

# 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

Higher Heights For America PAC

ADDRESS (number and street) 147 Prince Street

Check if different than previously reported. (ACC) Suite 1

Brooklyn NY 11201

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

C C00566067  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 M M M / D D D / Y Y Y Y Y Y in the State of  

(d) 30-Day POST-Election Report for the:

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

Election on M M M / D D D / Y Y Y Y Y Y in the State of  

5. Covering Period M M M / D D D / Y Y Y Y Y Y 11 / 27 / 2018 through M M M / D D D / Y Y Y Y Y Y 12 / 31 / 2018

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

Type or Print Name of Treasurer \_\_\_\_\_

Signature of Treasurer Pratts, Hasoni, , , [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y 10 / 17 / 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

**Higher Heights For America 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"/>	<input type="text" value=""/>	<input type="text" value="12148.84"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="3388.61"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="2972.00"/>	<input type="text" value="81187.17"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="6360.61"/>	<input type="text" value="93336.01"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="2067.38"/>	<input type="text" value="89042.78"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="4293.23"/>	<input type="text" value="4293.23"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="1740.00"/>	

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

Write or Type Committee Name

**Higher Heights For America PAC**

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

<b>I. Receipts</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	885.00	35858.21
(ii) Unitemized .....	2087.00	30222.46
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	2972.00	66080.67
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	13606.50
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	2972.00	79687.17
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
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	500.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	1000.00
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)).....▶	2972.00	81187.17
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	2972.00	81187.17

**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 .....	2067.38	19835.23
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	2067.38	19835.23
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	59907.55
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).....	0.00	9300.00
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)) ..	2067.38	89042.78
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	2067.38	89042.78

**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) .....	2972.00	79687.17
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	2972.00	79687.17
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	2067.38	19835.23
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	500.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	2067.38	19335.23

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 6 OF 15
	(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)  
**Higher Heights For America PAC**

**A. ActBlue Technical Services**

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

Mailing Address 366 Summer Street

City Somerville	State MA	Zip Code 02144
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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 ▼  
9091.09

Date of Receipt  

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

**Transaction ID : SA11AI.6398**

Amount of Each Receipt this Period  
2722.00

Memo Item  
Earmarked thru ActBlue

**B. Berry, Janet, , ,**

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

Mailing Address 1576 W Hedding St

City San Jose	State CA	Zip Code 95126
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) None	Occupation (for Individual) Not Employed
---	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
225.00

Date of Receipt  

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

**Transaction ID : SA11AI.6395**

Amount of Each Receipt this Period  
25.00

Memo Item  
Earmarked through ActBlue

**C. Frederick, Pamela, , ,**

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

Mailing Address 44 Woodland Drive

City Greenwich	State CT	Zip Code 06830
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Battery Park City Authority	Occupation (for Individual) Finance
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
700.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12		21		2018

**Transaction ID : SA11AI.6406**

Amount of Each Receipt this Period  
100.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	125.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 15
	<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)  
**Higher Heights For America PAC**

**A. Kahane, Nathan, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5089 Aldea Ave  
 City Encino State CA Zip Code 91316  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Lionsgate Occupation (for Individual) Film Executive  
 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 / 29 / 2018  
**Transaction ID : SA11AI.6320**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item  
 Earmarked through ActBlue

**B. Lester, Jane, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1506 N 36th Street  
 City SeattleWA State WA Zip Code 89103  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Everitt Clinic Occupation (for Individual) Physician  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 30 / 2018  
**Transaction ID : SA11AI.6302**  
 Amount of Each Receipt this Period  
 125.00  
 Memo Item  
 Earmarked through ActBlue

**C. Madison, Paula, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3369 Fryman Place  
 City Studio City State CA Zip Code 91604  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) None Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 310.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 21 / 2018  
**Transaction ID : SA11AI.6293**  
 Amount of Each Receipt this Period  
 35.00  
 Memo Item  
 Earmarked through ActBlue

<b>SUBTOTAL</b> of Receipts This Page (optional).....	410.00
<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 15
	<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)  
**Higher Heights For America PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Mitchell, Heidi, , ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 29 / 2018
Mailing Address 47 Sacramento St Apt 3		<b>Transaction ID : SA11AI.6274</b>
City Cambridge	State MA	Zip Code 02138
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer (for Individual) ActBlue	Occupation (for Individual) Director of Strategic Partnerships	<input type="checkbox"/> Memo Item Earmarked through ActBlue
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Mitchell, Heidi, , ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 29 / 2018
Mailing Address 47 Sacramento St Apt 3		<b>Transaction ID : SA11AI.6356</b>
City Cambridge	State MA	Zip Code 02138
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer (for Individual) ActBlue	Occupation (for Individual) Director of Strategic Partnerships	<input type="checkbox"/> Memo Item Earmarked through ActBlue
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Taylor, Holland, , ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 31 / 2018
Mailing Address 1821 Ventura Blvd		<b>Transaction ID : SA11AI.6372</b>
City Encine	State CA	Zip Code 91436
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer (for Individual) Various	Occupation (for Individual) Performer	<input type="checkbox"/> Memo Item Earmarked through ActBlue
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	350.00
<b>TOTAL</b> This Period (last page this line number only).....▶	885.00



**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)  
**Higher Heights For America PAC**

Full Name (Last, First, Middle Initial)

**A. ActBlue Technical Services**

Mailing Address 366 Summer Street

City Somerville State MA Zip Code 02144

Purpose of Disbursement  
Merchant Fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
11 / 30 / 2018

FEC Identification Number

C

Transaction ID : SB21B.6278

Amount of Each Disbursement this Period

2.03

Memo Item

Full Name (Last, First, Middle Initial)

**B. ActBlue Technical Services**

Mailing Address 366 Summer Street

City Somerville State MA Zip Code 02144

Purpose of Disbursement  
Merchant Fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
12 / 02 / 2018

FEC Identification Number

C

Transaction ID : SB21B.6283

Amount of Each Disbursement this Period

2.70

Memo Item

Full Name (Last, First, Middle Initial)

**C. ActBlue Technical Services**

Mailing Address 366 Summer Street

City Somerville State MA Zip Code 02144

Purpose of Disbursement  
Merchant Fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
12 / 09 / 2018

FEC Identification Number

C

Transaction ID : SB21B.6286

Amount of Each Disbursement this Period

1.98

Memo Item

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

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

6.71

**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)  
**Higher Heights For America PAC**

Full Name (Last, First, Middle Initial) <b>A. ActBlue Technical Services</b>		Date of Disbursement MM / DD / YYYY 12 / 16 / 2018
Mailing Address 366 Summer Street		FEC Identification Number C [ ] <b>Transaction ID : SB21B.6291</b> Amount of Each Disbursement this Period [ ] 2.97
City Somerville	State MA	Zip Code 02144
Purpose of Disbursement Merchant Fees		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. ActBlue Technical Services</b>		Date of Disbursement MM / DD / YYYY 12 / 23 / 2018
Mailing Address 366 Summer Street		FEC Identification Number C [ ] <b>Transaction ID : SB21B.6295</b> Amount of Each Disbursement this Period [ ] 2.38
City Somerville	State MA	Zip Code 02144
Purpose of Disbursement Merchant Fees		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. ActBlue Technical Services</b>		Date of Disbursement MM / DD / YYYY 12 / 30 / 2018
Mailing Address 366 Summer Street		FEC Identification Number C [ ] <b>Transaction ID : SB21B.6360</b> Amount of Each Disbursement this Period [ ] 43.90
City Somerville	State MA	Zip Code 02144
Purpose of Disbursement Merchant Fees		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).....▶	[ ] 49.25
<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)  
**Higher Heights For America PAC**

**A. ActBlue Technical Services**

Full Name (Last, First, Middle Initial)

Mailing Address 366 Summer Street

City Somerville State MA Zip Code 02144

Purpose of Disbursement Merchant Fees

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 12 / 31 / 2018

FEC Identification Number: C

Transaction ID : **SB21B.6397**

Amount of Each Disbursement this Period: 31.12

Memo Item

**B. Arielle Sanders**

Full Name (Last, First, Middle Initial)

Mailing Address 427 Mill Creek Bnd NE

City Atlanta State GA Zip Code 30309

Purpose of Disbursement Graphics Design

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2018  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 12 / 30 / 2018

FEC Identification Number: C

Transaction ID : **SB21B.6801**

Amount of Each Disbursement this Period: 210.00

Memo Item

**C. Facebook**

Full Name (Last, First, Middle Initial)

Mailing Address 1 Hacker Way

City Menlo Park State CA Zip Code 94025

Purpose of Disbursement Digital Advertising

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 12 / 03 / 2018

FEC Identification Number: C

Transaction ID : **SB21B.6410**

Amount of Each Disbursement this Period: 465.95

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 707.07

**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)  
**Higher Heights For America PAC**

Full Name (Last, First, Middle Initial)

**A. Facebook**

Mailing Address 1 Hacker Way

City Menlo Park State CA Zip Code 94025

Purpose of Disbursement Digital Advertising

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
12 / 03 / 2018

FEC Identification Number

C  
**Transaction ID : SB21B.6794**  
Amount of Each Disbursement this Period  
8.89

Memo Item

Full Name (Last, First, Middle Initial)

**B. Paypal**

Mailing Address 2211 North First Street

City San Jose State CA Zip Code 95131

Purpose of Disbursement Merchant Fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
12 / 03 / 2018

FEC Identification Number

C  
**Transaction ID : SB21B.6400**  
Amount of Each Disbursement this Period  
1.03

Memo Item

Full Name (Last, First, Middle Initial)

**C. Paypal**

Mailing Address 2211 North First Street

City San Jose State CA Zip Code 95131

Purpose of Disbursement Merchant Fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
12 / 04 / 2018

FEC Identification Number

C  
**Transaction ID : SB21B.6401**  
Amount of Each Disbursement this Period  
1.03

Memo Item

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

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

7.95

**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

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)  
**Higher Heights For America PAC**

Full Name (Last, First, Middle Initial)

**A. Paypal**

Mailing Address 2211 North First Street

City San Jose State CA Zip Code 95131

Purpose of Disbursement  
Merchant Fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
12 / 21 / 2018

FEC Identification Number

C  
**Transaction ID : SB21B.6402**  
Amount of Each Disbursement this Period  
3.20

Memo Item

Full Name (Last, First, Middle Initial)

**B. Paypal**

Mailing Address 2211 North First Street

City San Jose State CA Zip Code 95131

Purpose of Disbursement  
Merchant Fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify)

Category/Type

Date of Disbursement

MM / DD / YYYY  
12 / 31 / 2018

FEC Identification Number

C  
**Transaction ID : SB21B.6403**  
Amount of Each Disbursement this Period  
3.20

Memo Item

Full Name (Last, First, Middle Initial)

**C. Sheldon Sneed Designs**

Mailing Address 6329 Magnolia Avenue

City Pennsauken State NJ Zip Code 08109

Purpose of Disbursement  
Graphics Design

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2018  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
12 / 30 / 2018

FEC Identification Number

C  
**Transaction ID : SB21B.6800**  
Amount of Each Disbursement this Period  
1275.00

Memo Item

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

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

1281.40

2052.38

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 14 OF 15
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/> 9	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**Higher Heights For America PAC**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Arielle Sanders</b>			Nature of Debt (Purpose): Graphics Design
Mailing Address 427 Mill Creek Bnd NE			
City Atlanta	State GA	Zip Code 30309	

Outstanding Balance Beginning This Period <input type="text" value="210.00"/>	<b>Transaction ID : SD10.6799</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="210.00"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Arielle Sanders</b>			Nature of Debt (Purpose): Graohic Design
Mailing Address 427 Mill Creek Bnd NE			
City Atlanta	State GA	Zip Code 30309	

Outstanding Balance Beginning This Period <input type="text" value="990.00"/>	<b>Transaction ID : SD10.6810</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="990.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Johnson, Jessica, , ,</b>			Nature of Debt (Purpose): Graphic Design/Pressley/MA07/Support
Mailing Address 540 Monroe Street Apt 1			
City Brooklyn	State NY	Zip Code 11221	

Outstanding Balance Beginning This Period <input type="text" value="300.00"/>	<b>Transaction ID : SD10.5955</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="300.00"/>

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	<input type="text" value="1290.00"/>
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	<input type="text"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	<input type="text"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 15 OF 15
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/> 9	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**Higher Heights For America PAC**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Sheldon Sneed Designs</b>			Nature of Debt (Purpose): Graphics Design
Mailing Address 6329 Magnolia Avenue			
City Pennsauken	State NJ	Zip Code 08109	

Outstanding Balance Beginning This Period 1275.00	Transaction ID : SD10.6798	
Amount Incurred This Period 0.00	Payment This Period 1275.00	Outstanding Balance at Close of This Period 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Sheldon Sneed Designs</b>			Nature of Debt (Purpose): Graphic Design
Mailing Address 6329 Magnolia Avenue			
City Pennsauken	State NJ	Zip Code 08109	

Outstanding Balance Beginning This Period 450.00	Transaction ID : SD10.6809	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 450.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor			Nature of Debt (Purpose):
Mailing Address			
City	State	Zip Code	

Outstanding Balance Beginning This Period	Transaction ID :	
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	450.00
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	1740.00
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	0.00
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	1740.00