

# 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

Horsford for Congress

ADDRESS (number and street) 6100 Elton Ave, Suite 1000

Check if different than previously reported. (ACC)

Las Vegas

NV

89107

2. **FEC IDENTIFICATION NUMBER**

C C00504613

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  
05 / 22 / 2014

through

M M / D D / Y Y Y Y  
06 / 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 Mr. Michael Kern

Signature of Treasurer Mr. Michael Kern

[Electronically Filed]

Date

M M / D D / Y Y Y Y  
07 / 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

FEC FORM 3  
(Revised 02/2003)

**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name  
**Horsford 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))....	170361.65	1146349.96
(b) Total Contribution Refunds (from Line 20(d)) .....	0.00	4195.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	170361.65	1142154.96
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	45591.36	757816.27
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	45591.36	757816.27
8. Cash on Hand at Close of Reporting Period (from Line 27).....	404503.94	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	454.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

**For further information contact:**

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

**Horsford 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).....	72482.00	446615.74
(ii) Unitemized.....	4879.65	21532.62
(iii) TOTAL of contributions from individuals ▶	77361.65	468148.36
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	93000.00	678201.60
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	170361.65	1146349.96
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>	0.00	0.00
<b>13. LOANS:</b>		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....</b>	0.00	0.00
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.).....</b>	14.29	874.29
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶</b>	170375.94	1147224.25

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	45591.36	757816.27
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	4195.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	4195.00
21. OTHER DISBURSEMENTS .....	0.00	14755.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	45591.36	776766.27

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	279719.36
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	170375.94
25. SUBTOTAL (add Line 23 and Line 24).....	450095.30
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	45591.36
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	404503.94

**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 93
	<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)  
**Horsford for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Sherif Abdou**

Mailing Address 2604 Ragusa Ct

City Henderson State NV Zip Code 89052-4107

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

Name of Employer HealthCare Partners Nevada Occupation CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2750.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : VN8PPCRR7F7**

Amount of Each Receipt this Period  
1750.00

**B.** Full Name (Last, First, Middle Initial)  
**Iona Abram**

Mailing Address 37583 Burton Dr

City Farmington Hills State MI Zip Code 48331-3064

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  
275.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 28 / 2014

**Transaction ID : VN8PPCRJWM5**

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
**Francisco Aguilar**

Mailing Address 200 Hoover Ave  
Unit 2001

City Las Vegas State NV Zip Code 89101-6887

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

Name of Employer Agassi Enterprises Occupation Lawyer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
350.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : VN8PPCRSQH5**

Amount of Each Receipt this Period  
100.00

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

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

1950.00

**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 93
	<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)  
**Horsford for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Frank Aguilar**

Mailing Address 11543 Trevi Fountain Ave

City Las Vegas State NV Zip Code 89138-3011

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

Name of Employer Tricor Occupation 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 Y Y  
 05 / 27 / 2014

**Transaction ID : VN8PPCNWAK9**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Kai Anderson**

Mailing Address 4622 Asbury PI NW

City Washington State DC Zip Code 20016-4325

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

Name of Employer Cassidy & Associates Occupation Lobbyist

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 26 / 2014

**Transaction ID : VN8PPCRBW09**

Amount of Each Receipt this Period  
2000.00

\* Earmarked Contribution: See Below

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

Mailing Address 14 Arrow St

City Cambridge State MA Zip Code 02138-5106

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

Name of Employer Conduit total listed in Agg. field Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3447.15

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 26 / 2014

**Transaction ID : VN8PPCRBW09E**

Amount of Each Receipt this Period  
2000.00

**[MEMO ITEM]**  
 Note: Above Contribution earmarked through this organization.

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

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

3000.00

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

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

FOR LINE NUMBER: PAGE 7 OF 93  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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

**A.** Full Name (Last, First, Middle Initial)  
**Andre Agassi Trust**

Mailing Address 3883 Howard Hughes Pkwy  
Ste 800

City Las Vegas State NV Zip Code 89169-0965

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 Y Y  
 06 / 30 / 2014

**Transaction ID : VN8PPCSPG46**

Amount of Each Receipt this Period  
1000.00

PARTNERSHIP--partners below if itemized

**B.** Full Name (Last, First, Middle Initial)  
**Andre Agassi**

Mailing Address 3883 Howard Hughes Pkwy  
Ste 800

City Las Vegas State NV Zip Code 89169-0965

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

Name of Employer Occupation  
Agassi Enterprises Inc. Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : VN8PPCSQ9A7**

Amount of Each Receipt this Period  
1000.00

**[MEMO ITEM]**  
\*

**C.** Full Name (Last, First, Middle Initial)  
**Larry Anspach**

Mailing Address 1509 Golden Oak Dr

City Las Vegas State NV Zip Code 89117-1451

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

Name of Employer Occupation  
American Cemetery/Mortuary Consultants Consultant

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
850.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 27 / 2014

**Transaction ID : VN8PPCRJ2Z6**

Amount of Each Receipt this Period  
500.00

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

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

1500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 93
	<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)  
**Horsford for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Loretta Arrington**

Mailing Address **PO Box 371126**

City **Las Vegas** State **NV** Zip Code **89137-1126**

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

Name of Employer **Arrington & Associates** Occupation **Real Estate Broker**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1400.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 10 / 2014**

**Transaction ID : VN8PPCQ6F92**

Amount of Each Receipt this Period  
**200.00**

**B.** Full Name (Last, First, Middle Initial)  
**Deborah Ashford**

Mailing Address **555 13th St NW**

City **Washington** State **DC** Zip Code **20004-1109**

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

Name of Employer **Hogan Lovells US LLP** Occupation **Attorney**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**300.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 02 / 2014**

**Transaction ID : VN8PPCPS3S1**

Amount of Each Receipt this Period  
**300.00**

\* Earmarked Contribution: See Below

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

Mailing Address **14 Arrow St**

City **Cambridge** State **MA** Zip Code **02138-5106**

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

Name of Employer \_\_\_\_\_ Occupation **Conduit total listed in Agg. field**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**3447.15**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 02 / 2014**

**Transaction ID : VN8PPCPS3S1E**

Amount of Each Receipt this Period  
**300.00**

**[MEMO ITEM]**  
 Note: Above Contribution earmarked through this organization.

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

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

**500.00**



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 93
	<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)  
**Horsford for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Amy Ayoub**

Mailing Address 2955 Pinehurst Dr

City Las Vegas State NV Zip Code 89109-1524

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

Name of Employer Ayoub & Associates Occupation Consultant

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 04 / 2014**

**Transaction ID : VN8PPCPNGC4**

Amount of Each Receipt this Period  
**250.00**

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

Mailing Address 811 S 7th St

City Las Vegas State NV Zip Code 89101-6909

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

Name of Employer Michael Banks Dentistry Occupation Dentist

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 30 / 2014**

**Transaction ID : VN8PPCRT880**

Amount of Each Receipt this Period  
**500.00**

**C.** Full Name (Last, First, Middle Initial)  
**Claudia Bernstein**

Mailing Address 4 Vintage Valley Dr

City Las Vegas State NV Zip Code 89141-6060

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

Name of Employer Explosive Media Occupation Public Relations

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 28 / 2014**

**Transaction ID : VN8PPCRS1K4**

Amount of Each Receipt this Period  
**500.00**

**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 10 OF 93
	<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)  
**Horsford for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Ondra Berry**

Mailing Address 120 Mystic Mountain Dr

City Sparks	State NV	Zip Code 89441-6290
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FEC ID number of contributing federal political committee. **C**

Name of Employer MGM Resorts International	Occupation Executive
---	-------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
550.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 25 / 2014

**Transaction ID : VN8PPCR6ZV9**

Amount of Each Receipt this Period  
50.00

**B.** Full Name (Last, First, Middle Initial)  
**Kenneth A. Brunk**

Mailing Address 7215 S Chapparral Cir E

City Centennial	State CO	Zip Code 80016-2131
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FEC ID number of contributing federal political committee. **C**

Name of Employer Midway Gold Corp	Occupation CEO
--------------------------------------	-------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 09 / 2014

**Transaction ID : VN8PPCPY9C0**

Amount of Each Receipt this Period  
1500.00

**C.** Full Name (Last, First, Middle Initial)  
**Kevin T. Burke**

Mailing Address 385 Pilot Rd

City Las Vegas	State NV	Zip Code 89119-3525
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FEC ID number of contributing federal political committee. **C**

Name of Employer Burke Construction Group Inc.	Occupation General Contractor
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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  
 06 / 30 / 2014

**Transaction ID : VN8PPCRSWS8**

Amount of Each Receipt this Period  
1000.00

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

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

2550.00

**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 93
	<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)  
**Horsford for Congress**

Full Name (Last, First, Middle Initial) <b>Tyree Carr</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 30 / 2014
Mailing Address 2800 N Tenaya Way Ste 102		<b>Transaction ID : VN8PPCP5T97</b>
City Las Vegas	State NV	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Tyree Carr, M.D. Ltd.	Occupation Physician	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 300.00	

Full Name (Last, First, Middle Initial) <b>Tyree Carr</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 30 / 2014
Mailing Address 2800 N Tenaya Way Ste 102		<b>Transaction ID : VN8PPCRNHF3</b>
City Las Vegas	State NV	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Tyree Carr, M.D. Ltd.	Occupation Physician	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 400.00	

Full Name (Last, First, Middle Initial) <b>Gwen Chaney-Braimoh</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 28 / 2014
Mailing Address 1911 Stella Lake St		<b>Transaction ID : VN8PPCRRHC5</b>
City Las Vegas	State NV	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Expertise Cosmetology Institute	Occupation Director	
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).....	450.00
<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 12 OF 93
	<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)  
**Horsford for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Dwayne Chesnut**

Mailing Address **PO Box 35500**

City **Las Vegas** State **NV** Zip Code **89133-5500**

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  
**1300.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 26 / 2014**

**Transaction ID : VN8PPCRBAZ6**

Amount of Each Receipt this Period  
**1000.00**

**B.** Full Name (Last, First, Middle Initial)  
**Jeffery Clemons**

Mailing Address **1140 N Town Center Dr Ste 350**

City **Las Vegas** State **NV** Zip Code **89144-0501**

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

Name of Employer **MassMutual Financial** Occupation **GM**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2000.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 06 / 2014**

**Transaction ID : VN8PPCPTJ02**

Amount of Each Receipt this Period  
**500.00**

**C.** Full Name (Last, First, Middle Initial)  
**Jeffery Clemons**

Mailing Address **1140 N Town Center Dr Ste 350**

City **Las Vegas** State **NV** Zip Code **89144-0501**

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

Name of Employer **MassMutual Financial** Occupation **GM**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2500.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 28 / 2014**

**Transaction ID : VN8PPCRK5F4**

Amount of Each Receipt this Period  
**500.00**

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

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

**2000.00**

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

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

FOR LINE NUMBER: (check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15  
 PAGE 13 OF 93

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

**A.** Full Name (Last, First, Middle Initial)  
**Uri Clinton**

Mailing Address 3025 Rosanna St

City Las Vegas State NV Zip Code 89117-3141

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

Name of Employer Baha Mar Ltd Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 2750.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 27 / 2014

**Transaction ID : VN8PPCRJ820**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Cogburn Law Offices LLC**

Mailing Address 2879 Saint Rose Pkwy Ste 200

City Henderson State NV Zip Code 89052-4808

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : VN8PPCSPG13**

Amount of Each Receipt this Period  
 500.00

LLC - Members below if itemized. Permissible funds.

**C.** Full Name (Last, First, Middle Initial)  
**Jamie S. Cogburn**

Mailing Address 2879 Saint Rose Pkwy Ste 200

City Henderson State NV Zip Code 89052-4808

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

Name of Employer Cogburn Law Offices Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : VN8PPCSQA92**

Amount of Each Receipt this Period  
 500.00

**[MEMO ITEM]**  
 \*

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

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

1500.00

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

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

FOR LINE NUMBER: (check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15  
 PAGE 14 OF 93

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

**A.** Full Name (Last, First, Middle Initial)  
**Art Collins**

Mailing Address 3911 Lorcom Ln

City State Zip Code  
 Arlington VA 22207-5129

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

Name of Employer Occupation  
 theGROUP Public Affairs Strategist

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  
 05 / 22 / 2014

**Transaction ID : VN8PPCNNJM9**

Amount of Each Receipt this Period  
 1500.00

**B.** Full Name (Last, First, Middle Initial)  
**Lorenzo Creighton**

Mailing Address 157 Fleet St  
 Ph 9

City State Zip Code  
 Oxon Hill MD 20745-1596

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

Name of Employer Occupation  
 MGM Grand 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 Y Y  
 06 / 13 / 2014

**Transaction ID : VN8PPCQPV46**

Amount of Each Receipt this Period  
 1000.00

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

Mailing Address 1881 N Nash St  
 Unit 707

City State Zip Code  
 Arlington VA 22209-1565

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

Name of Employer Occupation  
 Cassidy and Associates Consultant

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 18 / 2014

**Transaction ID : VN8PPCQQD83**

Amount of Each Receipt this Period  
 500.00

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

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

3000.00

**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 93
	<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)  
**Horsford for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Douglas Dirks**

Mailing Address 625 Oxbow Ct

City	State	Zip Code
Reno	NV	89511-6719

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

Name of Employer	Occupation
Employer's Holdings Inc	Chief Executive Officer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
750.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 21 / 2014

**Transaction ID : VN8PPCR1Y21**

Amount of Each Receipt this Period  
750.00

**B.** Full Name (Last, First, Middle Initial)  
**Pamela Egan**

Mailing Address 672 Coffee Cherries Ct

City	State	Zip Code
Henderson	NV	89052-4819

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

Name of Employer	Occupation
Nevada Health CO-OP	Chief Development Officer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 28 / 2014

**Transaction ID : VN8PPCRS288**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 10908 Willow Heights Dr

City	State	Zip Code
Las Vegas	NV	89135-1707

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

Name of Employer	Occupation
Eglet Wall	Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : VN8PPCS0WY2**

Amount of Each Receipt this Period  
1000.00

**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 16 OF 93
	<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)  
**Horsford for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Rodney Emery**

Mailing Address 10001 Windstream Drive #708

City Columbia State MD Zip Code 21044

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

Name of Employer The Madison Group Occupation Consultant

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  
 06 / 30 / 2014

**Transaction ID : VN8PPCRTB37**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Marcus Faust**

Mailing Address 3008 Apple Brook Ln

City Oakton State VA Zip Code 22124-1842

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

Name of Employer Marcus G. Faust, P.C. Occupation Attorney at Law

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : VN8PPCRSC07**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 9103 Alta Dr  
Unit 1402

City Las Vegas State NV Zip Code 89145-8559

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

Name of Employer A.G. Spanos Company Occupation Vice President

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  
 06 / 28 / 2014

**Transaction ID : VN8PPCRS2Z0**

Amount of Each Receipt this Period  
250.00

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

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

1000.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 93
	<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)  
**Horsford for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Findlay Automotive Group NV LLC**

Mailing Address 7733 Eastgate Rd

City Henderson State NV Zip Code 89011-4039

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  
 06 / 30 / 2014

**Transaction ID : VN8PPCSB265**

Amount of Each Receipt this Period  
 1000.00

LLC - Members below if itemized. Permissible funds.

**B.** Full Name (Last, First, Middle Initial)  
**Jon Richard Abajian**

Mailing Address 7733 Eastgate Rd

City Henderson State NV Zip Code 89011-4039

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

Name of Employer Occupation  
 FT Insurance, LLC Manager

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : VN8PPCSQF42**

Amount of Each Receipt this Period  
 1000.00

**[MEMO ITEM]**  
\*

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

Mailing Address 8321 Spinnaker Cove Dr

City Las Vegas State NV Zip Code 89128-7726

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

Name of Employer Occupation  
 University of Nevada Reno Professor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 28 / 2014

**Transaction ID : VN8PPCRKQ03**

Amount of Each Receipt this Period  
 250.00

**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 18 OF 93
	<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)  
**Horsford for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Aaron D. Ford**

Mailing Address 8485 W Sunset Rd  
Ste 106

City Las Vegas State NV Zip Code 89113-2251

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

Name of Employer Snell and Wilmer Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : VN8PPCRTA02**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Harrison Gale**

Mailing Address 6722 N Rainbow Blvd

City Las Vegas State NV Zip Code 89131-3100

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

Name of Employer Student Occupation Student

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 28 / 2014

**Transaction ID : VN8PPCRS3C3**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**Jane F Gale**

Mailing Address 6722 N Rainbow Blvd

City Las Vegas State NV Zip Code 89131-3100

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

Name of Employer Las Vegas Sun Occupation Columnist

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 28 / 2014

**Transaction ID : VN8PPCRS3M6**

Amount of Each Receipt this Period  
1000.00

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

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

2500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 93
	<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)  
**Horsford for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**William Gialketsis Jr.**

Mailing Address 200 Satin Mist Ct

City Las Vegas State NV Zip Code 89144-4319

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

Name of Employer Bonanza Beverage Company Occupation Vice President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : VN8PPCS1D51**

Amount of Each Receipt this Period  
**500.00**

**B.** Full Name (Last, First, Middle Initial)  
**Kathleen Gillespie**

Mailing Address 18 Starbrook Dr

City Henderson State NV Zip Code 89052-6628

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

Name of Employer A&B Printing Occupation Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **4363.72**

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 10 / 2014

**Transaction ID : VN8PPCQ6F35**

Amount of Each Receipt this Period  
**2500.00**

**C.** Full Name (Last, First, Middle Initial)  
**Gerald Gordon**

Mailing Address 1728 Tangiers Dr

City Henderson State NV Zip Code 89012-7238

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

Name of Employer Gordon Silver Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 27 / 2014

**Transaction ID : VN8PPCRJ531**

Amount of Each Receipt this Period  
**500.00**

**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)	PAGE 20 OF 93
	<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)  
**Horsford for Congress**

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

Mailing Address 13232 Palmers Creek Ter

City State Zip Code  
Lakewood Ranch FL 34202-5009

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

Name of Employer Occupation  
Grain Management LLC Managing Partner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 22 / 2014

**Transaction ID : VN8PPCNP2P9**

Amount of Each Receipt this Period  
2600.00

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

Mailing Address 13232 Palmers Creek Ter

City State Zip Code  
Lakewood Ranch FL 34202-5009

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

Name of Employer Occupation  
Grain Management LLC Managing Partner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 22 / 2014

**Transaction ID : VN8PPCNT9T8**

Amount of Each Receipt this Period  
2400.00

**C.** Full Name (Last, First, Middle Initial)  
**Stephen Greathouse**

Mailing Address 1601 Enclave Ct

City State Zip Code  
Las Vegas NV 89134-6195

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  
4600.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 03 / 2014

**Transaction ID : VN8PPCPGZ52**

Amount of Each Receipt this Period  
1000.00

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

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

6000.00

**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 93
	<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)  
**Horsford for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Lettie Green**

Mailing Address 10553 Shoalhaven Dr

City Las Vegas State NV Zip Code 89134-7425

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  
1291.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 28 / 2014

**Transaction ID : VN8PPCRSCA6**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 4527 Whelk Pl

City North Las Vegas State NV Zip Code 89031-2264

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  
570.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 05 / 2014

**Transaction ID : VN8PPCPS2A3**

Amount of Each Receipt this Period  
10.00

\* Earmarked Contribution: See Below

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

Mailing Address 14 Arrow St

City Cambridge State MA Zip Code 02138-5106

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

Name of Employer Occupation Conduit total listed in Agg. field

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3447.15

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 05 / 2014

**Transaction ID : VN8PPCPS2A3E**

Amount of Each Receipt this Period  
10.00

**[MEMO ITEM]**  
 Note: Above Contribution earmarked through this organization.

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

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

510.00

**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 93
	<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)  
**Horsford for Congress**

Full Name (Last, First, Middle Initial) <b>Thelma Hall</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 26 / 2014
Mailing Address 4527 Whelk PI		<b>Transaction ID : VN8PPCRBRM0</b>
City North Las Vegas	State NV	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
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 670.00	

Full Name (Last, First, Middle Initial) <b>Thelma Hall</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 30 / 2014
Mailing Address 4527 Whelk PI		<b>Transaction ID : VN8PPCRTDF7</b>
City North Las Vegas	State NV	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
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 695.00	

Full Name (Last, First, Middle Initial) <b>Thelma Hall</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 30 / 2014
Mailing Address 4527 Whelk PI		<b>Transaction ID : VN8PPCRTKS6</b>
City North Las Vegas	State NV	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5.00
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 695.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	125.00
<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 23 OF 93
	<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)  
**Horsford for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Dan Hart**

Mailing Address 1990 Freeman Ct

City Henderson State NV Zip Code 89014-4555

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

Name of Employer Dan Hart & Associates Occupation Consultant

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 29 / 2014

**Transaction ID : VN8PPCRMT48**

Amount of Each Receipt this Period  
 500.00

**B.** Full Name (Last, First, Middle Initial)  
**Jeneane M Harter**

Mailing Address 1690 Wesley Dr

City Reno State NV Zip Code 89503-2333

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

Name of Employer Sustainable Nevada Occupation Executive Director

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : VN8PPCRSAP7**

Amount of Each Receipt this Period  
 500.00

**C.** Full Name (Last, First, Middle Initial)  
**Elaine Hurd**

Mailing Address 1520 Branding Iron Trl

City Mesquite State NV Zip Code 89034-1113

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

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : VN8PPCRQ6D0**

Amount of Each Receipt this Period  
 500.00

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

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

1500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 93
	<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)  
**Horsford for Congress**

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

Mailing Address 2578 Red Arrow Dr

City	State	Zip Code
Las Vegas	NV	89135-1627

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

Name of Employer	Occupation
MGM Resorts International	Attorney at Law

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 2250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : VN8PPCRT864**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 750.00

**B.** Full Name (Last, First, Middle Initial)  
**Ronald Jensen**

Mailing Address 767 Los Feliz St

City	State	Zip Code
Las Vegas	NV	89110-4213

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  
 \_\_\_\_\_ 451.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 28 / 2014

**Transaction ID : VN8PPCRS3V1**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 100.00

**C.** Full Name (Last, First, Middle Initial)  
**Megan Jones**

Mailing Address 7483 Sun Summit Ct

City	State	Zip Code
Las Vegas	NV	89178-8808

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

Name of Employer	Occupation
Hilltop Public Solutions	Consultant

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 750.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : VN8PPCRN8Y3**

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

**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 25 OF 93
	<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)  
**Horsford for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Nathan Jones**

Mailing Address 10075 E Desert Canyon Dr  
Ste A

City State Zip Code  
Reno NV 89511-5361

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

Name of Employer Occupation  
WJ Investments LLC Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5100.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : VN8PPCRS519**

Amount of Each Receipt this Period  
2600.00

**B.** Full Name (Last, First, Middle Initial)  
**Zia U. Khan**

Mailing Address 30 Promontory Ridge Dr  
Ste A-100

City State Zip Code  
Las Vegas NV 89135-1671

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

Name of Employer Occupation  
Desert Cardiovascular Physician

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : VN8PPCRSW01**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 5 Brookvale Rd

City State Zip Code  
Kinnelon NJ 07405-2275

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

Name of Employer Occupation  
Tiffany & Co. Executive

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 05 / 2014

**Transaction ID : VN8PPCPS287**

Amount of Each Receipt this Period  
1000.00

\* Earmarked Contribution: See Below

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

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

4100.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 93
	<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)  
**Horsford for Congress**

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

Mailing Address 14 Arrow St

City Cambridge State MA Zip Code 02138-5106

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

Name of Employer Occupation  
Conduit total listed in Agg. field

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**3447.15**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 05 / 2014**

**Transaction ID : VN8PPCPS287E**

Amount of Each Receipt this Period  
**1000.00**

**[MEMO ITEM]**  
 Note: Above Contribution earmarked through this organization.

**B.** Full Name (Last, First, Middle Initial)  
**Alfred Liggins**

Mailing Address 3227 Idaho Ave NW

City Washington State DC Zip Code 20016-3720

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

Name of Employer Occupation  
Radio One 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  
**06 / 09 / 2014**

**Transaction ID : VN8PPCPZSN5**

Amount of Each Receipt this Period  
**1000.00**

**C.** Full Name (Last, First, Middle Initial)  
**Charles Litt**

Mailing Address 2200 Point Rock Ln

City Las Vegas State NV Zip Code 89134-6742

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

Name of Employer Occupation  
Fenton Grant Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2500.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 30 / 2014**

**Transaction ID : VN8PPCRS4F9**

Amount of Each Receipt this Period  
**1000.00**

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

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

**2000.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 93
	<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)  
**Horsford for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**James T Mahoney**

Mailing Address 243 Wetzell Hollow Ln

City Maurertown	State VA	Zip Code 22644-2031
--------------------	-------------	------------------------

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

Name of Employer Tim Mahoney, Inc.	Occupation Philanthropist
---------------------------------------	------------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 23 / 2014

**Transaction ID : VN8PPCR1Y88**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**Juliet McCarthy**

Mailing Address 9805 Camden Rose Ct

City Las Vegas	State NV	Zip Code 89134-5906
-------------------	-------------	------------------------

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

Name of Employer Homemaker	Occupation Homemaker
-------------------------------	-------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
750.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 28 / 2014

**Transaction ID : VN8PPCRS4H5**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**Juliet McCarthy**

Mailing Address 9805 Camden Rose Ct

City Las Vegas	State NV	Zip Code 89134-5906
-------------------	-------------	------------------------

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

Name of Employer Homemaker	Occupation Homemaker
-------------------------------	-------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
750.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 28 / 2014

**Transaction ID : VN8PPCTDFV8**

Amount of Each Receipt this Period  
250.00

\* In-Kind: Event Expense- Photography

**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 28 OF 93
	<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)  
**Horsford for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**D Glenn McKay**

Mailing Address 20 Vintage Valley Dr

City State Zip Code  
Las Vegas NV 89141-6060

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

Name of Employer Occupation  
Selling Source, LLC President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 29 / 2014

**Transaction ID : VN8PPCP4DQ2**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**James Mitchell**

Mailing Address 1299 Pennsylvania Ave NW  
WEST

City State Zip Code  
Washington DC 20004-2414

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

Name of Employer Occupation  
General Electric Company Manager External Affairs & Technology

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 10 / 2014

**Transaction ID : VN8PPCQCZE5**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**Dr Aurangzeb Nagy Jr.**

Mailing Address 128 N Ring Dove Dr

City State Zip Code  
Las Vegas NV 89144-4323

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

Name of Employer Occupation  
University of Neurosciences, LLC Neurosurgeon

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3000.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 04 / 2014

**Transaction ID : VN8PPCPNH44**

Amount of Each Receipt this Period  
100.00

**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 29 OF 93
	<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)  
**Horsford for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Dr Aurangzeb Nagy Jr.**

Mailing Address 128 N Ring Dove Dr

City Las Vegas State NV Zip Code 89144-4323

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

Name of Employer University of Neurosciences, LLC Occupation Neurosurgeon

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 04 / 2014

**Transaction ID : VN8PPCPNH60**

Amount of Each Receipt this Period  
400.00

**B.** Full Name (Last, First, Middle Initial)  
**Dr Aurangzeb Nagy Jr.**

Mailing Address 128 N Ring Dove Dr

City Las Vegas State NV Zip Code 89144-4323

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

Name of Employer University of Neurosciences, LLC Occupation Neurosurgeon

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : VN8PPCSHTE6**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Ann Nelson**

Mailing Address 7413 Franktown Rd

City Washoe Valley State NV Zip Code 89704-9525

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

Name of Employer Employers Insurance Occupation Executive Vice President, Corporate an

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 20 / 2014

**Transaction ID : VN8PPCR1WQ3**

Amount of Each Receipt this Period  
250.00

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

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

1650.00

**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 30 OF 93
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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

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

Mailing Address 1 Elm Ct

City Reno State NV Zip Code 89501-1712

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

Name of Employer Peter C. Neumann, LLC 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  
**06 / 04 / 2014**

**Transaction ID : VN8PPCPJ6K5**

Amount of Each Receipt this Period  
**250.00**

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

Mailing Address 8026 Brighton Summit Ave

City Las Vegas State NV Zip Code 89131-1559

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

Name of Employer Gametech International, Inc. Occupation Software Engineer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**05 / 31 / 2014**

**Transaction ID : VN8PPCPAH95**

Amount of Each Receipt this Period  
**50.00**

**C.** Full Name (Last, First, Middle Initial)  
**Brian O'Donnell**

Mailing Address 931 E 5th Ave

City Durango State CO Zip Code 81301-5320

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

Name of Employer Conservation Lands Foundation Occupation Executive Director

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 19 / 2014**

**Transaction ID : VN8PPCQSCR4**

Amount of Each Receipt this Period  
**500.00**

**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 31 OF 93
	<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)  
**Horsford for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Vicky Palivos**

Mailing Address 2920 Carmelo Dr

City Henderson State NV Zip Code 89052-4073

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

Name of Employer Better Home & Gardens Real Estate Occupation Realtor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **3600.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 28 / 2014**

**Transaction ID : VN8PPCRS4J3**

Amount of Each Receipt this Period  
**1000.00**

**B.** Full Name (Last, First, Middle Initial)  
**Dimitris P Papakosmas**

Mailing Address 9484 S Eastern Ave # 8

City Las Vegas State NV Zip Code 89123-3987

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

Name of Employer Dimitris P. Papakosmas Occupation Real Estate Investment

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 28 / 2014**

**Transaction ID : VN8PPCRS8F6**

Amount of Each Receipt this Period  
**1000.00**

**C.** Full Name (Last, First, Middle Initial)  
**Lawrence H. Parks II**

Mailing Address 1661 Crescent PI NW Apt 508

City Washington State DC Zip Code 20009-4049

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

Name of Employer Federal Home Loan Bank/San Francisco Occupation Senior Vice President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 20 / 2014**

**Transaction ID : VN8PPCQZYW1**

Amount of Each Receipt this Period  
**500.00**

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

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

**2500.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 93
	<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)  
**Horsford for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Richard Perkins**

Mailing Address 788 Bolle Way

City Henderson State NV Zip Code 89012-7201

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

Name of Employer The Perkins Company Occupation Consultant

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  
 06 / 04 / 2014

**Transaction ID : VN8PPCPNG83**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Tamara Peterson**

Mailing Address 8205 Gillette St

City Las Vegas State NV Zip Code 89117-9026

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

Name of Employer Brownstein Hyatt Farber Schreck Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : VN8PPCRT2Q5**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**Xavier Peterson**

Mailing Address 10 Commerce Center Dr D-46

City Henderson State NV Zip Code 89014-2335

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

Name of Employer QI Security Occupation Security

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3441.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : VN8PPCRSGZ1**

Amount of Each Receipt this Period  
500.00

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

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

1000.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 93
	<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)  
**Horsford for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Paula Petruso**

Mailing Address 2124 Sunset Vista Ave

City Henderson State NV Zip Code 89052-2304

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

Name of Employer Paula W. Petruso, Registered Parliamen Occupation Parilamentarian

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : VN8PPCRRE12**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Diane Pollard**

Mailing Address 1860 Jasmine Joy Ct

City Las Vegas State NV Zip Code 89117-1937

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

Name of Employer DHP Group Occupation CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 28 / 2014

**Transaction ID : VN8PPCRKJT8**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**Tamara Quinn**

Mailing Address PO Box 883

City Logandale State NV Zip Code 89021-0883

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

Name of Employer Fresh and ready foods Occupation Sales

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
230.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 25 / 2014

**Transaction ID : VN8PPCRA1P9**

Amount of Each Receipt this Period  
50.00

**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: PAGE 34 OF 93  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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

A. Full Name (Last, First, Middle Initial)  
**Rachakondalata Prabhu Living Trust**  
 Mailing Address 2801 Alta Dr  
 City State Zip Code  
 Las Vegas NV 89107-3201  
 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 Y Y  
 06 / 28 / 2014  
**Transaction ID : VN8PPCSPG38**  
 Amount of Each Receipt this Period  
 1000.00  
 PARTNERSHIP--partners below if itemized

B. Full Name (Last, First, Middle Initial)  
**Rachakonda Prabhu**  
 Mailing Address 5701 W Charleston Blvd  
 Ste 100  
 City State Zip Code  
 Las Vegas NV 89146-1256  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Lung Institute of Nevada Medical Doctor  
 Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date  
 2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 28 / 2014  
**Transaction ID : VN8PPCSQB77**  
 Amount of Each Receipt this Period  
 1000.00  
**[MEMO ITEM]**  
 \*

C. Full Name (Last, First, Middle Initial)  
**Marie S. Ray-Scott**  
 Mailing Address 9130 Amber Waves St  
 City State Zip Code  
 Las Vegas NV 89123-5364  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 W.R. Whisett Chief Financial Officer  
 Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date  
 3750.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 06 / 2014  
**Transaction ID : VN8PPCPTXX6**  
 Amount of Each Receipt this Period  
 1150.00

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

2150.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 93
	<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)  
**Horsford for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Marie S. Ray-Scott**

Mailing Address 9130 Amber Waves St

City Las Vegas State NV Zip Code 89123-5364

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

Name of Employer W.R. Whisett Occupation Chief Financial Officer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **3750.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 06 / 2014

**Transaction ID : VN8PPCPTZM9**

Amount of Each Receipt this Period  
**350.00**

**B.** Full Name (Last, First, Middle Initial)  
**Tushina Reddy**

Mailing Address 708 Canyon Greens Dr

City Las Vegas State NV Zip Code 89144-0834

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

Name of Employer Shepard Eye Center Occupation Physician

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 25 / 2014

**Transaction ID : VN8PPCNV4Z4**

Amount of Each Receipt this Period  
**250.00**

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

Mailing Address 8911 Rio Grande Falls Ave

City Las Vegas State NV Zip Code 89178-7219

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

Name of Employer HealthCare partners of Nevada Occupation Administration

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : VN8PPCRNT39**

Amount of Each Receipt this Period  
**1000.00**

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

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

**1600.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 93
	<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)  
**Horsford for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Bryant Rogers**

Mailing Address 7105 Rancho De Taos Ct

City	State	Zip Code
Las Vegas	NV	89130-1011

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

Name of Employer	Occupation
UNLV	Higher Ed Administrator

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 09 / 2014

**Transaction ID : VN8PPCPY617**

Amount of Each Receipt this Period

1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Lloyd Rogers**

Mailing Address 4345 Mountaingate Dr

City	State	Zip Code
Reno	NV	89519-7916

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

Name of Employer	Occupation
Riverside Partners	partner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : VN8PPCRQZN6**

Amount of Each Receipt this Period

50.00

**C.** Full Name (Last, First, Middle Initial)  
**Lawrence Romans**

Mailing Address 5422 Seminary Rd

City	State	Zip Code
Alexandria	VA	22311-1299

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

Name of Employer	Occupation
Lawrence J Romans & Associates	Lobbyist

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 23 / 2014

**Transaction ID : VN8PPCR1Y55**

Amount of Each Receipt this Period

500.00

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

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

1550.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 93
	<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)  
**Horsford for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Anthony F Sanchez III**

Mailing Address 8312 Fulton Ranch St

City Las Vegas	State NV	Zip Code 89131-2039
-------------------	-------------	------------------------

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

Name of Employer NV Energy	Occupation Senior Vice President
-------------------------------	-------------------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 04 / 2014

**Transaction ID : VN8PPCPNGT5**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 8312 Fulton Ranch St

City Las Vegas	State NV	Zip Code 89131-2039
-------------------	-------------	------------------------

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

Name of Employer NV Energy	Occupation Senior Vice 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  
 06 / 30 / 2014

**Transaction ID : VN8PPCRSJ74**

Amount of Each Receipt this Period  
1700.00

**C.** Full Name (Last, First, Middle Initial)  
**Elaine Sanchez**

Mailing Address 8312 Fulton Ranch St

City Las Vegas	State NV	Zip Code 89131-2039
-------------------	-------------	------------------------

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

Name of Employer Nevada Holistic Medicine, LLC	Occupation Partner
---	-----------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
800.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : VN8PPCRTS53**

Amount of Each Receipt this Period  
800.00

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 93
	<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)  
**Horsford for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Corey Sanders**

Mailing Address 14 Ridge Blossom Rd

City Las Vegas State NV Zip Code 89135-3284

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

Name of Employer MGM Resorts International Occupation COO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 04 / 2014**

**Transaction ID : VN8PPCPJG14**

Amount of Each Receipt this Period  
**1000.00**

**B.** Full Name (Last, First, Middle Initial)  
**Maureen Schafer**

Mailing Address 9212 Tesoras Dr  
Unit 402

City Las Vegas State NV Zip Code 89144-1550

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

Name of Employer Cleveland Clinic Occupation CEO

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  
**06 / 30 / 2014**

**Transaction ID : VN8PPCRS8E9**

Amount of Each Receipt this Period  
**500.00**

**C.** Full Name (Last, First, Middle Initial)  
**Howard Schiffman**

Mailing Address 1617 21st St NW

City Washington State DC Zip Code 20009-1332

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

Name of Employer Schulte Roth & Zabel Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 10 / 2014**

**Transaction ID : VN8PPCQ21E2**

Amount of Each Receipt this Period  
**1000.00**

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

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

**2500.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 93
	<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)  
**Horsford for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Roger L. Scholl**

Mailing Address 4870 Hilton Ct

City Reno State NV Zip Code 89519-2925

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

Name of Employer Alpha Analytical, Inc. Occupation Laboratory Director

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 30 / 2014**

**Transaction ID : VN8PPCRTRF9**

Amount of Each Receipt this Period  
**100.00**

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

Mailing Address 930 S 4th St Ste 100

City Las Vegas State NV Zip Code 89101-6845

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

Name of Employer Nevada Legal News Occupation Publisher

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5100.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 30 / 2014**

**Transaction ID : VN8PPCRTGW3**

Amount of Each Receipt this Period  
**2600.00**

**C.** Full Name (Last, First, Middle Initial)  
**Carol Ruth Silver**

Mailing Address 68 Ramona Ave

City San Francisco State CA Zip Code 94103-2215

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

Name of Employer Law Offices of Carol Ruth Silver Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **222.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 30 / 2014**

**Transaction ID : VN8PPCRN8J8**

Amount of Each Receipt this Period  
**36.00**

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

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

**2736.00**

**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 40 OF 93
	<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)  
**Horsford for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Carol Ruth Silver**

Mailing Address 68 Ramona Ave

City San Francisco State CA Zip Code 94103-2215

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

Name of Employer Law Offices of Carol Ruth Silver Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **222.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : VN8PPCRN8M4**

Amount of Each Receipt this Period  
**36.00**

**B.** Full Name (Last, First, Middle Initial)  
**Eva Simmons**

Mailing Address 4119 Cricket Ln

City N Las Vegas State NV Zip Code 89032-0107

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 **350.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 29 / 2014

**Transaction ID : VN8PPCRN6V5**

Amount of Each Receipt this Period  
**50.00**

**C.** Full Name (Last, First, Middle Initial)  
**Christine Springer**

Mailing Address 2912 Kandahar Ave

City North Las Vegas State NV Zip Code 89081-2436

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

Name of Employer UNLV Occupation Professor/Director of Graduate Program

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **325.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 25 / 2014

**Transaction ID : VN8PPCR9WH1**

Amount of Each Receipt this Period  
**100.00**

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

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

**186.00**



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 OF 93
	<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)  
**Horsford for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Ian H. Staller**

Mailing Address 6325 S Jones Blvd  
Ste 500

City Las Vegas State NV Zip Code 89118-3336

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

Name of Employer Southern Wine & Spirits Occupation CFO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 18 / 2014

**Transaction ID : VN8PPCQKY9**

Amount of Each Receipt this Period  
2600.00

**B.** Full Name (Last, First, Middle Initial)  
**Peter Stoddard**

Mailing Address 629 Cervantes Dr

City Henderson State NV Zip Code 89014-4022

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

Name of Employer Stoddard Creative Services Occupation Graphic Design

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 29 / 2014

**Transaction ID : VN8PPCRN6G8**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**Debra Toney**

Mailing Address 5228 Painted Lakes Way

City Las Vegas State NV Zip Code 89149-6425

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

Name of Employer Nevada Health Centers Occupation RN

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 28 / 2014

**Transaction ID : VN8PPCRS8X7**

Amount of Each Receipt this Period  
500.00

**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 42 OF 93  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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

**A.** Full Name (Last, First, Middle Initial)  
**Marla S Turner**

Mailing Address 5708 Solimar Ln

City Las Vegas State NV Zip Code 89130-5102

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

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 450.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 25 / 2014

**Transaction ID : VN8PPCR9W97**

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

**B.** Full Name (Last, First, Middle Initial)  
**Peter Umhofer**

Mailing Address 5031 Alta Vista Rd

City Bethesda State MD Zip Code 20814-5735

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

Name of Employer e2 strategies Occupation consultant

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 19 / 2014

**Transaction ID : VN8PPCQS9V2**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 500.00

**C.** Full Name (Last, First, Middle Initial)  
**Ernest Urata**

Mailing Address 57 Voltaire Ave

City Henderson State NV Zip Code 89002-6553

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  
 \_\_\_\_\_ 1050.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 01 / 2014

**Transaction ID : VN8PPCPB9E8**

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

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

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

\_\_\_\_\_ 1000.00

\_\_\_\_\_

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 OF 93
	<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)  
**Horsford for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Michael Viellion**

Mailing Address 10777 W Twain Ave  
Ste 120

City Las Vegas State NV Zip Code 89135-3037

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

Name of Employer Lanco West Occupation Developer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 10 / 2014

**Transaction ID : VN8PPCQ3FW8**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 722 E 6th Ave

City Durango State CO Zip Code 81301-5509

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

Name of Employer CLF Occupation Senior VP

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 19 / 2014

**Transaction ID : VN8PPCQSAR8**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 2033 Glenview Dr

City Las Vegas State NV Zip Code 89134-6115

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

Name of Employer Westfield Eye Center Occupation Eye Doctor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 04 / 2014

**Transaction ID : VN8PPCPNHH7**

Amount of Each Receipt this Period  
500.00

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

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

1500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 OF 93
	<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)  
**Horsford for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Ralph Williamson**

Mailing Address 5205 Clouds Rest Ave

City Las Vegas State NV Zip Code 89108-4035

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

Name of Employer FAME Church Occupation Minister

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **645.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 27 / 2014**

**Transaction ID : VN8PPCRFS70**

Amount of Each Receipt this Period  
**20.00**

**B.** Full Name (Last, First, Middle Initial)  
**Stephanie Youngblood**

Mailing Address 500 S Rancho Dr Ste 9

City Las Vegas State NV Zip Code 89106-4848

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

Name of Employer Stephanie J. Youngblood D.C. Ltd. Occupation Chiropractor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **255.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 28 / 2014**

**Transaction ID : VN8PPCRS9E1**

Amount of Each Receipt this Period  
**255.00**

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

**275.00**

**72482.00**

**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 45 OF 93
	<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)  
**Horsford for Congress**

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

Mailing Address **Worldwide Headquarters**  
**1932 WYNNNTON ROAD**

City **Columbus** State **GA** Zip Code **31999-0001**

FEC ID number of contributing federal political committee. **C C00034157**

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  
**06 / 30 / 2014**

**Transaction ID : VN8PPCRSBR4**

Amount of Each Receipt this Period  
 2000.00

**B.** Full Name (Last, First, Middle Initial)  
**AMERICAN ASSOCIATION FOR JUSTICE POLITICAL ACTION COMMITTEE (AAJ PAC)**

Mailing Address **777 6th St NW**  
**Ste 200**

City **Washington** State **DC** Zip Code **20001-3707**

FEC ID number of contributing federal political committee. **C C00024521**

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  
**06 / 23 / 2014**

**Transaction ID : VN8PPCR1YD8**

Amount of Each Receipt this Period  
 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**American Bankers Association**

Mailing Address **1120 Connecticut Ave NW**

City **Washington** State **DC** Zip Code **20036-3959**

FEC ID number of contributing federal political committee. **C C00004275**

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  
**05 / 29 / 2014**

**Transaction ID : VN8PPCP4D34**

Amount of Each Receipt this Period  
 1500.00

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

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

4500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 OF 93
	<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)  
**Horsford for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**AMERICAN EXPRESS COMPANY POLITICAL ACTION COMMITTEE (AXPPAC)**

Mailing Address 801 Pennsylvania Ave NW  
Ste 650

City Washington State DC Zip Code 20004-2673

FEC ID number of contributing federal political committee. **C** C00040535

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  
 06 / 30 / 2014

**Transaction ID : VN8PPCS0PB9**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**AMERICAN FAMILY MUTUAL INSURANCE COMPANY FEDERAL PAC (AMFAM PAC)**

Mailing Address 6000 American Pkwy

City Madison State WI Zip Code 53783-0001

FEC ID number of contributing federal political committee. **C** C00354290

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  
 06 / 30 / 2014

**Transaction ID : VN8PPCRSBM2**

Amount of Each Receipt this Period  
 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**AMERICAN HEALTH CARE ASSOCIATION POLITICAL ACTION COMMITTEE**

Mailing Address 1201 L St NW

City Washington State DC Zip Code 20005-4024

FEC ID number of contributing federal political committee. **C** C00006080

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  
 06 / 10 / 2014

**Transaction ID : VN8PPCQPV87**

Amount of Each Receipt this Period  
 2500.00

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

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

4500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 OF 93
	<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)  
**Horsford for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**AMERICAN INSURANCE ASSOCIATION POLITICAL ACTION COMMITTEE**

Mailing Address 2101 L St NW  
Ste 400

City Washington State DC Zip Code 20037-1542

FEC ID number of contributing federal political committee. **C** C00103143

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  
 06 / 27 / 2014

**Transaction ID : VN8PPCRGEF0**

Amount of Each Receipt this Period  
 1500.00

**B.** Full Name (Last, First, Middle Initial)  
**AMERIPRISE FINANCIAL INC. POLITICAL ACTION COMMITTEE (AMERIPRISEPAC)**

Mailing Address 101 Constitution Ave NW  
SUITE 912 WEST

City Washington State DC Zip Code 20001-2133

FEC ID number of contributing federal political committee. **C** C00414474

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  
 06 / 27 / 2014

**Transaction ID : VN8PPCRG4V3**

Amount of Each Receipt this Period  
 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**AT&T INC. FEDERAL POLITICAL ACTION COMMITTEE (AT&T FEDERAL PAC)**

Mailing Address 208 S Akard St  
Ste 2701

City Dallas State TX Zip Code 75202-4206

FEC ID number of contributing federal political committee. **C** C00109017

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  
 06 / 30 / 2014

**Transaction ID : VN8PPCRVN44**

Amount of Each Receipt this Period  
 3000.00

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

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

5500.00

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

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

FOR LINE NUMBER: PAGE 48 OF 93  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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

Full Name (Last, First, Middle Initial)  
BAKERY CONFECTIONERY TOBACCO WKRS & GRAIN MILLERS INT'L UNION LOCAL 19 POL ORG 'BCTGM'

**A.** Mailing Address 10401 Connecticut Ave

City Kensington State MD Zip Code 20895-3961

FEC ID number of contributing federal political committee. **C** C00249359

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 27 / 2014

**Transaction ID : VN8PPCNYWN9**

Amount of Each Receipt this Period  
 1000.00

Full Name (Last, First, Middle Initial)  
BROTHERHOOD OF RAILROAD SIGNALMEN POLITICAL ACTION COMMITTEE

**B.** Mailing Address 917 Shenandoah Shores Rd

City Front Royal State VA Zip Code 22630-6418

FEC ID number of contributing federal political committee. **C** C00011262

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 27 / 2014

**Transaction ID : VN8PPCRG660**

Amount of Each Receipt this Period  
 1000.00

Full Name (Last, First, Middle Initial)  
CAESARS ENTERTAINMENT POLITICAL ACTION COMMITTEE

**C.** Mailing Address 1 Caesars Palace Dr

City Las Vegas State NV Zip Code 89109-8969

FEC ID number of contributing federal political committee. **C** C00239947

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  
 06 / 10 / 2014

**Transaction ID : VN8PPCQ6F84**

Amount of Each Receipt this Period  
 2500.00

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

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

4500.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 OF 93
	<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)  
**Horsford for Congress**

Full Name (Last, First, Middle Initial)  
CITIGROUP INC. POLITICAL ACTION COMMITTEE - FEDERAL (CITIGROUP PAC-FEDERAL)

Mailing Address 1101 Pennsylvania Ave NW  
Ste 1000  
City Washington State DC Zip Code 20004-2524

FEC ID number of contributing federal political committee. **C C00008474**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)  
Election Cycle-to-Date  
3500.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 02 / 2014

Transaction ID : VN8PPCPF933

Amount of Each Receipt this Period  
2500.00

Full Name (Last, First, Middle Initial)  
**CLARKE FOR CONGRESS**

Mailing Address PO Box 250200  
City Brooklyn State NY Zip Code 11225-0200

FEC ID number of contributing federal political committee. **C C00415331**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)  
Election Cycle-to-Date  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 30 / 2014

Transaction ID : VN8PPCRSS88

Amount of Each Receipt this Period  
1000.00

Full Name (Last, First, Middle Initial)  
COMCAST CORPORATION & NBCUNIVERSAL POLITICAL ACTION COMMITTEE - FEDERAL

Mailing Address 1701 John F Kennedy Blvd  
FI 49  
City Philadelphia State PA Zip Code 19103-2855

FEC ID number of contributing federal political committee. **C C00248716**

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  
06 / 02 / 2014

Transaction ID : VN8PPCFB85

Amount of Each Receipt this Period  
1000.00

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

4500.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 OF 93
	<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)  
**Horsford for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**COMERICA INC. PAC**

Mailing Address **PO Box 75000**

City **Detroit** State **MI** Zip Code **48275-0001**

FEC ID number of contributing federal political committee. **C C00393173**

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  
**06 / 05 / 2014**

**Transaction ID : VN8PPCPNE89**

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

**B.** Full Name (Last, First, Middle Initial)  
**COMMITTEE ON LETTER CARRIERS POLITICAL EDUCATION (LETTER CARRIERS POLITICAL ACTION FUND)**

Mailing Address **100 Indiana Ave NW**

City **Washington** State **DC** Zip Code **20001-2143**

FEC ID number of contributing federal political committee. **C C00023580**

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  
**06 / 05 / 2014**

**Transaction ID : VN8PPCPS184**

Amount of Each Receipt this Period  
 \_\_\_\_\_  
**1500.00**

**C.** Full Name (Last, First, Middle Initial)  
**COX ENTERPRISES PAC (COXPAC) INC.**

Mailing Address **975 F St NW  
Ste 300**

City **Washington** State **DC** Zip Code **20004-1459**

FEC ID number of contributing federal political committee. **C C00477653**

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  
**06 / 23 / 2014**

**Transaction ID : VN8PPCR1YN1**

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

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

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

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**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)	PAGE 51 OF 93
	<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)  
**Horsford for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**DON PAYNE FOR CONGRESS**

Mailing Address PO Box 2406

City Newark State NJ Zip Code 07114-0406

FEC ID number of contributing federal political committee. **C C00225045**

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  
 05 / 22 / 2014

**Transaction ID : VN8PPCNT9S0**

Amount of Each Receipt this Period  
 1000.00

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

Mailing Address 499 S Capitol St SW Ste 422

City Washington State DC Zip Code 20003-4028

FEC ID number of contributing federal political committee. **C C00467837**

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  
 06 / 30 / 2014

**Transaction ID : VN8PPCRZQH1**

Amount of Each Receipt this Period  
 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**EMPLOYEES OF NORTHROP GRUMMAN CORPORATION PAC**

Mailing Address 2980 Fairview Park Dr

City Falls Church State VA Zip Code 22042-4511

FEC ID number of contributing federal political committee. **C C00088591**

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  
 06 / 02 / 2014

**Transaction ID : VN8PPCPGNN6**

Amount of Each Receipt this Period  
 2500.00

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

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

4500.00

**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 52 OF 93
	<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)  
**Horsford for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**GENENTECH INC. POLITICAL ACTION COMMITTEE**

Mailing Address 1 Dna Way

City South San Francisco State CA Zip Code 94080-4918

FEC ID number of contributing federal political committee. **C** C00199257

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  
 05 / 22 / 2014

**Transaction ID : VN8PPCNT9Q4**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**INDEPENDENT COMMUNITY BANKERS OF AMERICA POLITICAL ACTION COMMITTEE**

Mailing Address 1615 L St NW Ste 900

City Washington State DC Zip Code 20036-5623

FEC ID number of contributing federal political committee. **C** C00032698

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  
 05 / 27 / 2014

**Transaction ID : VN8PPCNYXE5**

Amount of Each Receipt this Period  
 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**INDEPENDENT INSURANCE AGENTS & BROKERS OF AMERICA, INC. POLITICAL ACTION COMMITTEE (INSURP**

Mailing Address 412 1st St SE Ste 300

City Washington State DC Zip Code 20003-1804

FEC ID number of contributing federal political committee. **C** C00022343

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  
 06 / 02 / 2014

**Transaction ID : VN8PPCPGNJ3**

Amount of Each Receipt this Period  
 1000.00

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

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

3000.00

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

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

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(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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

Full Name (Last, First, Middle Initial)  
INTERNATIONAL BROTHERHOOD OF BOILERMAKERS IRON SHIP BUILDERS BLACKSMITHS FORGERS & HELPERS

**A.** Mailing Address 753 State Ave  
Ste 565

City State Zip Code  
Kansas City KS 66101-2511

FEC ID number of contributing federal political committee. **C** C70002506

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 02 / 2014

**Transaction ID : VN8PPCPF9S7**

Amount of Each Receipt this Period  
1000.00

Full Name (Last, First, Middle Initial)  
**INVESTMENT COMPANY INSTITUTE POLITICAL ACTION COMMITTEE**

**B.** Mailing Address 1401 H St NW  
Ste 1200

City State Zip Code  
Washington DC 20005-2110

FEC ID number of contributing federal political committee. **C** C00105981

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  
 06 / 30 / 2014

**Transaction ID : VN8PPCRSC15**

Amount of Each Receipt this Period  
2500.00

Full Name (Last, First, Middle Initial)  
**John Ocegura Campaign Account**

**C.** Mailing Address 7655 Chaumont St

City State Zip Code  
Las Vegas NV 89123-1491

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  
 06 / 04 / 2014

**Transaction ID : VN8PPCPNG25**

Amount of Each Receipt this Period  
1000.00

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

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

4500.00

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

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

FOR LINE NUMBER: PAGE 54 OF 93  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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

**A.** Full Name (Last, First, Middle Initial)  
**KPMG PARTNERS/PRINCIPALS & EMPLOYEES PAC**

Mailing Address 1801 K St NW

City State Zip Code  
Washington DC 20006-1302

FEC ID number of contributing federal political committee. **C C00280222**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 27 / 2014

**Transaction ID : VN8PPCNYWW5**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**KRAFT FOODS GLOBAL INC. POLITICAL ACTION COMMITTEE (KRAFTPAC)**

Mailing Address 975 F St NW  
Ste 1000

City State Zip Code  
Washington DC 20004-1467

FEC ID number of contributing federal political committee. **C C00077701**

Name of Employer Occupation

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  
 06 / 23 / 2014

**Transaction ID : VN8PPCR1YS3**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**LABORERS' INTERNATIONAL UNION OF NORTH AMERICA (LIUNA) PAC**

Mailing Address 905 16th St NW  
FI 2

City State Zip Code  
Washington DC 20006-1703

FEC ID number of contributing federal political committee. **C C00007922**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 30 / 2014

**Transaction ID : VN8PPCP8WR1**

Amount of Each Receipt this Period  
1500.00

**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)	PAGE 55 OF 93
	<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)  
**Horsford for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**LEADERSHIP OF TODAY AND TOMORROW**

Mailing Address 700 13th St NW  
Ste 600

City Washington State DC Zip Code 20005-3960

FEC ID number of contributing federal political committee. **C** C00299149

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : VN8PPCRZNX2**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**LEAGUE OF CONSERVATION VOTERS ACTION FUND**

Mailing Address 1920 L St NW  
Ste 800

City Washington State DC Zip Code 20036-5045

FEC ID number of contributing federal political committee. **C** C00252940

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 23 / 2014

**Transaction ID : VN8PPCR1YX4**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**LOCKHEED MARTIN CORPORATION EMPLOYEES' POLITICAL ACTION COMMITTEE**

Mailing Address 1500 Crystal Dr  
Crystal Sq Two, Ste 300

City Arlington State VA Zip Code 22202

FEC ID number of contributing federal political committee. **C** C00303024

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 13 / 2014

**Transaction ID : VN8PPCQE0P5**

Amount of Each Receipt this Period  
1000.00

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

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

3000.00

**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 56 OF 93
	<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)  
**Horsford for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Main Street Banking PAC**

Mailing Address **PO Box 77472**

City **Washington** State **DC** Zip Code **20013-8472**

FEC ID number of contributing federal political committee. **C C00551192**

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  
**06 / 10 / 2014**

**Transaction ID : VN8PPCQ3HH5**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**MCDONALDS CORPORATION POLITICAL ACTION COMMITTEE**

Mailing Address **2111 McDonalds Dr  
Dept 213**

City **Oak Brook** State **IL** Zip Code **60523-5500**

FEC ID number of contributing federal political committee. **C C00063164**

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  
**06 / 04 / 2014**

**Transaction ID : VN8PPCPNHP6**

Amount of Each Receipt this Period  
 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**MORTGAGE BANKERS ASSOCIATION POLITICAL ACTION COMMITTEE**

Mailing Address **1717 Rhode Island Ave NW  
Ste 400**

City **Washington** State **DC** Zip Code **20036-3023**

FEC ID number of contributing federal political committee. **C C00004812**

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  
**06 / 30 / 2014**

**Transaction ID : VN8PPCSB1F4**

Amount of Each Receipt this Period  
 1000.00

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

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

3000.00



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

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

FOR LINE NUMBER: PAGE 57 OF 93  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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

**A.** Full Name (Last, First, Middle Initial)  
NATIONAL ASSOCIATION OF INSURANCE AND FINANCIAL ADVISORS POLITICAL ACTION COMM

Mailing Address 2901 Telestar Ct

City Falls Church State VA Zip Code 22042-1260

FEC ID number of contributing federal political committee. **C** C00005249

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  
 06 / 26 / 2014

**Transaction ID : VN8PPCRBWP2**

Amount of Each Receipt this Period  
 2500.00

**B.** Full Name (Last, First, Middle Initial)  
NATIONAL ASSOCIATION OF MUTUAL INSURANCE COMPANIES PAC

Mailing Address 3601 Vincennes Rd

City Indianapolis State IN Zip Code 46268-1154

FEC ID number of contributing federal political committee. **C** C00170258

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 Y  
 06 / 09 / 2014

**Transaction ID : VN8PPCQ6F68**

Amount of Each Receipt this Period  
 1000.00

**C.** Full Name (Last, First, Middle Initial)  
NATIONAL ASSOCIATION OF REALTORS POLITICAL ACTION COMMITTEE

Mailing Address 430 N Michigan Ave

City Chicago State IL Zip Code 60611-4011

FEC ID number of contributing federal political committee. **C** C00030718

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 7500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 05 / 2014

**Transaction ID : VN8PPCPQBY2**

Amount of Each Receipt this Period  
 1000.00

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

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

4500.00

**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 58 OF 93
	<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)  
**Horsford for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**NEA FUND FOR CHILDREN AND PUBLIC EDUCATION**

Mailing Address 1201 16th St NW  
Ste 420

City Washington State DC Zip Code 20036-3201

FEC ID number of contributing federal political committee. **C C00003251**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 03 / 2014

**Transaction ID : VN8PPCPGNW2**

Amount of Each Receipt this Period  
2000.00

**B.** Full Name (Last, First, Middle Initial)  
**PAC TO THE FUTURE**

Mailing Address 700 13th St NW  
Ste 600

City Washington State DC Zip Code 20005-3960

FEC ID number of contributing federal political committee. **C C00344234**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : VN8PPCSP6V6**

Amount of Each Receipt this Period  
3000.00

**C.** Full Name (Last, First, Middle Initial)  
**PowerPAC+**

Mailing Address 201 Spear St  
Ste 1650

City San Francisco State CA Zip Code 94105-6138

FEC ID number of contributing federal political committee. **C C30000822**

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 Y Y  
 06 / 02 / 2014

**Transaction ID : VN8PPCPF9N5**

Amount of Each Receipt this Period  
1000.00

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

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

6000.00

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

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

FOR LINE NUMBER: PAGE 59 OF 93  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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

Full Name (Last, First, Middle Initial)  
PROPERTY CASUALTY INSURERS ASSOCIATION OF AMERICA POLITICAL ACTION COMMITTEE (PCIPAC)

**A.** Mailing Address 444 N Capitol St NW  
Ste 801  
City Washington State DC Zip Code 20001-1508

FEC ID number of contributing federal political committee. **C** C00066472

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  
06 / 30 / 2014

Transaction ID : VN8PPCSP6F1

Amount of Each Receipt this Period  
5000.00

Full Name (Last, First, Middle Initial)  
**B. QUICKEN LOANS INC PAC**

Mailing Address 101 S Washington Sq  
Ste 620  
City Lansing State MI Zip Code 48933-1708

FEC ID number of contributing federal political committee. **C** C00388827

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  
06 / 23 / 2014

Transaction ID : VN8PPCR1YH9

Amount of Each Receipt this Period  
1000.00

Full Name (Last, First, Middle Initial)  
**C. REGIONS FINANCIAL CORPORATION POLITICAL ACTION COMMITTEE**

Mailing Address 1015 15th St NW  
Ste 920  
City Washington State DC Zip Code 20005-2623

FEC ID number of contributing federal political committee. **C** C00432252

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)  
Election Cycle-to-Date 500.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 04 / 2014

Transaction ID : VN8PPCQ6F76

Amount of Each Receipt this Period  
500.00

**SUBTOTAL** of Receipts This Page (optional)..... 6500.00  
**TOTAL** This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 60 OF 93
	<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)  
**Horsford for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Suntrust Bank, Inc.**

Mailing Address 919 E Main St

City Richmond State VA Zip Code 23219-4625

FEC ID number of contributing federal political committee. **C** C00214965

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  
 06 / 09 / 2014

**Transaction ID : VN8PPCQ3HP5**

Amount of Each Receipt this Period  
 1000.00

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

Mailing Address 6849 Old Dominion Dr Ste 222

City McLean State VA Zip Code 22101-3705

FEC ID number of contributing federal political committee. **C** C00409623

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  
 06 / 30 / 2014

**Transaction ID : VN8PPCRSAE4**

Amount of Each Receipt this Period  
 1000.00

**C.** Full Name (Last, First, Middle Initial)  
TEACHERS INSURANCE ANNUITY ASSOC OF AMERICA COLLEGE RETIREMENT EQUITIES FUND PAC TIAA-CREF

Mailing Address 1101 Pennsylvania Ave NW Ste 800

City Washington State DC Zip Code 20004-2526

FEC ID number of contributing federal political committee. **C** C00431361

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  
 06 / 10 / 2014

**Transaction ID : VN8PPCQE0F9**

Amount of Each Receipt this Period  
 1000.00

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

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

3000.00

**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 61 OF 93
	<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)  
**Horsford for Congress**

**A.** Full Name (Last, First, Middle Initial)  
THE COCA-COLA COMPANY NONPARTISAN COMMITTEE FOR GOOD GOVERNMENT

Mailing Address 800 Connecticut Ave NW  
Ste 711

City Washington State DC Zip Code 20006-2735

FEC ID number of contributing federal political committee. **C** C00012468

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 25 / 2014

**Transaction ID : VN8PPCR9W56**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
THE COUNCIL OF INSURANCE AGENTS & BROKERS POLITICAL ACTION COMMITTEE

Mailing Address 701 Pennsylvania Ave NW  
Ste 750

City Washington State DC Zip Code 20004-2661

FEC ID number of contributing federal political committee. **C** C00039578

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 23 / 2014

**Transaction ID : VN8PPCR1WA1**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
THE COUNCIL OF INSURANCE AGENTS & BROKERS POLITICAL ACTION COMMITTEE

Mailing Address 701 Pennsylvania Ave NW  
Ste 750

City Washington State DC Zip Code 20004-2661

FEC ID number of contributing federal political committee. **C** C00039578

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : VN8PPCSAZF0**

Amount of Each Receipt this Period  
2500.00

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

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

4500.00

**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 62 OF 93
	<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)  
**Horsford for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**THE HOME DEPOT INC. POLITICAL ACTION COMMITTEE**

Mailing Address 1155 F St NW  
Ste 400

City Washington State DC Zip Code 20004-1346

FEC ID number of contributing federal political committee. **C** C00284885

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  
 06 / 05 / 2014

**Transaction ID : VN8PPCPQ7M4**

Amount of Each Receipt this Period  
 2500.00

**B.** Full Name (Last, First, Middle Initial)  
**TITLE INDUSTRY POLITICAL ACTION COMMITTEE**

Mailing Address 1828 L St NW  
Ste 705

City Washington State DC Zip Code 20036-5107

FEC ID number of contributing federal political committee. **C** C00012914

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  
 05 / 27 / 2014

**Transaction ID : VN8PPCNYWM1**

Amount of Each Receipt this Period  
 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Tunica- Biloxi Tribe of LA**

Mailing Address PO Box 1589

City Marksville State LA Zip Code 71351-1589

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  
 06 / 10 / 2014

**Transaction ID : VN8PPCQPTV5**

Amount of Each Receipt this Period  
 2500.00

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

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

6000.00

**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 63 OF 93
	<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)  
**Horsford for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**U.S. BANCORP POLITICAL PARTICIPATION PROGRAM**

Mailing Address 800 Nicollet Mall  
# BC-MN-H210

City Minneapolis State MN Zip Code 55402-7000

FEC ID number of contributing federal political committee. **C** C00018036

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  
 06 / 09 / 2014

**Transaction ID : VN8PPCQE0K1**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**UNION PACIFIC CORP. FUND FOR EFFECTIVE GOVERNMENT**

Mailing Address 600 13th St NW  
Ste 340

City Washington State DC Zip Code 20005-3012

FEC ID number of contributing federal political committee. **C** C00010470

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  
 06 / 20 / 2014

**Transaction ID : VN8PPCQZYS7**

Amount of Each Receipt this Period  
 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**UNION PACIFIC CORP. FUND FOR EFFECTIVE GOVERNMENT**

Mailing Address 600 13th St NW  
Ste 340

City Washington State DC Zip Code 20005-3012

FEC ID number of contributing federal political committee. **C** C00010470

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  
 06 / 27 / 2014

**Transaction ID : VN8PPCRG6E4**

Amount of Each Receipt this Period  
 1000.00

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

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

3000.00

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

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

FOR LINE NUMBER: PAGE 64 OF 93  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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

Full Name (Last, First, Middle Initial)  
UNITED ASSOCIATION POLITICAL EDUCATION COMMITTEE (UNITED ASSOCIATION OF JOURNEYMEN AND APP

**A.** Mailing Address 3 Park Pl

City State Zip Code  
Annapolis MD 21401-3687

FEC ID number of contributing federal political committee. **C** C00012476

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 Y Y  
 06 / 09 / 2014

**Transaction ID : VN8PPCQ3HJ3**

Amount of Each Receipt this Period  
2500.00

Full Name (Last, First, Middle Initial)  
**UNITED TECHNOLOGIES CORPORATION**

**B.** Mailing Address 1 Financial Plz

City State Zip Code  
Hartford CT 06103-2608

FEC ID number of contributing federal political committee. **C** C70004544

Name of Employer Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
4500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : VN8PPCRS9Y8**

Amount of Each Receipt this Period  
1000.00

Full Name (Last, First, Middle Initial)  
UNITED TRANSPORTATION UNION POLITICAL ACTION COMMITTEE (UTU PAC)

**C.** Mailing Address 24950 Country Club Blvd  
Ste 340

City State Zip Code  
North Olmsted OH 44070-5333

FEC ID number of contributing federal political committee. **C** C00001636

Name of Employer Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
4500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 22 / 2014

**Transaction ID : VN8PPCNT9R2**

Amount of Each Receipt this Period  
2000.00

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

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

5500.00



**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 65 OF 93
	<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)  
**Horsford for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Valley Electric Association Inc.**

Mailing Address 800 E Highway 372

City Pahrump State NV Zip Code 89048-4624

FEC ID number of contributing federal political committee. **C** C00564575

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  
 06 / 11 / 2014

**Transaction ID : VN8PPCSQC04**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**WAL-MART STORES INC. PAC FOR RESPONSIBLE GOVERNMENT**

Mailing Address 701 8th St NW

City Washington State DC Zip Code 20001-3854

FEC ID number of contributing federal political committee. **C** C00093054

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  
 06 / 10 / 2014

**Transaction ID : VN8PPCSM343**

Amount of Each Receipt this Period  
 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**WAL-MART STORES INC. PAC FOR RESPONSIBLE GOVERNMENT**

Mailing Address 701 8th St NW

City Washington State DC Zip Code 20001-3854

FEC ID number of contributing federal political committee. **C** C00093054

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  
 06 / 23 / 2014

**Transaction ID : VN8PPCSM327**

Amount of Each Receipt this Period  
 2500.00

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

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

4500.00

**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 66 OF 93
	<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)  
**Horsford for Congress**

**A.** Full Name (Last, First, Middle Initial)  
WELLS FARGO AND COMPANY EMPLOYEE PAC (AKA WELLS FARGO EMPLOYEE PAC)

Mailing Address Sixth And Marquette  
MAC N9305-084

City Minneapolis State MN Zip Code 55479-0001

FEC ID number of contributing federal political committee. **C** C00034595

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 18 / 2014

**Transaction ID : VN8PPCQQFJ5**

Amount of Each Receipt this Period  
1000.00

**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 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).....

1000.00

93000.00

**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 67 OF 93			
	<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)  
**Horsford for Congress**

Full Name (Last, First, Middle Initial) <b>A. 423 New Jersey Avenue Building Fund</b>		Date of Disbursement MM / DD / YYYY 06 / 20 / 2014
Mailing Address 423 New Jersey Ave SE # B		Amount of Each Disbursement this Period 500.00 <b>Transaction ID : VN7QE9SAH33</b>
City Washington State DC Zip Code 20003-4034	Purpose of Disbursement Event Expense - Venue 007 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President 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. A&amp;B Printing</b>		Date of Disbursement MM / DD / YYYY 05 / 29 / 2014
Mailing Address 2900 S Highland Dr 18 STE		Amount of Each Disbursement this Period 324.30 <b>Transaction ID : VN7QE9S9CG5</b>
City Las Vegas State NV Zip Code 89109-1091	Purpose of Disbursement Advertising 004 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. ActBlue</b>		Date of Disbursement MM / DD / YYYY 05 / 22 / 2014
Mailing Address 14 Arrow St		Amount of Each Disbursement this Period 1.28 <b>Transaction ID : VN7QE9SED84</b>
City Cambridge State MA Zip Code 02138-5106	Purpose of Disbursement Credit Card Processing 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	825.58
<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 93			
	<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)  
**Horsford for Congress**

Full Name (Last, First, Middle Initial) <b>A. ActBlue</b>		Date of Disbursement MM / DD / YYYY 06 / 01 / 2014
Mailing Address 14 Arrow St		Amount of Each Disbursement this Period 40.25 <b>Transaction ID : VN7QE9S9CH3</b>
City Cambridge	State MA	
Zip Code 02138-5106	Purpose of Disbursement Credit Card Processing	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. ActBlue</b>		Date of Disbursement MM / DD / YYYY 06 / 02 / 2014
Mailing Address 14 Arrow St		Amount of Each Disbursement this Period 14.76 <b>Transaction ID : VN7QE9SB3R6</b>
City Cambridge	State MA	
Zip Code 02138-5106	Purpose of Disbursement Credit Card Processing	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. ActBlue</b>		Date of Disbursement MM / DD / YYYY 06 / 08 / 2014
Mailing Address 14 Arrow St		Amount of Each Disbursement this Period 0.64 <b>Transaction ID : VN7QE9SB3S4</b>
City Cambridge	State MA	
Zip Code 02138-5106	Purpose of Disbursement Credit Card Processing	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	55.65
<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 93			
	<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)  
**Horsford for Congress**

Full Name (Last, First, Middle Initial) <b>A. ActBlue</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 15 / 2014
Mailing Address 14 Arrow St		Amount of Each Disbursement this Period 0.21 <b>Transaction ID : VN7QE9SB3V0</b>
City Cambridge	State MA	
Zip Code 02138-5106	Purpose of Disbursement Credit Card Processing	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. ActBlue</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 26 / 2014
Mailing Address 14 Arrow St		Amount of Each Disbursement this Period 79.12 <b>Transaction ID : VN7QE9SFP32</b>
City Cambridge	State MA	
Zip Code 02138-5106	Purpose of Disbursement Credit Card Processing	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. AT&amp;T</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 05 / 2014
Mailing Address 208 S Akard St Ste 2701		Amount of Each Disbursement this Period 247.89 <b>Transaction ID : VN7QE9S9CV2</b>
City Dallas	State TX	
Zip Code 75202-4206	Purpose of Disbursement Utility - Phones	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	327.22
<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 93			
	<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)  
**Horsford for Congress**

Full Name (Last, First, Middle Initial) <b>A. AT&amp;T</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 27 / 2014
Mailing Address 208 S Akard St Ste 2701		Amount of Each Disbursement this Period 256.47 <b>Transaction ID : VN7QE9SCN87</b>
City Dallas State TX Zip Code 75202-4206	Purpose of Disbursement Utility - Phones Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Bank of Nevada Credit Services</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 22 / 2014
Mailing Address PO Box 98809		Amount of Each Disbursement this Period 33.42 <b>Transaction ID : VN7QE9S5Z80</b>
City Las Vegas State NV Zip Code 89193-8809	Purpose of Disbursement Credit Card Payment Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Uber Taxi</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 22 / 2014
Mailing Address 405 Howard St		Amount of Each Disbursement this Period 33.42 <b>Transaction ID : VN7QE9S5Z97</b>
City San Francisco State CA Zip Code 94105-2625	Purpose of Disbursement Travel - Cab Fare Candidate Name Category/Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	<b>[MEMO ITEM]</b> *

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	289.89
<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 93	
	<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)  
**Horsford for Congress**

Full Name (Last, First, Middle Initial) <b>A. Bank of Nevada Credit Services</b>		Date of Disbursement MM / DD / YYYY 06 / 05 / 2014
Mailing Address PO Box 98809		Amount of Each Disbursement this Period 769.60
City Las Vegas	State NV	
Zip Code 89193-8809	Purpose of Disbursement Credit Card Payment	<b>Transaction ID : VN7QE9SB441</b>
Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. The Corner Bakery</b>		Date of Disbursement MM / DD / YYYY 06 / 05 / 2014
Mailing Address 1425 K St NW		Amount of Each Disbursement this Period 394.60
City Washington	State DC	
Zip Code 20005-3546	Purpose of Disbursement Fundraiser Event Expense - Catering	<b>Transaction ID : VN7QE9SB459</b>
Candidate Name	003 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> *
State: District:		

Full Name (Last, First, Middle Initial) <b>c. The Source</b>		Date of Disbursement MM / DD / YYYY 06 / 05 / 2014
Mailing Address 575 Pennsylvania Ave NW		Amount of Each Disbursement this Period 375.00
City Washington	State DC	
Zip Code 20001-2114	Purpose of Disbursement Fundraiser Event Expense - Food, Beverages, Venue, Entertainment	<b>Transaction ID : VN7QE9SB4B6</b>
Candidate Name	003 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> *
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	769.60
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 72 OF 93	
	<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)  
**Horsford for Congress**

Full Name (Last, First, Middle Initial) <b>A. Bank of Nevada Credit Services</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 05 / 2014
Mailing Address PO Box 98809		Amount of Each Disbursement this Period 355.51
City Las Vegas	State NV	
Zip Code 89193-8809	Purpose of Disbursement Credit Card Payment	<b>Transaction ID : VN7QE9SB4K9</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. GOOGLE INC. NETPAC</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 05 / 2014
Mailing Address 1101 New York Ave NW FI 2		Amount of Each Disbursement this Period 25.00
City Washington	State DC	
Zip Code 20005-4344	Purpose of Disbursement E-mail Service	<b>Transaction ID : VN7QE9SB5V3</b>
Candidate Name <b>GOOGLE INC. NETPAC</b>	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> *
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Uber Taxi</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 05 / 2014
Mailing Address 405 Howard St		Amount of Each Disbursement this Period 269.28
City San Francisco	State CA	
Zip Code 94105-2625	Purpose of Disbursement Travel - Cab Fare	<b>Transaction ID : VN7QE9SB4N5</b>
Candidate Name	002 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> *
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	355.51
<b>TOTAL</b> This Period (last page this line number only).....	



: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB17

Transaction ID : VN7QE9SB4K9

Please Note that not all of the memo entries for this reimbursement meet the \$200.00 Reporting threshold

Form/Schedule:

Transaction ID:

**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 93	
	<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)  
**Horsford for Congress**

Full Name (Last, First, Middle Initial) <b>A. Bank of Nevada Credit Services</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 05 / 2014
Mailing Address PO Box 98809		Amount of Each Disbursement this Period 2487.00
City Las Vegas	State NV	
Zip Code 89193-8809	Purpose of Disbursement Credit Card Payment	<b>Transaction ID : VN7QE9SCNC8</b>
Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Amtrak</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 05 / 2014
Mailing Address 50 Massachusetts Ave NE		Amount of Each Disbursement this Period 54.00
City Washington	State DC	
Zip Code 20002-4278	Purpose of Disbursement Travel - Train Fare	<b>Transaction ID : VN7QE9SCNT9</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> *
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Battle Born Media - Hawthorne, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 05 / 2014
Mailing Address dba Mineral Co. Independent News 10120 W. Flamingo Rd., Ste. 4629		Amount of Each Disbursement this Period 600.00
City Las Vegas	State NV	
Zip Code 89147	Purpose of Disbursement Advertising	<b>Transaction ID : VN7QE9SCNX3</b>
Candidate Name	004 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> *
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2487.00
<b>TOTAL</b> This Period (last page this line number only).....	

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB17

Transaction ID : VN7QE9SCNC8

Please note that not all of the memo entries for this reimbursement meet the \$200.00 Reporting Threshold.

Form/Schedule:

Transaction ID:

**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 93	
	<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)  
**Horsford for Congress**

Full Name (Last, First, Middle Initial) <b>A. Circus Circus Reno Hotel &amp; Casino</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 05 / 2014
Mailing Address 500 N Sierra St		Amount of Each Disbursement this Period 337.11
City Reno	State NV	
Zip Code 89503-4717	Purpose of Disbursement Travel - Lodging	Transaction ID : VN7QE9SCNE4
Candidate Name	002 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Cricket Communications</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 05 / 2014
Mailing Address 5887 Copley Dr		Amount of Each Disbursement this Period 268.00
City San Diego	State CA	
Zip Code 92111-7906	Purpose of Disbursement Equipment - Phones	Transaction ID : VN7QE9SCNF2
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Gramercy Park Hotel</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 05 / 2014
Mailing Address 2 Lexington Ave		Amount of Each Disbursement this Period 495.77
City New York	State NY	
Zip Code 10010-5405	Purpose of Disbursement Travel - Lodging	Transaction ID : VN7QE9SCNY1
Candidate Name	002 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<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 77 OF 93	
	<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)  
**Horsford for Congress**

Full Name (Last, First, Middle Initial) <b>A. NEVADA STATE DEMOCRATIC PARTY</b>		Date of Disbursement MM / DD / YYYY 06 / 05 / 2014
Mailing Address 1210 S Valley View Blvd Ste 114		Amount of Each Disbursement this Period 100.00
City Las Vegas	State NV Zip Code 89102-1857	
Purpose of Disbursement State Convention	Category/Type 007	Transaction ID : VN7QE9SCPC1  [MEMO ITEM] *
Candidate Name <b>NEVADA STATE DEMOCRATIC PARTY</b>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. U.S. Postal Service</b>		Date of Disbursement MM / DD / YYYY 06 / 05 / 2014
Mailing Address 1001 E Sunset Rd		Amount of Each Disbursement this Period 343.00
City Las Vegas	State NV Zip Code 89193-1101	
Purpose of Disbursement Postage	Category/Type 001	Transaction ID : VN7QE9SCNW5  [MEMO ITEM] *
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Bank of Nevada Credit Services</b>		Date of Disbursement MM / DD / YYYY 06 / 13 / 2014
Mailing Address PO Box 98809		Amount of Each Disbursement this Period 538.75
City Las Vegas	State NV Zip Code 89193-8809	
Purpose of Disbursement Credit Card Payment	Category/Type 001	Transaction ID : VN7QE9SB425
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	538.75
<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 78 OF 93	
	<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)  
**Horsford for Congress**

<b>A. PROPERTY CASUALTY INSURERS ASSOCIATION OF AMERICA POLITICAL ACTION COMMITTEE (PCIPAC)</b> Full Name (Last, First, Middle Initial) Mailing Address 444 N Capitol St NW Ste 801 City Washington State DC Zip Code 20001-1508 Purpose of Disbursement Event Expense - Venue, Invitations Candidate Name PROPERTY CASUALTY INSURERS ASSOCIATION OF AMERICA POLITICAL ACTION COMMITTEE (PCIPAC) Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) State: District:		Date of Disbursement M M / D D / Y Y Y Y 06 / 13 / 2014 Amount of Each Disbursement this Period 538.75 Transaction ID : VN7QE9SB433 [MEMO ITEM] *
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<b>B. Bank of Nevada Credit Services</b> Full Name (Last, First, Middle Initial) Mailing Address PO Box 98809 City Las Vegas State NV Zip Code 89193-8809 Purpose of Disbursement Credit Card Payment Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) State: District:		Date of Disbursement M M / D D / Y Y Y Y 06 / 13 / 2014 Amount of Each Disbursement this Period 389.86 Transaction ID : VN7QE9SB6N9
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<b>C. National Democratic Club</b> Full Name (Last, First, Middle Initial) Mailing Address 30 Ivy St SE City Washington State DC Zip Code 20003-4071 Purpose of Disbursement Meetings Expense - Meals Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) State: District:		Date of Disbursement M M / D D / Y Y Y Y 06 / 13 / 2014 Amount of Each Disbursement this Period 344.75 Transaction ID : VN7QE9SB6Q5 [MEMO ITEM] *
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<b>SUBTOTAL</b> of Disbursements This Page (optional).....	389.86
<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 79 OF 93	
	<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)  
**Horsford for Congress**

Full Name (Last, First, Middle Initial) <b>A. Uber Taxi</b>		Date of Disbursement MM / DD / YYYY 06 / 13 / 2014
Mailing Address 405 Howard St		Amount of Each Disbursement this Period 45.11
City San Francisco	State CA	
Zip Code 94105-2625	Purpose of Disbursement Travel - Cab Fare	Transaction ID : VN7QE9SB6R3
Candidate Name	002 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Bank of Nevada Credit Services</b>		Date of Disbursement MM / DD / YYYY 06 / 13 / 2014
Mailing Address PO Box 98809		Amount of Each Disbursement this Period 59.66
City Las Vegas	State NV	
Zip Code 89193-8809	Purpose of Disbursement Credit Card Payment	Transaction ID : VN7QE9SCNA3
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Bank of Nevada Credit Services</b>		Date of Disbursement MM / DD / YYYY 06 / 19 / 2014
Mailing Address PO Box 98809		Amount of Each Disbursement this Period 1606.31
City Las Vegas	State NV	
Zip Code 89193-8809	Purpose of Disbursement Credit Card Payment	Transaction ID : VN7QE9SB3C1
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1665.97
<b>TOTAL</b> This Period (last page this line number only).....	

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB17

Transaction ID : VN7QE9SCNA3

Please Note that not all of the memo entries for this reimbursement meet the \$200.00 Reporting threshold

Form/Schedule: SB17

Transaction ID: VN7QE9SB3C1

Please Note that not all of the memo entries for this reimbursement meet the \$200.00 Reporting threshold



**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 93	
	<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)  
**Horsford for Congress**

Full Name (Last, First, Middle Initial) <b>A. Congressional Liquor Store</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 19 / 2014
Mailing Address 404 1st St SE		Amount of Each Disbursement this Period 286.17
City Washington	State DC	
Zip Code 20003-1826	Purpose of Disbursement Fundraiser Event Expense - Beverages	Transaction ID : VN7QE9SB3H1
Candidate Name	Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:		

Full Name (Last, First, Middle Initial) <b>B. W. Millar &amp; Company Catering</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 19 / 2014
Mailing Address 1335 14th St NW		Amount of Each Disbursement this Period 1308.51
City Washington	State DC	
Zip Code 20005-3610	Purpose of Disbursement Fundraiser Event Expense - Catering	Transaction ID : VN7QE9SB3F5
Candidate Name	Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Bank of Nevada Credit Services</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 20 / 2014
Mailing Address PO Box 98809		Amount of Each Disbursement this Period 173.58
City Las Vegas	State NV	
Zip Code 89193-8809	Purpose of Disbursement Credit Card Payment	Transaction ID : VN7QE9SB603
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	173.58
<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 93			
	<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)  
**Horsford for Congress**

Full Name (Last, First, Middle Initial) <b>A. Uber Taxi</b>		Date of Disbursement MM / DD / YYYY 06 / 20 / 2014
Mailing Address 405 Howard St		Amount of Each Disbursement this Period 173.58
City San Francisco	State CA	
Zip Code 94105-2625	Purpose of Disbursement Travel - Cab Fare	Transaction ID : VN7QE9SB629
Candidate Name	Category/Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Bank of Nevada</b>		Date of Disbursement MM / DD / YYYY 05 / 22 / 2014
Mailing Address 7251 W Lake Mead Blvd Ste 108		Amount of Each Disbursement this Period 50.00
City Las Vegas	State NV	
Zip Code 89128-8358	Purpose of Disbursement Bank Service Fee	Transaction ID : VN7QE9SEHY7
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Bank of Nevada</b>		Date of Disbursement MM / DD / YYYY 06 / 10 / 2014
Mailing Address 7251 W Lake Mead Blvd Ste 108		Amount of Each Disbursement this Period 10.00
City Las Vegas	State NV	
Zip Code 89128-8358	Purpose of Disbursement Bank Service Fee	Transaction ID : VN7QE9SEH83
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	60.00
<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 93	
	<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)  
**Horsford for Congress**

Full Name (Last, First, Middle Initial) <b>A. Bank of Nevada</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 20 / 2014
Mailing Address 7251 W Lake Mead Blvd Ste 108		Amount of Each Disbursement this Period 25.00
City Las Vegas	State NV Zip Code 89128-8358	
Purpose of Disbursement Bank Service Fee	Category/Type 001	<b>Transaction ID : VN7QE9SEHB6</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. CenturyLink</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 05 / 2014
Mailing Address PO Box 2961		Amount of Each Disbursement this Period 570.11
City Phoenix	State AZ Zip Code 85062-2961	
Purpose of Disbursement Phones	Category/Type 001	<b>Transaction ID : VN7QE9S9CT4</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. CenturyLink</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 27 / 2014
Mailing Address PO Box 2961		Amount of Each Disbursement this Period 252.54
City Phoenix	State AZ Zip Code 85062-2961	
Purpose of Disbursement Phones	Category/Type 001	<b>Transaction ID : VN7QE9SC2M0</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	847.65
<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 93			
	<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)  
**Horsford for Congress**

Full Name (Last, First, Middle Initial) <b>A. Francesca Cox</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 27 / 2014
Mailing Address 1532 Brookhaven Dr		Amount of Each Disbursement this Period 1028.69 <b>Transaction ID : VN7QE9SCN95</b>
City McLean	State VA	
Purpose of Disbursement Fundraising Consultant Reimbursement		Category/ Type 003
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) <b>B. First Data USA</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 02 / 2014
Mailing Address 5565 Glenridge Connector NE		Amount of Each Disbursement this Period 990.74 <b>Transaction ID : VN7QE9SB3Z1</b>
City Atlanta	State GA	
Purpose of Disbursement Credit Card Processing		Category/ Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) <b>c. Institute for Debate Education</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 02 / 2014
Mailing Address 13106 Heritage Way		Amount of Each Disbursement this Period 500.00 <b>Transaction ID : VN7QE9S9CM7</b>
City Apple Valley	State MN	
Purpose of Disbursement Campaign Consultant		Category/ Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2519.43
<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 93	
	<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)  
**Horsford for Congress**

Full Name (Last, First, Middle Initial) <b>A. LOOC Holdings, LLC</b>		Date of Disbursement MM / DD / YYYY 06 / 05 / 2014
Mailing Address 3320 Palatine Hills Ave		Amount of Each Disbursement this Period 2500.00 <b>Transaction ID : VN7QE9S9CS6</b>
City North Las Vegas	State NV Zip Code 89081-6539	
Purpose of Disbursement Office Rent	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Juliet McCarthy</b>		Date of Disbursement MM / DD / YYYY 06 / 28 / 2014
Mailing Address 9805 Camden Rose Ct		Amount of Each Disbursement this Period 250.00 <b>Transaction ID : VN8PPCTDFV8I</b>
City Las Vegas	State NV Zip Code 89134-5906	
Purpose of Disbursement Event Expense- Photography	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	* In-Kind Received
State: District:		

Full Name (Last, First, Middle Initial) <b>c. NGP Van, Inc.</b>		Date of Disbursement MM / DD / YYYY 06 / 27 / 2014
Mailing Address 1101 15th St NW Ste 500		Amount of Each Disbursement this Period 75.00 <b>Transaction ID : VN7QE9SC2K2</b>
City Washington	State DC Zip Code 20005-5006	
Purpose of Disbursement Web Site Support	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2825.00
<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 86 OF 93		
	<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)  
**Horsford for Congress**

Full Name (Last, First, Middle Initial) <b>A. Nuria, LLP</b>		Date of Disbursement MM / DD / YYYY 06 / 02 / 2014
Mailing Address 1321 Corcoran St NW		Amount of Each Disbursement this Period 7500.00 <b>Transaction ID : VN7QE9SED76</b>
City Washington State DC Zip Code 20009-4310	Purpose of Disbursement Campaign Consultant Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. NV Energy</b>		Date of Disbursement MM / DD / YYYY 06 / 27 / 2014
Mailing Address PO Box 30086		Amount of Each Disbursement this Period 40.46 <b>Transaction ID : VN7QE9SC2H7</b>
City Reno State NV Zip Code 89520-3086	Purpose of Disbursement Utility - Electric Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. NV Energy</b>		Date of Disbursement MM / DD / YYYY 06 / 27 / 2014
Mailing Address PO Box 30086		Amount of Each Disbursement this Period 99.16 <b>Transaction ID : VN7QE9SC2J5</b>
City Reno State NV Zip Code 89520-3086	Purpose of Disbursement Utility - Electric Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	7639.62
<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 87 OF 93	
	<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)  
**Horsford for Congress**

Full Name (Last, First, Middle Initial) <b>A. Paychex, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 16 / 2014
Mailing Address 1175 John St		Amount of Each Disbursement this Period 2210.28
City West Henrietta	State NY	
Zip Code 14586-9102	Purpose of Disbursement Payroll	<b>Transaction ID : VN7QE9SCN37</b>
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Paychex, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 16 / 2014
Mailing Address 1175 John St		Amount of Each Disbursement this Period 167.25
City West Henrietta	State NY	
Zip Code 14586-9102	Purpose of Disbursement Payroll Processing Fee	<b>Transaction ID : VN7QE9SCN45</b>
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> *
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Marcela C. Ruiz</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 16 / 2014
Mailing Address 133 Sam Jonas Dr		Amount of Each Disbursement this Period 897.84
City Las Vegas	State NV	
Zip Code 89145-4901	Purpose of Disbursement Administrative Consulting	<b>Transaction ID : VN7QE9SCN61</b>
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> *
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2210.28
<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 88 OF 93			
	<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)  
**Horsford for Congress**

Full Name (Last, First, Middle Initial) <b>A. U.S. Treasury</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 16 / 2014
Mailing Address PO Box 9941		Amount of Each Disbursement this Period 4190.00
City Ogden	State UT	
Purpose of Disbursement Employer Payroll Taxes		Transaction ID : VN7QE9SCN79
Candidate Name		
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	[MEMO ITEM] *
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) <b>B. Wendell P Williams</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 16 / 2014
Mailing Address 3701 Fortune Ave		Amount of Each Disbursement this Period 1000.00
City Las Vegas	State NV	
Purpose of Disbursement Salary		Transaction ID : VN7QE9SCN53
Candidate Name		
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	[MEMO ITEM] *
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) <b>c. Piercy, Bowler, Tayler &amp; Kern</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 02 / 2014
Mailing Address 6100 Elton Ave Ste 1000		Amount of Each Disbursement this Period 4190.00
City Las Vegas	State NV	
Purpose of Disbursement Accounting Services		Transaction ID : VN7QE9S9CK9
Candidate Name		
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	001 Category/ Type
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4190.00
<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 89 OF 93			
	<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)  
**Horsford for Congress**

<b>A. PROPERTY CASUALTY INSURERS ASSOCIATION OF AMERICA POLITICAL ACTION COMMITTEE (PCIPAC)</b> Full Name (Last, First, Middle Initial) Mailing Address 444 N Capitol St NW Ste 801 City Washington State DC Zip Code 20001-1508 Purpose of Disbursement Event Expense - Email Candidate Name PROPERTY CASUALTY INSURERS ASSOCIATION OF AMERICA POLITICAL ACTION COMMITTEE (PCIPAC) Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Date of Disbursement M M / D D / Y Y Y Y 06 / 18 / 2014 Amount of Each Disbursement this Period 62.50 <b>Transaction ID : VN7QE9SA8C5</b>
State: District:		Category/ Type 007

<b>B. Jennifer L. Taylor</b> Full Name (Last, First, Middle Initial) Mailing Address 8158 Hawk Clan Ct Ste 202 City Las Vegas State NV Zip Code 89131-1445 Purpose of Disbursement Campaign Consultant Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Date of Disbursement M M / D D / Y Y Y Y 06 / 02 / 2014 Amount of Each Disbursement this Period 4500.00 <b>Transaction ID : VN7QE9S9CN4</b>
State: District:		Category/ Type 001

<b>c. Jennifer L. Taylor</b> Full Name (Last, First, Middle Initial) Mailing Address 8158 Hawk Clan Ct Ste 202 City Las Vegas State NV Zip Code 89131-1445 Purpose of Disbursement Campaign Consultant Expense Reimbursement Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Date of Disbursement M M / D D / Y Y Y Y 06 / 02 / 2014 Amount of Each Disbursement this Period 221.14 <b>Transaction ID : VN7QE9S9CP2</b>
State: District:		Category/ Type 001

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4783.64
<b>TOTAL</b> This Period (last page this line number only).....	[Empty Box]

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 90 OF 93			
	<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)  
**Horsford for Congress**

Full Name (Last, First, Middle Initial) <b>A. Jennifer L. Taylor</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 27 / 2014
Mailing Address 8158 Hawk Clan Ct Ste 202		Amount of Each Disbursement this Period 4500.00 <b>Transaction ID : VN7QE9SBFR2</b>
City Las Vegas	State NV Zip Code 89131-1445	
Purpose of Disbursement Campaign Consultant	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Jennifer L. Taylor</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 27 / 2014
Mailing Address 8158 Hawk Clan Ct Ste 202		Amount of Each Disbursement this Period 1845.69 <b>Transaction ID : VN7QE9SC2F1</b>
City Las Vegas	State NV Zip Code 89131-1445	
Purpose of Disbursement Campaign Consultant Expense Reimbursement	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Jennifer L. Taylor</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 27 / 2014
Mailing Address 8158 Hawk Clan Ct Ste 202		Amount of Each Disbursement this Period 986.44 <b>Transaction ID : VN7QE9SC2G9</b>
City Las Vegas	State NV Zip Code 89131-1445	
Purpose of Disbursement Campaign Consultant Expense Reimbursement	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	7332.13
<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 91 OF 93		
	<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)  
**Horsford for Congress**

Full Name (Last, First, Middle Initial) <b>A. The Wakem Group, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 12 / 2014
Mailing Address 1532 Brookhaven Dr		Amount of Each Disbursement this Period 5000.00
City McLean	State VA Zip Code 22101-4127	
Purpose of Disbursement Fundraising Consultant	Category/Type 001	<b>Transaction ID : VN7QE9S9CX8</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

Full Name (Last, First, Middle Initial) <b>B.</b>		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State Zip Code	
Purpose of Disbursement	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State Zip Code	
Purpose of Disbursement	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	5000.00
<b>TOTAL</b> This Period (last page this line number only).....	45286.36

**SCHEDULE D (FEC Form 3)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9  
 10

NAME OF COMMITTEE (In Full)

**Horsford for Congress**

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

**Genevieve G. Cornelius**

Nature of Debt (Purpose):

Contributor requested refund of a portion of online contribution.

Mailing Address 9753 Glittering Star Ave

City State Zip Code  
Las Vegas NV 89147-8242

Outstanding Balance Beginning This Period

454.00

Transaction ID : VN5RY9H9B43

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

454.00

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

Nature of Debt (Purpose):

Mailing Address

City State Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

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

Nature of Debt (Purpose):

Mailing Address

City State Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) **SUBTOTALS** This Period This Page (optional) .....

454.00

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

454.00

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

454.00

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SD9

Transaction ID : VN5RY9H9B43

Inadvertent contribution refund made by campaign check and by the credit card company.

Form/Schedule:

Transaction ID: