

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 06 / 01 / 2018 through 06 / 30 / 2018

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

Type or Print Name of Treasurer

Signature of Treasurer Hastie, Chrissie, , , [Electronically Filed] Date 07 / 20 / 2018

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="2018"/>	<input type="text" value="318829.00"/>	<input type="text" value="318829.00"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="282043.37"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="93000.00"/>	<input type="text" value="221699.57"/>
(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="375043.37"/>	<input type="text" value="540528.57"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="49300.26"/>	<input type="text" value="214785.46"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="325743.11"/>	<input type="text" value="325743.11"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="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)

Page 3

Write or Type Committee Name

HELLERHIGHWATER PAC

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y
06 / 01 / 2018 To: M M / D D / Y Y Y Y Y Y
06 / 30 / 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).....	15000.00	25000.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	15000.00	25000.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	78000.00	190500.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	93000.00	215500.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	1199.57
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	5000.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	93000.00	221699.57
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	93000.00	221699.57

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	29300.26	114285.46
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	29300.26	114285.46
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	20000.00	75500.00
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	25000.00
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)) ..	49300.26	214785.46
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	49300.26	214785.46

DETAILED SUMMARY PAGE
of Disbursements

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Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	93000.00	215500.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	93000.00	215500.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	29300.26	114285.46
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	29300.26	114285.46

**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. Connor, Jacque, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 990 S Rock Boulevard #F
 City Reno State NV Zip Code 89502-4149
 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 ▼ 5000.00

Date of Receipt 06 / 12 / 2018
Transaction ID : A2955D948FD6A4E51B15
 Amount of Each Receipt this Period 5000.00
 Memo Item

B. Connor, William, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 990 S Rock Boulevard #F
 City Reno State NV Zip Code 89502-4149
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) William E. Connor & Associates Ltd. Occupation (for Individual) Executive
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 06 / 12 / 2018
Transaction ID : AF921C0AB70064723A20
 Amount of Each Receipt this Period 5000.00
 Memo Item

C. Mihaylo, Steven, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 10097
 City Boise State ID Zip Code 83707-5097
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 06 / 28 / 2018
Transaction ID : A58E93BDA96554D47969
 Amount of Each Receipt this Period 5000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	15000.00
TOTAL This Period (last page this line number only).....	15000.00

**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. UPSPAC

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

Mailing Address 55 Glenlake Parkway NE

City Atlanta	State GA	Zip Code 30328
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FEC ID number of contributing federal political committee. **C** C00064766

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
06	/	14	/	2018

Transaction ID : A28A1307D36C040859D9

Amount of Each Receipt this Period
2500.00

Memo Item

B. SYNCHRONY FINANCIAL EMPLOYEES POLITICAL ACTION COMMITTEE (SYNCPAC)

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

Mailing Address 777 LONG RIDGE ROAD

City STAMFORD	State CT	Zip Code 06902
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FEC ID number of contributing federal political committee. **C** C00589119

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
06	/	14	/	2018

Transaction ID : AABBC16F6F28641BB9FA

Amount of Each Receipt this Period
4500.00

Memo Item

c. Las Vegas Sands Corp. PAC

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

Mailing Address 3355 Las Vegas Boulevard South

City Las Vegas	State NV	Zip Code 89109
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FEC ID number of contributing federal political committee. **C** C00399642

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
06	/	14	/	2018

Transaction ID : A66C994A375164B6BB35

Amount of Each Receipt this Period
5000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	12000.00
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 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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. American Society Anesthesiologists PAC

Mailing Address 1061 American Lane

City Schaumburg	State IL	Zip Code 60173
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FEC ID number of contributing federal political committee. **C** C00255752

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
06	/	14	/	2018

Transaction ID : AC42E163BDAFF4F9A961

Amount of Each Receipt this Period
5000.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. Blue Cross & Blue Shield Association PAC

Mailing Address 1310 G Street NW 12th Floor

City Washington	State DC	Zip Code 20005
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FEC ID number of contributing federal political committee. **C** C00194746

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
06	/	20	/	2018

Transaction ID : A3EC8A8ED9EC84DD3AFF

Amount of Each Receipt this Period
5000.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. VIACOM INTERNATIONAL, INC. POLITICAL ACTION COMMITTEE

Mailing Address 1275 PENNSYLVANIA AVENUE NW
SUITE 710

City WASHINGTON	State DC	Zip Code 20004
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00167759

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
06	/	20	/	2018

Transaction ID : AA8CB48068C8B4D72876

Amount of Each Receipt this Period
1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	11000.00
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 9 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. NextEra Energy PAC

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

Mailing Address 700 Universal Boulevard

City Juno Beach	State FL	Zip Code 33408-2657
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FEC ID number of contributing federal political committee. **C** C00064774

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
06		20		2018

Transaction ID : A29D7B360DBB14E60B15

Amount of Each Receipt this Period
5000.00

Memo Item

B. General Motors Company PAC

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

Mailing Address 25 Massachusetts Avenue NW #400

City Washington	State DC	Zip Code 20001-1427
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FEC ID number of contributing federal political committee. **C** C00076810

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
06		20		2018

Transaction ID : A68B409D36A3A431AB60

Amount of Each Receipt this Period
2500.00

Memo Item

C. National Multifamily Housing Council PAC

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

Mailing Address 1850 M Street NW #540

City Washington	State DC	Zip Code 20036
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FEC ID number of contributing federal political committee. **C** C00130773

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
06		28		2018

Transaction ID : A703F5F9BEE1948D3AF5

Amount of Each Receipt this Period
5000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	12500.00
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 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. American Bankers Association BankPAC

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

Mailing Address 1120 Connecticut Avenue NW

City Washington	State DC	Zip Code 20036
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FEC ID number of contributing federal political committee. **C** C00004275

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
06	/	28	/	2018

Transaction ID : A7725576F581C4B2AA88

Amount of Each Receipt this Period
5000.00

Memo Item

B. Cigna PAC

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

Mailing Address 1601 Chestnut Street

City Philadelphia	State PA	Zip Code 19192
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FEC ID number of contributing federal political committee. **C** C00085316

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
06	/	28	/	2018

Transaction ID : AD7D07FA1A06F4755AF3

Amount of Each Receipt this Period
2500.00

Memo Item

C. Sempra Energy Employees PAC

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

Mailing Address 101 Ash Street

City San Diego	State CA	Zip Code 92101
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FEC ID number of contributing federal political committee. **C** C00008748

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
06	/	30	/	2018

Transaction ID : A5F2E8857E99841D9831

Amount of Each Receipt this Period
2000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	9500.00
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 11 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. American Academy Of Neurology BrainPAC

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

Mailing Address 201 Chicago Avenue

City Minneapolis	State MN	Zip Code 55415
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FEC ID number of contributing federal political committee. **C** C00435933

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
06		30		2018

Transaction ID : AD1F3518672B8403FAFE

Amount of Each Receipt this Period
2500.00

Memo Item

B. DUKE ENERGY CORPORATION PAC

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

Mailing Address 550 SOUTH TRYON STREET

City CHARLOTTE	State NC	Zip Code 28202
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FEC ID number of contributing federal political committee. **C** C00083535

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

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
06		30		2018

Transaction ID : AE0BC658720EA4F1A97C

Amount of Each Receipt this Period
1500.00

Memo Item

C. THE TRAVELERS COMPANIES, INC. POLITICAL ACTION COMMITTEE (T-PAC)

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

Mailing Address ONE TOWER SQUARE

City HARTFORD	State CT	Zip Code 06183
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FEC ID number of contributing federal political committee. **C** C00376376

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
06		30		2018

Transaction ID : A91A0E301A77149FE8A2

Amount of Each Receipt this Period
5000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	9000.00
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 12 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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. Property Casualty Insurers Assoc. PAC

Mailing Address 8700 West Bryn Mawr Avenue #1200S

City Chicago	State IL	Zip Code 60631
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FEC ID number of contributing federal political committee. **C** C00066472

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
06	/	30	/	2018

Transaction ID : A58B984CEC4324349B8D

Amount of Each Receipt this Period
4500.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. American Hotel & Lodging Assoc HOTELPAC

Mailing Address 1250 I Street NW #1100

City Washington	State DC	Zip Code 20005
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FEC ID number of contributing federal political committee. **C** C00001198

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
06	/	30	/	2018

Transaction ID : A8FF888F058614A95924

Amount of Each Receipt this Period
5000.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. Employees Of Northrop Grumman Corp PAC

Mailing Address 2980 Fairview Park Drive

City Falls Church	State VA	Zip Code 22042
----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00088591

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
06	/	30	/	2018

Transaction ID : A9F3C5952620F475C846

Amount of Each Receipt this Period
5000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	14500.00
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 13 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. DAVITA INC. POLITICAL ACTION COMMITTEE (DAPAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 32275 32ND AVE, S.

City FEDERAL WAY	State WA	Zip Code 98001
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00340943

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
06		30		2018

Transaction ID : A31ABEEC358B64B99936

Amount of Each Receipt this Period
2500.00

Memo Item

B. AMERICAN LAND TITLE ASSOCIATION TITLE INDUSTRY PAC (TIPAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1800 M ST, NW
SUITE 300S

City WASHINGTON	State DC	Zip Code 20036
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00012914

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 M	/	D D D	/	Y Y Y Y Y Y
06		30		2018

Transaction ID : A3AB2FD39BCEB4ACCA7

Amount of Each Receipt this Period
3000.00

Memo Item

C. National Association Of Broadcasters PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1771 N Street NW

City Washington	State DC	Zip Code 20036
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00009985

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
4000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		30		2018

Transaction ID : A9FCDEC9BE7E74DE68F0

Amount of Each Receipt this Period
2000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	7500.00
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 14 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 Association Of Broadcasters PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1771 N Street NW

City Washington	State DC	Zip Code 20036
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00009985

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
4000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		30		2018

Transaction ID : ACBECA578380D4AEBBC!

Amount of Each Receipt this Period
2000.00

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
-----	---	-----	---	---------

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
-----	---	-----	---	---------

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	2000.00
TOTAL This Period (last page this line number only).....▶	78000.00

**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

A. Abrams, Edgar, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 1391 Pennsylvania Ave SE
Unit 250

City Washington State DC Zip Code 20003-3079

Purpose of Disbursement Consulting Management

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
06 / 04 / 2018

FEC Identification Number: C

Transaction ID : BAC6615BC0

Amount of Each Disbursement this Period: 2290.00

Memo Item

B. October Inc.

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 370672

City Las Vegas State NV Zip Code 89137-0672

Purpose of Disbursement Name Badges

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
06 / 05 / 2018

FEC Identification Number: C

Transaction ID : B8B6FC1D46

Amount of Each Disbursement this Period: 35.71

Memo Item

C. In Compliance Inc.

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 751271

City Las Vegas State NV Zip Code 89136-1271

Purpose of Disbursement Postage

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
06 / 05 / 2018

FEC Identification Number: C

Transaction ID : B6D0C85B29

Amount of Each Disbursement this Period: 26.10

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 2351.81

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
89136-1271

Purpose of Disbursement
Printing

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
06			05			2018			

FEC Identification Number

C

Transaction ID : BC4FCA0E8F

Amount of Each Disbursement this Period

55.00

Memo Item

Full Name (Last, First, Middle Initial)

B. October Inc.

Mailing Address PO Box 370672

City
Las Vegas

State
NV

Zip Code
89137-0672

Purpose of Disbursement
Consulting Fundraising

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
06			05			2018			

FEC Identification Number

C

Transaction ID : BBFA34CE41

Amount of Each Disbursement this Period

2950.00

Memo Item

Full Name (Last, First, Middle Initial)

C. In Compliance Inc.

Mailing Address PO Box 751271

City
Las Vegas

State
NV

Zip Code
89136-1271

Purpose of Disbursement
Compliance Consulting

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
06			05			2018			

FEC Identification Number

C

Transaction ID : B8FA52F9A6

Amount of Each Disbursement this Period

2000.00

Memo Item

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

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

5005.00

**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. 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

MM / DD / YYYY
06 / 05 / 2018

FEC Identification Number

C
Transaction ID : BA0D59F88F
Amount of Each Disbursement this Period
5000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. In Compliance Inc.

Mailing Address PO Box 751271

City Las Vegas State NV Zip Code 89136-1271

Purpose of Disbursement
Office Supplies

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
06 / 05 / 2018

FEC Identification Number

C
Transaction ID : BDC4D2F632
Amount of Each Disbursement this Period
3.35

Memo Item

Full Name (Last, First, Middle Initial)

C. Blue Cross Blue Shield Association

Mailing Address 1310 G Street NW 12th Floor

City Washington State DC Zip Code 20005-3007

Purpose of Disbursement
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
06 / 12 / 2018

FEC Identification Number

C
Transaction ID : B5F503B0A2
Amount of Each Disbursement this Period
15000.00

Memo Item

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

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

20003.35

**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. Anedot

Mailing Address 10156 Perkins Rowe
17F

City
Baton Rouge

State
LA

Zip Code
70810-1799

Purpose of Disbursement
Merchant Processing 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
06			28			2018			

FEC Identification Number

C []
Transaction ID : B90794CF65
Amount of Each Disbursement this Period
[] 200.30 []

Memo Item

Full Name (Last, First, Middle Initial)

B. October Inc.

Mailing Address PO Box 370672

City
Las Vegas

State
NV

Zip Code
89137-0672

Purpose of Disbursement
See Below/Airfare

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
06			05			2018			

FEC Identification Number

C []
Transaction ID : B1C6C1026F
Amount of Each Disbursement this Period
[] 1723.80 []

Memo Item

Full Name (Last, First, Middle Initial)

C. American Airlines

Mailing Address 4333 Amon Carter Blvd

City
Fort Worth

State
TX

Zip Code
76155-2605

Purpose of Disbursement
Airfare

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
03			15			2018			

FEC Identification Number

C []
Transaction ID : B156196AD0
Amount of Each Disbursement this Period
[] 741.11 []

Memo Item

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

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

[]	[]	[]	[]	[]	[]	[]	[]	[]	[]
						1924.10			

**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. Delta Airlines

Mailing Address 1030 Delta Blvd

City Atlanta State GA Zip Code 30354-1989

Purpose of Disbursement
Airfare

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
03 / 25 / 2018

FEC Identification Number

C
Transaction ID : **BD02F657671**
Amount of Each Disbursement this Period
431.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Southwest Airlines

Mailing Address PO Box 36611

City Dallas State TX Zip Code 75235-1611

Purpose of Disbursement
Airfare

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
03 / 31 / 2018

FEC Identification Number

C
Transaction ID : **B8D8650CCB**
Amount of Each Disbursement this Period
551.69

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

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
29284.26

**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. HOUSLEY FOR SENATE COMMITTEE

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 1000 UNIVERSITY AVE W
#10

M M M	/	D D D	/	Y Y Y Y Y
06		20		2018

City SAINT PAUL State MN Zip Code 55104

FEC Identification Number

Purpose of Disbursement
General 2018

C	C00664219
---	-----------

Candidate Name
Housley, Karin, , ,

Category/
Type

Transaction ID : B404799A34C

Amount of Each Disbursement this Period

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

5000.00

State: MN District:

Memo Item

B. Nevada Republican Central Comm.

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 2810 W. Charleston #69

M M M	/	D D D	/	Y Y Y Y Y
06		15		2018

City Las Vegas State NV Zip Code 89102-1909

FEC Identification Number

Purpose of Disbursement
Federal Contribution

C	
---	--

Transaction ID : BB574092BC

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify)

5000.00

State: District:

Memo Item

C. HOUSLEY FOR SENATE COMMITTEE

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 1000 UNIVERSITY AVE W
#10

M M M	/	D D D	/	Y Y Y Y Y
06		20		2018

City SAINT PAUL State MN Zip Code 55104

FEC Identification Number

Purpose of Disbursement
Primary 2018

C	C00664219
---	-----------

Transaction ID : B4E0D87D72

Amount of Each Disbursement this Period

Candidate Name
Housley, Karin, , ,

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

5000.00

State: MN District:

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

A. RENACCI FOR SENATE

Full Name (Last, First, Middle Initial)
Mailing Address 150 SMOKERISE DRIVE

City WADSWORTH State OH Zip Code 44281

Purpose of Disbursement
General 2018

Candidate Name
Renacci, James, B, ,

Office Sought: House Senate President
State: OH District:

Disbursement For: 2018
 Primary General Other (specify) ▼

Date of Disbursement
MM / DD / YYYY
06 / 29 / 2018

FEC Identification Number
C C00466359
Transaction ID : **BAFF72F862I**

Amount of Each Disbursement this Period
5000.00

Memo Item

B.

Full Name (Last, First, Middle Initial)
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
MM / DD / YYYY

FEC Identification Number
C

Amount of Each Disbursement this Period

Memo Item

C.

Full Name (Last, First, Middle Initial)
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
MM / DD / YYYY

FEC Identification Number
C

Amount of Each Disbursement this Period

Memo Item

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