

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

HELLERHIGHWATER PAC

ADDRESS (number and street)

PO Box 370672

Check if different
than previously
reported. (ACC)

Las Vegas

NV

89137-0672

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00471607

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

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)☐ July 31 Mid-Year
Report (Non-election
Year Only) (MY)☐ Termination Report
(TER)(b) Monthly
Report
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)
(Non-Election
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)
(Non-Election
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☒ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M /

D D /

Y Y Y Y Y Y

11

06

2018

in the
State of

NV

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M /

D D /

Y Y Y Y Y Y

in the
State of

5. Covering Period

M M /

D D /

Y Y Y Y Y Y

10

01

2018

through

M M /

D D /

Y Y Y Y Y Y

10

17

2018

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Hastie, Chrissie, , ,

Type or Print Name of Treasurer

Signature of Treasurer

Hastie, Chrissie, , ,

[Electronically Filed]

Date

M M /

D D /

Y Y Y Y Y Y

12

31

2021

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

Office
Use
Only**FEC FORM 3X**
Rev. 05/2016

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

HELLERHIGHWATER PAC

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y Y
10		01		2018

To:

M M	/	D D	/	Y Y Y Y Y
10		17		2018

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <div><div>Y Y Y Y Y</div><div>2018</div></div>		<div><div></div><div>318829.00</div></div>
(b) Cash on Hand at Beginning of Reporting Period.....	<div><div></div><div>351847.82</div></div>	
(c) Total Receipts (from Line 19)	<div><div></div><div>23454.99</div></div>	<div><div></div><div>326931.93</div></div>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<div><div></div><div>375302.81</div></div>	<div><div></div><div>645760.93</div></div>
7. Total Disbursements (from Line 31).....	<div><div></div><div>7600.76</div></div>	<div><div></div><div>278058.88</div></div>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	<div><div></div><div>367702.05</div></div>	<div><div></div><div>367702.05</div></div>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<div><div></div><div>0.00</div></div>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<div><div></div><div>0.00</div></div>	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

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 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

HELLERHIGHWATER PAC

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	1		2	0	1	8

To:

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	7		2	0	1	8

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	0.00	28000.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	0.00	28000.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	5500.00	274000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	5500.00	302000.00
12. Transfers From Affiliated/Other Party Committees.....	17954.99	19931.93
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	5000.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	23454.99	326931.93
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	23454.99	326931.93

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	5000.00	169008.12
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	5000.00	169008.12
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	80500.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(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 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	2600.76	28550.76
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	7600.76	278058.88
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	7600.76	278058.88

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	5500.00	302000.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	5500.00	302000.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	5000.00	169008.12
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	5000.00	169008.12

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

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

FOR LINE NUMBER:
(check only one)

PAGE 6 OF 16

☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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)

HELLERHIGHWATER PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. National Air Traffic Controllers PAC

Mailing Address 1325 Massachusetts Avenue NW

City
Washington

State
DC

Zip Code
20005-4171

FEC ID number of contributing
federal political committee.

C C00238725

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4000.00

Date of Receipt

10 / **12** / **2018**

Transaction ID : A6909BAF1BBFD4E5FB30

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Merck Employees PAC

Mailing Address 601 Pennsylvania Avenue NW
North Building #1200

City
Washington

State
DC

Zip Code
20004

FEC ID number of contributing
federal political committee.

C C00097485

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

10 / **12** / **2018**

Transaction ID : A09A21E1E40B246B1918

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. National Air Traffic Controllers PAC

Mailing Address 1325 Massachusetts Avenue NW

City
Washington

State
DC

Zip Code
20005-4171

FEC ID number of contributing
federal political committee.

C C00238725

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

4000.00

Date of Receipt

10 / **12** / **2018**

Transaction ID : A139DD4AEBD3449C891C

Amount of Each Receipt this Period

1000.00

☐ Memo Item

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

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

4500.00

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

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

FOR LINE NUMBER: PAGE 7 OF 16

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

HELLERHIGHWATER PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. National Air Traffic Controllers PAC

Mailing Address 1325 Massachusetts Avenue NW

City
Washington

State
DC

Zip Code
20005-4171

FEC ID number of contributing
federal political committee.

C C00238725

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4000.00

Date of Receipt

10 / **12** / **2018**

Transaction ID : A867D26C3D5704257A00

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

☐ Memo Item

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

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

1000.00

5500.00

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 OF 16

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
------------------------------	------------------------------	------------------------------	----------------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

HELLERHIGHWATER PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HELLER VICTORY COMMITTEE

Mailing Address PO BOX 370672

City
Las VegasState
NVZip Code
89137-0672FEC ID number of contributing
federal political committee.

C C00630889

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

38931.93

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	17	2018

Transaction ID : AC4532125D9724387A42

Amount of Each Receipt this Period

17954.99

☐ Memo Item
 Transfer Of Net Proceeds

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Foley, Carol, , ,

Mailing Address 1701 Village Center Cir

City
Las VegasState
NVZip Code
89134-6368FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RetiredOccupation (for Individual)
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	12	2018

Transaction ID : A1CBE36F0569C4812984

Amount of Each Receipt this Period

5000.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Fertitta, Lorenzo, , ,

Mailing Address PO Box 379045

City
Las VegasState
NVZip Code
89137-9045FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Zuffa LLCOccupation (for Individual)
Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

7700.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
09	27	2018

Transaction ID : A97D79FD7030249D18FA

Amount of Each Receipt this Period

5000.00

☒ Memo Item

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

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

17954.99

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

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

FOR LINE NUMBER:
(check only one)

PAGE 9 OF 16

☐ 11a ☐ 11b ☐ 11c ☒ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

HELLERHIGHWATER PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Fertitta, Frank, , ,

Mailing Address PO Box 379045

City
Las Vegas

State
NV

Zip Code
89137-9045

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Zuffa LLC

Occupation (for Individual)
Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7700.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 27 / 2018

Transaction ID : A361EEF3977064740A48

Amount of Each Receipt this Period

5000.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Rastin, Thomas, , ,

Mailing Address PO Box 243

City
Mount Vernon

State
OH

Zip Code
43050-0243

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Ariel Corp.

Occupation (for Individual)
Executive Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 26 / 2018

Transaction ID : AC5E822EFFFDB43BB8EC

Amount of Each Receipt this Period

5000.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Foley, William, , ,

Mailing Address 1701 Village Center Cir

City
Las Vegas

State
NV

Zip Code
89134-6368

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Black Knight Financial Services

Occupation (for Individual)
Chairman

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 12 / 2018

Transaction ID : A81FE8DB8AB28471DB1F

Amount of Each Receipt this Period

5000.00

☒ Memo Item

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

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

0.00

17954.99

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

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

FOR LINE NUMBER:
(check only one)

PAGE 10 OF 16

☒ 21b ☐ 22 ☐ 23 ☐ 26 ☐ 27
☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

HELLERHIGHWATER PAC

Full Name (Last, First, Middle Initial)

A. Abrams, Edgar, , ,

Mailing Address 1391 Pennsylvania Ave SE
Unit 250

City
Washington

State
DC

Zip Code
20003-3079

Purpose of Disbursement
Consulting Management

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
10 / 02 / 2018

FEC Identification Number

C

Transaction ID : B408CDB718

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Category/
Type

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Category/
Type

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

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

5000.00

5000.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 11 OF 16

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

HELLERHIGHWATER PAC

Full Name (Last, First, Middle Initial)

A. Phillips, Ryan, , ,

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		09		2018

Mailing Address 6755 N Pioneer Way

City
Las VegasState
NVZip Code
89131-3509Purpose of Disbursement
Unauthorized disbursement of funds

Candidate Name

Category/
TypeOffice 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:

FEC Identification Number

C**Transaction ID : B9E34EDF44**

Amount of Each Disbursement this Period

478.50

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. WALMART

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		17		2018

Mailing Address 8060 W Tropical Pkwy

City
Las VegasState
NVZip Code
89149-4528Purpose of Disbursement
Unauthorized disbursement of funds

Candidate Name

Category/
TypeOffice 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:

FEC Identification Number

C**Transaction ID : BF0253C3F01**

Amount of Each Disbursement this Period

104.24

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. VONS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		09		2018

Mailing Address 6450 Sky Pointe Dr

City
Las VegasState
NVZip Code
89131-4058Purpose of Disbursement
Unauthorized disbursement of funds

Candidate Name

Category/
TypeOffice 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:

FEC Identification Number

C**Transaction ID : B3396681261**

Amount of Each Disbursement this Period

213.21

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

795.95

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 12 OF 16

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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)

HELLERHIGHWATER PAC

Full Name (Last, First, Middle Initial)

A. WALMART

Mailing Address 8060 W Tropical Pkwy

City
Las VegasState
NVZip Code
89149-4528Purpose of Disbursement
Unauthorized disbursement of funds

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		09		2018

FEC Identification Number

C

Transaction ID : B1FCBD4287

Amount of Each Disbursement this Period

 101.78☐ Memo Item

Full Name (Last, First, Middle Initial)

B. WALMART

Mailing Address 8060 W Tropical Pkwy

City
Las VegasState
NVZip Code
89149-4528Purpose of Disbursement
Unauthorized disbursement of funds

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		09		2018

FEC Identification Number

C

Transaction ID : BA11B92E33

Amount of Each Disbursement this Period

 101.78☐ Memo Item

Full Name (Last, First, Middle Initial)

C. WALMART

Mailing Address 8060 W Tropical Pkwy

City
Las VegasState
NVZip Code
89149-4528Purpose of Disbursement
Unauthorized disbursement of funds

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		09		2018

FEC Identification Number

C

Transaction ID : B5D87C07E4

Amount of Each Disbursement this Period

 101.68☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ► 305.24

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 13 OF 16

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

HELLERHIGHWATER PAC

Full Name (Last, First, Middle Initial)

A. VONS

Mailing Address 6450 Sky Pointe Dr

City
Las VegasState
NVZip Code
89131-4058Purpose of Disbursement
Unauthorized disbursement of funds

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		11		2018

FEC Identification Number

C**Transaction ID : B742F580547**

Amount of Each Disbursement this Period

171.91

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. WALMART

Mailing Address 8060 W Tropical Pkwy

City
Las VegasState
NVZip Code
89149-4528Purpose of Disbursement
Unauthorized disbursement of funds

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		09		2018

FEC Identification Number

C**Transaction ID : B76DB82E43I**

Amount of Each Disbursement this Period

101.78

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. CHEVRON

Mailing Address 6698 Sky Pointe Dr

City
Las VegasState
NVZip Code
89131-4001Purpose of Disbursement
Unauthorized disbursement of funds

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		09		2018

FEC Identification Number

C**Transaction ID : B3C14F9AAf**

Amount of Each Disbursement this Period

51.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

324.69

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 14 OF 16

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

HELLERHIGHWATER PAC

Full Name (Last, First, Middle Initial)

A. WALMART

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		17		2018

Mailing Address 8060 W Tropical Pkwy

City
Las VegasState
NVZip Code
89149-4528Purpose of Disbursement
Unauthorized disbursement of funds

Candidate Name

Category/
TypeOffice 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:

FEC Identification Number

C**Transaction ID : BEDC963123**

Amount of Each Disbursement this Period

111.04

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. VONS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		10		2018

Mailing Address 6450 Sky Pointe Dr

City
Las VegasState
NVZip Code
89131-4058Purpose of Disbursement
Unauthorized disbursement of funds

Candidate Name

Category/
TypeOffice 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:

FEC Identification Number

C**Transaction ID : B4364E8406C**

Amount of Each Disbursement this Period

205.99

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. VONS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		10		2018

Mailing Address 6450 Sky Pointe Dr

City
Las VegasState
NVZip Code
89131-4058Purpose of Disbursement
Unauthorized disbursement of funds

Candidate Name

Category/
TypeOffice 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:

FEC Identification Number

C**Transaction ID : B29EF40FF3**

Amount of Each Disbursement this Period

161.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

478.03

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

HELLERHIGHWATER PAC

Full Name (Last, First, Middle Initial)

A. VONS

Mailing Address 6450 Sky Pointe Dr

City
Las VegasState
NVZip Code
89131-4058Purpose of Disbursement
Unauthorized disbursement of funds

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		09		2018

FEC Identification Number

C**Transaction ID : B9062F7800E**

Amount of Each Disbursement this Period

201.79

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. WALMART

Mailing Address 8060 W Tropical Pkwy

City
Las VegasState
NVZip Code
89149-4528Purpose of Disbursement
Unauthorized disbursement of funds

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		16		2018

FEC Identification Number

C**Transaction ID : BE41C4E8E4**

Amount of Each Disbursement this Period

101.48

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. CHEVRON

Mailing Address 6698 Sky Pointe Dr

City
Las VegasState
NVZip Code
89131-4001Purpose of Disbursement
Unauthorized disbursement of funds

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		09		2018

FEC Identification Number

C**Transaction ID : B489BD056F**

Amount of Each Disbursement this Period

51.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

354.27

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 16 OF 16

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

HELLERHIGHWATER PAC

Full Name (Last, First, Middle Initial)

A. VONS

Mailing Address 6450 Sky Pointe Dr

City
Las VegasState
NVZip Code
89131-4058Purpose of Disbursement
Unauthorized disbursement of funds

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
10		09		2018

FEC Identification Number

C**Transaction ID : BBE317C109**

Amount of Each Disbursement this Period

141.29

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. VONS

Mailing Address 6450 Sky Pointe Dr

City
Las VegasState
NVZip Code
89131-4058Purpose of Disbursement
Unauthorized disbursement of funds

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify)

State: District:

Category/
Type

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
10		12		2018

FEC Identification Number

C**Transaction ID : B741988E596**

Amount of Each Disbursement this Period

201.29

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
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FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

342.58

2600.76