

**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 49
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
HellerHighWater PAC

A. Mr. Aaron Cohen
 Full Name (Last, First, Middle Initial)
 Mailing Address 1007 West Braddock Road
 City Alexandria State VA Zip Code 22302
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Capitol Counsel LLC Occupation Executive
 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
 04 / 09 / 2015
Transaction ID : 50409.C323
 Amount of Each Receipt this Period
 1500.00
 Receipt

B. Mrs. Brenda Reese
 Full Name (Last, First, Middle Initial)
 Mailing Address 2396 Grassy Spring Place
 City Las Vegas State NV Zip Code 89135
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Bockorny Group Occupation Lobbyist
 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
 03 / 26 / 2015
Transaction ID : 50326.C305
 Amount of Each Receipt this Period
 250.00
 Receipt

C. Mr. Scott Styles
 Full Name (Last, First, Middle Initial)
 Mailing Address 3609 North Rockingham Street
 City Arlington State VA Zip Code 22213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer .Information Requested Occupation .Information Requested
 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
 03 / 19 / 2015
Transaction ID : 50319.C300
 Amount of Each Receipt this Period
 2500.00
 Receipt

SUBTOTAL of Receipts This Page (optional).....▶	4250.00
TOTAL This Period (last page this line number only).....▶	