

# 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** ▼

C 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  
07 / 01 / 2014

through

M M / D D / Y Y Y Y  
09 / 30 / 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  
10 / 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.

Office Use Only									
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**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))....	90959.60	284259.88
(b) Total Contribution Refunds (from Line 20(d)) .....	3200.00	3250.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	87759.60	281009.88
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	83283.29	244936.01
(b) Total Offsets to Operating Expenditures (from Line 14).....	650.00	650.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	82633.29	244286.01
8. Cash on Hand at Close of Reporting Period (from Line 27).....	38124.87	
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).....	32811.71	

**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

**Cresent 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).....	71435.00	243850.28
(ii) Unitemized.....	4865.00	9500.00
(iii) TOTAL of contributions from individuals ▶	76300.00	253350.28
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	14659.60	30909.60
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	90959.60	284259.88
<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	1406.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	1406.00
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....</b>	650.00	650.00
<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>	91609.60	286315.88

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	83283.29	244936.01
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 .....	2200.00	2250.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	1000.00	1000.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	3200.00	3250.00
21. OTHER DISBURSEMENTS .....	0.00	5.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	86483.29	248191.01

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	32998.56
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	91609.60
25. SUBTOTAL (add Line 23 and Line 24).....	124608.16
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	86483.29
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	38124.87

**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 90
	<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)  
**Cresnet Hardy for Congress**

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

Mailing Address 4485 Mountaingate Drive

City Reno State NV Zip Code 89519

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

Name of Employer ERGS Inc. Occupation Real Estate

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 26 / 2014

**Transaction ID : 40829.C459**

Amount of Each Receipt this Period  
100.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
**Paul Truman**

Mailing Address 102 Grosse Pointe Place

City Henderson State NV Zip Code 89052

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

Name of Employer Truline Corporation Occupation Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 15 / 2014

**Transaction ID : 40718.C414**

Amount of Each Receipt this Period  
1000.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
**Susan Miller**

Mailing Address 176 Tierra Bonita Court

City Henderson State NV Zip Code 89074

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

Name of Employer Keystate Corporate Mgmt. Occupation Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5200.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 12 / 2014

**Transaction ID : 40912.C496**

Amount of Each Receipt this Period  
2600.00

Receipt

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

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

3700.00

**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 90
	<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)  
**Fred Gibson Jr.**

Mailing Address 3204 Plaza De Rafael

City Las Vegas State NV Zip Code 89102

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  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 22 / 2014

**Transaction ID : 40822.C451**

Amount of Each Receipt this Period  
500.00

Receipt

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

Mailing Address 3600 Lamay

City Reno State NV Zip Code 89511

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

Name of Employer Law Offices Of George Benesch Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
600.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 26 / 2014

**Transaction ID : 40829.C471**

Amount of Each Receipt this Period  
100.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
**Bruce Woodbury**

Mailing Address 1501 San Felipe Drive

City Boulder City State NV Zip Code 89005

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

Name of Employer Self Employed Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1525.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 19 / 2014

**Transaction ID : 40919.C500**

Amount of Each Receipt this Period  
500.00

Receipt

**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: (check only one)	PAGE 7 OF 90
	<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. Bill Hirschi</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 26 / 2014	
Mailing Address PO Box 1001		<b>Transaction ID : 40926.C506</b>	
City New Harmony	State UT	Zip Code 84757	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2200.00	
Name of Employer Resident Masonry Group	Occupation President		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 7400.00		

Full Name (Last, First, Middle Initial) <b>B. Bill Hirschi</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 26 / 2014	
Mailing Address PO Box 1001		<b>Transaction ID : 40926.C507</b>	
City New Harmony	State UT	Zip Code 84757	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period -2200.00	
Name of Employer Resident Masonry Group	Occupation President		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5200.00		

Reattribution Memo  
**[MEMO ITEM]**  
Reattribution To Spouse

Full Name (Last, First, Middle Initial) <b>C. Amy Hirschi</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 26 / 2014	
Mailing Address PO Box 1001		<b>Transaction ID : 40926.C508</b>	
City New Harmony	State UT	Zip Code 84757	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2200.00	
Name of Employer Homemaker	Occupation Homemaker		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 4800.00		

Reattribution Memo  
**[MEMO ITEM]**  
Reattribution From Spouse

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2200.00
<b>TOTAL</b> This Period (last page this line number only).....	2200.00

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

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

FOR LINE NUMBER: PAGE 8 OF 90  
(check only one)  
 11a  11b  11c  11d  
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Crescent Hardy for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Scott Godino**

Mailing Address 6018 South Durango Drive #110

City State Zip Code  
Las Vegas NV 89113

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

Name of Employer Occupation  
Equity Group Inc. Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4100.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 22 / 2014

**Transaction ID : 40822.C454**

Amount of Each Receipt this Period  
 Receipt 1500.00

**B.** Full Name (Last, First, Middle Initial)  
**Scott Gragson**

Mailing Address 3960 Howard Hughes Parkway #150

City State Zip Code  
Las Vegas NV 89169

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

Name of Employer Occupation  
Colliers International Vice President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5100.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 30 / 2014

**Transaction ID : 40829.C473**

Amount of Each Receipt this Period  
 Receipt 2600.00

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

Mailing Address 1405 Chuck Wagon Run

City State Zip Code  
Mesquite NV 89034

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
185.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 22 / 2014

**Transaction ID : 40822.C447**

Amount of Each Receipt this Period  
 Receipt 85.00

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

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

4185.00

**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 90
	<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)  
**Kenneth Russell**

Mailing Address 1405 Chuck Wagon Run

City Mesquite State NV Zip Code 89034

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 **285.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 26 / 2014

**Transaction ID : 40926.C516**

Amount of Each Receipt this Period  
 Receipt **100.00**

**B.** Full Name (Last, First, Middle Initial)  
**Chadley Clemetson**

Mailing Address 2960 Roundrock Court

City Reno State NV Zip Code 89511

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

Name of Employer Nev Dex Properties Occupation Real Estate

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5000.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 26 / 2014

**Transaction ID : 40829.C461**

Amount of Each Receipt this Period  
 Receipt **2500.00**

**C.** Full Name (Last, First, Middle Initial)  
**Cory David Clemetson**

Mailing Address 5310 Kietzke Lane #205

City Reno State NV Zip Code 89511

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

Name of Employer Nevdex Properties Occupation Real Estate

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5000.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 08 / 2014

**Transaction ID : 40808.C431**

Amount of Each Receipt this Period  
 Receipt **2500.00**

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

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

**5100.00**

**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 90
	<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)  
**Carolyn DeGanahl**

Mailing Address 911 Carrara Court

City Mesquite State NV Zip Code 89027

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 **700.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 05 / 2014

**Transaction ID : 40905.C480**

Amount of Each Receipt this Period  
**500.00**

Receipt

**B.** Full Name (Last, First, Middle Initial)  
**Melanie Cohen**

Mailing Address 875 Turtle Cove

City Mesquite State NV Zip Code 89027

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

Name of Employer Melanie Cohen LLC Occupation Partner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 26 / 2014

**Transaction ID : 40926.C515**

Amount of Each Receipt this Period  
**200.00**

Receipt

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

Mailing Address 295 Jody Court

City Mesquite State NV Zip Code 89027

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

Name of Employer Premier Properties Occupation Executive

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **200.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 26 / 2014

**Transaction ID : 40926.C520**

Amount of Each Receipt this Period  
**100.00**

Receipt

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

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

**800.00**

**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 90
	<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. Gary Black**  
Full Name (Last, First, Middle Initial)  
Mailing Address 4511 West Cheyenne Avenue #702

City North Las Vegas	State NV	Zip Code 89032
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FEC ID number of contributing federal political committee. **C**

Name of Employer Black & Black Real Estate	Occupation Owner
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Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 29 / 2014

**Transaction ID : 40829.C477**

Amount of Each Receipt this Period  
 Receipt  
 1000.00

**B. Dayton B. Blaine**  
Full Name (Last, First, Middle Initial)  
Mailing Address 3540 North 5th Street

City North Las Vegas	State NV	Zip Code 89032
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FEC ID number of contributing federal political committee. **C**

Name of Employer Blaine Equipment Company	Occupation Owner
--	---------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 12 / 2014

**Transaction ID : 40912.C495**

Amount of Each Receipt this Period  
 Receipt  
 1000.00

**C. Bill Miller**  
Full Name (Last, First, Middle Initial)  
Mailing Address 4895 Convair Drive

City Carson City	State NV	Zip Code 89706
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FEC ID number of contributing federal political committee. **C**

Name of Employer Bill Miller Engineering	Occupation Owner
---	---------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 09 / 2014

**Transaction ID : 40711.C413**

Amount of Each Receipt this Period  
 Receipt  
 250.00

**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 12 OF 90
	<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)  
**Ronald Cameron**

Mailing Address **PO Box 21440**

City **Little Rock** State **AR** Zip Code **72221**

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  
**2600.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**07 / 18 / 2014**

**Transaction ID : 40718.C415**

Amount of Each Receipt this Period  
**2600.00**

Receipt

**B.** Full Name (Last, First, Middle Initial)  
**Casablanca Resorts 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  
**2500.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**07 / 21 / 2014**

**Transaction ID : 40725.C420**

Amount of Each Receipt this Period  
**2500.00**

Receipt

**C.** Full Name (Last, First, Middle Initial)  
**Timothy Janszen**

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 **Casablanca Resorts LLC** Occupation **Partner**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2500.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**07 / 21 / 2014**

**Transaction ID : 40725.C422**

Amount of Each Receipt this Period  
**2500.00**

Memo  
**[MEMO ITEM]**  
 Partnership->Casablanca Resorts LLC Partnership

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

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

**5100.00**

**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 90
	<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)  
**Virgin River Hotel 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

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 21 / 2014

**Transaction ID : 40725.C421**

Amount of Each Receipt this Period  
 Receipt 2500.00

**B.** Full Name (Last, First, Middle Initial)  
**Ryan Langdan**

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  
 Virgin River Hotel LLC Partner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 21 / 2014

**Transaction ID : 40725.C423**

Amount of Each Receipt this Period  
 Memo 2500.00

**[MEMO ITEM]**  
 Partnership->Virgin River Hotel LLC Partnership

**C.** Full Name (Last, First, Middle Initial)  
**Margaret Cavin**

Mailing Address 9185 Mile Circle Drive

City Reno State NV Zip Code 89511

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

Name of Employer Occupation  
 J & J Mechanical Contractor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 31 / 2014

**Transaction ID : 40801.C425**

Amount of Each Receipt this Period  
 Receipt 1000.00

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

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

3500.00

**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)  
 11a 12     11b 13a     11c 13b     11d 14     15  
 PAGE 14 OF 90

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NAME OF COMMITTEE (In Full)  
**Crescent Hardy for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Janet Parker**

Mailing Address 1390 Creek Drive

City State Zip Code  
 Gardnerville NV 89410

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

Name of Employer Occupation  
 Minden Air Corporation President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 300.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 31 2014

**Transaction ID : 40801.C426**

Amount of Each Receipt this Period  
 300.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
**Robert Lissner**

Mailing Address PO Box 7548

City State Zip Code  
 Reno NV 89510

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

Name of Employer Occupation  
 Self Employed Software Engineer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 08 2014

**Transaction ID : 40808.C429**

Amount of Each Receipt this Period  
 1000.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
**John H. O. LaGatta**

Mailing Address 50 West Liberty Street #1080

City State Zip Code  
 Reno NV 89501

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

Name of Employer Occupation  
 Self Employed Investor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 08 2014

**Transaction ID : 40808.C430**

Amount of Each Receipt this Period  
 1000.00

Receipt

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

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

2300.00

**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 90
	<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)  
**William Richardson**

Mailing Address 395 East Sunset Road

City Las Vegas State NV Zip Code 89119

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

Name of Employer W.A. Richardson Builders LLC Occupation President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 08 / 2014

**Transaction ID : 40808.C432**

Amount of Each Receipt this Period  
 Receipt 2500.00

**B.** Full Name (Last, First, Middle Initial)  
**Michael Gaughan**

Mailing Address PO Box 400550

City Las Vegas State NV Zip Code 89140

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

Name of Employer South Point Hotel Occupation Owner

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  
 08 / 08 / 2014

**Transaction ID : 40808.C433**

Amount of Each Receipt this Period  
 Receipt 2600.00

**C.** Full Name (Last, First, Middle Initial)  
**Gregory Bushman**

Mailing Address 3 Camelot Acres

City Yerington State NV Zip Code 89447

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

Name of Employer NV Energy Occupation 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 Y Y  
 08 / 08 / 2014

**Transaction ID : 40808.C436**

Amount of Each Receipt this Period  
 Receipt 250.00

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

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

5350.00

**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 90
	<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)  
**Arthur Gisi**

Mailing Address 4282 Ridgeview Drive

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: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 12 / 2014

**Transaction ID : 40808.C440**

Amount of Each Receipt this Period  
500.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
**Ulrika Miyashiro**

Mailing Address 2912 Setting Sun Street

City Las Vegas State NV Zip Code 89117

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  
400.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 13 / 2014

**Transaction ID : 40808.C441**

Amount of Each Receipt this Period  
400.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
**Ulrika Miyashiro**

Mailing Address 2912 Setting Sun Street

City Las Vegas State NV Zip Code 89117

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  
650.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : 41008.C540**

Amount of Each Receipt this Period  
250.00

Receipt

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

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

1150.00

**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 90
	<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. Maria Carole Donald</b>		Date of Receipt M M / D D / Y Y Y Y 08 / 13 / 2014	
Mailing Address 6550 Peachtree Lane		<b>Transaction ID : 40808.C443</b>	
City Las Vegas	State NV	Zip Code 89103	Amount of Each Receipt this Period Receipt 200.00
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 200.00		

Full Name (Last, First, Middle Initial) <b>B. Maria Carole Donald</b>		Date of Receipt M M / D D / Y Y Y Y 08 / 22 / 2014	
Mailing Address 6550 Peachtree Lane		<b>Transaction ID : 40822.C455</b>	
City Las Vegas	State NV	Zip Code 89103	Amount of Each Receipt this Period Receipt 100.00
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 300.00		

Full Name (Last, First, Middle Initial) <b>C. John Ross</b>		Date of Receipt M M / D D / Y Y Y Y 08 / 13 / 2014	
Mailing Address 6303 Galena Canyon Trail		<b>Transaction ID : 40815.C444</b>	
City Reno	State NV	Zip Code 89511	Amount of Each Receipt this Period Receipt 250.00
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	550.00
<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 18 OF 90
	<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>Peter Gunnerman</b>		Date of Receipt M M / D D / Y Y Y Y 08 / 14 / 2014
Mailing Address 2630 West Lakeridge Shores		<b>Transaction ID : 40815.C445</b>
City Reno	State NV	Zip Code 89519
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 1000.00	
Name of Employer Advanced Refining Group	Occupation Partner	Receipt
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

Full Name (Last, First, Middle Initial) <b>Ed Goedhart</b>		Date of Receipt M M / D D / Y Y Y Y 08 / 22 / 2014
Mailing Address 1321 South Highway 160		<b>Transaction ID : 40822.C448</b>
City Pahrump	State NV	Zip Code 89048
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 500.00	
Name of Employer State Of Nevada	Occupation Legislator	Receipt
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) <b>Frank Martin</b>		Date of Receipt M M / D D / Y Y Y Y 08 / 22 / 2014
Mailing Address 6828 North Rio Vista		<b>Transaction ID : 40822.C449</b>
City Las Vegas	State NV	Zip Code 89131
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 2600.00	
Name of Employer Martin Harris	Occupation Owner	Receipt
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2600.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	4100.00
<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 19 OF 90
	<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)  
**Gerald Hunt**

Mailing Address **PO Box 748**

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

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  
**500.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**08 / 22 / 2014**

**Transaction ID : 40822.C453**

Amount of Each Receipt this Period  
**500.00**

Receipt

**B.** Full Name (Last, First, Middle Initial)  
**Thomas Enos**

Mailing Address **7351 Granite Ridge Court**

City **Washoe Valley** State **NV** Zip Code **89704**

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  
**08 / 26 / 2014**

**Transaction ID : 40829.C463**

Amount of Each Receipt this Period  
**250.00**

Receipt

**C.** Full Name (Last, First, Middle Initial)  
**Motion & Purpose LLC**

Mailing Address **1720 Summer Glen Drive**

City **Reno** State **NV** Zip Code **89521**

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  
**08 / 26 / 2014**

**Transaction ID : 40829.C468**

Amount of Each Receipt this Period  
**1000.00**

Receipt

**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 20 OF 90
	<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)  
**Paul Enos**

Mailing Address 1720 Summer Glen Drive

City	State	Zip Code
Reno	NV	89521

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

Name of Employer	Occupation
Motion & Purpose LLC	Partner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 26 / 2014

**Transaction ID : 40829.C469**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 1000.00

Memo  
**[MEMO ITEM]**  
 Partnership->Motion & Purpose LLC Partnership

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

Mailing Address PO Box 4720

City	State	Zip Code
Incline Village	NV	89450

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

Name of Employer	Occupation
Nevada State Development Corp.	Commercial Loan Officer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 26 / 2014

**Transaction ID : 40829.C472**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 250.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
**Robert Maricich**

Mailing Address 1 Hughes Center Drive #1801

City	State	Zip Code
Las Vegas	NV	89169

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

Name of Employer	Occupation
International Market Centers	CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 28 / 2014

**Transaction ID : 40829.C474**

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 21 OF 90
	<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)  
**Martha P. Gaughan**

Mailing Address PO Box 400550

City Las Vegas State NV Zip Code 89140

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

Name of Employer Self Employed Occupation Rancher

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  
 09 / 05 / 2014

**Transaction ID : 40905.C479**

Amount of Each Receipt this Period  
 Receipt 2600.00

**B.** Full Name (Last, First, Middle Initial)  
**Diamond H Ranch LLC**

Mailing Address 2958 South Old Highway 91

City New Harmony State UT Zip Code 84757

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify) Primary DEBT 2014

Election Cycle-to-Date  
200.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 05 / 2014

**Transaction ID : 40912.C491**

Amount of Each Receipt this Period  
 Receipt 200.00

**C.** Full Name (Last, First, Middle Initial)  
**Amy Hirschi**

Mailing Address PO Box 1001

City New Harmony State UT Zip Code 84757

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

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2014  
 Primary  General  
 Other (specify) Primary DEBT 2014

Election Cycle-to-Date  
2600.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 05 / 2014

**Transaction ID : 40912.C492**

Amount of Each Receipt this Period  
 Memo 200.00

**[MEMO ITEM]**  
 Partnership->Diamond H Ranch LLC Partnership

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

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

2800.00

**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 90
	<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)  
**Diamond H Ranch LLC**

Mailing Address 2958 South Old Highway 91

City State Zip Code  
New Harmony UT 84757

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  
09 / 05 / 2014

**Transaction ID : 40905.C484**

Amount of Each Receipt this Period  
4800.00

Receipt

NOTE: See Refund Sched B

**B.** Full Name (Last, First, Middle Initial)  
**Bill Hirschi**

Mailing Address PO Box 1001

City State Zip Code  
New Harmony UT 84757

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

Name of Employer Occupation  
Resident Masonry Group President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5200.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 05 / 2014

**Transaction ID : 40912.C493**

Amount of Each Receipt this Period  
2600.00

Memo

**[MEMO ITEM]**  
Partnership->Diamond H Ranch LLC Partnership

**C.** Full Name (Last, First, Middle Initial)  
**Bill Sanderson**

Mailing Address 774 Mays Boulevard #10-466

City State Zip Code  
Incline Village NV 89451

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600.00

Date of Receipt  
M M / D D / Y Y Y Y  
08 / 30 / 2014

**Transaction ID : 40905.C485**

Amount of Each Receipt this Period  
2600.00

Receipt

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

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

7400.00

**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 90
	<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)  
**Pamela Elardi**

Mailing Address 809 Ville Franche Street

City Las Vegas	State NV	Zip Code 89145
-------------------	-------------	-------------------

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

Name of Employer Self Employed	Occupation Investor
-----------------------------------	------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 19 / 2014

**Transaction ID : 40919.C498**

Amount of Each Receipt this Period  
500.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
**Maurice Gallagher**

Mailing Address 8350 South Durango Drive #210

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

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

Name of Employer Allegiant Air	Occupation Chairman of the Board
-----------------------------------	-------------------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 19 / 2014

**Transaction ID : 40919.C499**

Amount of Each Receipt this Period  
2600.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
**Scott Loughridge**

Mailing Address 6140 Egan Crest Drive

City Las Vegas	State NV	Zip Code 89149
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FEC ID number of contributing federal political committee. **C**

Name of Employer SR Construction	Occupation General Contractor
-------------------------------------	----------------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 26 / 2014

**Transaction ID : 40926.C502**

Amount of Each Receipt this Period  
250.00

Receipt

**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: PAGE 24 OF 90  
(check only one)  
 11a  11b  11c  11d  
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Cresnet Hardy for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Carolyn Bloom**

Mailing Address 426 Via Ventana Drive

City State Zip Code  
Mesquite NV 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 M / D D D / Y Y Y Y Y Y  
 09 26 2014

**Transaction ID : 40926.C521**

Amount of Each Receipt this Period  
250.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
**Mary Bollenbecker**

Mailing Address PO Box 3420

City State Zip Code  
Mesquite NV 89024

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 M / D D D / Y Y Y Y Y Y  
 09 26 2014

**Transaction ID : 40926.C528**

Amount of Each Receipt this Period  
250.00

Receipt

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

Mailing Address 752 West Pioneer Boulevard

City State Zip Code  
Mesquite NV 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  
750.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 26 2014

**Transaction ID : 40926.C530**

Amount of Each Receipt this Period  
750.00

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 25 OF 90
	<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)  
**Gregory Bulloch**

Mailing Address 752 West Pioneer Boulevard

City Mesquite State NV Zip Code 89027

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

Name of Employer Mesquite Material Testing LLC Occupation Partner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
750.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 26 / 2014

**Transaction ID : 41012.C545**

Amount of Each Receipt this Period  
750.00

Memo  
**[MEMO ITEM]**  
Partnership->Mesquite Material Testing LLC Partnership

**B.** Full Name (Last, First, Middle Initial)  
**John Stanko**

Mailing Address 12785 Silver Wolf Road

City Reno State NV Zip Code 89511

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

Name of Employer Champion Chevrolet Occupation President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : 41008.C535**

Amount of Each Receipt this Period  
5000.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
**John Stanko**

Mailing Address 12785 Silver Wolf Road

City Reno State NV Zip Code 89511

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

Name of Employer Champion Chevrolet Occupation President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : 41008.C536**

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 26 OF 90
	<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)  
**Betty Stanko**

Mailing Address 12785 Silver Wolf Road

City	State	Zip Code
Reno	NV	89511

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

Name of Employer	Occupation
Champion Chevolet	Customer Relations

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 2400.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : 41008.C537**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 2400.00

Reattribution Memo  
**[MEMO ITEM]**  
 Reattribution From Spouse

**B.** Full Name (Last, First, Middle Initial)  
**Victor Fuchs**

Mailing Address 1840 South Tomsik Street

City	State	Zip Code
Las Vegas	NV	89117

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

Name of Employer	Occupation
Helix Electric	President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : 41008.C538**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 1000.00

Receipt

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

Mailing Address 900 S. Pavilion Center Drive #180

City	State	Zip Code
Las Vegas	NV	89144

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

Name of Employer	Occupation
Ed Vance Associates	Architect

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : 41008.C539**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 250.00

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 27 OF 90
	<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)  
**Wayne Jefferies**

Mailing Address 2022 Country Cove Court

City Las Vegas State NV Zip Code 89135

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

Name of Employer Self Employed Occupation Business Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : 41008.C541**

Amount of Each Receipt this Period  
 Receipt 1000.00

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

Mailing Address 2549 Sun Reef Road

City Las Vegas State NV Zip Code 89128

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

Name of Employer Gaming Arts LLC Occupation CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : 41008.C542**

Amount of Each Receipt this Period  
 Receipt 2600.00

**C.** Full Name (Last, First, Middle Initial)  
**Janice Colvin**

Mailing Address 2549 Sun Reef Road

City Las Vegas State NV Zip Code 89128

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

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : 41008.C543**

Amount of Each Receipt this Period  
 Receipt 2400.00

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

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

6000.00

71435.00

**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 90
	<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)  
**Crescent Hardy for Congress**

Full Name (Last, First, Middle Initial) <b>A. Heller Highwater PAC</b>		Date of Receipt M M / D D / Y Y Y Y 07 / 25 / 2014	
Mailing Address PO Box 370672		<b>Transaction ID : 40725.C418</b>	
City Las Vegas	State NV	Zip Code 89137	Amount of Each Receipt this Period Receipt 5000.00
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation		Amount of Each Receipt this Period Receipt 10000.00
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 10000.00		

Full Name (Last, First, Middle Initial) <b>B. Amodei For Nevada</b>		Date of Receipt M M / D D / Y Y Y Y 08 / 22 / 2014	
Mailing Address 503 North Division Street		<b>Transaction ID : 40822.C452</b>	
City Carson City	State NV	Zip Code 89703	Amount of Each Receipt this Period Receipt 3500.00
FEC ID number of contributing federal political committee. C C00496760			
Name of Employer	Occupation		NOTE:See Refund Sched B
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5000.00		

Full Name (Last, First, Middle Initial) <b>C. Amodei For Nevada</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2014	
Mailing Address 503 North Division Street		<b>Transaction ID : 41015.C546</b>	
City Carson City	State NV	Zip Code 89703	Amount of Each Receipt this Period Redesignation FROM Memo -500.00
FEC ID number of contributing federal political committee. C C00496760			
Name of Employer	Occupation		[MEMO ITEM]
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 4000.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	8500.00
<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 29 OF 90
	<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)  
**Amodei For Nevada**

Mailing Address 503 North Division Street

City Carson City State NV Zip Code 89703

FEC ID number of contributing federal political committee. **C** C00496760

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify) Primary DEBT 2014

Election Cycle-to-Date 4000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : 41015.C547**

Amount of Each Receipt this Period  
 500.00

Redesignation TO Memo

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
**Sandoval For Governor**

Mailing Address PO Box 370297

City Las Vegas State NV Zip Code 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 159.60

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 25 / 2014

**Transaction ID : 40829.C478**

Amount of Each Receipt this Period  
 159.60

In-Kind  
 Photography Services

**C.** Full Name (Last, First, Middle Initial)  
**Full House PAC**

Mailing Address PO Box 530520

City Henderson State NV Zip Code 89053

FEC ID number of contributing federal political committee. **C** C00541128

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  
 07 / 25 / 2014

**Transaction ID : 40725.C419**

Amount of Each Receipt this Period  
 1000.00

Receipt

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

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

1159.60

**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 30 OF 90
	<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)  
**Crescent Hardy for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Majority Committee PAC**

Mailing Address PO Box 10134

City Bakersfield State CA Zip Code 93389

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  
 09 / 05 / 2014

**Transaction ID : 40905.C481**

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

14659.60

**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 31 OF 90
	<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)  
**Crescent Hardy for Congress**

**A. Moore Information**

Full Name (Last, First, Middle Initial)  
Mailing Address 2130 SW Jefferson #200

City Portland State OR Zip Code 97201-

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
650.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 26 / 2014

**Transaction ID : 40926.C510**

Amount of Each Receipt this Period  
650.00

Offsets to Operating Expenditu

NOTE:Refund Of Overpayment

**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

**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

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

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

650.00

650.00

**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 32 OF 90	
	<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 Oil</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 28 / 2014
Mailing Address 910 Mesquite Boulevard		Amount of Each Disbursement this Period 75.00
City Mesquite	State NV	
Zip Code 89027-	Purpose of Disbursement Travel	<b>Transaction ID : 40808.E361</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. Loves Country Store</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 29 / 2014
Mailing Address 12501 Apex Great Basin Way		Amount of Each Disbursement this Period 65.00
City Las Vegas	State NV	
Zip Code 89105-	Purpose of Disbursement Travel	<b>Transaction ID : 41008.E541</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. Loves Country Store</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 03 / 2014
Mailing Address 12501 Apex Great Basin Way		Amount of Each Disbursement this Period 66.00
City Las Vegas	State NV	
Zip Code 89105-	Purpose of Disbursement Travel	<b>Transaction ID : 40808.E366</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).....	206.00
<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 33 OF 90	
	<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. Loves Country Store</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 31 / 2014	
Mailing Address 12501 Apex Great Basin Way			Amount of Each Disbursement this Period 75.00	
City Las Vegas	State NV	Zip Code 89105-	Transaction ID : 40808.E369	
Purpose of Disbursement Travel		Category/ Type		
Candidate Name			TRAVEL	
Office Sought:	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. Chevron</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 03 / 2014	
Mailing Address 9991 West Charleston Boulevard			Amount of Each Disbursement this Period 71.00	
City Las Vegas	State NV	Zip Code 89117-	Transaction ID : 41008.E511	
Purpose of Disbursement Travel		Category/ Type		
Candidate Name			TRAVEL	
Office Sought:	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. Shell Oil</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 28 / 2014	
Mailing Address 910 Mesquite Boulevard			Amount of Each Disbursement this Period 99.00	
City Mesquite	State NV	Zip Code 89027-	Transaction ID : 40808.E363	
Purpose of Disbursement Travel		Category/ Type		
Candidate Name			TRAVEL	
Office Sought:	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).....	245.00
<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 34 OF 90			
	<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 Oil</b>		Date of Disbursement MM / DD / YYYY 08 / 15 / 2014
Mailing Address 910 Mesquite Boulevard		Amount of Each Disbursement this Period 70.00
City Mesquite	State NV	
Zip Code 89027-	Purpose of Disbursement Travel	Transaction ID : 40919.E442
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. Loves Country Store</b>		Date of Disbursement MM / DD / YYYY 09 / 29 / 2014
Mailing Address 12501 Apex Great Basin Way		Amount of Each Disbursement this Period 115.00
City Las Vegas	State NV	
Zip Code 89105-	Purpose of Disbursement Travel	Transaction ID : 41008.E542
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. Naka Sushi</b>		Date of Disbursement MM / DD / YYYY 09 / 22 / 2014
Mailing Address 8540 W Lake Mead Boulevard		Amount of Each Disbursement this Period 55.53
City Las Vegas	State NV	
Zip Code 89128-	Purpose of Disbursement Meals	Transaction ID : 41008.E545
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)	MEALS
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	240.53
<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 35 OF 90			
	<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. Piryx Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 24 / 2014
Mailing Address 144 2nd Street 1st Floor		Amount of Each Disbursement this Period 2.88
City San Francisco	State CA	
Zip Code 94105-	Purpose of Disbursement Merchant Processing Fees	<b>Transaction ID : 40926.E477</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)	MERCHANT PROCESSING FEES
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Loves Country Store</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 02 / 2014
Mailing Address 12501 Apex Great Basin Way		Amount of Each Disbursement this Period 72.00
City Las Vegas	State NV	
Zip Code 89105-	Purpose of Disbursement Travel	<b>Transaction ID : 41008.E504</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. Shell Oil</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 22 / 2014
Mailing Address 910 Mesquite Boulevard		Amount of Each Disbursement this Period 52.00
City Mesquite	State NV	
Zip Code 89027-	Purpose of Disbursement Travel	<b>Transaction ID : 41008.E530</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).....	126.88
<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 36 OF 90			
	<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. Danielle Cherry</b>			Date of Disbursement MM / DD / YYYY 08 / 29 / 2014	
Mailing Address 385 Teramo Drive			Amount of Each Disbursement this Period 1297.50	
City Reno	State NV	Zip Code 89521-	Transaction ID : 40905.E398	
Purpose of Disbursement Consulting Fundraising		Category/ Type	CONSULTING FUNDRAISING	
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>B. Charlene Stamps</b>			Date of Disbursement MM / DD / YYYY 07 / 15 / 2014	
Mailing Address 375 Conestoga Way #4212			Amount of Each Disbursement this Period 1250.00	
City Henderson	State NV	Zip Code 89002-	Transaction ID : 40718.E327	
Purpose of Disbursement Consulting Grassroots		Category/ Type	CONSULTING GRASSROOTS	
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. Piryx Inc.</b>			Date of Disbursement MM / DD / YYYY 09 / 10 / 2014	
Mailing Address 144 2nd Street 1st Floor			Amount of Each Disbursement this Period 1.44	
City San Francisco	State CA	Zip Code 94105-	Transaction ID : 40919.E473	
Purpose of Disbursement Merchant Processing Fees		Category/ Type	MERCHANT PROCESSING FEES	
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).....	2548.94
<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 37 OF 90	
	<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 07 / 15 / 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	<b>Transaction ID : 40718.E338</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>MERCHANT PROCESSING FEES</b>
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Mizpah Hotel</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 18 / 2014
Mailing Address 100 North Main Street		Amount of Each Disbursement this Period 129.71
City Tonopah	State NV	
Zip Code 89049-	Purpose of Disbursement Travel	<b>Transaction ID : 40919.E452</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. Red Rock Strategies</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2014
Mailing Address 9500 West Flamingo Road #203		Amount of Each Disbursement this Period 500.36
City Las Vegas	State NV	
Zip Code 89147-	Purpose of Disbursement Telephone	<b>Transaction ID : 40801.E343</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>TELEPHONE</b>
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	687.57
<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 38 OF 90	
	<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 08 / 07 / 2014
Mailing Address 144 2nd Street 1st Floor		Amount of Each Disbursement this Period 99.66 <b>Transaction ID : 40808.E386</b>
City San Francisco	State CA Zip Code 94105-	
Purpose of Disbursement Merchant Processing Fees	Category/Type	MERCHANT PROCESSING FEES
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>B. Kent Alexander</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2014
Mailing Address PO Box 157		Amount of Each Disbursement this Period 30.20 <b>Transaction ID : 40919.E466</b>
City Saucier	State MS Zip Code 39574-	
Purpose of Disbursement Post Driver	Category/Type	POST DRIVER
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. Naka Sushi</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 21 / 2014
Mailing Address 8540 W Lake Mead Boulevard		Amount of Each Disbursement this Period 52.21 <b>Transaction ID : 40919.E456</b>
City Las Vegas	State NV Zip Code 89128-	
Purpose of Disbursement Meals	Category/Type	MEALS
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).....	99.66
<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 39 OF 90			
	<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. Loves Country Store</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2014	
Mailing Address 12501 Apex Great Basin Way			Amount of Each Disbursement this Period 85.00	
City Las Vegas	State NV	Zip Code 89105-	Transaction ID : 40808.E365	
Purpose of Disbursement Travel		Category/ Type		
Candidate Name			TRAVEL	
Office Sought:	House Senate 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. Loves Country Store</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 26 / 2014	
Mailing Address 12501 Apex Great Basin Way			Amount of Each Disbursement this Period 78.00	
City Las Vegas	State NV	Zip Code 89105-	Transaction ID : 41008.E540	
Purpose of Disbursement Travel		Category/ Type		
Candidate Name			TRAVEL	
Office Sought:	House Senate 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. Piryx Inc.</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 26 / 2014	
Mailing Address 144 2nd Street 1st Floor			Amount of Each Disbursement this Period 14.38	
City San Francisco	State CA	Zip Code 94105-	Transaction ID : 40926.E478	
Purpose of Disbursement Merchant Processing Fees		Category/ Type		
Candidate Name			MERCHANT PROCESSING FEES	
Office Sought:	House Senate 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).....	177.38
<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 40 OF 90			
	<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. Moore Information</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 08 / 2014
Mailing Address 2130 SW Jefferson #200			Amount of Each Disbursement this Period 11800.00 <b>Transaction ID : 40909.E416</b>
City Portland	State OR	Zip Code 97201-	
Purpose of Disbursement Polling		Category/ Type	<b>POLLING</b>
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>B. Piryx Inc.</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 31 / 2014
Mailing Address 144 2nd Street 1st Floor			Amount of Each Disbursement this Period 17.25 <b>Transaction ID : 40801.E352</b>
City San Francisco	State CA	Zip Code 94105-	
Purpose of Disbursement Merchant Processing Fees		Category/ Type	<b>MERCHANT PROCESSING FEES</b>
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. Prosper Group Corporation</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 26 / 2014
Mailing Address 435 East Main Street #250			Amount of Each Disbursement this Period 34.72 <b>Transaction ID : 40829.E394</b>
City Greenwood	State IN	Zip Code 46143-	
Purpose of Disbursement Email Services		Category/ Type	<b>EMAIL SERVICES</b>
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) .....	11851.97
<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 41 OF 90			
	<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. Prosper Group Corporation</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 09 / 2014
Mailing Address 435 East Main Street #250		Amount of Each Disbursement this Period 35.00
City Greenwood	State IN Zip Code 46143-	
Purpose of Disbursement Email Services	Candidate Name	Transaction ID : 40912.E418
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:	EMAIL SERVICES

Full Name (Last, First, Middle Initial) <b>B. Naka Sushi</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 05 / 2014
Mailing Address 8540 W Lake Mead Boulevard		Amount of Each Disbursement this Period 52.21
City Las Vegas	State NV Zip Code 89128-	
Purpose of Disbursement Meals	Candidate Name	Transaction ID : 41008.E512
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:	MEALS

Full Name (Last, First, Middle Initial) <b>c. In Compliance Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2014
Mailing Address PO Box 751271		Amount of Each Disbursement this Period 14.00
City Las Vegas	State NV Zip Code 89136-	
Purpose of Disbursement Printing	Candidate Name	Transaction ID : 40801.E347
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:	PRINTING

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	101.21
<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 42 OF 90			
	<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. Danielle Cherry</b>			Date of Disbursement MM / DD / YYYY 08 / 29 / 2014		
Mailing Address 385 Teramo Drive			Amount of Each Disbursement this Period 159.25		
City Reno	State NV	Zip Code 89521-	Transaction ID : 40905.E400		
Purpose of Disbursement Postage		Category/ Type			
Candidate Name		POSTAGE			
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. Loves Country Store</b>			Date of Disbursement MM / DD / YYYY 09 / 17 / 2014		
Mailing Address 12501 Apex Great Basin Way			Amount of Each Disbursement this Period 70.00		
City Las Vegas	State NV	Zip Code 89105-	Transaction ID : 41008.E539		
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. Piryx Inc.</b>			Date of Disbursement MM / DD / YYYY 09 / 08 / 2014		
Mailing Address 144 2nd Street 1st Floor			Amount of Each Disbursement this Period 5.76		
City San Francisco	State CA	Zip Code 94105-	Transaction ID : 40919.E471		
Purpose of Disbursement Merchant Processing Fees		Category/ Type			
Candidate Name		MERCHANT PROCESSING FEES			
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).....	235.01
<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 43 OF 90			
	<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 Oil</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 22 / 2014
Mailing Address 910 Mesquite Boulevard			Amount of Each Disbursement this Period 50.00
City Mesquite	State NV	Zip Code 89027-	
Purpose of Disbursement Travel		Category/ Type	<b>Transaction ID : 41008.E532</b>
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)		TRAVEL
State: District:			

Full Name (Last, First, Middle Initial) <b>B. Loves Country Store</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 02 / 2014
Mailing Address 12501 Apex Great Basin Way			Amount of Each Disbursement this Period 125.00
City Las Vegas	State NV	Zip Code 89105-	
Purpose of Disbursement Travel		Category/ Type	<b>Transaction ID : 41008.E505</b>
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)		TRAVEL
State: District:			

Full Name (Last, First, Middle Initial) <b>c. Shell Oil</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 25 / 2014
Mailing Address 910 Mesquite Boulevard			Amount of Each Disbursement this Period 80.01
City Mesquite	State NV	Zip Code 89027-	
Purpose of Disbursement Travel		Category/ Type	<b>Transaction ID : 40919.E444</b>
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)		TRAVEL
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	255.01
<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 44 OF 90			
	<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 07 / 18 / 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	Transaction ID : 40718.E331	
Candidate Name	Category/ Type 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>B. Piryx Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 13 / 2014
Mailing Address 144 2nd Street 1st Floor		Amount of Each Disbursement this Period 54.63
City San Francisco	State CA	Zip Code 94105-
Purpose of Disbursement Merchant Processing Fees	Transaction ID : 40815.E391	
Candidate Name	Category/ Type MERCHANT PROCESSING FEES	
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. Piryx Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 22 / 2014
Mailing Address 144 2nd Street 1st Floor		Amount of Each Disbursement this Period 4.89
City San Francisco	State CA	Zip Code 94105-
Purpose of Disbursement Merchant Processing Fees	Transaction ID : 40829.E395	
Candidate Name	Category/ Type MERCHANT PROCESSING FEES	
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).....	101.86
<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 45 OF 90			
	<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. Southwest Airlines</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2014
Mailing Address PO Box 36647-1CR			Amount of Each Disbursement this Period 22.00
City Dallas	State TX	Zip Code 75235-	
Purpose of Disbursement Travel		Category/ Type	<b>Transaction ID : 40808.E374</b>
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)		TRAVEL
State: District:			

Full Name (Last, First, Middle Initial) <b>B. Piryx Inc.</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2014
Mailing Address 144 2nd Street 1st Floor			Amount of Each Disbursement this Period 373.76
City San Francisco	State CA	Zip Code 94105-	
Purpose of Disbursement Merchant Processing Fees		Category/ Type	<b>Transaction ID : 41008.E548</b>
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)		MERCHANT PROCESSING FEES
State: District:			

Full Name (Last, First, Middle Initial) <b>c. Kent Alexander</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 01 / 2014
Mailing Address PO Box 157			Amount of Each Disbursement this Period 66.99
City Saucier	State MS	Zip Code 39574-	
Purpose of Disbursement Printing		Category/ Type	<b>Transaction ID : 40905.E412</b>
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)		PRINTING
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	462.75
<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 46 OF 90			
	<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. Cox Communications</b>		Date of Disbursement <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>09</td> <td></td> <td>12</td> <td></td> <td>2014</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	09		12		2014
M M	/	D D	/	Y Y Y Y								
09		12		2014								
Mailing Address 750 North Rancho Drive		Amount of Each Disbursement this Period <table border="1"> <tr> <td>327.04</td> </tr> </table>	327.04									
327.04												
City Las Vegas	State NV	Zip Code 89106-										
Purpose of Disbursement Telephone & Internet		Transaction ID : 41008.E538										
Candidate Name												
Office Sought:	<table border="1"> <tr> <td><input type="checkbox"/></td> <td>House</td> </tr> <tr> <td><input type="checkbox"/></td> <td>Senate</td> </tr> <tr> <td><input type="checkbox"/></td> <td>President</td> </tr> </table>	<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)				
<input type="checkbox"/>	House											
<input type="checkbox"/>	Senate											
<input type="checkbox"/>	President											
State:	District:											
Category/Type		TELEPHONE & INTERNET										

Full Name (Last, First, Middle Initial) <b>B. Shell Oil</b>		Date of Disbursement <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>07</td> <td></td> <td>21</td> <td></td> <td>2014</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	07		21		2014
M M	/	D D	/	Y Y Y Y								
07		21		2014								
Mailing Address 910 Mesquite Boulevard		Amount of Each Disbursement this Period <table border="1"> <tr> <td>76.00</td> </tr> </table>	76.00									
76.00												
City Mesquite	State NV	Zip Code 89027-										
Purpose of Disbursement Travel		Transaction ID : 40808.E359										
Candidate Name												
Office Sought:	<table border="1"> <tr> <td><input type="checkbox"/></td> <td>House</td> </tr> <tr> <td><input type="checkbox"/></td> <td>Senate</td> </tr> <tr> <td><input type="checkbox"/></td> <td>President</td> </tr> </table>	<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)				
<input type="checkbox"/>	House											
<input type="checkbox"/>	Senate											
<input type="checkbox"/>	President											
State:	District:											
Category/Type		TRAVEL										

Full Name (Last, First, Middle Initial) <b>c. Loves Country Store</b>		Date of Disbursement <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>08</td> <td></td> <td>04</td> <td></td> <td>2014</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	08		04		2014
M M	/	D D	/	Y Y Y Y								
08		04		2014								
Mailing Address 12501 Apex Great Basin Way		Amount of Each Disbursement this Period <table border="1"> <tr> <td>54.01</td> </tr> </table>	54.01									
54.01												
City Las Vegas	State NV	Zip Code 89105-										
Purpose of Disbursement Travel		Transaction ID : 40919.E424										
Candidate Name												
Office Sought:	<table border="1"> <tr> <td><input type="checkbox"/></td> <td>House</td> </tr> <tr> <td><input type="checkbox"/></td> <td>Senate</td> </tr> <tr> <td><input type="checkbox"/></td> <td>President</td> </tr> </table>	<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)				
<input type="checkbox"/>	House											
<input type="checkbox"/>	Senate											
<input type="checkbox"/>	President											
State:	District:											
Category/Type		TRAVEL										

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<table border="1"> <tr> <td>457.05</td> </tr> </table>	457.05
457.05		
<b>TOTAL</b> 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 47 OF 90	
	<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. Loves Country Store</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 17 / 2014
Mailing Address 12501 Apex Great Basin Way		Amount of Each Disbursement this Period 76.00
City Las Vegas	State NV	
Zip Code 89105-	Purpose of Disbursement Travel	Transaction ID : 40808.E368
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. Red Rock Strategies</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 18 / 2014
Mailing Address 9500 West Flamingo Road #203		Amount of Each Disbursement this Period 23.06
City Las Vegas	State NV	
Zip Code 89147-	Purpose of Disbursement Advertisement	Transaction ID : 40718.E335
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)	ADVERTISEMENT
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 09 / 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 Compliance Consulting	Transaction ID : 40905.E405
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)	COMPLIANCE CONSULTING
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1949.06
<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 48 OF 90			
	<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. Mizpah Hotel</b>		Date of Disbursement MM / DD / YYYY 08 / 18 / 2014
Mailing Address 100 North Main Street		Amount of Each Disbursement this Period 145.73
City Tonopah	State NV	
Zip Code 89049-	Purpose of Disbursement Travel	<b>Transaction ID : 40919.E453</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. Costco</b>		Date of Disbursement MM / DD / YYYY 08 / 20 / 2014
Mailing Address 801 South Pavilion Center Drive		Amount of Each Disbursement this Period 148.96
City Las Vegas	State NV	
Zip Code 89144-	Purpose of Disbursement Office Supplies	<b>Transaction ID : 40919.E455</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)	OFFICE SUPPLIES
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Chevron</b>		Date of Disbursement MM / DD / YYYY 08 / 15 / 2014
Mailing Address 9991 West Charleston Boulevard		Amount of Each Disbursement this Period 56.00
City Las Vegas	State NV	
Zip Code 89117-	Purpose of Disbursement Travel	<b>Transaction ID : 40919.E449</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).....	350.69
<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 49 OF 90			
	<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. Arianni Valencia</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 06 / 2014	
Mailing Address 6057 Charity Street			Amount of Each Disbursement this Period 500.00	
City Las Vegas	State NV	Zip Code 89148-	Transaction ID : 40808.E353	
Purpose of Disbursement Consulting Grassroots		Category/ Type	CONSULTING GRASSROOTS	
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>B. Prosper Group Corporation</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2014	
Mailing Address 435 East Main Street #250			Amount of Each Disbursement this Period 47.23	
City Greenwood	State IN	Zip Code 46143-	Transaction ID : 40709.E292	
Purpose of Disbursement Email Services		Category/ Type	EMAIL SERVICES	
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. Red Rock Strategies</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2014	
Mailing Address 9500 West Flamingo Road #203			Amount of Each Disbursement this Period 34.25	
City Las Vegas	State NV	Zip Code 89147-	Transaction ID : 40801.E345	
Purpose of Disbursement Office Supplies		Category/ Type	OFFICE SUPPLIES	
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).....	581.48
<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 50 OF 90			
	<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 07 / 18 / 2014
Mailing Address PO Box 751271		Amount of Each Disbursement this Period 1850.00
City Las Vegas	State NV	
Zip Code 89136-		Transaction ID : 40718.E330
Purpose of Disbursement Compliance Consulting	Category/ Type	
Candidate Name		COMPLIANCE CONSULTING
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. Alamo Sinclair</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 03 / 2014
Mailing Address 51 Broadway Street		Amount of Each Disbursement this Period 75.00
City Alamo	State NV	
Zip Code 89001-		Transaction ID : 41008.E509
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. Silverscreen</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 07 / 2014
Mailing Address 200 Philadelphia		Amount of Each Disbursement this Period 654.90
City Las Vegas	State NV	
Zip Code 89104-		Transaction ID : 40808.E370
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).....	2579.90
<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 51 OF 90	
	<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. Home Depot</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 29 / 2014
Mailing Address 7881 West Tropical Parkway		Amount of Each Disbursement this Period 115.10
City Las Vegas	State NV Zip Code 89149-	
Purpose of Disbursement Office Supplies	Candidate Name	Transaction ID : 40808.E385
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	OFFICE SUPPLIES

Full Name (Last, First, Middle Initial) <b>B. NV Energy</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 26 / 2014
Mailing Address PO Box 30086		Amount of Each Disbursement this Period 285.24
City Reno	State NV Zip Code 89520-	
Purpose of Disbursement Utilities	Candidate Name	Transaction ID : 41008.E479
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	UTILITIES

Full Name (Last, First, Middle Initial) <b>c. Red Rock Strategies</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 18 / 2014
Mailing Address 9500 West Flamingo Road #203		Amount of Each Disbursement this Period 30.17
City Las Vegas	State NV Zip Code 89147-	
Purpose of Disbursement Travel	Candidate Name	Transaction ID : 40718.E336
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	TRAVEL

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	430.51
<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 52 OF 90	
	<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 07 / 18 / 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 : 40718.E334
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. South Point Hotel</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 08 / 2014
Mailing Address 9777 South Las Vegas Boulevard			Amount of Each Disbursement this Period 40.35
City Las Vegas	State NV	Zip Code 89183-	Transaction ID : 40919.E429
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. D &amp; L Development</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 18 / 2014
Mailing Address PO Box 92969			Amount of Each Disbursement this Period 3696.00
City Los Angeles	State CA	Zip Code 90009-	Transaction ID : 40725.E339
Purpose of Disbursement Rent		Category/ Type	
Candidate Name			RENT
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).....	8236.35
<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 53 OF 90			
	<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. Home Depot</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 24 / 2014
Mailing Address 7881 West Tropical Parkway		Amount of Each Disbursement this Period 106.48
City Las Vegas	State NV	
Zip Code 89149-	Purpose of Disbursement Fold-Up Tables	<b>Transaction ID : 40808.E383</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)	FOLD-UP TABLES
State: District:		

Full Name (Last, First, Middle Initial) <b>B. D &amp; L Development</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 16 / 2014
Mailing Address PO Box 92969		Amount of Each Disbursement this Period 1848.00
City Los Angeles	State CA	
Zip Code 90009-	Purpose of Disbursement Rent	<b>Transaction ID : 40919.E470</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)	RENT
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Piryx Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 29 / 2014
Mailing Address 144 2nd Street 1st Floor		Amount of Each Disbursement this Period 4.32
City San Francisco	State CA	
Zip Code 94105-	Purpose of Disbursement Merchant Processing Fees	<b>Transaction ID : 40905.E414</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)	MERCHANT PROCESSING FEES
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1958.80
<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 54 OF 90	
	<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 07 / 15 / 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 : 40718.E329	
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. Kent Alexander</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 15 / 2014
Mailing Address PO Box 157		Amount of Each Disbursement this Period 1500.00
City Saucier	State MS	Zip Code 39574-
Purpose of Disbursement Consulting Grassroots	Category/Type	
Candidate Name	Transaction ID : 40815.E387	
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 GRASSROOTS
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Kent Alexander</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2014
Mailing Address PO Box 157		Amount of Each Disbursement this Period 2500.00
City Saucier	State MS	Zip Code 39574-
Purpose of Disbursement Consulting Grassroots	Category/Type	
Candidate Name	Transaction ID : 40919.E464	
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 GRASSROOTS
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	6500.00
<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 55 OF 90			
	<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 Oil</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2014
Mailing Address 910 Mesquite Boulevard		Amount of Each Disbursement this Period 58.00
City Mesquite	State NV	
Zip Code 89027-	Purpose of Disbursement Travel	Transaction ID : 41008.E527
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. Shell Oil</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2014
Mailing Address 910 Mesquite Boulevard		Amount of Each Disbursement this Period 55.01
City Mesquite	State NV	
Zip Code 89027-	Purpose of Disbursement Travel	Transaction ID : 41008.E526
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. Southwest Airlines</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 05 / 2014
Mailing Address PO Box 36647-1CR		Amount of Each Disbursement this Period 462.20
City Dallas	State TX	
Zip Code 75235-	Purpose of Disbursement Travel	Transaction ID : 41008.E513
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).....	575.21
<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 56 OF 90			
	<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. Loves Country Store</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 04 / 2014
Mailing Address 12501 Apex Great Basin Way		Amount of Each Disbursement this Period 125.00
City Las Vegas	State NV	
Zip Code 89105-	Purpose of Disbursement Travel	Transaction ID : 40919.E423
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. Red Rock Strategies</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2014
Mailing Address 9500 West Flamingo Road #203		Amount of Each Disbursement this Period 5000.00
City Las Vegas	State NV	
Zip Code 89147-	Purpose of Disbursement Consulting Management	Transaction ID : 40801.E341
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 MANAGEMENT
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Piryx Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 22 / 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	Transaction ID : 40822.E393
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)	MERCHANT PROCESSING FEES
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	5126.44
<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 57 OF 90			
	<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 Oil</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 05 / 2014
Mailing Address 910 Mesquite Boulevard		Amount of Each Disbursement this Period 67.00
City Mesquite	State NV	
Zip Code 89027-	Purpose of Disbursement Travel	<b>Transaction ID : 41008.E514</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. La Quinta</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 18 / 2014
Mailing Address 1591 Great Basin Boulevard		Amount of Each Disbursement this Period 167.61
City Ely	State NV	
Zip Code 89301-	Purpose of Disbursement Travel	<b>Transaction ID : 40919.E454</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. Growth &amp; Opportunity PAC</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 31 / 2014
Mailing Address 10000 West Charleston Blvd. #135		Amount of Each Disbursement this Period 549.00
City Las Vegas	State NV	
Zip Code 89135-	Purpose of Disbursement Website Services	<b>Transaction ID : 40801.E351</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)	WEBSITE SERVICES
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	783.61
<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 58 OF 90			
	<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 09 / 26 / 2014
Mailing Address 144 2nd Street 1st Floor		Amount of Each Disbursement this Period 5.75
City San Francisco	State CA	
Zip Code 94105-	Purpose of Disbursement Merchant Processing Fees	Transaction ID : 41008.E502
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)	MERCHANT PROCESSING FEES
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Shell Oil</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 18 / 2014
Mailing Address 910 Mesquite Boulevard		Amount of Each Disbursement this Period 65.00
City Mesquite	State NV	
Zip Code 89027-	Purpose of Disbursement Travel	Transaction ID : 41008.E528
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. Red Rock Strategies</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 01 / 2014
Mailing Address 9500 West Flamingo Road #203		Amount of Each Disbursement this Period 54.04
City Las Vegas	State NV	
Zip Code 89147-	Purpose of Disbursement Office Supplies	Transaction ID : 40905.E404
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)	OFFICE SUPPLIES
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	124.79
<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 59 OF 90	
	<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 07 / 18 / 2014
Mailing Address 9500 West Flamingo Road #203			Amount of Each Disbursement this Period 431.20
City Las Vegas	State NV	Zip Code 89147-	
Purpose of Disbursement Telephone		Category/ Type	<b>Transaction ID : 40718.E337</b>
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)		TELEPHONE
State: District:			

Full Name (Last, First, Middle Initial) <b>B. Cox Communications</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 12 / 2014
Mailing Address 750 North Rancho Drive			Amount of Each Disbursement this Period 626.04
City Las Vegas	State NV	Zip Code 89106-	
Purpose of Disbursement Telephone & Internet		Category/ Type	<b>Transaction ID : 40919.E438</b>
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)		TELEPHONE & INTERNET
State: District:			

Full Name (Last, First, Middle Initial) <b>c. Piryx Inc.</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 26 / 2014
Mailing Address 144 2nd Street 1st Floor			Amount of Each Disbursement this Period 6.33
City San Francisco	State CA	Zip Code 94105-	
Purpose of Disbursement Merchant Processing Fees		Category/ Type	<b>Transaction ID : 41008.E501</b>
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)		MERCHANT PROCESSING FEES
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1063.57
<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 60 OF 90			
	<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. Growth &amp; Opportunity PAC</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2014
Mailing Address 10000 West Charleston Blvd. #135			Amount of Each Disbursement this Period 1098.00
City Las Vegas	State NV	Zip Code 89135-	
Purpose of Disbursement Website Services		Category/ Type	<b>Transaction ID : 40709.E291</b>
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)		<b>WEBSITE SERVICES</b>
State: District:			

Full Name (Last, First, Middle Initial) <b>B. NorthStar Campaign Systems Inc.</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 17 / 2014
Mailing Address 11421 Davenport Street			Amount of Each Disbursement this Period 1020.52
City Omaha	State NE	Zip Code 68154-	
Purpose of Disbursement Telephone Svcs		Category/ Type	<b>Transaction ID : 40926.E475</b>
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)		<b>TELEPHONE SVCS</b>
State: District:			

Full Name (Last, First, Middle Initial) <b>c. PDQ Printing</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 08 / 2014
Mailing Address 3820 South Valley View Boulevard			Amount of Each Disbursement this Period 3651.62
City Las Vegas	State NV	Zip Code 89103-	
Purpose of Disbursement Printing		Category/ Type	<b>Transaction ID : 40919.E431</b>
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)		<b>PRINTING</b>
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	5770.14
<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 61 OF 90			
	<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. Atlantis Casino Resort</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 15 / 2014
Mailing Address 3800 South Virginia Street			Amount of Each Disbursement this Period 257.94 <b>Transaction ID : 40919.E441</b>
City Reno	State NV	Zip Code 89502-	
Purpose of Disbursement Travel		Category/ Type	TRAVEL
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>B. Charlene Stamps</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2014
Mailing Address 375 Conestoga Way #4212			Amount of Each Disbursement this Period 1250.00 <b>Transaction ID : 40801.E350</b>
City Henderson	State NV	Zip Code 89002-	
Purpose of Disbursement Consulting Grassroots		Category/ Type	CONSULTING GRASSROOTS
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. Red Rock Strategies</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2014
Mailing Address 9500 West Flamingo Road #203			Amount of Each Disbursement this Period 23.65 <b>Transaction ID : 40801.E344</b>
City Las Vegas	State NV	Zip Code 89147-	
Purpose of Disbursement Travel		Category/ Type	TRAVEL
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) .....	1531.59
<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 62 OF 90	
	<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 08 / 22 / 2014
Mailing Address 144 2nd Street 1st Floor		Amount of Each Disbursement this Period 178.25
City San Francisco	State CA	
Zip Code 94105-	Purpose of Disbursement Merchant Processing Fees	<b>Transaction ID : 40829.E396</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>MERCHANT PROCESSING FEES</b>
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Shell Oil</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 07 / 2014
Mailing Address 910 Mesquite Boulevard		Amount of Each Disbursement this Period 59.01
City Mesquite	State NV	
Zip Code 89027-	Purpose of Disbursement Travel	<b>Transaction ID : 40808.E355</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. Shell Oil</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 12 / 2014
Mailing Address 910 Mesquite Boulevard		Amount of Each Disbursement this Period 21.00
City Mesquite	State NV	
Zip Code 89027-	Purpose of Disbursement Travel	<b>Transaction ID : 40919.E437</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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	258.26
<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 63 OF 90			
	<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 07 / 18 / 2014
Mailing Address PO Box 751271		Amount of Each Disbursement this Period 32.51
City Las Vegas	State NV	
Zip Code 89136-	Purpose of Disbursement Office Supplies	Transaction ID : 40718.E332
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)	OFFICE SUPPLIES
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Kent Alexander</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 01 / 2014
Mailing Address PO Box 157		Amount of Each Disbursement this Period 49.00
City Saucier	State MS	
Zip Code 39574-	Purpose of Disbursement Postage	Transaction ID : 40905.E411
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)	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 08 / 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	Transaction ID : 40801.E348
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)	TRAVEL
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	123.85
<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 64 OF 90			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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**

Full Name (Last, First, Middle Initial) <b>A. Red Rock Strategies</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 01 / 2014
Mailing Address 9500 West Flamingo Road #203			Amount of Each Disbursement this Period 5000.00
City Las Vegas	State NV	Zip Code 89147-	Transaction ID : 40905.E401
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>B. In Compliance Inc.</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 01 / 2014
Mailing Address PO Box 751271			Amount of Each Disbursement this Period 4.00
City Las Vegas	State NV	Zip Code 89136-	Transaction ID : 40905.E406
Purpose of Disbursement Printing		Category/ Type	
Candidate Name		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	PRINTING
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

Full Name (Last, First, Middle Initial) <b>c. Shell Oil</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 28 / 2014
Mailing Address 910 Mesquite Boulevard			Amount of Each Disbursement this Period 62.00
City Mesquite	State NV	Zip Code 89027-	Transaction ID : 40919.E447
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).....	5066.00
<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 65 OF 90			
	<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. Kent Alexander</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2014
Mailing Address PO Box 157			Amount of Each Disbursement this Period 356.27
City Saucier	State MS	Zip Code 39574-	
Purpose of Disbursement Travel		Category/ Type	<b>Transaction ID : 40919.E467</b>
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)		TRAVEL
State: District:			

Full Name (Last, First, Middle Initial) <b>B. NorthStar Campaign Systems Inc.</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 17 / 2014
Mailing Address 11421 Davenport Street			Amount of Each Disbursement this Period 1702.52
City Omaha	State NE	Zip Code 68154-	
Purpose of Disbursement Telephone Svcs		Category/ Type	<b>Transaction ID : 40926.E476</b>
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)		TELEPHONE SVCS
State: District:			

Full Name (Last, First, Middle Initial) <b>c. Piryx Inc.</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2014
Mailing Address 144 2nd Street 1st Floor			Amount of Each Disbursement this Period 0.29
City San Francisco	State CA	Zip Code 94105-	
Purpose of Disbursement Merchant Processing Fees		Category/ Type	<b>Transaction ID : 40919.E474</b>
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)		MERCHANT PROCESSING FEES
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2059.08
<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 66 OF 90			
	<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 Oil</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 08 / 2014		
Mailing Address 910 Mesquite Boulevard			Amount of Each Disbursement this Period 65.00		
City Mesquite	State NV	Zip Code 89027-	Transaction ID : 40919.E430		
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>B. Danielle Cherry</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 29 / 2014		
Mailing Address 385 Teramo Drive			Amount of Each Disbursement this Period 351.15		
City Reno	State NV	Zip Code 89521-	Transaction ID : 40905.E399		
Purpose of Disbursement Envelopes & Printing		Category/ Type			
Candidate Name		ENVELOPES & 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:					

Full Name (Last, First, Middle Initial) <b>c. Shell Oil</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2014		
Mailing Address 910 Mesquite Boulevard			Amount of Each Disbursement this Period 45.01		
City Mesquite	State NV	Zip Code 89027-	Transaction ID : 41008.E525		
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:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	461.16
<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 67 OF 90			
	<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 07 / 18 / 2014
Mailing Address PO Box 751271			Amount of Each Disbursement this Period 3.00
City Las Vegas	State NV	Zip Code 89136-	Transaction ID : 40718.E333
Purpose of Disbursement Printing	Category/ Type		
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		PRINTING
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. Kent Alexander</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 01 / 2014
Mailing Address PO Box 157			Amount of Each Disbursement this Period 23.62
City Saucier	State MS	Zip Code 39574-	Transaction ID : 40905.E413
Purpose of Disbursement Office Key & Tape	Category/ Type		
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		OFFICE KEY & TAPE
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. Shell Oil</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 22 / 2014
Mailing Address 910 Mesquite Boulevard			Amount of Each Disbursement this Period 70.30
City Mesquite	State NV	Zip Code 89027-	Transaction ID : 41008.E531
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)		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	96.92
<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 68 OF 90			
	<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. Arianni Valencia</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2014	
Mailing Address 6057 Charity Street			Amount of Each Disbursement this Period 1500.00	
City Las Vegas	State NV	Zip Code 89148-	Transaction ID : 40709.E289	
Purpose of Disbursement Consulting Grassroots		Category/ Type		
Candidate Name			CONSULTING GRASSROOTS	
Office Sought:	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. Shell Oil</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2014	
Mailing Address 910 Mesquite Boulevard			Amount of Each Disbursement this Period 57.00	
City Mesquite	State NV	Zip Code 89027-	Transaction ID : 41008.E529	
Purpose of Disbursement Travel		Category/ Type		
Candidate Name			TRAVEL	
Office Sought:	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. Costco</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 22 / 2014	
Mailing Address 801 South Pavilion Center Drive			Amount of Each Disbursement this Period 295.76	
City Las Vegas	State NV	Zip Code 89144-	Transaction ID : 40808.E378	
Purpose of Disbursement Chairs		Category/ Type		
Candidate Name			CHAIRS	
Office Sought:	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).....	1852.76
<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 69 OF 90			
	<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 Oil</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 08 / 2014
Mailing Address 910 Mesquite Boulevard			Amount of Each Disbursement this Period 16.00 <b>Transaction ID : 41008.E515</b>
City Mesquite	State NV	Zip Code 89027-	
Purpose of Disbursement Travel	Candidate Name		Category/ Type <b>TRAVEL</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:			

Full Name (Last, First, Middle Initial) <b>B. Loves Country Store</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 14 / 2014
Mailing Address 12501 Apex Great Basin Way			Amount of Each Disbursement this Period 90.00 <b>Transaction ID : 40808.E367</b>
City Las Vegas	State NV	Zip Code 89105-	
Purpose of Disbursement Travel	Candidate Name		Category/ Type <b>TRAVEL</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:			

Full Name (Last, First, Middle Initial) <b>c. Chevron</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 11 / 2014
Mailing Address 9991 West Charleston Boulevard			Amount of Each Disbursement this Period 40.00 <b>Transaction ID : 40919.E435</b>
City Las Vegas	State NV	Zip Code 89117-	
Purpose of Disbursement Travel	Candidate Name		Category/ Type <b>TRAVEL</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:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	146.00
<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 70 OF 90			
	<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 Oil</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 18 / 2014
Mailing Address 910 Mesquite Boulevard		Amount of Each Disbursement this Period 40.00
City Mesquite	State NV	
Zip Code 89027-	Purpose of Disbursement Travel	<b>Transaction ID : 40919.E443</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. Piryx Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 09 / 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	<b>Transaction ID : 40919.E472</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)	MERCHANT PROCESSING FEES
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Charlene Stamps</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2014
Mailing Address 375 Conestoga Way #4212		Amount of Each Disbursement this Period 1250.00
City Henderson	State NV	
Zip Code 89002-	Purpose of Disbursement Consulting Grassroots	<b>Transaction ID : 40709.E290</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)	CONSULTING GRASSROOTS
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1301.50
<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 71 OF 90	
	<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. Kent Alexander</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 01 / 2014
Mailing Address PO Box 157		Amount of Each Disbursement this Period 2500.00 <b>Transaction ID : 40905.E410</b>
City Saucier	State MS	
Zip Code 39574-	Purpose of Disbursement Consulting Grassroots	CONSULTING GRASSROOTS
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)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Shell Oil</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 16 / 2014
Mailing Address 910 Mesquite Boulevard		Amount of Each Disbursement this Period 65.00 <b>Transaction ID : 40808.E358</b>
City Mesquite	State NV	
Zip Code 89027-	Purpose of Disbursement Travel	TRAVEL
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)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Shell Oil</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 28 / 2014
Mailing Address 910 Mesquite Boulevard		Amount of Each Disbursement this Period 99.00 <b>Transaction ID : 40808.E362</b>
City Mesquite	State NV	
Zip Code 89027-	Purpose of Disbursement Travel	TRAVEL
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)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2664.00
<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 72 OF 90			
	<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 09 / 01 / 2014
Mailing Address 9500 West Flamingo Road #203			Amount of Each Disbursement this Period 58.06
City Las Vegas	State NV	Zip Code 89147-	Transaction ID : 40905.E402
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. Piryx Inc.</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 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-	Transaction ID : 40829.E397
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
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. Naka Sushi</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 17 / 2014
Mailing Address 8540 W Lake Mead Boulevard			Amount of Each Disbursement this Period 50.21
City Las Vegas	State NV	Zip Code 89128-	Transaction ID : 41008.E543
Purpose of Disbursement Meals	Category/ Type		
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		MEALS
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).....	165.77
<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 73 OF 90			
	<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. Arianni Valencia</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2014	
Mailing Address 6057 Charity Street			Amount of Each Disbursement this Period 1500.00	
City Las Vegas	State NV	Zip Code 89148-	Transaction ID : 40801.E349	
Purpose of Disbursement Consulting Grassroots		Category/ Type		
Candidate Name			CONSULTING GRASSROOTS	
Office Sought:	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. Southwest Airlines</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2014	
Mailing Address PO Box 36647-1CR			Amount of Each Disbursement this Period 432.00	
City Dallas	State TX	Zip Code 75235-	Transaction ID : 40808.E373	
Purpose of Disbursement Travel		Category/ Type		
Candidate Name			TRAVEL	
Office Sought:	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. Piryx Inc.</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 11 / 2014	
Mailing Address 144 2nd Street 1st Floor			Amount of Each Disbursement this Period 29.00	
City San Francisco	State CA	Zip Code 94105-	Transaction ID : 41008.E535	
Purpose of Disbursement Merchant Processing Fees		Category/ Type		
Candidate Name			MERCHANT PROCESSING FEES	
Office Sought:	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).....	1961.00
<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 74 OF 90			
	<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 08 / 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 Compliance Consulting	Transaction ID : 40801.E346	
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)	COMPLIANCE CONSULTING
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Chevron</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 25 / 2014
Mailing Address 9991 West Charleston Boulevard		Amount of Each Disbursement this Period 65.00
City Las Vegas	State NV	Zip Code 89117-
Purpose of Disbursement Travel	Transaction ID : 40919.E450	
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. Kent Alexander</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2014
Mailing Address PO Box 157		Amount of Each Disbursement this Period 14.99
City Saucier	State MS	Zip Code 39574-
Purpose of Disbursement Postage	Transaction ID : 40919.E465	
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1929.99
<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 75 OF 90			
	<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 08 / 01 / 2014
Mailing Address 9500 West Flamingo Road #203			Amount of Each Disbursement this Period 30.00
City Las Vegas	State NV	Zip Code 89147-	Transaction ID : 40801.E342
Purpose of Disbursement Advertisement		Category/ Type	
Candidate Name			ADVERTISEMENT
Office Sought:	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. Shell Oil</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 29 / 2014
Mailing Address 910 Mesquite Boulevard			Amount of Each Disbursement this Period 41.00
City Mesquite	State NV	Zip Code 89027-	Transaction ID : 40808.E364
Purpose of Disbursement Travel		Category/ Type	
Candidate Name			TRAVEL
Office Sought:	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. Chevron</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 24 / 2014
Mailing Address 9991 West Charleston Boulevard			Amount of Each Disbursement this Period 74.00
City Las Vegas	State NV	Zip Code 89117-	Transaction ID : 40808.E381
Purpose of Disbursement Travel		Category/ Type	
Candidate Name			TRAVEL
Office Sought:	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).....	145.00
<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 76 OF 90			
	<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 09 / 10 / 2014
Mailing Address 9991 West Charleston Boulevard		Amount of Each Disbursement this Period 48.00
City Las Vegas	State NV	
Zip Code 89117-	Purpose of Disbursement Travel	<b>Transaction ID : 41008.E534</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. Staples</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 28 / 2014
Mailing Address 6677 Las Vegas Boulevard South #10		Amount of Each Disbursement this Period 590.56
City Las Vegas	State NV	
Zip Code 89119-	Purpose of Disbursement Office Supplies	<b>Transaction ID : 40808.E384</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)	OFFICE SUPPLIES
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Chevron</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 11 / 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 : 40919.E434</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).....	716.56
<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 77 OF 90			
	<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. Arianni Valencia</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2014	
Mailing Address 6057 Charity Street			Amount of Each Disbursement this Period 1500.00	
City Las Vegas	State NV	Zip Code 89148-	Transaction ID : 40718.E328	
Purpose of Disbursement Consulting Grassroots		Category/ Type		
Candidate Name			CONSULTING GRASSROOTS	
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. Hyatt Hotels</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 18 / 2014	
Mailing Address 111 Country Club Drive			Amount of Each Disbursement this Period 350.30	
City Incline Village	State NV	Zip Code 89451-	Transaction ID : 40919.E451	
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. Alamo Sinclair</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 03 / 2014	
Mailing Address 51 Broadway Street			Amount of Each Disbursement this Period 75.00	
City Alamo	State NV	Zip Code 89001-	Transaction ID : 41008.E510	
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:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1925.30
<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 78 OF 90			
	<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 08 / 12 / 2014
Mailing Address 144 2nd Street 1st Floor		Amount of Each Disbursement this Period 28.75
City San Francisco	State CA	
Zip Code 94105-	Purpose of Disbursement Merchant Processing Fees	<b>Transaction ID : 40815.E390</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>MERCHANT PROCESSING FEES</b>
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Chevron</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 04 / 2014
Mailing Address 9991 West Charleston Boulevard		Amount of Each Disbursement this Period 101.00
City Las Vegas	State NV	
Zip Code 89117-	Purpose of Disbursement Travel	<b>Transaction ID : 40919.E422</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. Shell Oil</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2014
Mailing Address 910 Mesquite Boulevard		Amount of Each Disbursement this Period 78.00
City Mesquite	State NV	
Zip Code 89027-	Purpose of Disbursement Travel	<b>Transaction ID : 40808.E356</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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	207.75
<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 79 OF 90			
	<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. Loves Country Store</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 11 / 2014
Mailing Address 12501 Apex Great Basin Way			Amount of Each Disbursement this Period 75.00
City Las Vegas	State NV	Zip Code 89105-	
Purpose of Disbursement Travel		Category/ Type	<b>Transaction ID : 40919.E433</b>
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)		TRAVEL
State: District:			

Full Name (Last, First, Middle Initial) <b>B. Piryx Inc.</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 30 / 2014
Mailing Address 144 2nd Street 1st Floor			Amount of Each Disbursement this Period 299.00
City San Francisco	State CA	Zip Code 94105-	
Purpose of Disbursement Merchant Processing Fees		Category/ Type	<b>Transaction ID : 40905.E415</b>
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)		MERCHANT PROCESSING FEES
State: District:			

Full Name (Last, First, Middle Initial) <b>c. Shell Oil</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 10 / 2014
Mailing Address 910 Mesquite Boulevard			Amount of Each Disbursement this Period 72.00
City Mesquite	State NV	Zip Code 89027-	
Purpose of Disbursement Travel		Category/ Type	<b>Transaction ID : 40808.E357</b>
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)		TRAVEL
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	446.00
<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 80 OF 90			
	<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. South Point Hotel</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 07 / 2014
Mailing Address 9777 South Las Vegas Boulevard			Amount of Each Disbursement this Period 54.88
City Las Vegas	State NV	Zip Code 89183-	
Purpose of Disbursement Travel	Candidate Name		Transaction ID : 40919.E428
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 Oil</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 27 / 2014
Mailing Address 910 Mesquite Boulevard			Amount of Each Disbursement this Period 72.00
City Mesquite	State NV	Zip Code 89027-	
Purpose of Disbursement Travel	Candidate Name		Transaction ID : 40919.E446
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. Piryx Inc.</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 11 / 2014
Mailing Address 144 2nd Street 1st Floor			Amount of Each Disbursement this Period 5.75
City San Francisco	State CA	Zip Code 94105-	
Purpose of Disbursement Merchant Processing Fees	Candidate Name		Transaction ID : 40815.E389
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		MERCHANT PROCESSING FEES

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	132.63
<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 81 OF 90			
	<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 09 / 01 / 2014
Mailing Address PO Box 751271			Amount of Each Disbursement this Period 42.34
City Las Vegas	State NV	Zip Code 89136-	Transaction ID : 40905.E407
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 M M / D D / Y Y Y Y 09 / 01 / 2014
Mailing Address 9500 West Flamingo Road #203			Amount of Each Disbursement this Period 80.00
City Las Vegas	State NV	Zip Code 89147-	Transaction ID : 40905.E403
Purpose of Disbursement Meeting Registration Fees	Category/ Type		
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		MEETING REGISTRATION FEES
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. Atlantis Casino Resort</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 12 / 2014
Mailing Address 3800 South Virginia Street			Amount of Each Disbursement this Period 67.79
City Reno	State NV	Zip Code 89502-	Transaction ID : 40919.E436
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)		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	190.13
<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 82 OF 90	
	<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. D &amp; L Development</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 11 / 2014	
Mailing Address PO Box 92969			Amount of Each Disbursement this Period 1848.00	
City Los Angeles	State CA	Zip Code 90009-	Transaction ID : 40912.E420	
Purpose of Disbursement Rent		Category/ Type		
Candidate Name			RENT	
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. Alamo Sinclair</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2014	
Mailing Address 51 Broadway Street			Amount of Each Disbursement this Period 65.00	
City Alamo	State NV	Zip Code 89001-	Transaction ID : 41008.E544	
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. Residents Forum Sun City</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 26 / 2014	
Mailing Address 10716 Back Plains Drive			Amount of Each Disbursement this Period 250.00	
City Las Vegas	State NV	Zip Code 89134-	Transaction ID : 41008.E482	
Purpose of Disbursement Meeting Registration Fees		Category/ Type		
Candidate Name			MEETING REGISTRATION FEES	
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).....	2163.00
<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 83 OF 90			
	<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 Oil</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 29 / 2014
Mailing Address 910 Mesquite Boulevard		Amount of Each Disbursement this Period 21.00
City Mesquite	State NV	
Zip Code 89027-	Purpose of Disbursement Travel	Transaction ID : 40919.E448
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. Shell Oil</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 25 / 2014
Mailing Address 910 Mesquite Boulevard		Amount of Each Disbursement this Period 66.00
City Mesquite	State NV	
Zip Code 89027-	Purpose of Disbursement Travel	Transaction ID : 40919.E445
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. Election Impact Group</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 09 / 2014
Mailing Address 18 31st Street		Amount of Each Disbursement this Period 589.52
City Gulfport	State MS	
Zip Code 39507-	Purpose of Disbursement Printing & Postage	Transaction ID : 40912.E417
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 & POSTAGE
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	676.52
<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 84 OF 90			
	<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 Oil</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 29 / 2014
Mailing Address 910 Mesquite Boulevard			Amount of Each Disbursement this Period 96.00
City Mesquite	State NV	Zip Code 89027-	
Purpose of Disbursement Travel		Category/ Type	<b>Transaction ID : 41008.E533</b>
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)		TRAVEL
State: District:			

Full Name (Last, First, Middle Initial) <b>B. Shell Oil</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 11 / 2014
Mailing Address 910 Mesquite Boulevard			Amount of Each Disbursement this Period 63.00
City Mesquite	State NV	Zip Code 89027-	
Purpose of Disbursement Travel		Category/ Type	<b>Transaction ID : 41008.E524</b>
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)		TRAVEL
State: District:			

Full Name (Last, First, Middle Initial) <b>c. Shell Oil</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 10 / 2014
Mailing Address 910 Mesquite Boulevard			Amount of Each Disbursement this Period 77.00
City Mesquite	State NV	Zip Code 89027-	
Purpose of Disbursement Travel		Category/ Type	<b>Transaction ID : 41008.E523</b>
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)		TRAVEL
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	236.00
<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 85 OF 90			
	<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 Oil</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 24 / 2014
Mailing Address 910 Mesquite Boulevard		Amount of Each Disbursement this Period 74.00
City Mesquite	State NV	
Zip Code 89027-	Purpose of Disbursement Travel	<b>Transaction ID : 40808.E360</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. Shell Oil</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2014
Mailing Address 910 Mesquite Boulevard		Amount of Each Disbursement this Period 67.00
City Mesquite	State NV	
Zip Code 89027-	Purpose of Disbursement Travel	<b>Transaction ID : 40808.E354</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. Piryx Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 14 / 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	<b>Transaction ID : 40815.E392</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)	MERCHANT PROCESSING FEES
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	198.50
<b>TOTAL</b> This Period (last page this line number only).....	80482.64

**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 90			
	<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)  
**Crescent Hardy for Congress**

Full Name (Last, First, Middle Initial) <b>A. Diamond H Ranch LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 10 / 2014		
Mailing Address 2958 South Old Highway 91			Amount of Each Disbursement this Period 2200.00		
City New Harmony	State UT	Zip Code 84757-	Transaction ID : 40912.E419		
Purpose of Disbursement Refund of Contribution		Category/ Type 010			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" 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:	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.</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:	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).....	2200.00
<b>TOTAL</b> This Period (last page this line number only).....	2200.00

**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 87 OF 90	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input checked="" 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. Amodei For Nevada</b>		Date of Disbursement M M / D D / Y Y Y Y <b>09 / 30 / 2014</b>
Mailing Address <b>503 North Division Street</b>		Amount of Each Disbursement this Period <b>1000.00</b> <b>Transaction ID : 41015.E549</b>
City <b>Carson City</b> State <b>NV</b> Zip Code <b>89703-</b>	Purpose of Disbursement <b>Refund of Contribution</b> Category/Type <b>010</b>	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <b>2014</b> <input type="checkbox"/> Primary <input checked="" 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>1000.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	<b>1000.00</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)

Transaction ID : LS40627.C408

Crescent Hardy for Congress

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

Crescent Hardy

Election: 2014

Primary  
 General  
 Other (specify) ▼

Mailing Address  
PO Box 753941

City State ZIP Code  
Las Vegas NV 89136-

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period  
1406.00 0.00 1406.00

### TERMS

Date Incurred Date Due Interest Rate Secured:  
06 / 09 / 2014 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)..... ▶ 1406.00  
**TOTALS** This Period (last page in this line only)..... ▶ 1406.00

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**

NAME OF COMMITTEE (In Full)

**Crescent Hardy for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Red Rock Strategies</b>		Nature of Debt (Purpose): Advertisement
Mailing Address 9500 West Flamingo Road #203		
City	State	Zip Code
Las Vegas	NV	89147-

Outstanding Balance Beginning This Period	<b>Transaction ID : LS40709.E324</b>	
<input type="text" value="78.86"/>		
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="78.86"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Red Rock Strategies</b>		Nature of Debt (Purpose): Consulting Management
Mailing Address 9500 West Flamingo Road #203		
City	State	Zip Code
Las Vegas	NV	89147-

Outstanding Balance Beginning This Period	<b>Transaction ID : LS40709.E323</b>	
<input type="text" value="19500.00"/>		
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="19500.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>FBM Inc.</b>		Nature of Debt (Purpose): Consulting Fundraising
Mailing Address 9117 Vintage Wine Avenue		
City	State	Zip Code
Las Vegas	NV	89148-

Outstanding Balance Beginning This Period	<b>Transaction ID : LS40709.E325</b>	
<input type="text" value="2500.00"/>		
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="2500.00"/>

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	<input type="text" value="22078.86"/>
2) <b>TOTALS</b> This Period (last page this line number only) .....	<input type="text"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	<input type="text"/>
4) <b>ADD 2) and 3)</b> 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)  
**Crescent Hardy for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Prosper Group Corporation</b>	Nature of Debt (Purpose): Email Services
Mailing Address 435 East Main Street #250	
City State Zip Code Greenwood IN 46143-	

Outstanding Balance Beginning This Period 47.23	<b>Transaction ID : LS40709.E292</b>	
Amount Incurred This Period 0.00	Payment This Period 47.23	Outstanding Balance at Close of This Period 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>King Strategic Communications Inc.</b>	Nature of Debt (Purpose): Printing & Postage
Mailing Address 750 Cross Pointe Boulevard #N	
City State Zip Code Columbus OH 43230-	

Outstanding Balance Beginning This Period 9326.85	<b>Transaction ID : LS40709.E321</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 9326.85

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>NorthStar Campaign Systems Inc.</b>	Nature of Debt (Purpose): Telephone Svcs
Mailing Address 11421 Davenport Street	
City State Zip Code Omaha NE 68154-	

Outstanding Balance Beginning This Period 1020.52	<b>Transaction ID : LS40926.E475</b>	
Amount Incurred This Period 0.00	Payment This Period 1020.52	Outstanding Balance at Close of This Period 0.00

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	9326.85
2) <b>TOTALS</b> This Period (last page this line number only) .....	31405.71
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	1406.00
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	32811.71