

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12FE4M5 HELLERHIGHWATER PAC

ADDRESS (number and street) PO Box 370672 Las Vegas NV 89137-0672

2. FEC IDENTIFICATION NUMBER C C00471607 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year, Termination Report (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31 (c) 12-Day PRE-Election Report for the: Primary, General, Runoff, Convention, Special (d) 30-Day POST-Election Report for the: General, Runoff, Special

5. Covering Period 10 / 20 / 2016 through 11 / 28 / 2016

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

Type or Print Name of Treasurer Signature of Treasurer Hastie, Chrissie, , , [Electronically Filed] Date 12 / 08 / 2016

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)

Page 2

Write or Type Committee Name

**HELLERHIGHWATER 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="2016"/>		144002.97
(b) Cash on Hand at Beginning of Reporting Period.....	201972.62	
(c) Total Receipts (from Line 19) .....	19500.00	465995.46
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	221472.62	609998.43
7. Total Disbursements (from Line 31).....	50670.04	439195.85
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	170802.58	170802.58
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

**HELLERHIGHWATER PAC**

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

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).....	5000.00	66269.35
(ii) Unitemized .....	0.00	1226.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	5000.00	67495.35
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	14500.00	347500.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	19500.00	414995.35
12. Transfers From Affiliated/Other Party Committees.....	0.00	41000.11
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	10000.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	19500.00	465995.46
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	19500.00	465995.46

**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 .....	30670.04	229195.85
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	30670.04	229195.85
22. Transfers to Affiliated/Other Party Committees.....	0.00	30000.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	20000.00	180000.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
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)) ..	50670.04	439195.85
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	50670.04	439195.85

**DETAILED SUMMARY PAGE**  
of Disbursements

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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) .....	19500.00	414995.35
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	19500.00	414995.35
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	30670.04	229195.85
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	30670.04	229195.85

**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 21
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**HELLERHIGHWATER PAC**

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

Mailing Address 1 West 81st Street

City New York	State NY	Zip Code 10024-6048
------------------	-------------	------------------------

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

Name of Employer (for Individual) Elliott Management	Occupation (for Individual) Executive
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 10 / 2016

**Transaction ID : ACCA201800CD249ADA9E**

Amount of Each Receipt this Period  
5000.00

Memo Item

**B.** 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 Y

Amount of Each Receipt this Period

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 / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	5000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	5000.00

**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 7 OF 21
<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)  
**HELLERHIGHWATER PAC**

**A. National Beer Wholesalers Assoc. PAC**

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

Mailing Address 1101 King Street #600

City Alexandria	State VA	Zip Code 22314
--------------------	-------------	-------------------

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 ▼  
2500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	28	/	2016

**Transaction ID : AFBA9DB145E2946F6AA9**

Amount of Each Receipt this Period  
2500.00

Memo Item

**B. Newmont Employees PAC**

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

Mailing Address 101 Constitution Avenue NW #800

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

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 ▼  
2500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	10	/	2016

**Transaction ID : AA8693C87C6714E91AC2**

Amount of Each Receipt this Period  
2500.00

Memo Item

**C. Humana Inc. PAC**

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

Mailing Address 975 F Street NW #550

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

FEC ID number of contributing federal political committee. **C C00271007**

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 M	/	D D D	/	Y Y Y Y Y Y
11	/	10	/	2016

**Transaction ID : A5A07F9A7FA1942B79B5**

Amount of Each Receipt this Period  
2000.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	7000.00
<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 21
<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)  
**HELLERHIGHWATER PAC**

**A. Securities Industry & Financial**

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

Mailing Address **Markets Association PAC**  
1101 New York Avenue NW #800

City Washington	State DC	Zip Code 20005
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00431312

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
11	/	17	/	2016

**Transaction ID : A9596EB9A4C1D46B7910**

Amount of Each Receipt this Period  
2500.00

Memo Item

**B. National Assoc Of Convenience Stores PAC**

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

Mailing Address 1600 Duke Street

City Alexandria	State VA	Zip Code 22314
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00126763

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 M	/	D D D	/	Y Y Y Y Y Y
11	/	17	/	2016

**Transaction ID : A086F996545824D7AA75**

Amount of Each Receipt this Period  
5000.00

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).....	7500.00
<b>TOTAL</b> This Period (last page this line number only).....	14500.00



**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)  
**HELLERHIGHWATER PAC**

Full Name (Last, First, Middle Initial)

**A. PDQ Printing**

Mailing Address 3820 South Valley View Boulevard

City Las Vegas State NV Zip Code 89103-2904

Purpose of Disbursement  
Printing

Candidate Name

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

Date of Disbursement

MM / DD / YYYY  
10 / 31 / 2016

FEC Identification Number

C  
Transaction ID : BAC01CE48E  
Amount of Each Disbursement this Period  
431.93

Memo Item

Full Name (Last, First, Middle Initial)

**B. October Inc.**

Mailing Address PO Box 372672

City Las Vegas State NV Zip Code 89137

Purpose of Disbursement  
Office Supplies

Candidate Name

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

Date of Disbursement

MM / DD / YYYY  
11 / 01 / 2016

FEC Identification Number

C  
Transaction ID : B5E484A1B6:  
Amount of Each Disbursement this Period  
26.69

Memo Item

Full Name (Last, First, Middle Initial)

**C. In Compliance Inc.**

Mailing Address PO Box 751271

City Las Vegas State NV Zip Code 89136

Purpose of Disbursement  
Travel

Candidate Name

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

Date of Disbursement

MM / DD / YYYY  
11 / 01 / 2016

FEC Identification Number

C  
Transaction ID : B5C5832C32  
Amount of Each Disbursement this Period  
45.50

Memo Item

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

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

504.12

**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)  
**HELLERHIGHWATER PAC**

Full Name (Last, First, Middle Initial)

**A. October Inc.**

Mailing Address PO Box 372672

City Las Vegas State NV Zip Code 89137

Purpose of Disbursement  
Consulting Fundraising

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
11 / 01 / 2016

FEC Identification Number

C

Transaction ID : BA5CBB4D2I

Amount of Each Disbursement this Period

4807.50

Memo Item

Full Name (Last, First, Middle Initial)

**B. October Inc.**

Mailing Address PO Box 372672

City Las Vegas State NV Zip Code 89137

Purpose of Disbursement  
See Below/Lodging

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
11 / 01 / 2016

FEC Identification Number

C

Transaction ID : B806A6316EF

Amount of Each Disbursement this Period

470.13

Memo Item

Full Name (Last, First, Middle Initial)

**C. November Inc.**

Mailing Address PO Box 372672

City Las Vegas State NV Zip Code 89137

Purpose of Disbursement  
Parking

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
11 / 01 / 2016

FEC Identification Number

C

Transaction ID : B8158656E6I

Amount of Each Disbursement this Period

60.00

Memo Item

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

5337.63

**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)  
**HELLERHIGHWATER PAC**

Full Name (Last, First, Middle Initial)

### A. In Compliance Inc.

Mailing Address PO Box 751271

City  
Las Vegas

State  
NV

Zip Code  
89136

Purpose of Disbursement  
Postage

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:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			01			2016			

FEC Identification Number

**C** [Redacted]

**Transaction ID : B65C30325E**

Amount of Each Disbursement this Period

[Redacted] 115.34

Memo Item

Full Name (Last, First, Middle Initial)

### B. In Compliance Inc.

Mailing Address PO Box 751271

City  
Las Vegas

State  
NV

Zip Code  
89136

Purpose of Disbursement  
Printing

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:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			01			2016			

FEC Identification Number

**C** [Redacted]

**Transaction ID : B78407C51F8**

Amount of Each Disbursement this Period

[Redacted] 36.00

Memo Item

Full Name (Last, First, Middle Initial)

### C. In Compliance Inc.

Mailing Address PO Box 751271

City  
Las Vegas

State  
NV

Zip Code  
89136

Purpose of Disbursement  
Compliance Consulting

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:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			01			2016			

FEC Identification Number

**C** [Redacted]

**Transaction ID : B8B3AC1F3F**

Amount of Each Disbursement this Period

[Redacted] 1500.00

Memo Item

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

[Redacted] 1651.34

**TOTAL** 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)  
**HELLERHIGHWATER PAC**

Full Name (Last, First, Middle Initial)

**A. Tagged Digital**

Mailing Address 10697 West Centennial Parkway #204

City Las Vegas State NV Zip Code 89166

Purpose of Disbursement  
Email Services

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
11 / 01 / 2016

FEC Identification Number

C  
**Transaction ID : B9A2B423A0**  
Amount of Each Disbursement this Period  
500.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. November Inc.**

Mailing Address PO Box 372672

City Las Vegas State NV Zip Code 89137

Purpose of Disbursement  
Consulting Strategy

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
11 / 01 / 2016

FEC Identification Number

C  
**Transaction ID : BDD7C1328C**  
Amount of Each Disbursement this Period  
2500.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. November Inc.**

Mailing Address PO Box 372672

City Las Vegas State NV Zip Code 89137

Purpose of Disbursement  
Meals

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
11 / 01 / 2016

FEC Identification Number

C  
**Transaction ID : BD77F4EF37**  
Amount of Each Disbursement this Period  
26.00

Memo Item

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

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

3026.00

**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)  
**HELLERHIGHWATER PAC**

Full Name (Last, First, Middle Initial)

**A. October Inc.**

Mailing Address PO Box 372672

City  
Las Vegas

State  
NV

Zip Code  
89137

Purpose of Disbursement  
Postage

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			01			2016			

FEC Identification Number

C [REDACTED]

Transaction ID : **BF28C97F75I**

Amount of Each Disbursement this Period

[REDACTED] 144.63

Memo Item

Full Name (Last, First, Middle Initial)

**B. October Inc.**

Mailing Address PO Box 372672

City  
Las Vegas

State  
NV

Zip Code  
89137

Purpose of Disbursement  
Car Rental

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			01			2016			

FEC Identification Number

C [REDACTED]

Transaction ID : **B0DDC9BC0I**

Amount of Each Disbursement this Period

[REDACTED] 86.08

Memo Item

Full Name (Last, First, Middle Initial)

**C. Carson Nugget Inc.**

Mailing Address 507 North Carson Street

City  
Carson City

State  
NV

Zip Code  
89701

Purpose of Disbursement  
Catering & Facility Fees

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			07			2016			

FEC Identification Number

C [REDACTED]

Transaction ID : **B09E7BFE28**

Amount of Each Disbursement this Period

[REDACTED] 4804.58

Memo Item

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

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

[REDACTED] 5035.29

[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)  
**HELLERHIGHWATER PAC**

**A. Jonkey, Ashley, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 1806 Kodiak Circle

City Reno State NV Zip Code 89511-3014

Purpose of Disbursement Cleaning Services

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 11 / 07 / 2016

FEC Identification Number: C

Transaction ID : B2F1DF4B93

Amount of Each Disbursement this Period: 102.00

Memo Item

**B. Abrams, Edgar, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 1391 Pennsylvania Ave. SE #250

City Washington State DC Zip Code 20003

Purpose of Disbursement Consulting Management

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 11 / 28 / 2016

FEC Identification Number: C

Transaction ID : BCED4A732A

Amount of Each Disbursement this Period: 2290.00

Memo Item

**C. November Inc.**

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 372672

City Las Vegas State NV Zip Code 89137

Purpose of Disbursement See Below/Catering

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 11 / 01 / 2016

FEC Identification Number: C

Transaction ID : B31478CA08

Amount of Each Disbursement this Period: 347.82

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 2739.82

**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)  
**HELLERHIGHWATER PAC**

Full Name (Last, First, Middle Initial) <b>A. Panevino Restaurant</b>		Date of Disbursement MM / DD / YYYY 10 / 15 / 2016
Mailing Address 246 Via Antonio Ave.		FEC Identification Number C [REDACTED] <b>Transaction ID : BB8C9CCA8</b> Amount of Each Disbursement this Period [REDACTED] 347.82
City Las Vegas	State NV	Zip Code 89119-3527
Purpose of Disbursement Catering	Category/Type [REDACTED]	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Memo Item <input checked="" type="checkbox"/>		Catering

Full Name (Last, First, Middle Initial) <b>B. November Inc.</b>		Date of Disbursement MM / DD / YYYY 11 / 01 / 2016
Mailing Address PO Box 372672		FEC Identification Number C [REDACTED] <b>Transaction ID : B97BBA3CDF</b> Amount of Each Disbursement this Period [REDACTED] 922.06
City Las Vegas	State NV	Zip Code 89137
Purpose of Disbursement See Below/Catering & Facility Fees	Category/Type [REDACTED]	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Memo Item <input type="checkbox"/>		Catering

Full Name (Last, First, Middle Initial) <b>C. Hyatt Regency Lake Tahoe Resorts</b>		Date of Disbursement MM / DD / YYYY 10 / 10 / 2016
Mailing Address 111 Country Club Drive		FEC Identification Number C [REDACTED] <b>Transaction ID : BE4A63C385</b> Amount of Each Disbursement this Period [REDACTED] 922.06
City Incline Village	State NV	Zip Code 89451
Purpose of Disbursement Catering & Facility Fees	Category/Type [REDACTED]	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Memo Item <input checked="" type="checkbox"/>		Catering & Facility Fees

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[REDACTED] 922.06
<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)  
**HELLERHIGHWATER PAC**

Full Name (Last, First, Middle Initial)

**A. October Inc.**

Mailing Address PO Box 372672

City  
Las Vegas

State  
NV

Zip Code  
89137

Purpose of Disbursement  
See Below/Catering & Facility Fees

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			01			2016			

FEC Identification Number

**C** [ ]  
**Transaction ID : B38E3BCE1E**  
Amount of Each Disbursement this Period  
[ ] 9147.96

Memo Item

Full Name (Last, First, Middle Initial)

**B. Council of Ins. Agents & Brokers**

Mailing Address 701 Pennsylvania Ave NW

City  
Washington

State  
DC

Zip Code  
20004-2608

Purpose of Disbursement  
Catering & Facility Fees

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			11			2016			

FEC Identification Number

**C** [ ]  
**Transaction ID : B15AAD8305**  
Amount of Each Disbursement this Period  
[ ] 1422.93  
Catering & Facility Fees

Memo Item

Full Name (Last, First, Middle Initial)

**C. Robert Trent Jones Golf Course**

Mailing Address 1 Turtle Point Drive

City  
Gainsville

State  
VA

Zip Code  
20155

Purpose of Disbursement  
Catering & Facility Fees

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			11			2016			

FEC Identification Number

**C** [ ]  
**Transaction ID : B17DB66585**  
Amount of Each Disbursement this Period  
[ ] 6175.03  
Catering & Facility Fees

Memo Item

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

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

[ ] 9147.96

[ ]



**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)  
**HELLERHIGHWATER PAC**

Full Name (Last, First, Middle Initial)

**A. Bourbon Steak @ Four Seasons Hotel**

Mailing Address 2800 Pennsylvania Avenue

City Washington State DC Zip Code 20007

Purpose of Disbursement  
Catering & Facility Fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
10 / 11 / 2016

FEC Identification Number

C  
Transaction ID : B403AA4EB5  
Amount of Each Disbursement this Period  
1550.00

Catering & Facility Fees  
 Memo Item

Full Name (Last, First, Middle Initial)

**B. October Inc.**

Mailing Address PO Box 372672

City Las Vegas State NV Zip Code 89137

Purpose of Disbursement  
See Below/Airfare

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
11 / 01 / 2016

FEC Identification Number

C  
Transaction ID : B32AEF9C80  
Amount of Each Disbursement this Period  
1790.44

Memo Item

Full Name (Last, First, Middle Initial)

**C. Southwest Airlines**

Mailing Address PO Box 36611

City Dallas State TX Zip Code 75235

Purpose of Disbursement  
Travel/Airfare

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
11 / 01 / 2016

FEC Identification Number

C  
Transaction ID : BA4FAD1DF  
Amount of Each Disbursement this Period  
1790.44

Travel/Airfare  
 Memo Item

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

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

1790.44

**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)  
**HELLERHIGHWATER PAC**

**A. Jonkey, Ashley, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 1806 Kodiak Circle

City Reno State NV Zip Code 89511-3014

Purpose of Disbursement See Below/Event Supplies

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 11 / 07 / 2016

FEC Identification Number: C

Transaction ID : **BB10CE63A9**

Amount of Each Disbursement this Period: 515.38

Memo Item

**B. Hobby Lobby**

Full Name (Last, First, Middle Initial)

Mailing Address 5685 South Virginia Street

City Reno State NV Zip Code 89502-6032

Purpose of Disbursement Event Supplies

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 21 / 2016

FEC Identification Number: C

Transaction ID : **B4132AF1705**

Amount of Each Disbursement this Period: 113.67

Event Supplies

Memo Item

**C. Sams Club**

Full Name (Last, First, Middle Initial)

Mailing Address 1001 Kietzke Lane

City Reno State NV Zip Code 89509

Purpose of Disbursement Event Supplies

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 23 / 2016

FEC Identification Number: C

Transaction ID : **B9B9D7BD8**

Amount of Each Disbursement this Period: 227.24

Event Supplies

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 515.38

**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)  
**HELLERHIGHWATER PAC**

Full Name (Last, First, Middle Initial)

**A. Walmart**

Mailing Address 4855 Kietzke Lane

City Reno State NV Zip Code 89509-6549

Purpose of Disbursement  
Event Supplies

Candidate Name

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

State: District:

Date of Disbursement

MM / DD / YYYY  
10 / 27 / 2016

FEC Identification Number

C  
Transaction ID : B10CC29CF5  
Amount of Each Disbursement this Period  
6.01  
Event Supplies

Memo Item

Full Name (Last, First, Middle Initial)

**B. Home Depot**

Mailing Address 1001 Steamboat Parkway

City Reno State NV Zip Code 89521-6238

Purpose of Disbursement  
Event Supplies

Candidate Name

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

State: District:

Date of Disbursement

MM / DD / YYYY  
10 / 28 / 2016

FEC Identification Number

C  
Transaction ID : B90D2780EB  
Amount of Each Disbursement this Period  
69.96  
Event Supplies

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  
Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY

FEC Identification Number

C  
Amount of Each Disbursement this Period

Memo Item

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

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

0.00  
30670.04

**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)  
**HELLERHIGHWATER PAC**

**A. COMMITTEE TO ELECT DARRYL GLENN**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO BOX 62667

M M M	/	D D D	/	Y Y Y Y Y
11		03		2016

City  
COLORADO SPRINGS

State  
CO

Zip Code  
80962

FEC Identification Number

Purpose of Disbursement  
General 2016

C	C00572594
---	-----------

Candidate Name  
**Glenn, Darryl, , ,**

Category/  
Type

**Transaction ID : BB6561A23D**

Amount of Each Disbursement this Period

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

5000.00
---------

Memo Item

Full Name (Last, First, Middle Initial)

**B. John Kennedy for US Senate**

Date of Disbursement

Mailing Address 4724 Jamestown Ave. #4

M M M	/	D D D	/	Y Y Y Y Y
11		11		2016

City  
Baton Rouge

State  
LA

Zip Code  
70808-3221

FEC Identification Number

Purpose of Disbursement

C	C00608398
---	-----------

Candidate Name  
**John Kennedy for US Senate**

Category/  
Type

**Transaction ID : BCA5D4E6FC**

Amount of Each Disbursement this Period

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) RunOff

5000.00
---------

Memo Item

Full Name (Last, First, Middle Initial)

**C. Rand Paul For US Senate 2016**

Date of Disbursement

Mailing Address PO Box 72928

M M M	/	D D D	/	Y Y Y Y Y
10		31		2016

City  
Newport

State  
KY

Zip Code  
41072-0928

FEC Identification Number

Purpose of Disbursement  
General 2016

C	C00496075
---	-----------

Candidate Name  
**Paul, Rand, , ,**

Category/  
Type

**Transaction ID : B50EF303CE**

Amount of Each Disbursement this Period

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

5000.00
---------

Memo Item

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

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

15000.00
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**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)  
**HELLERHIGHWATER PAC**

Full Name (Last, First, Middle Initial) <b>A. Mike Crapo For Senate</b>		Date of Disbursement MM / DD / YYYY 10 / 31 / 2016
Mailing Address PO Box 1948		FEC Identification Number C C00330886 <b>Transaction ID : B85492AE99!</b>
City Boise	State ID	Zip Code 83701
Purpose of Disbursement General 2016		Amount of Each Disbursement this Period 5000.00
Candidate Name <b>Crapo, Mike, , ,</b>		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: ID	District:	

Full Name (Last, First, Middle Initial) <b>B.</b>		Date of Disbursement MM / DD / YYYY
Mailing Address		FEC Identification Number C
City	State	Zip Code
Purpose of Disbursement		Amount of Each Disbursement this Period
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement MM / DD / YYYY
Mailing Address		FEC Identification Number C
City	State	Zip Code
Purpose of Disbursement		Amount of Each Disbursement this Period
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	5000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	20000.00