

**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)
MERITAGE HOMES CORPORATION PAC

Full Name (Last, First, Middle Initial) A. HELLER FOR SENATE		Date of Disbursement MM / DD / YYYY 11 / 09 / 2016
Mailing Address PO BOX 371907		FEC Identification Number C 000494229 Transaction ID : SB23.7645
City LAS VEGAS	State NV	Zip Code 89137
Purpose of Disbursement Contribution	Category/ Type 011	Amount of Each Disbursement this Period 2000.00
Candidate Name HELLER, DEAN, , ,	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Memo Item <input type="checkbox"/>
Disbursement For: 2018	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: NV	District: 00	

Full Name (Last, First, Middle Initial) B. MAJORITY COMMITTEE PAC--MC PAC		Date of Disbursement MM / DD / YYYY 11 / 10 / 2016
Mailing Address PO BOX 10134		FEC Identification Number C 000428052 Transaction ID : SB23.7649
City BAKERSFIELD	State CA	Zip Code 93389
Purpose of Disbursement Contribution	Category/ Type 011	Amount of Each Disbursement this Period 2000.00
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Memo Item <input type="checkbox"/>
Disbursement For: 2016	<input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	
State:	District:	

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

SUBTOTAL of Disbursements This Page (optional).....▶	4000.00
TOTAL This Period (last page this line number only).....▶	4000.00