

# 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**  
**Heartland Values PAC**

ADDRESS (number and street) **PO Box 505**  
 Check if different than previously reported. (ACC) **Sioux Falls SD 57101**

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲  
**C C00409003** 3. IS THIS REPORT  NEW (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)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12S)  
Election on  /  /  in the State of   
(d) 30-Day POST-Election Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on  /  /  in the State of

5. Covering Period  /  /  2018 through  /  /  2018

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.  
Hatch, Chad, D, ,  
Type or Print Name of Treasurer

Signature of Treasurer Hatch, Chad, D, , [Electronically Filed] Date  /  /  2019

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

**Heartland Values PAC**

Report Covering the Period: From:  /  /  To:  /  /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2018"/>		809767.71
(b) Cash on Hand at Beginning of Reporting Period.....	701955.06	
(c) Total Receipts (from Line 19) .....	39637.32	883174.54
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	741592.38	1692942.25
7. Total Disbursements (from Line 31).....	73240.36	1024590.23
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	668352.02	668352.02
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

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)

Write or Type Committee Name

**Heartland Values PAC**

Report Covering the Period: From: M M / D D / Y Y Y Y Y 11 / 27 / 2018 To: M M / D D / Y Y Y Y Y 12 / 31 / 2018

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).....	20250.00	100500.00
(ii) Unitemized .....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	20250.00	100500.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	26500.00	778400.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	46750.00	878900.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	8798.33
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	3636.40
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	- 7112.68	- 8160.19
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)).....▶	39637.32	883174.54
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	39637.32	883174.54

**DETAILED SUMMARY PAGE**  
of Disbursements

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 .....	23240.36	555090.23
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	23240.36	555090.23
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	50000.00	400000.00
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	2500.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	2500.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	67000.00
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)) ..	73240.36	1024590.23
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	73240.36	1024590.23

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	46750.00	878900.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	2500.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	46750.00	876400.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	23240.36	555090.23
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	3636.40
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	23240.36	551453.83

**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 35
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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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)  
**Heartland Values PAC**

**A. Arison, Micky, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2 Alhambra Plz  
Ste 1040

City Coral Gables State FL Zip Code 33134-5249

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

Name of Employer (for Individual) Carnival Corporation Occupation (for Individual) Chairman/CEO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
 11 / 29 / 2018  
**Transaction ID : A854CAA1F83794E1196F**

Amount of Each Receipt this Period  
2500.00

Memo Item

**B. Arison, Madeleine, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2 Alhambra Plz  
Ste 1040

City Coral Gables State FL Zip Code 33134-5249

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

Name of Employer (for Individual) Homemaker Occupation (for Individual) Homemaker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
 11 / 29 / 2018  
**Transaction ID : A5422E32E74F845F19B2**

Amount of Each Receipt this Period  
2500.00

Memo Item

**C. Rigby, Haliburton, P, , Jr.**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3643 Van Ness St NW

City Washington State DC Zip Code 20008-3130

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

Name of Employer (for Individual) Wiley Rein LLP Occupation (for Individual) Senior Policy Advisor

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
 12 / 04 / 2018  
**Transaction ID : A287582DA18A94EB7BD4**

Amount of Each Receipt this Period  
500.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	5500.00
<b>TOTAL</b> This Period (last page this line number only).....	

**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 7 OF 35
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Heartland Values PAC**

**A. Stoick, Jordan, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1529 Forest Villa Ln  
 City Mc Lean State VA Zip Code 22101-4132  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 NAM Govt Affairs  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 04 / 2018  
**Transaction ID : A9F4F82E9867D4F49ADA**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

**B. Schwietert, David, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1513 Crestwood Dr  
 City Alexandria State VA Zip Code 22302-2303  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 Auto Alliance Govt Affairs  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 04 / 2018  
**Transaction ID : A2963EEA4DA71429F9BF**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item

**C. Hegyi, Albert, P, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 245 Park Ave 39th Flr  
 c/o William Burton  
 City New York State NY Zip Code 10167-4000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 1st Financial Bank USA Banker  
 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  
 12 / 04 / 2018  
**Transaction ID : ACED956FA9E174BA191B**  
 Amount of Each Receipt this Period  
 5000.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	5750.00
<b>TOTAL</b> This Period (last page this line number only).....	

**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 8 OF 35
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input 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)  
**Heartland Values PAC**

**A. Odawa Indians, Little Traverse, Bay Bands of, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7500 Odawa Cir  
 City Harbor Springs State MI Zip Code 49740-9692  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Na Occupation (for Individual) Na  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 12 / 05 / 2018  
**Transaction ID : A2C7E2186CC054D16822**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item

**B. Bertram, Christoph, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3309 Woodley Rd NW  
 City Washington State DC Zip Code 20008-3337  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) B + S Strategies Occupation (for Individual) Consultant  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 12 / 17 / 2018  
**Transaction ID : AA68D6AF64A0E4B898A2**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

**C. McNamara, Daniel, J, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 811 Milestone Dr  
 City Silver Spring State MD Zip Code 20904-2710  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Milestone Federal Solutions Occupation (for Individual) President/CEO  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 12 / 18 / 2018  
**Transaction ID : A95B3D4E5449D4583BB4**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	2000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 9 OF 35
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Heartland Values PAC**

**A. Black, Kathleen, Q, ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 6528 75th St  
City Cabin John State MD Zip Code 20818-1421  
FEC ID number of contributing federal political committee. **C**  
Name of Employer (for Individual) Coca Cola Occupation (for Individual) Director Govt Relations  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 250.00

Date of Receipt 12 / 18 / 2018  
**Transaction ID : A2D44EB9EE58E4A71A4B**  
Amount of Each Receipt this Period 250.00  
 Memo Item

**B. Savary-Taylor, Mary, E, ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 409 MacArthur Ave NE  
City Vienna State VA Zip Code 22180-3563  
FEC ID number of contributing federal political committee. **C**  
Name of Employer (for Individual) The Nickles Group Occupation (for Individual) Partner  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 12 / 18 / 2018  
**Transaction ID : A5E68EF5825254A838A2**  
Amount of Each Receipt this Period 1000.00  
 Memo Item

**C. Taylor, Robert, P, ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 1200 G St NW Ste 800  
City Washington State DC Zip Code 20005-6705  
FEC ID number of contributing federal political committee. **C**  
Name of Employer (for Individual) Defense Consulting Group LLC Occupation (for Individual) Lobbyist/consultant  
Receipt For:  Primary  General  Other (specify)  
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 12 / 18 / 2018  
**Transaction ID : AC377ECE5055740F3B40**  
Amount of Each Receipt this Period 1000.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 2250.00  
**TOTAL** This Period (last page this line number only)..... ▶

**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 10 OF 35
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Heartland Values PAC**

**A. Taylor, Tracy, Doherty, ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 205 W Glendale Ave

City Alexandria	State VA	Zip Code 22301-2452
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Williams & Jensen PLLC	Occupation (for Individual) Attorney
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Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12		18		2018

**Transaction ID : A5B079625F41F438D941**

Amount of Each Receipt this Period  
250.00

Memo Item

**B. Chlopecki, Julie, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO Box 896

City Mc Lean	State VA	Zip Code 22101-0896
-----------------	-------------	------------------------

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

Name of Employer (for Individual) Lincoln Concepts	Occupation (for Individual) Attorney
---	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12		18		2018

**Transaction ID : A4444BC6B922D44DF8A2**

Amount of Each Receipt this Period  
250.00

Memo Item

**C. Motley, John, J, , III**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3140 Aberfoyle PI NW

City Washington	State DC	Zip Code 20015-2352
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Policy Solutions	Occupation (for Individual) Principal
---	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12		18		2018

**Transaction ID : AB87B2068D7094E1C849**

Amount of Each Receipt this Period  
500.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1000.00
<b>TOTAL</b> This Period (last page this line number only).....	

**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 11 OF 35
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**Heartland Values PAC**

**A. Bell, Jennifer, E, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3333 N Glebe Rd  
 City Arlington State VA Zip Code 22207-4234  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Chamber Hill Strategies Occupation (for Individual) Partner  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 18 / 2018  
**Transaction ID : AD3795C55A2C14D45870**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item

**B. Shuster, Robert, L, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 123 N 24th St  
 City Camp Hill State PA Zip Code 17011-3602  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Buchanan Ingersoll Rooney PC Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 18 / 2018  
**Transaction ID : A38E1E7A7D0974750A29**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item

**C. Strazzella, Michael, P, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4920 26th St N  
 City Arlington State VA Zip Code 22207-2633  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Buchanan Ingersoll Rooney PC Occupation (for Individual) Fed Govt Relations  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 18 / 2018  
**Transaction ID : AF9B01CB86DB14842A0F**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1250.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**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 12 OF 35
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Heartland Values PAC**

**A. Heard, B, Keith, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1822 Stinson Creek Rd  
 City Columbus State MS Zip Code 39705-9352  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Key Impact Strategies Occupation (for Individual) President  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 12 / 18 / 2018  
**Transaction ID : ACE97D966AA9941FF977**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**B. Downey, Kyle, W, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1824 10th St NW  
 City Washington State DC Zip Code 20001-5002  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Occupation (for Individual) Consultant  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 12 / 21 / 2018  
**Transaction ID : A4DDF9853D22F4DDA9AD**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

**C. Smith, Alicia, W, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1401 K St NW 12th Flr  
 City Washington State DC Zip Code 20005-3464  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) The Smith-free Group Occupation (for Individual) Sr VP  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 12 / 21 / 2018  
**Transaction ID : A9AB6007410CA4A20878**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1000.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 13 OF 35
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Heartland Values PAC**

**A. Crowley, John, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 25172 N Pawnee Rd  
 City Barrington State IL Zip Code 60010-1354  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Comcast Occupation (for Individual) Regional Sr VP  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2018  
**Transaction ID : AE569BCC49AF041D0A46**  
 Amount of Each Receipt this Period  
 1000.00  
 Memo Item

**B. Gordon, Steven, H, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 507 Capitol Ct NE Ste 100  
 City Washington State DC Zip Code 20002-7705  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Steven H Gordon & Assoc Occupation (for Individual) Owner  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2018  
**Transaction ID : AA57B0D5D95BB46068B0**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item

**C.**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 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  
 M M M / D D D / Y Y Y Y Y Y  
 Amount of Each Receipt this Period  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	20250.00

**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 14 OF 35
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input 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)  
**Heartland Values PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. ESOP Association PAC**

Mailing Address 1200 18th St NW  
Ste 1125

City Washington State DC Zip Code 20036-2587

FEC ID number of contributing federal political committee. **C** C00196089

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
4500.00

Date of Receipt  
11 / 29 / 2018  
**Transaction ID : A4BD2C503AFDF45519DF**

Amount of Each Receipt this Period  
500.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. AMGEN Inc PAC**

Mailing Address 601 13th St NW 12th Flr

City Washington State DC Zip Code 20005-3819

FEC ID number of contributing federal political committee. **C** C00251876

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
11 / 29 / 2018  
**Transaction ID : A960059C338544BA1946**

Amount of Each Receipt this Period  
2500.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. National Roofing Contractors Assoc PAC**

Mailing Address 324 4th St NE

City Washington State DC Zip Code 20002-5824

FEC ID number of contributing federal political committee. **C** C00244863

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
12 / 05 / 2018  
**Transaction ID : A9589F7FA644145E99DC**

Amount of Each Receipt this Period  
1000.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	4000.00
<b>TOTAL</b> This Period (last page this line number only).....	

**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 15 OF 35
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input 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)  
**Heartland Values PAC**

**A. Universal Health Services Employees' Good Govt Fund**

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

Mailing Address 367 S Gulph Rd

City King Of Prussia	State PA	Zip Code 19406-3121
-------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00185520

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  

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

**Transaction ID : A911DB807952B4780911**

Amount of Each Receipt this Period  
2500.00

Memo Item

**B. Fresenius Medical Care North America PAC**

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

Mailing Address 801 Pennsylvania Ave NW  
Ste 255

City Washington	State DC	Zip Code 20004-3637
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00401299

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	17	/	2018

**Transaction ID : A4D4FC75F3B52435788B**

Amount of Each Receipt this Period  
1000.00

Memo Item

**C. Bipartisan Voluntary Public Affairs Committee of the PNC Financial Services Group Inc**

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

Mailing Address 249 5th Ave  
21st Flr

City Pittsburgh	State PA	Zip Code 15222-2707
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00035519

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	18	/	2018

**Transaction ID : AB4012AEB7ACC4B14B20**

Amount of Each Receipt this Period  
2500.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	6000.00
<b>TOTAL</b> This Period (last page this line number only).....	

**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 16 OF 35
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input 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)  
**Heartland Values PAC**

**A. Herbalife International Inc PAC**

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

Mailing Address 607 14th St NW  
Ste 675

City Washington State DC Zip Code 20005-2091

FEC ID number of contributing federal political committee. **C** C00393298

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2000.00

Date of Receipt  
 M  M /  D  D /  Y  Y  Y  Y  
 12 / 18 / 2018

**Transaction ID : AFC47BFF8FF1049DE954**

Amount of Each Receipt this Period  
2000.00

Memo Item

**B. Home Depot Inc PAC**

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

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 (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
 M  M /  D  D /  Y  Y  Y  Y  
 12 / 31 / 2018

**Transaction ID : A51625D0DA6BF439180B**

Amount of Each Receipt this Period  
5000.00

Memo Item

**C. American Council of Engineering Companies PAC**

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

Mailing Address 1015 15th St NW  
Ste 802

City Washington State DC Zip Code 20005-2605

FEC ID number of contributing federal political committee. **C** C00010868

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
 M  M /  D  D /  Y  Y  Y  Y  
 12 / 31 / 2018

**Transaction ID : A9326D5A7509F493C992**

Amount of Each Receipt this Period  
2500.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	9500.00
<b>TOTAL</b> This Period (last page this line number only).....	



**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 17 OF 35
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input 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)  
**Heartland Values PAC**

**A. CME Group Inc PAC**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 325 7th St NW Ste 525

City Washington	State DC	Zip Code 20004-2836
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00076299

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	31	/	2018

**Transaction ID : A582C7DC338AA41788CA**

Amount of Each Receipt this Period  
1000.00

Memo Item

**B. OppenheimerFunds Inc PAC**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1295 State St

City Springfield	State MA	Zip Code 01111-0001
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00367920

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	31	/	2018

**Transaction ID : A8716FA5227E84BAAAEF**

Amount of Each Receipt this Period  
500.00

Memo Item

**C. Massachusetts Mutual Life Insurance Company PAC**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1295 State St

City Springfield	State MA	Zip Code 01111-0001
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00118943

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
4500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	31	/	2018

**Transaction ID : AC1860C6E9EF344C2965**

Amount of Each Receipt this Period  
4500.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	6000.00
<b>TOTAL</b> This Period (last page this line number only).....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 18 OF 35  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input 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)  
**Heartland Values PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. Sprint Corporation PAC**

Mailing Address 12502 Sunrise Valley Dr

City Reston	State VA	Zip Code 20191-3438
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00089342

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
3000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 31 / 2018

**Transaction ID : ABD7E4E9693D549F2999**

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

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

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1000.00
<b>TOTAL</b> This Period (last page this line number only).....	26500.00

**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 19 OF 35
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Heartland Values PAC**

**A. Charles Schwab & Co Inc**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 101 Montgomery St  
 City San Francisco State CA Zip Code 94104-4151  
 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 ▼  
 3625.52

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 11 / 30 / 2018  
**Transaction ID : AC45681D16E0B49BEB39**  
 Amount of Each Receipt this Period  
 4673.03  
 Memo Item  
 Interest

**B. Charles Schwab & Co Inc**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 101 Montgomery St  
 City San Francisco State CA Zip Code 94104-4151  
 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 ▼  
 - 8160.19

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 31 / 2018  
**Transaction ID : ACBCA32D224824C9C9DB**  
 Amount of Each Receipt this Period  
 - 11785.71  
 Memo Item  
 Interest Loss

**C.**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 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  
 M M / D D / Y Y Y Y Y  
 Amount of Each Receipt this Period  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	- 7112.68
<b>TOTAL</b> This Period (last page this line number only).....	- 7112.68

**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)

<input checked="" 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 type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Heartland Values PAC**

Full Name (Last, First, Middle Initial) <b>A. FLS Connect LLC</b>		Date of Disbursement MM / DD / YYYY 11 / 27 / 2018
Mailing Address 7300 Hudson Blvd N Ste 270		FEC Identification Number C [REDACTED] <b>Transaction ID : BFDD0591EE</b> Amount of Each Disbursement this Period 8.79
City Saint Paul	State MN	Zip Code 55128-7143
Purpose of Disbursement PAC Conference Calls		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:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. Midcontinent Communications</b>		Date of Disbursement MM / DD / YYYY 11 / 28 / 2018
Mailing Address PO Box 5010		FEC Identification Number C [REDACTED] <b>Transaction ID : B9A206A421f</b> Amount of Each Disbursement this Period 223.55
City Sioux Falls	State SD	Zip Code 57117-5010
Purpose of Disbursement PAC Utilities		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:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. Barb Buell</b>		Date of Disbursement MM / DD / YYYY 11 / 30 / 2018
Mailing Address PO Box 505		FEC Identification Number C [REDACTED] <b>Transaction ID : B5FB62B121</b> Amount of Each Disbursement this Period 3160.12
City Sioux Falls	State SD	Zip Code 57101-0505
Purpose of Disbursement Payroll		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:	<input type="checkbox"/> Memo Item	

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

3392.46

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

**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)

<input checked="" 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 type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Heartland Values PAC**

Full Name (Last, First, Middle Initial) <b>A. Nelson, Ryan, , ,</b>		Date of Disbursement MM / DD / YYYY 11 / 30 / 2018
Mailing Address PO Box 505		FEC Identification Number C [REDACTED] <b>Transaction ID : B90ED400F2I</b> Amount of Each Disbursement this Period 115.44
City Sioux Falls	State SD	Zip Code 57101-0505
Purpose of Disbursement Payroll		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:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. Paulson, Angel, R, ,</b>		Date of Disbursement MM / DD / YYYY 11 / 30 / 2018
Mailing Address PO Box 505		FEC Identification Number C [REDACTED] <b>Transaction ID : BD07400596F</b> Amount of Each Disbursement this Period 3107.12
City Sioux Falls	State SD	Zip Code 57101-0505
Purpose of Disbursement Payroll		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:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. 401 C LLC</b>		Date of Disbursement MM / DD / YYYY 12 / 01 / 2018
Mailing Address 2004 Rhode Island Ave		FEC Identification Number C [REDACTED] <b>Transaction ID : B9DDB71953</b> Amount of Each Disbursement this Period 400.00
City Mc Lean	State VA	Zip Code 22101-4921
Purpose of Disbursement PAC Office Rent		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:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	3622.56
<b>TOTAL</b> This Period (last page this line number only).....▶	

**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)

<input checked="" 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 type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Heartland Values PAC**

Full Name (Last, First, Middle Initial) <b>A. A&amp;B Business Solutions</b>		Date of Disbursement MM / DD / YYYY 12 / 03 / 2018
Mailing Address 1600 N A Ave		FEC Identification Number C [REDACTED] <b>Transaction ID : B16A89CE4C</b> Amount of Each Disbursement this Period 97.67
City Sioux Falls	State SD	Zip Code 57104-0370
Purpose of Disbursement PAC Office Supplies		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:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. Fellowship of Christian Athletes</b>		Date of Disbursement MM / DD / YYYY 12 / 03 / 2018
Mailing Address 1601 E 69th St Ste 301		FEC Identification Number C [REDACTED] <b>Transaction ID : B8AB4C9E2E</b> Amount of Each Disbursement this Period 674.80
City Sioux Falls	State SD	Zip Code 57108-8322
Purpose of Disbursement PAC Office Rent		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:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. Sprint</b>		Date of Disbursement MM / DD / YYYY 12 / 12 / 2018
Mailing Address PO Box 4181		FEC Identification Number C [REDACTED] <b>Transaction ID : B1E3380D85</b> Amount of Each Disbursement this Period 51.23
City Carol Stream	State IL	Zip Code 60197-4181
Purpose of Disbursement PAC Phone Service		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:	<input type="checkbox"/> Memo Item	

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

823.70

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

**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)

<input checked="" 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 type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Heartland Values PAC**

Full Name (Last, First, Middle Initial) <b>A. TransFirst Epay</b>		Date of Disbursement MM / DD / YYYY 12 / 12 / 2018
Mailing Address 12120 Shamrock Plz Ste 100		FEC Identification Number C [REDACTED] <b>Transaction ID : B934FFC6EC</b> Amount of Each Disbursement this Period [REDACTED] 63.90
City Omaha	State NE	Zip Code 68154-3539
Purpose of Disbursement Credit Card Merchant Fee		Category/ Type [REDACTED]
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:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. United States Treasury</b>		Date of Disbursement MM / DD / YYYY 12 / 13 / 2018
Mailing Address PO Box 660351		FEC Identification Number C [REDACTED] <b>Transaction ID : B44990414E5</b> Amount of Each Disbursement this Period [REDACTED] 1825.64
City Ogden	State UT	Zip Code 84201-0001
Purpose of Disbursement Payroll Taxes		Category/ Type [REDACTED]
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:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. Sioux Falls Networks</b>		Date of Disbursement MM / DD / YYYY 12 / 13 / 2018
Mailing Address 304 W 37th St		FEC Identification Number C [REDACTED] <b>Transaction ID : BA4EA3A08f</b> Amount of Each Disbursement this Period [REDACTED] 334.54
City Sioux Falls	State SD	Zip Code 57105-5706
Purpose of Disbursement PAC IT Support		Category/ Type [REDACTED]
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:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[REDACTED] 2224.08
<b>TOTAL</b> This Period (last page this line number only).....▶	[REDACTED]

**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)

<input checked="" 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 type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Heartland Values PAC**

Full Name (Last, First, Middle Initial) <b>A. FLS Connect LLC</b>		Date of Disbursement MM / DD / YYYY 12 / 17 / 2018
Mailing Address 7300 Hudson Blvd N Ste 270		FEC Identification Number C [REDACTED] <b>Transaction ID : BCD1D44D9/</b> Amount of Each Disbursement this Period 47.00
City Saint Paul	State MN	Zip Code 55128-7143
Purpose of Disbursement PAC Conference Calls		Category/ Type [REDACTED]
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:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. Washington Pavilion</b>		Date of Disbursement MM / DD / YYYY 12 / 18 / 2018
Mailing Address 301 S Main Ave		FEC Identification Number C [REDACTED] <b>Transaction ID : B498DFE2B2/</b> Amount of Each Disbursement this Period 284.52
City Sioux Falls	State SD	Zip Code 57104-6311
Purpose of Disbursement PAC Meals		Category/ Type [REDACTED]
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:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. A&amp;B Business Solutions</b>		Date of Disbursement MM / DD / YYYY 12 / 21 / 2018
Mailing Address 1600 N A Ave		FEC Identification Number C [REDACTED] <b>Transaction ID : B33AA05699</b> Amount of Each Disbursement this Period 97.67
City Sioux Falls	State SD	Zip Code 57104-0370
Purpose of Disbursement PAC Office Supplies		Category/ Type [REDACTED]
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:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	429.19
<b>TOTAL</b> This Period (last page this line number only).....▶	[REDACTED]



**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)

<input checked="" 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 type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Heartland Values PAC**

Full Name (Last, First, Middle Initial)

**A. Midcontinent Communications**

Mailing Address PO Box 5010

City: Sioux Falls  
State: SD  
Zip Code: 57117-5010

Purpose of Disbursement  
PAC Utilities

Candidate Name

Office Sought:  House  Senate  President  
State: District:  
Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
12 / 28 / 2018

FEC Identification Number

C  
Transaction ID : **BFA0CA6CC**  
Amount of Each Disbursement this Period  
223.55

Memo Item

Full Name (Last, First, Middle Initial)

**B. Barb Buell**

Mailing Address PO Box 505

City: Sioux Falls  
State: SD  
Zip Code: 57101-0505

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  Senate  President  
State: District:  
Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
12 / 31 / 2018

FEC Identification Number

C  
Transaction ID : **BF98243E379**  
Amount of Each Disbursement this Period  
3160.13

Memo Item

Full Name (Last, First, Middle Initial)

**C. Nelson, Ryan, , ,**

Mailing Address PO Box 505

City: Sioux Falls  
State: SD  
Zip Code: 57101-0505

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  Senate  President  
State: District:  
Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
12 / 31 / 2018

FEC Identification Number

C  
Transaction ID : **B42DFC6D4E**  
Amount of Each Disbursement this Period  
115.44

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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

3499.12

**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)

<input checked="" 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 type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Heartland Values PAC**

Full Name (Last, First, Middle Initial) <b>A. Paulson, Angel, R, ,</b>		Date of Disbursement MM / DD / YYYY 12 / 31 / 2018
Mailing Address PO Box 505		FEC Identification Number C [REDACTED] <b>Transaction ID : BDFD16D839</b> Amount of Each Disbursement this Period [REDACTED] 3107.13
City Sioux Falls	State SD	Zip Code 57101-0505
Purpose of Disbursement Payroll		Category/ Type [REDACTED]
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:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. US Bank Visa</b>		Date of Disbursement MM / DD / YYYY 12 / 07 / 2018
Mailing Address PO Box 790408		FEC Identification Number C [REDACTED] <b>Transaction ID : B7257DA527f</b> Amount of Each Disbursement this Period [REDACTED] 682.98
City Saint Louis	State MO	Zip Code 63179-0408
Purpose of Disbursement Credit Card: See below		Category/ Type [REDACTED]
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:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. Minnehaha Country Club</b>		Date of Disbursement MM / DD / YYYY 12 / 07 / 2018
Mailing Address 3101 W 22nd St		FEC Identification Number C [REDACTED] <b>Transaction ID : B9CFF998EE</b> Amount of Each Disbursement this Period [REDACTED] 436.82
City Sioux Falls	State SD	Zip Code 57105-0101
Purpose of Disbursement PAC Meals		Category/ Type [REDACTED]
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:	<input checked="" type="checkbox"/> Memo Item	

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

[REDACTED] 3790.11

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

**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)

<input checked="" 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 type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Heartland Values PAC**

Full Name (Last, First, Middle Initial) <b>A. Morrie's</b>		Date of Disbursement MM / DD / YYYY 12 / 07 / 2018	
Mailing Address 2507 S Shirley Ave		FEC Identification Number C [ ] <b>Transaction ID : BCF597C3C2</b> Amount of Each Disbursement this Period [ ] 25.00	
City Sioux Falls	State SD	Zip Code 57106-4324	Category/ Type [ ]
Purpose of Disbursement PAC Meals		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input checked="" type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>B. American Express</b>		Date of Disbursement MM / DD / YYYY 12 / 10 / 2018	
Mailing Address PO Box 650448		FEC Identification Number C [ ] <b>Transaction ID : B8A9547BD6</b> Amount of Each Disbursement this Period [ ] 4851.14	
City Dallas	State TX	Zip Code 75265-0448	Category/ Type [ ]
Purpose of Disbursement Credit Card: See below		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) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>C. RPM Italian</b>		Date of Disbursement MM / DD / YYYY 12 / 10 / 2018	
Mailing Address 650 K St NW		FEC Identification Number C [ ] <b>Transaction ID : B904E3FE7C</b> Amount of Each Disbursement this Period [ ] 300.00	
City Washington	State DC	Zip Code 20001-1341	Category/ Type [ ]
Purpose of Disbursement PAC Event Deposit		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) ▼		Memo Item <input checked="" type="checkbox"/>
State: District:			

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

4851.14

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

**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)

<input checked="" 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 type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Heartland Values PAC**

Full Name (Last, First, Middle Initial)  
**A. Tinner's Grill**

Date of Disbursement:  /  /

Mailing Address: 449 W 69th St

City: Sioux Falls State: SD Zip Code: 57108-3824

Purpose of Disbursement: PAC Meals

Candidate Name:

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type:

FEC Identification Number:   
**Transaction ID : B0A4815059f**  
Amount of Each Disbursement this Period:

Memo Item

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

Date of Disbursement:  /  /

Mailing Address: 300 Josephine St

City: Denver State: CO Zip Code: 80206-4234

Purpose of Disbursement: PAC Airline Travel

Candidate Name:

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type:

FEC Identification Number:   
**Transaction ID : BE6AB95556f**  
Amount of Each Disbursement this Period:

Memo Item

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

Date of Disbursement:  /  /

Mailing Address: 2632 Marine Way

City: Mountain View State: CA Zip Code: 94043-1126

Purpose of Disbursement: Payroll Software Support

Candidate Name:

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type:

FEC Identification Number:   
**Transaction ID : BBC364483E**  
Amount of Each Disbursement this Period:

Memo Item

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

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

**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)

<input checked="" 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 type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Heartland Values PAC**

Full Name (Last, First, Middle Initial) <b>A. Gravatt Entertainment</b>		Date of Disbursement MM / DD / YYYY 12 / 10 / 2018
Mailing Address 1400 Sands Cir		FEC Identification Number C [REDACTED] <b>Transaction ID : BABDA226B</b> Amount of Each Disbursement this Period [REDACTED] 1250.00
City Fredericksburg	State VA	Zip Code 22401-6662
Purpose of Disbursement PAC Event Entertainment		Category/ Type [REDACTED]
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:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. Morrie's</b>		Date of Disbursement MM / DD / YYYY 12 / 10 / 2018
Mailing Address 2507 S Shirley Ave		FEC Identification Number C [REDACTED] <b>Transaction ID : B9C7AE76F1</b> Amount of Each Disbursement this Period [REDACTED] 453.24
City Sioux Falls	State SD	Zip Code 57106-4324
Purpose of Disbursement PAC Meals		Category/ Type [REDACTED]
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:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. Minnehaha Country Club</b>		Date of Disbursement MM / DD / YYYY 12 / 10 / 2018
Mailing Address 3101 W 22nd St		FEC Identification Number C [REDACTED] <b>Transaction ID : BD7136C7C9</b> Amount of Each Disbursement this Period [REDACTED] 190.77
City Sioux Falls	State SD	Zip Code 57105-0101
Purpose of Disbursement PAC Meals		Category/ Type [REDACTED]
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:	<input checked="" type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[REDACTED] 0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	[REDACTED]

**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)

<input checked="" 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 type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Heartland Values PAC**

Full Name (Last, First, Middle Initial)

**A. Staples**

Mailing Address 515 W 41st St

City: Sioux Falls, State: SD, Zip Code: 57105-6401

Purpose of Disbursement  
PAC Office Supplies

Candidate Name

Office Sought:  House,  Senate,  President  
State: District: Disbursement For:  Primary,  General,  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
12 / 10 / 2018

FEC Identification Number

C  
Transaction ID : **BB601EE91A**  
Amount of Each Disbursement this Period  
87.11

Memo Item

Full Name (Last, First, Middle Initial)

**B. Dav-El Services**

Mailing Address 200 2nd St

City: Chelsea, State: MA, Zip Code: 02150-1802

Purpose of Disbursement  
PAC Transportation

Candidate Name

Office Sought:  House,  Senate,  President  
State: District: Disbursement For:  Primary,  General,  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
12 / 10 / 2018

FEC Identification Number

C  
Transaction ID : **B0F14DD2C3**  
Amount of Each Disbursement this Period  
1193.50

Memo Item

Full Name (Last, First, Middle Initial)

**C. Starbucks**

Mailing Address 418 S Minnesota Ave

City: Sioux Falls, State: SD, Zip Code: 57104-6816

Purpose of Disbursement  
PAC Meals

Candidate Name

Office Sought:  House,  Senate,  President  
State: District: Disbursement For:  Primary,  General,  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
12 / 10 / 2018

FEC Identification Number

C  
Transaction ID : **BD2E9B35D4**  
Amount of Each Disbursement this Period  
50.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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

0.00

**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)

<input checked="" 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 type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Heartland Values PAC**

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

Mailing Address 500 W 69th St

City Sioux Falls State SD Zip Code 57108-3817

Purpose of Disbursement  
PAC Meals

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 12 / 10 / 2018

FEC Identification Number: C  
Transaction ID : B1835D3D04  
Amount of Each Disbursement this Period: 132.24

Memo Item

Full Name (Last, First, Middle Initial)  
**B. McNally's**

Mailing Address 6211 S Old Village Pl

City Sioux Falls State SD Zip Code 57108-2100

Purpose of Disbursement  
PAC Meals

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 12 / 10 / 2018

FEC Identification Number: C  
Transaction ID : B3A286F488L  
Amount of Each Disbursement this Period: 156.70

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) ▼

Date of Disbursement: / /

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 0.00

**TOTAL** This Period (last page this line number only)..... ▶ 22632.36

**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)

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

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NAME OF COMMITTEE (In Full)  
**Heartland Values PAC**

Full Name (Last, First, Middle Initial) <b>A. Steve Daines for Montana</b>		Date of Disbursement MM / DD / YYYY 12 / 03 / 2018
Mailing Address PO Box 1598		FEC Identification Number C C00491357 <b>Transaction ID : BCEF33A524</b> Amount of Each Disbursement this Period 5000.00
City Helena	State MT	Zip Code 59624
Purpose of Disbursement 2020 General		Category/ Type
Candidate Name <b>Daines, Steve, , Sen.,</b>		
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: MT	District:	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>B. Thom Tillis Committee</b>		Date of Disbursement MM / DD / YYYY 12 / 10 / 2018
Mailing Address PO Box 97396		FEC Identification Number C C00545772 <b>Transaction ID : BE11DF24B2</b> Amount of Each Disbursement this Period 5000.00
City Raleigh	State NC	Zip Code 27624-7396
Purpose of Disbursement 2020 Primary		Category/ Type
Candidate Name <b>Tillis, Thom, R, ,</b>		
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC	District:	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>C. Cory Gardner for Senate</b>		Date of Disbursement MM / DD / YYYY 12 / 03 / 2018
Mailing Address 9227 E Lincoln Ave #200-234		FEC Identification Number C C00492454 <b>Transaction ID : BBA79DB6A</b> Amount of Each Disbursement this Period 5000.00
City Lone Tree	State CO	Zip Code 80124-5506
Purpose of Disbursement 2020 General		Category/ Type
Candidate Name <b>Gardner, Cory, , ,</b>		
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: CO	District:	<input type="checkbox"/> Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

15000.00

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







**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)

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

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NAME OF COMMITTEE (In Full)  
**Heartland Values PAC**

Full Name (Last, First, Middle Initial)  
**A. Alaskans for Dan Sullivan**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		03		2018

Mailing Address 3705 Arctic Blvd #447

FEC Identification Number

**C** C00570994

**Transaction ID : BCEEDA678**

Amount of Each Disbursement this Period

5000.00

Memo Item

City Anchorage State AK Zip Code 99503-5774

Purpose of Disbursement  
2020 General

Category/Type

Candidate Name  
**Sullivan, Dan, , ,**

Office Sought:  House  
 Senate  
 President  
State: AK District:

Disbursement For: 2020  
 Primary  General  
 Other (specify) ▼

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

Date of Disbursement

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

Mailing Address

FEC Identification Number

**C**

Amount of Each Disbursement this Period

Memo Item

City State Zip Code

Purpose of Disbursement

Category/Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify)

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

Date of Disbursement

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

Mailing Address

FEC Identification Number

**C**

Amount of Each Disbursement this Period

Memo Item

City State Zip Code

Purpose of Disbursement

Category/Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

5000.00

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

50000.00