Box 1662**

City **Logandale** State **NV** Zip Code **89021**

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

Name of Employer **Western State Contracting** Occupation **Controller**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2000.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**03 / 21 / 2014**

**Transaction ID : 40321.C340**

Amount of Each Receipt this Period  
**2000.00**

Receipt

**C.** Full Name (Last, First, Middle Initial)  
**DFA LLC**

Mailing Address **1401 Mineral Avenue**

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

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**03 / 31 / 2014**

**Transaction ID : 40404.C351**

Amount of Each Receipt this Period  
**1000.00**

Receipt

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

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

**5000.00**

**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 31
	<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)  
**Crescent Hardy for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Don Ahern**

Mailing Address 1401 Mineral Avenue

City Las Vegas State NV Zip Code 89106

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

Name of Employer DFA LLC Occupation Partner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 31 / 2014

**Transaction ID : 40404.C352**

Amount of Each Receipt this Period  
1000.00

Memo  
**[MEMO ITEM]**  
Partnership->DFA LLC Partnership

**B.** Full Name (Last, First, Middle Initial)  
**Shelly Aldean**

Mailing Address 2614 Bohr Road

City Carson City State NV Zip Code 89706

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

Name of Employer Self Employed Occupation Property Manager

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 20 / 2014

**Transaction ID : 40221.C308**

Amount of Each Receipt this Period  
250.00

Receipt

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

Mailing Address 4511 West Cheyenne Avenue #702

City North Las Vegas State NV Zip Code 89032

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

Name of Employer Black & Black Real Estate Occupation Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 28 / 2014

**Transaction ID : 40328.C341**

Amount of Each Receipt this Period  
1000.00

Receipt

**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: (check only one)	PAGE 7 OF 31
	<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)  
**Crescent Hardy for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Peter Bollenbecker**

Mailing Address **PO Box 3420**

City **Mesquite** State **NV** Zip Code **89024**

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

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**03 / 21 / 2014**

**Transaction ID : 40321.C328**

Amount of Each Receipt this Period  
**250.00**

Receipt

**B.** Full Name (Last, First, Middle Initial)  
**Patriot Contractors LLC**

Mailing Address **7770 West Spring Mountain Road**

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

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**03 / 07 / 2014**

**Transaction ID : 40307.C310**

Amount of Each Receipt this Period  
**1000.00**

Receipt

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

Mailing Address **7770 West Spring Mountain Road**

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

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

Name of Employer **Patriot Contractors LLC** Occupation **Partner**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**03 / 07 / 2014**

**Transaction ID : 40307.C311**

Amount of Each Receipt this Period  
**1000.00**

Memo  
**[MEMO ITEM]**  
 Partnership->Patriot Contractors LLC Partnership

**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: (check only one)	PAGE 8 OF 31
	<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)  
**Crescent Hardy for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Broadacres Open Air Marketplace LLC**

Mailing Address 2930 North Las Vegas Boulevard

City	State	Zip Code
North Las Vegas	NV	89030

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

Name of Employer	Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 10 / 2014

**Transaction ID : 40214.C303**

Amount of Each Receipt this Period  
1000.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
**Greg Danz**

Mailing Address 2930 North Las Vegas Boulevard

City	State	Zip Code
North Las Vegas	NV	89030

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

Name of Employer	Occupation
Broadacres Open Air LLC	Partner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 10 / 2014

**Transaction ID : 40214.C304**

Amount of Each Receipt this Period  
1000.00

Memo

**[MEMO ITEM]**  
 Partnership->Broadacres Open Air Marketplace LLC Partnership

**C.** Full Name (Last, First, Middle Initial)  
**Ben Farahi**

Mailing Address 3702 South Virginia Street #G2

City	State	Zip Code
Reno	NV	89502

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

Name of Employer	Occupation
Maxum	Manager

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 07 / 2014

**Transaction ID : 40207.C302**

Amount of Each Receipt this Period  
1000.00

Receipt

**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 9 OF 31
	<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)  
**Crescent Hardy for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Rew Goodenow**

Mailing Address 50 West Liberty Street #750

City Reno State NV Zip Code 89501

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

Name of Employer Parsons Behle & Latimer Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**01 / 24 / 2014**

**Transaction ID : 40124.C297**

Amount of Each Receipt this Period  
**500.00**

Receipt

**B.** Full Name (Last, First, Middle Initial)  
**Josie Hughes**

Mailing Address 350 Tex Street

City Mesquite State NV Zip Code 89027

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

Name of Employer .Information Requested Occupation .Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**03 / 31 / 2014**

**Transaction ID : 40411.C361**

Amount of Each Receipt this Period  
**250.00**

Receipt

**C.** Full Name (Last, First, Middle Initial)  
**Shane Hughes**

Mailing Address 493 Clark Street

City Mesquite State NV Zip Code 89027

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

Name of Employer .Information Requested Occupation .Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**03 / 31 / 2014**

**Transaction ID : 40411.C360**

Amount of Each Receipt this Period  
**250.00**

Receipt

**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 10 OF 31
	<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)  
**Crescent Hardy for Congress**

Full Name (Last, First, Middle Initial) <b>A. Wade Hughes</b>		Date of Receipt M M / D D / Y Y Y Y 03 / 31 / 2014
Mailing Address PO Box 1055		<b>Transaction ID : 40411.C359</b>
City Mesquite	State NV	
Zip Code 89024		Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C		Receipt
Name of Employer .Information Requested	Occupation .Information Requested	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) <b>B. Gene Krametbauer</b>		Date of Receipt M M / D D / Y Y Y Y 03 / 28 / 2014
Mailing Address 4450 Palisades Canyon Circle		<b>Transaction ID : 40328.C344</b>
City Las Vegas	State NV	
Zip Code 89129		Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C		Receipt
Name of Employer VTN Nevada	Occupation Principal	
Receipt For: 2014 <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) <b>C. Duane Magoon</b>		Date of Receipt M M / D D / Y Y Y Y 03 / 14 / 2014
Mailing Address 305 East First South Street		<b>Transaction ID : 40314.C313</b>
City Bunkerville	State NV	
Zip Code 89007		Amount of Each Receipt this Period 750.00
FEC ID number of contributing federal political committee. C		Receipt
Name of Employer Magoon Farm & Ranch	Occupation Sole Proprietor	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 750.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2000.00
<b>TOTAL</b> 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 11 OF 31
	<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)  
**Crescent Hardy for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Peter Maheu**

Mailing Address 2190 East Pebble Road #150

City State Zip Code  
Las Vegas NV 89123

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

Name of Employer Occupation  
Global Intelligence Network Executive

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y  
03 / 31 / 2014

**Transaction ID : 40404.C349**

Amount of Each Receipt this Period  
250.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
**Anthony Marnell III**

Mailing Address 222 Via Marnell Way

City State Zip Code  
Las Vegas NV 89119

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

Name of Employer Occupation  
M Resort Executive

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600.00

Date of Receipt  
M M / D D / Y Y Y Y  
03 / 31 / 2014

**Transaction ID : 40404.C350**

Amount of Each Receipt this Period  
2600.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
**Elodie McGuirk**

Mailing Address 613 La Scala Drive

City State Zip Code  
Mesquite NV 89027

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

Name of Employer Occupation  
.Information Requested .Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y  
03 / 21 / 2014

**Transaction ID : 40321.C324**

Amount of Each Receipt this Period  
2000.00

Receipt

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

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

4850.00

**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 31
	<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)  
**Crescent Hardy for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Sharon Melsheimer**

Mailing Address 3200 Ponderosa Drive

City Carson City State NV Zip Code 89701

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

Name of Employer Retired Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 13 / 2014

**Transaction ID : 40214.C307**

Amount of Each Receipt this Period  
2400.00

Reattribution Memo

**[MEMO ITEM]**  
Reattribution From Spouse

**B.** Full Name (Last, First, Middle Initial)  
**Ted Melsheimer**

Mailing Address 3200 Ponderosa Drive

City Carson City State NV Zip Code 89701

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

Name of Employer Mustang Manufacturing Occupation Executive

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 13 / 2014

**Transaction ID : 40214.C305**

Amount of Each Receipt this Period  
5000.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
**Ted Melsheimer**

Mailing Address 3200 Ponderosa Drive

City Carson City State NV Zip Code 89701

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

Name of Employer Mustang Manufacturing Occupation Executive

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 13 / 2014

**Transaction ID : 40214.C306**

Amount of Each Receipt this Period  
-2400.00

Reattribution Memo

**[MEMO ITEM]**  
Reattribution To Spouse

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

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

5000.00

**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 31
	<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)  
**Crescent Hardy for Congress**

Full Name (Last, First, Middle Initial) <b>A. Bev Nessinger</b>		Date of Receipt M M / D D / Y Y Y Y 03 / 21 / 2014	
Mailing Address 9108 Crystal Lake Court		<b>Transaction ID : 40321.C317</b>	
City Las Vegas	State NV	Zip Code 89134	Amount of Each Receipt this Period Receipt 500.00
FEC ID number of contributing federal political committee.		C	
Name of Employer Information Requested	Occupation Information Requested		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00		

Full Name (Last, First, Middle Initial) <b>B. Sonny Newman</b>		Date of Receipt M M / D D / Y Y Y Y 01 / 31 / 2014	
Mailing Address 9400 Timothy Drive		<b>Transaction ID : 40131.C298</b>	
City Reno	State NV	Zip Code 89511	Amount of Each Receipt this Period Receipt 2600.00
FEC ID number of contributing federal political committee.		C	
Name of Employer EE Technologies Inc.	Occupation Owner		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2600.00		

Full Name (Last, First, Middle Initial) <b>C. Stanley Paher</b>		Date of Receipt M M / D D / Y Y Y Y 01 / 24 / 2014	
Mailing Address 4135 Badger Circle		<b>Transaction ID : 40124.C296</b>	
City Reno	State NV	Zip Code 89519	Amount of Each Receipt this Period Receipt 800.00
FEC ID number of contributing federal political committee.		C	
Name of Employer Nevada Publications	Occupation Sole Proprietor		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 800.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	3900.00
<b>TOTAL</b> This Period (last page this line number only).....	[Empty Box]

**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 31
	<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)  
**Crescent Hardy for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Adam Piergallini**

Mailing Address 532 West 1st Street #201

City: Claremont State: CA Zip Code: 91711

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

Name of Employer: Self Employed Occupation: Bio-Chemist

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 2600.00

Date of Receipt: 02 / 07 / 2014

**Transaction ID : 40207.C300**

Amount of Each Receipt this Period: 2600.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
**Lisa Piergallini**

Mailing Address 532 West 1st Street #201

City: Claremont State: CA Zip Code: 91711

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

Name of Employer: Student Occupation: Student

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 2600.00

Date of Receipt: 02 / 07 / 2014

**Transaction ID : 40207.C301**

Amount of Each Receipt this Period: 2600.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
**Mesquite Gaming LLC**

Mailing Address 897 West Mesquite Boulevard

City: Mesquite State: NV Zip Code: 89027

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

Name of Employer: Occupation:

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 2400.00

Date of Receipt: 01 / 17 / 2014

**Transaction ID : 40117.C293**

Amount of Each Receipt this Period: 2400.00

Receipt

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

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

7600.00

**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 31
	<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)  
**Cresnet Hardy for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Anthony Toti**

Mailing Address 897 West Mesquite Boulevard

City Mesquite State NV Zip Code 89027

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

Name of Employer Mesquite Gaming LLC Occupation Partner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 17 / 2014

**Transaction ID : 40117.C295**

Amount of Each Receipt this Period  
2400.00

Memo  
**[MEMO ITEM]**  
Partnership->Mesquite Gaming LLC Partnership

**B.** Full Name (Last, First, Middle Initial)  
**Mesquite Gaming LLC**

Mailing Address 897 West Mesquite Boulevard

City Mesquite State NV Zip Code 89027

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 17 / 2014

**Transaction ID : 40117.C292**

Amount of Each Receipt this Period  
2600.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
**Anthony Toti**

Mailing Address 897 West Mesquite Boulevard

City Mesquite State NV Zip Code 89027

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

Name of Employer Mesquite Gaming LLC Occupation Partner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 17 / 2014

**Transaction ID : 40117.C294**

Amount of Each Receipt this Period  
2600.00

Memo  
**[MEMO ITEM]**  
Partnership->Mesquite Gaming LLC Partnership

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

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

2600.00

**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 16 OF 31
	<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)  
**Crescent Hardy for Congress**

Full Name (Last, First, Middle Initial) <b>A. Paul Truman</b>		Date of Receipt M M / D D / Y Y Y Y 03 / 28 / 2014
Mailing Address 102 Grosse Pointe Place		<b>Transaction ID : 40328.C345</b>
City Henderson	State NV	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Truline Corporation	Occupation Owner	Receipt
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2000.00	

Full Name (Last, First, Middle Initial) <b>B. Michael Waite</b>		Date of Receipt M M / D D / Y Y Y Y 03 / 21 / 2014
Mailing Address 135 East Virgin Street		<b>Transaction ID : 40321.C325</b>
City Bunkerville	State NV	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Waite Valley Leavitt Insurance	Occupation Owner	Receipt
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) <b>C. Vanguard Golf Falcon Ridge LLC</b>		Date of Receipt M M / D D / Y Y Y Y 03 / 13 / 2014
Mailing Address 1024 Normandy Lane		<b>Transaction ID : 40404.C346</b>
City Mesquite	State NV	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2113.72
Name of Employer	Occupation	In-Kind Catering
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2113.72	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	3363.72
<b>TOTAL</b> 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 17 OF 31
	<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)  
**Crescent Hardy for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mark Whetzel**

Mailing Address 1024 Normandy Lane

City Mesquite State NV Zip Code 89027

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

Name of Employer Vanguard Golf Falcon Ridge LLC Occupation Partner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2113.72

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 13 / 2014

**Transaction ID : 40404.C347**

Amount of Each Receipt this Period  
2113.72

Memo  
**[MEMO ITEM]**  
 Partnership->Vanguard Golf Falcon Ridge LLC Partnership

**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).....

0.00

39813.72

**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 31
	<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)  
**Cresnet Hardy for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Committee To Elect Joe Hardy**

Mailing Address PO Box 60306

City State Zip Code  
Boulder City NV 89006

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 21 / 2014

**Transaction ID : 40321.C337**

Amount of Each Receipt this Period  
 Receipt  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Heller Highwater PAC**

Mailing Address PO Box 370672

City State Zip Code  
Las Vegas NV 89137

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 14 / 2014

**Transaction ID : 40314.C314**

Amount of Each Receipt this Period  
 Receipt  
 2500.00

**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  
 Receipt

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

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

3500.00

3500.00

**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 19 OF 31			
	<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)  
**Crescent Hardy for Congress**

Full Name (Last, First, Middle Initial) <b>A. Chevron</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 10 / 2014
Mailing Address 9991 West Charleston Boulevard		Amount of Each Disbursement this Period 84.00
City Las Vegas	State NV	
Zip Code 89117-	Purpose of Disbursement Travel	<b>Transaction ID : 40411.E190</b>
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)	TRAVEL
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Chevron</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 19 / 2014
Mailing Address 9991 West Charleston Boulevard		Amount of Each Disbursement this Period 81.00
City Las Vegas	State NV	
Zip Code 89117-	Purpose of Disbursement Travel	<b>Transaction ID : 40411.E196</b>
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)	TRAVEL
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Chevron</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 21 / 2014
Mailing Address 9991 West Charleston Boulevard		Amount of Each Disbursement this Period 78.00
City Las Vegas	State NV	
Zip Code 89117-	Purpose of Disbursement Travel	<b>Transaction ID : 40411.E198</b>
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)	TRAVEL
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	243.00
<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 20 OF 31			
	<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)  
**Crescent Hardy for Congress**

Full Name (Last, First, Middle Initial) <b>A. FBM Inc.</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 01 / 2014
Mailing Address 9117 Vintage Wine Avenue			Amount of Each Disbursement this Period 2500.00
City Las Vegas	State NV	Zip Code 89148-	Transaction ID : 40117.E140
Purpose of Disbursement Consulting Fundraising	Category/ Type		
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		CONSULTING FUNDRAISING
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) <b>B. FBM Inc.</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 01 / 2014
Mailing Address 9117 Vintage Wine Avenue			Amount of Each Disbursement this Period 46.00
City Las Vegas	State NV	Zip Code 89148-	Transaction ID : 40207.E145
Purpose of Disbursement Postage	Category/ Type		
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		POSTAGE
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) <b>C. FBM Inc.</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 01 / 2014
Mailing Address 9117 Vintage Wine Avenue			Amount of Each Disbursement this Period 2500.00
City Las Vegas	State NV	Zip Code 89148-	Transaction ID : 40207.E144
Purpose of Disbursement Consulting Fundraising	Category/ Type		
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		CONSULTING FUNDRAISING
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	5046.00
<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 21 OF 31	
	<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)  
**Crescent Hardy for Congress**

Full Name (Last, First, Middle Initial) <b>A. FBM Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 01 / 2014
Mailing Address 9117 Vintage Wine Avenue		Amount of Each Disbursement this Period 2500.00
City Las Vegas	State NV	Zip Code 89148-
Purpose of Disbursement Consulting Fundraising	Category/Type	
Candidate Name	Transaction ID : 40228.E156	
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 FUNDRAISING
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Crescent Hardy</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 15 / 2014
Mailing Address PO Box 753941		Amount of Each Disbursement this Period 4949.69
City Las Vegas	State NV	Zip Code 89136-
Purpose of Disbursement Travel & Meals	Category/Type	
Candidate Name	Transaction ID : 40214.E152	
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)	TRAVEL & MEALS
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Crescent Hardy</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 11 / 2014
Mailing Address PO Box 753941		Amount of Each Disbursement this Period 1528.91
City Las Vegas	State NV	Zip Code 89136-
Purpose of Disbursement Travel & Meals	Category/Type	
Candidate Name	Transaction ID : 40214.E153	
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)	TRAVEL & MEALS
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	8978.60
<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 22 OF 31			
	<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)  
**Crescent Hardy 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 / 01 / 2014
Mailing Address PO Box 751271		Amount of Each Disbursement this Period 1950.00
City Las Vegas	State NV	
Zip Code 89136-		<b>Transaction ID : 40117.E139</b>
Purpose of Disbursement Software & Support	Category/ Type	
Candidate Name		SOFTWARE & SUPPORT
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. In Compliance Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 01 / 2014
Mailing Address PO Box 751271		Amount of Each Disbursement this Period 42.34
City Las Vegas	State NV	
Zip Code 89136-		<b>Transaction ID : 40117.E138</b>
Purpose of Disbursement Travel	Category/ Type	
Candidate Name		TRAVEL
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. In Compliance Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 01 / 2014
Mailing Address PO Box 751271		Amount of Each Disbursement this Period 2.00
City Las Vegas	State NV	
Zip Code 89136-		<b>Transaction ID : 40117.E137</b>
Purpose of Disbursement Printing	Category/ Type	
Candidate Name		PRINTING
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).....	1994.34
<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 23 OF 31			
	<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)  
**Crescent Hardy 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 / 01 / 2014
Mailing Address PO Box 751271		Amount of Each Disbursement this Period 1850.00
City Las Vegas	State NV	Zip Code 89136-
Purpose of Disbursement Consulting Treasury	Transaction ID : 40117.E136	
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 / 01 / 2014
Mailing Address PO Box 751271		Amount of Each Disbursement this Period 11.50
City Las Vegas	State NV	Zip Code 89136-
Purpose of Disbursement Postage	Transaction ID : 40207.E148	
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)	POSTAGE
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 / 01 / 2014
Mailing Address PO Box 751271		Amount of Each Disbursement this Period 6.00
City Las Vegas	State NV	Zip Code 89136-
Purpose of Disbursement Printing	Transaction ID : 40207.E147	
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).....	1867.50
<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 24 OF 31			
	<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)  
**Crescent Hardy 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 02 / 01 / 2014
Mailing Address PO Box 751271		Amount of Each Disbursement this Period 1850.00
City Las Vegas	State NV	
Zip Code 89136-	Purpose of Disbursement Consulting Treasury	<b>Transaction ID : 40207.E146</b>
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)	<b>CONSULTING TREASURY</b>
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 03 / 01 / 2014
Mailing Address PO Box 751271		Amount of Each Disbursement this Period 42.34
City Las Vegas	State NV	
Zip Code 89136-	Purpose of Disbursement Travel	<b>Transaction ID : 40228.E158</b>
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)	<b>TRAVEL</b>
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 03 / 01 / 2014
Mailing Address PO Box 751271		Amount of Each Disbursement this Period 1850.00
City Las Vegas	State NV	
Zip Code 89136-	Purpose of Disbursement Consulting Treasury	<b>Transaction ID : 40228.E157</b>
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)	<b>CONSULTING TREASURY</b>
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3742.34
<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 25 OF 31			
	<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)  
**Crescent Hardy 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 03 / 01 / 2014
Mailing Address PO Box 751271			Amount of Each Disbursement this Period 29.69
City Las Vegas	State NV	Zip Code 89136-	Transaction ID : 40228.E159
Purpose of Disbursement Office Supplies	Category/ Type		
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		OFFICE SUPPLIES
	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. Piryx Inc.</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 29 / 2014
Mailing Address 144 2nd Street 1st Floor			Amount of Each Disbursement this Period 1.15
City San Francisco	State CA	Zip Code 94105-	Transaction ID : 40131.E143
Purpose of Disbursement Merchant Processing Fees	Category/ Type		
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		MERCHANT PROCESSING FEES
	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. Piryx Inc.</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 07 / 2014
Mailing Address 144 2nd Street 1st Floor			Amount of Each Disbursement this Period 299.00
City San Francisco	State CA	Zip Code 94105-	Transaction ID : 40207.E151
Purpose of Disbursement Merchant Processing Fees	Category/ Type		
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		MERCHANT PROCESSING FEES
	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).....	329.84
<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 26 OF 31			
	<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)  
**Crescent Hardy for Congress**

Full Name (Last, First, Middle Initial) <b>A. Piryx Inc.</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 14 / 2014
Mailing Address 144 2nd Street 1st Floor			Amount of Each Disbursement this Period 11.50
City San Francisco	State CA	Zip Code 94105-	
Purpose of Disbursement Merchant Processing Fees		Candidate Name	Transaction ID : 40314.E163
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)		Category/ Type	MERCHANT PROCESSING FEES
State:	District:		

Full Name (Last, First, Middle Initial) <b>B. Piryx Inc.</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 28 / 2014
Mailing Address 144 2nd Street 1st Floor			Amount of Each Disbursement this Period 57.50
City San Francisco	State CA	Zip Code 94105-	
Purpose of Disbursement Merchant Processing Fees		Candidate Name	Transaction ID : 40328.E168
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)		Category/ Type	MERCHANT PROCESSING FEES
State:	District:		

Full Name (Last, First, Middle Initial) <b>c. Piryx Inc.</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2014
Mailing Address 144 2nd Street 1st Floor			Amount of Each Disbursement this Period 1.44
City San Francisco	State CA	Zip Code 94105-	
Purpose of Disbursement Merchant Processing Fees		Candidate Name	Transaction ID : 40404.E180
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)		Category/ Type	MERCHANT PROCESSING FEES
State:	District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	70.44
<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 27 OF 31			
	<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)  
**Crescent Hardy for Congress**

Full Name (Last, First, Middle Initial) <b>A. Prosper Group Corporation</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 13 / 2014
Mailing Address 435 East Main Street #250			Amount of Each Disbursement this Period 450.00
City Greenwood	State IN	Zip Code 46143-	Transaction ID : 40117.E141
Purpose of Disbursement Email Services		Category/ Type	
Candidate Name		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	EMAIL SERVICES
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

Full Name (Last, First, Middle Initial) <b>B. Red Rock Strategies</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 01 / 2014
Mailing Address 9500 West Flamingo Road #203			Amount of Each Disbursement this Period 4000.00
City Las Vegas	State NV	Zip Code 89147-	Transaction ID : 40117.E134
Purpose of Disbursement Consulting Management		Category/ Type	
Candidate Name		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	CONSULTING MANAGEMENT
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

Full Name (Last, First, Middle Initial) <b>c. Red Rock Strategies</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 01 / 2014
Mailing Address 9500 West Flamingo Road #203			Amount of Each Disbursement this Period 441.47
City Las Vegas	State NV	Zip Code 89147-	Transaction ID : 40117.E135
Purpose of Disbursement Travel		Category/ Type	
Candidate Name		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	TRAVEL
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4891.47
<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 28 OF 31			
	<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)  
**Crescent Hardy for Congress**

Full Name (Last, First, Middle Initial) <b>A. Red Rock Strategies</b>			Date of Disbursement MM / DD / YYYY 02 / 01 / 2014
Mailing Address 9500 West Flamingo Road #203			Amount of Each Disbursement this Period 252.91
City Las Vegas	State NV	Zip Code 89147-	Transaction ID : 40207.E150
Purpose of Disbursement Travel	Category/ Type		
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		TRAVEL
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) <b>B. Red Rock Strategies</b>			Date of Disbursement MM / DD / YYYY 02 / 01 / 2014
Mailing Address 9500 West Flamingo Road #203			Amount of Each Disbursement this Period 4500.00
City Las Vegas	State NV	Zip Code 89147-	Transaction ID : 40207.E149
Purpose of Disbursement Consulting Management	Category/ Type		
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		CONSULTING MANAGEMENT
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) <b>C. Red Rock Strategies</b>			Date of Disbursement MM / DD / YYYY 03 / 01 / 2014
Mailing Address 9500 West Flamingo Road #203			Amount of Each Disbursement this Period 4000.00
City Las Vegas	State NV	Zip Code 89147-	Transaction ID : 40228.E155
Purpose of Disbursement Research Services	Category/ Type		
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		RESEARCH SERVICES
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	8752.91
<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 29 OF 31			
	<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)  
**Crescent Hardy for Congress**

Full Name (Last, First, Middle Initial) <b>A. Red Rock Strategies</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 01 / 2014	
Mailing Address 9500 West Flamingo Road #203			Amount of Each Disbursement this Period 4500.00	
City Las Vegas	State NV	Zip Code 89147-	Transaction ID : 40228.E154	
Purpose of Disbursement Consulting Management		Category/ Type		
Candidate Name			CONSULTING MANAGEMENT	
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	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. Shell Gas</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 03 / 2014	
Mailing Address 910 Mesquite Blvd.			Amount of Each Disbursement this Period 81.00	
City Mesquite	State NV	Zip Code 89027-	Transaction ID : 40411.E182	
Purpose of Disbursement Travel		Category/ Type		
Candidate Name			TRAVEL	
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	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. Shell Gas</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 05 / 2014	
Mailing Address 910 Mesquite Blvd.			Amount of Each Disbursement this Period 83.98	
City Mesquite	State NV	Zip Code 89027-	Transaction ID : 40411.E185	
Purpose of Disbursement		Category/ Type		
Candidate Name				
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	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).....	4664.98
<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 30 OF 31			
	<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)  
**Crescent Hardy for Congress**

Full Name (Last, First, Middle Initial) <b>A. Shell Gas</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 14 / 2014
Mailing Address 910 Mesquite Blvd.			Amount of Each Disbursement this Period 73.00
City Mesquite	State NV	Zip Code 89027-	
Purpose of Disbursement Travel	Candidate Name		<b>Transaction ID : 40411.E195</b>
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:	Category/Type		TRAVEL

Full Name (Last, First, Middle Initial) <b>B. Shell Gas</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 25 / 2014
Mailing Address 910 Mesquite Blvd.			Amount of Each Disbursement this Period 83.00
City Mesquite	State NV	Zip Code 89027-	
Purpose of Disbursement Travel	Candidate Name		<b>Transaction ID : 40411.E199</b>
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:	Category/Type		TRAVEL

Full Name (Last, First, Middle Initial) <b>c. Shell Gas</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2014
Mailing Address 910 Mesquite Blvd.			Amount of Each Disbursement this Period 74.00
City Mesquite	State NV	Zip Code 89027-	
Purpose of Disbursement Travel	Candidate Name		<b>Transaction ID : 40411.E203</b>
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:	Category/Type		TRAVEL

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	230.00
<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 31 OF 31	
	<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)  
**Crescent Hardy for Congress**

Full Name (Last, First, Middle Initial) <b>A. Wenzel Strategies</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 26 / 2014
Mailing Address 4223 Elmway Drive		Amount of Each Disbursement this Period 4500.00
City Toledo	State OH Zip Code 43614-	
Purpose of Disbursement Survey Services	Candidate Name	<b>Transaction ID : 40328.E167</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	<b>SURVEY SERVICES</b>

Full Name (Last, First, Middle Initial) <b>B. Vanguard Golf Falcon Ridge LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 13 / 2014
Mailing Address 1024 Normandy Lane		Amount of Each Disbursement this Period 2113.72
City Mesquite	State NV Zip Code 89027-	
Purpose of Disbursement Catering	Candidate Name	<b>Transaction ID : 40404.C346IK</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	<b>IN KIND: CATERING</b>

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	Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	6613.72
<b>TOTAL</b> This Period (last page this line number only).....	47425.14