

# 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**  
Check if different than previously reported. (ACC) **Las Vegas NV 89137-0672**

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲  
**C C00471607** 3. IS THIS REPORT  NEW (N) OR  AMENDED (A)

4. TYPE OF REPORT (Choose One)  
(a) Quarterly Reports:  
 April 15 Quarterly Report (Q1)  
 July 15 Quarterly Report (Q2)  
 October 15 Quarterly Report (Q3)  
 January 31 Year-End Report (YE)  
 July 31 Mid-Year Report (Non-election Year Only) (MY)  
 Termination Report (TER)  
(b) Monthly Report Due On:  
 Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)  
 Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)  
 Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)  
(c) 12-Day PRE-Election Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12S)  
Election on  /  /  in the State of   
(d) 30-Day POST-Election Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on  /  /  in the State of

5. Covering Period  /  /  2018 through  /  /  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  /  /  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"/>		318829.00
(b) Cash on Hand at Beginning of Reporting Period.....	334519.89	
(c) Total Receipts (from Line 19) .....	9777.37	253976.94
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	344297.26	572805.94
7. Total Disbursements (from Line 31).....	24532.70	253041.38
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	319764.56	319764.56
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

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).....	3000.00	28000.00
(ii) Unitemized .....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	3000.00	28000.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	6000.00	219000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	9000.00	247000.00
12. Transfers From Affiliated/Other Party Committees.....	777.37	1976.94
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)).....▶	9777.37	253976.94
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	9777.37	253976.94

**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 .....	19532.70	147541.38
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	19532.70	147541.38
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	5000.00	80500.00
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)) ..	24532.70	253041.38
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	24532.70	253041.38

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	9000.00	247000.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	9000.00	247000.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	19532.70	147541.38
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	19532.70	147541.38

**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 11
	<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  
Lindner, Carl, , ,

Mailing Address 301 East 4th Street #40S

City Cincinnati	State OH	Zip Code 45202-4242
--------------------	-------------	------------------------

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

Name of Employer (for Individual) American Financial Group	Occupation (for Individual) Executive
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
3000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 16 / 2018

**Transaction ID : A9CD9F31C406E43F18B5**

Amount of Each Receipt this Period  
 3000.00

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).....	3000.00
<b>TOTAL</b> This Period (last page this line number only).....	3000.00

**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 11
<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. Aflac Incorporated PAC**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 1932 Wynnton Road

City Columbus	State GA	Zip Code 31999
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FEC ID number of contributing federal political committee. **C** C00034157

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
3500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08		02		2018

**Transaction ID : A40B5E64B00A148548FF**

Amount of Each Receipt this Period  
3500.00

Memo Item

**B. Pfizer PAC**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 235 East 42nd Street

City New York	State NY	Zip Code 10017
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FEC ID number of contributing federal political committee. **C** C00016683

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
08		23		2018

**Transaction ID : A00B0DDF6298B4342BC0**

Amount of Each Receipt this Period  
2500.00

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
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Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	6000.00
<b>TOTAL</b> This Period (last page this line number only).....	6000.00

**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 8 OF 11
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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. HELLER VICTORY COMMITTEE**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 370672

City Las Vegas	State NV	Zip Code 89137-0672
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FEC ID number of contributing federal political committee. **C** C00630889

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
20976.94

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	31	/	2018

**Transaction ID : A79E37D03F1A04411A54**

Amount of Each Receipt this Period  

777.37
--------

Memo Item  
Transfer Of Net Proceeds

**B. Wright, Karen, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO Box 243

City Mount Vernon	State OH	Zip Code 43050-0243
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Ariel Corp.	Occupation (for Individual) President

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
07	/	31	/	2018

**Transaction ID : A24C13D8D94D24A4B8AE**

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).....	777.37
<b>TOTAL</b> This Period (last page this line number only).....	777.37



**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 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:

Date of Disbursement

MM / DD / YYYY  
08 / 01 / 2018

FEC Identification Number

C  
Transaction ID : B44A73F7BF  
Amount of Each Disbursement this Period  
9300.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. November Inc.**

Mailing Address PO Box 371553

City Las Vegas State NV Zip Code 89137-1553

Purpose of Disbursement  
Cab Fare

Candidate Name

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

Date of Disbursement

MM / DD / YYYY  
08 / 01 / 2018

FEC Identification Number

C  
Transaction ID : B65CC9B718  
Amount of Each Disbursement this Period  
21.50

Memo Item

Full Name (Last, First, Middle Initial)

**C. Abrams, Edgar, , ,**

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  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement

MM / DD / YYYY  
08 / 01 / 2018

FEC Identification Number

C  
Transaction ID : B7D6DFEDB  
Amount of Each Disbursement this Period  
5000.00

Memo Item

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

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

14321.50

**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 371553

City  
Las Vegas

State  
NV

Zip Code  
89137-1553

Purpose of Disbursement  
Consulting Strategy

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		01		2018

FEC Identification Number

C [ ]

Transaction ID : **BE88D96FF6**  
Amount of Each Disbursement this Period

[ ] 5000.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. American Express**

Mailing Address 200 Vesey Street

City  
New York

State  
NY

Zip Code  
10285-1000

Purpose of Disbursement  
Membership Fees

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		03		2018

FEC Identification Number

C [ ]

Transaction ID : **B2219D6D86I**  
Amount of Each Disbursement this Period

[ ] 211.20

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:

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y

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)..... ▶

[ ] 5211.20

[ ] 19532.70

**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. TARKANIAN FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 3008 CAMPBELL CIRCLE

M M M	/	D D D	/	Y Y Y Y Y
08		21		2018

City LAS VEGAS State NV Zip Code 89107

FEC Identification Number

Purpose of Disbursement  
General 2018

C	C00654095
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Candidate Name  
**Tarkanian, Danny, , ,**

Category/  
Type

**Transaction ID : B2DB8021EE**

Amount of Each Disbursement this Period

Office Sought:  House  
 Senate  
 President  
State: NV District: 03

Disbursement For: 2018  
 Primary  General  
 Other (specify) ▼

5000.00
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Memo Item

**B.**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address

M M M	/	D D D	/	Y Y Y Y Y

City State Zip Code

FEC Identification Number

Purpose of Disbursement

C	
---	--

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify)

--

Memo Item

**C.**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address

M M M	/	D D D	/	Y Y Y Y Y

City State Zip Code

FEC Identification Number

Purpose of Disbursement

C	
---	--

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

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Memo Item

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

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

5000.00
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5000.00
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