CONTRIBUTIONS AND EXPENSES REPORT A Stronger NV	St	ate of Nevada
Name Office (if applicable) 284-C E Lake Mead Parkway, #315, Henderson, NV, 89015	District (if applic 202-772-5600	cable)
Mailing Address	Telephone No.	
astrongerNV@gmail.com E-Mail Address		
Select Appropriate Box(es) PAC PAC (Advocating Passage or Defeat of a	Question on the Ballot)	POLITICAL PARTY
□ INDEPENDENT EXPENDITURE □ NONPROFIT	CORP AMENDED	
Report #1 - Due April 15, 2022 Period: Jan 01, 2022 - Mar 31, 2022		FILED
Report #2 - Due July 15, 2022 Period: Apr 01, 2022 - Jun 30, 2022	J	ıl <b>15</b> 2022
Report #3 - Due October 15, 2022 Period: Jul 01, 2022 - Sep 30, 2022	R	ARBARA K.
Report #4 - Due January 15, 2023 Period: Oct 01, 2022 - Dec 31, 2022	C	EGAVSKE TARY OF STATE
Annual Filing - Due January 15, 2023 Period: Jan 01, 2022 - Dec 31, 2022	FOR	OFFICE USE ONLY
* Report #4 suffices for the 2023 Annual CE Filing only if Report #'s 1, 2, 3, are	previously filed this peri	
CONTRIBUTIONS SUMMARY	This Period	Cumulative From Beginning of Report Period #1 Through End of This Reporting Period
1. Total Monetary Contributions in Excess of \$1000	\$ 6,100,000.00	\$ 6,100,000.00
2. Total Monetary Contributions in the Form of Loans Guaranteed by a 3rd-Party in Excess of \$1000	\$ 0.00	\$0.00
3. Total Monetary Contributions in the Form of Loans that were Forgiven in Excess of \$1000	\$ 0.00	\$0.00
4. Total Value of In Kind Contributions in Excess of \$1000	\$ 0.00	\$0.00
5. Total Amount of All Contributions (Add Lines 1 through 4)	\$ 6,100,000.00	\$6,100,000.00
EXPENSES SUMMARY		
6. Total Monetary Expenses Paid in Excess of \$1000	\$ 4,782,297.00	\$4,782,297.00
7. Total Value of In Kind Expenses in Excess of \$1000	\$ 0.00	\$0.00
8. Total Amount of All Expenses (Add Lines 6 and 7)	\$ 4,782,297.00	\$ 4,782,297.00
AFFIRMATION		
I Declare Under Penalty of Perjury That the Foregoing is True and Correct.  AND		
I have agreed to the following terms and conditions:		
I declare, under penalty of perjury or under an oath to God, that the information I submitted herein to the Se and is not submitted for any improper purpose, and that I am authorized to submit the information, and to th I have reviewed the NRS 225.083 Notice. I understand it is unlawful to submit any illegal, unauthorized, frau information, as defined by state and federal law, to the Secretary of State, and agree to indemnify the Secre any damages incurred for any unlawful, unauthorized, fraudulent, forged, deceptive, defamatory, illicit, or im law, submitted to the Secretary of State by my use of this electronic filing system. I further understand that I (NRS 225.084) penalties for submitting any unlawful unauthorized, fraudulent, forged, deceptive, defamator state law. I understand and agree that all information submitted is the property of the Secretary of State, and understand that during such monitoring, all information, including personal information placed on this syster purpose. By submitting this report I intend to identify myself as the authorized person signing this document as such.	e best of my knowledge complie idulent, forged, deceptive, defan stary of State, and any other part proper information, as defined by may be subject to criminal (NRS y, illicit, or improper information, d may be monitored for all lawful n, may be examined, copied, and	s with NRS Chapter 294A latory, illicit, or improper es entitled thereto, for y the federal and state 239.330) and/or civil as defined by federal and purposes. I further d used for any authorized
Jillian Edelman 07/-	15/2022	
Signature Dat	е	

MONETARY Report Period # 2

CONTRIBUTIONS		
A Stronger NV		
Name (print)	Office (if applicable)	District (if applicable)

## MONETARY CONTRIBUTIONS IN EXCESS OF \$1000 OR, WHEN ADDED TOGETHER FROM ONE CONTRIBUTOR, THAT EXCEED \$1000

(Transfer Total Amount of All Monetary Contributions to Lines 1, 2, or 3, As Applicable, of Contributions Summary)

NAME AND ADDRESS OF PERSON, GROUP OR ORGANIZATION WHO MADE CONTRIBUTION	DATE OF CONTRIBUTION 1	AMOUNT OF CONTRIBUTION	CHECK HERE IF LOAN	NAME AND ADDRESS OF 3rd PARTY IF LOAN GUARANTEED BY 3rd PARTY	NAME AND ADDRESS OF PERSON, GROUP OR ORGANIZATION WHO FORGAVE THE LOAN, IF DIFFERENT THAN CONTRIBUTOR
Home Means Nevada 401 S. Curry Street Carson City, NV 89703	04/29/2022	\$1,500,000.00			
Democratic Governor's Association 1225 Eye St. NW, Suite 1100	04/29/2022	\$2,100,000.00			
Washington, DC 20005	06/13/2022	\$2,500,000.00			

IN KIND CONTRIBUTIONS		Report Period #	<b>‡</b> 2
A Stronger NV			
Name (print)	Office (if applicable)	District (if applicable)	

# IN KIND CONTRIBUTIONS IN EXCESS OF \$1000 OR, WHEN ADDED TOGETHER FROM ONE CONTRIBUTOR, THAT EXCEED \$1000

(Transfer Total Value of All In Kind Contributions to Line 4 of Contributions Summary)

DESCRIPTION OF IN KIND CONTRIBUTION	VALUE OR COST OF IN KIND CONTRIBUTION			NAME AND ADDRESS OF PERSON, GROUP OR ORGANIZATION WHO FORGAVE THE LOAN, IF DIFFERENT THAN CONTRIBUTOR
	OF IN KIND	OF IN KIND OF IN KIND	OF IN KIND OF IN KIND HERE IF	DESCRIPTION OF IN KIND

EXPENSE CATEGORIES		Report Period #2	
A Stronger NV			
Name (print)	Office (if applicable)	District (if applicable)	

## **EXPENSE CATEGORIES (NRS 294A.365)**

CATEGORIES	CODE
Office expenses	A
Expenses related to volunteers	В
Expenses related to travel	С
Expenses related to advertising	D
Expenses related to paid staff	E
Expenses related to consultants	F
Expenses related to polling	G

Expenses related to special events	н
Expenses related to legal defense fund	I
Goods and services provided in kind for which money would otherwise have been paid	J
Contributions made to: (i) another candidate; (ii) a nonprofit corporation that is registered or required to be registered pursuant to NRS 294A.225; (iii) a PAC that is registered or required to be registered pursuant to NRS 294A.230; or (iv) a Recall Committee that is registered or required to be registered pursuant to NRS 294A.250	К
Fees for filing declarations of candidacy or acceptances of candidacy	L
Repayments or forgiveness of loans	М
Disposal of unspent contributions pursuant to NRS 294A.160	N
Other miscellaneous expenses	0

1 NRS 294A.362 requires "In Kind" contributions and expenses to be reported on a separate form, which is attached hereto.

MONETARY EXPENSES	Report Period 12	ŧ 2
A Stronger NV		

A Stronger NV Name (print)

Office (if applicable)

District (if applicable)

#### **MONETARY EXPENSES IN EXCESS OF \$1000**

(Transfer Total Amount of All Campaign Expenses to Line 6 of Expenses Summary)

NAME AND ADDRESS OF PERSON, GROUP OR ORGANIZATION WHO RECEIVED THE PAYMENT FOR THE EXPENSE	<u>CATEGORY</u> (NRS 294A.365)	DATE OF EXPENSE	AMOUNT OF EXPENSE
	D	05/03/2022	\$637,500.00
	D	05/09/2022	\$548,700.00
	D	05/13/2022	\$548,700.00
Great American Media	D	05/26/2022	\$655,075.00
3050 K Street, NW Suite 100	D	06/03/2022	\$398,444.00
Washington, DC 20007	D	06/03/2022	\$447,238.00
	D	06/16/2022	\$447,238.00
	D	06/23/2022	\$447,238.00
	D	06/30/2022	\$447,238.00
Hart Research Associates 1724 Connecticut Ave NW	G	05/11/2022	\$68,000.00
Washington, DC 20009	G	05/11/2022	\$38,000.00
Elias Law Group 10 G St NE Ste 600	0	05/20/2022	\$11,000.00
Washington, DC 20002	0	06/23/2022	\$5,500.00
MVAR Media 1421 Prince St Ste 320	D	06/03/2022	\$68,595.14
ALEXANDRIA, VA 22314	D	06/16/2022	\$13,830.86

IN KIND EXPENSES		Report Period	# 2
A Stronger NV			
Name (print)	Office (if applicable)	District (if applicable)	

### **IN KIND EXPENSES IN EXCESS OF \$1000**

(Transfer Total Value of All In-Kind Expenses to Line 7 of Expenses Summary)

NAME AND ADDRESS OF PERSON, GROUP OR ORGANIZATION WHO RECEIVED THE IN KIND GOOD OR SERVICE	DESCRIPTION OF IN KIND EXPENSE	DATE OF IN KIND  EXPENSE	VALUE OR COST OF IN KIND EXPENSE

EL 202 Revised: 8-13-13 NRS 294A.140; 294A.150; 294A.210; 294A.220; 294A.373