

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

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 M M / D D / Y Y Y Y Y Y in the State of
(d) 30-Day POST-Election Report for the: General (30G) Runoff (30R) Special (30S)
Election on M M / D D / Y Y Y Y Y Y in the State of

5. Covering Period M M / D D / Y Y Y Y Y Y 07 / 01 / 2016 through M M / D D / Y Y Y Y Y Y 07 / 31 / 2016

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

Signature of Treasurer Chrissie Hastie [Electronically Filed] Date M M / D D / Y Y Y Y Y Y 08 / 20 / 2016

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

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"/> | | <input type="text" value="144002.97"/> |
| (b) Cash on Hand at Beginning of Reporting Period..... | <input type="text" value="234419.29"/> | |
| (c) Total Receipts (from Line 19) | <input type="text" value="41685.00"/> | <input type="text" value="335136.00"/> |
| (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="276104.29"/> | <input type="text" value="479138.97"/> |
| 7. Total Disbursements (from Line 31)..... | <input type="text" value="90194.12"/> | <input type="text" value="293228.80"/> |
| 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))..... | <input type="text" value="185910.17"/> | <input type="text" value="185910.17"/> |
| 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. 06/2004)

Write or Type Committee Name
HellerHighWater PAC

Report Covering the Period: From: 07 / 01 / 2016 To: 07 / 31 / 2016

| 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)..... | 6500.00 | 32000.00 |
| (ii) Unitemized | 185.00 | 636.00 |
| (iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶ | 6685.00 | 32636.00 |
| (b) Political Party Committees | 0.00 | 0.00 |
| (c) Other Political Committees (such as PACs)..... | 25000.00 | 292500.00 |
| (d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) | 31685.00 | 325136.00 |
| 12. Transfers From Affiliated/Other Party Committees..... | 0.00 | 0.00 |
| 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..... | 10000.00 | 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))..... ▶ | 41685.00 | 335136.00 |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶ | 41685.00 | 335136.00 |

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 | 15194.12 | 123228.80 |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) | 15194.12 | 123228.80 |
| 22. Transfers to Affiliated/Other Party Committees..... | 0.00 | 30000.00 |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees..... | 75000.00 | 140000.00 |
| 24. Independent Expenditures (use Schedule E) | 0.00 | 0.00 |
| 25. Coordinated Party Expenditures (2 U.S.C. §441a(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 | 0.00 | 0.00 |
| 30. Federal Election Activity (2 U.S.C. §431(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)) .. | 90194.12 | 293228.80 |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 90194.12 | 293228.80 |

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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) | 31685.00 | 325136.00 |
| 34. Total Contribution Refunds (from Line 28(d)) | 0.00 | 0.00 |
| 35. Net Contributions (other than loans) (subtract Line 34 from Line 33) | 31685.00 | 325136.00 |
| 36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ▶ | 15194.12 | 123228.80 |
| 37. Offsets to Operating Expenditures (from Line 15, page 3)..... | 0.00 | 0.00 |
| 38. Net Operating Expenditures (subtract Line 37 from Line 36)▶ | 15194.12 | 123228.80 |

**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 19 |
| | <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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NAME OF COMMITTEE (In Full)
HellerHighWater PAC

A. Mr. Don Ahnger
 Full Name (Last, First, Middle Initial)
 Mailing Address 2505 Anthem Village Drive E383
 City Henderson State NV Zip Code 89052
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Midway Ford Truck Center Occupation Auto Dealer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 31 / 2016
Transaction ID : 60818.C584
 Amount of Each Receipt this Period 250.00
 Memo Item
 Receipt

B. Mr. Philip Bender
 Full Name (Last, First, Middle Initial)
 Mailing Address 4593 Village Green Parkway
 City Reno State NV Zip Code 89519
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Retired Occupation Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 07 / 31 / 2016
Transaction ID : 60818.C586
 Amount of Each Receipt this Period 250.00
 Memo Item
 Receipt

C. Mr. Jeffrey Kimbell
 Full Name (Last, First, Middle Initial)
 Mailing Address 601 13th Street NW #650 North
 City Washington State DC Zip Code 20005
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Kimbell & Associates Occupation Executive
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 07 / 13 / 2016
Transaction ID : 60714.C572
 Amount of Each Receipt this Period 1000.00
 Memo Item
 Receipt

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 1500.00 |
| 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: PAGE 7 OF 19
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
HellerHighWater PAC

Full Name (Last, First, Middle Initial)
A. Mrs. Susan Miller

Mailing Address 35 Drifting Shadow Way

City Las Vegas State NV Zip Code 89135

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

Name of Employer Key State Corporation Occupation 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
 07 / 28 / 2016

Transaction ID : 60728.C576

Amount of Each Receipt this Period
 5000.00

Memo Item Receipt

Full Name (Last, First, Middle Initial)
B.

Mailing Address

City State Zip Code

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

Name of Employer Occupation

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

Full Name (Last, First, Middle Initial)
C.

Mailing Address

City State Zip Code

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

Name of Employer Occupation

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

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 5000.00 |
| TOTAL This Period (last page this line number only).....▶ | 6500.00 |

**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 19 |
| <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 (Last, First, Middle Initial)
A. Blue Cross & Blue Shield Association PAC

Mailing Address 1310 G Street NW 12th Floor

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00194746

Name of Employer Occupation

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
07 / 07 / 2016

Transaction ID : 60707.C565

Amount of Each Receipt this Period
1000.00

Memo Item
Receipt

Full Name (Last, First, Middle Initial)
B. Caesars Entertainment PAC

Mailing Address 1 Caesars Palace Drive

City Las Vegas State NV Zip Code 89109

FEC ID number of contributing federal political committee. **C** C00239947

Name of Employer Occupation

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
07 / 28 / 2016

Transaction ID : 60728.C579

Amount of Each Receipt this Period
2500.00

Memo Item
Earmarked(Receipt)

Full Name (Last, First, Middle Initial)
C. International Game Technology PAC

Mailing Address 10 Memorial Boulevard

City Providence State RI Zip Code 02903

FEC ID number of contributing federal political committee. **C** C00473025

Name of Employer Occupation

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
07 / 21 / 2016

Transaction ID : 60721.C574

Amount of Each Receipt this Period
2500.00

Memo Item
Receipt

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 6000.00 |
| 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 19 |
| <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 (Last, First, Middle Initial)
A. Microsoft Corporation PAC

Mailing Address 16011 NE 36th Way

City Redmond State WA Zip Code 98073

FEC ID number of contributing federal political committee. **C C00227546**

Name of Employer Occupation

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
 07 / 21 / 2016

Transaction ID : 60721.C573

Amount of Each Receipt this Period
2500.00

Memo Item
Receipt

Full Name (Last, First, Middle Initial)
B. Pacific Life Insurance Company PAC

Mailing Address 700 Newport Center Drive

City Newport Beach State CA Zip Code 92660

FEC ID number of contributing federal political committee. **C C00068528**

Name of Employer Occupation

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
 07 / 28 / 2016

Transaction ID : 60728.C577

Amount of Each Receipt this Period
1500.00

Memo Item
Receipt

Full Name (Last, First, Middle Initial)
C. United For Health PAC

Mailing Address 701 Pennsylvania Avenue NW #200

City Washington State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C C00274431**

Name of Employer Occupation

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 / 28 / 2016

Transaction ID : 60728.C578

Amount of Each Receipt this Period
5000.00

Memo Item
Receipt

| | |
|---|---------|
| 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 10 OF 19 |
| <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 (Last, First, Middle Initial) A. UPSPAC | | Date of Receipt MM / DD / YYYY 07 / 31 / 2016 Transaction ID : 60818.C591 |
| Mailing Address 55 Glenlake Parkway NE | | Amount of Each Receipt this Period 5000.00 |
| City Atlanta | State GA | Zip Code 30328 |
| FEC ID number of contributing federal political committee. C C00064766 | | <input type="checkbox"/> Memo Item Receipt |
| Name of Employer | Occupation | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 5000.00 | |

| | | |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial) B. Wine & Spirits Wholesalers Of AmericaPAC | | Date of Receipt MM / DD / YYYY 07 / 21 / 2016 Transaction ID : 60721.C575 |
| Mailing Address 805 15th Street NW #430 | | Amount of Each Receipt this Period 5000.00 |
| City Washington | State DC | Zip Code 20005 |
| FEC ID number of contributing federal political committee. C C00147173 | | <input type="checkbox"/> Memo Item Receipt |
| Name of Employer | Occupation | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 5000.00 | |

| | | |
|---|--------------------------|--|
| Full Name (Last, First, Middle Initial) C. | | Date of Receipt MM / DD / YYYY |
| Mailing Address | | Amount of Each Receipt this Period |
| City | State | Zip Code |
| FEC ID number of contributing federal political committee. C | | <input type="checkbox"/> Memo Item Receipt |
| Name of Employer | Occupation | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ | |

| | |
|--|----------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 10000.00 |
| TOTAL This Period (last page this line number only).....▶ | 25000.00 |

**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 11 OF 19 |
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input checked="" type="checkbox"/> 16 |
| | | | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
HellerHighWater PAC

Full Name (Last, First, Middle Initial)
A. Friends Of Mia Love

Mailing Address PO Box 255

City Riverton State UT Zip Code 84065-

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

Name of Employer Occupation

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 / 14 / 2016
Transaction ID : 60714.C571

Amount of Each Receipt this Period
5000.00

Memo Item
Refund of Contribution Made

NOTE:Primary 2016 Refund

Full Name (Last, First, Middle Initial)
B. Roberson For Congress

Mailing Address PO Box 371722

City Las Vegas State NV Zip Code 89137-

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

Name of Employer Occupation

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 / 14 / 2016
Transaction ID : 60714.C570

Amount of Each Receipt this Period
5000.00

Memo Item
Refund of Contribution Made

NOTE:General 2016 Refund

Full Name (Last, First, Middle Initial)
C.

Mailing Address

City State Zip Code

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

Name of Employer Occupation

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

| | |
|--|----------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 10000.00 |
| TOTAL This Period (last page this line number only).....▶ | 10000.00 |

**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"/> 24 | <input type="checkbox"/> 25 | <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. Edgar Abrams

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

State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
07 / 20 / 2016

Transaction ID : 60728.E577

Amount of Each Disbursement this Period

2290.00

Memo Item
CONSULTING MANAGEMENT

Full Name (Last, First, Middle Initial)

B. Anedot

Mailing Address 10156 Perkins Rowe #17F

City Baton Rouge State LA Zip Code 70810-

Purpose of Disbursement
Merchant Processing Fees

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
07 / 13 / 2016

Transaction ID : 60714.E575

Amount of Each Disbursement this Period

55.30

Memo Item
MERCHANT PROCESSING FEES

Full Name (Last, First, Middle Initial)

C. Anedot

Mailing Address 10156 Perkins Rowe #17F

City Baton Rouge State LA Zip Code 70810-

Purpose of Disbursement
Merchant Processing Fees

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
07 / 31 / 2016

Transaction ID : 60818.E589

Amount of Each Disbursement this Period

40.35

Memo Item
MERCHANT PROCESSING FEES

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

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

2385.65

**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"/> 24 | <input type="checkbox"/> 25 | <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. Lynne Heller

Mailing Address PO Box 751271

City Las Vegas State NV Zip Code 89136-

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
07 / 20 / 2016

Transaction ID : 60728.E578

Amount of Each Disbursement this Period

122.99

Memo Item
SEE BELOW/AIRFARE

Full Name (Last, First, Middle Initial)

B. Southwest Airlines

Mailing Address PO Box 36611

City Dallas State TX Zip Code 75235-

Purpose of Disbursement
Airfare

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
03 / 20 / 2016

Transaction ID : 60728.E579

Amount of Each Disbursement this Period

122.99

Memo Item
MEMO: AIRFARE

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
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
07 / 01 / 2016

Transaction ID : 60707.E555

Amount of Each Disbursement this Period

2500.00

Memo Item
CONSULTING STRATEGY

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

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

2622.99

**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"/> 24 | <input type="checkbox"/> 25 | <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
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
07 / 01 / 2016

Transaction ID : 60707.E556

Amount of Each Disbursement this Period

211.20

Memo Item
SEE BELOW/AIRFARE

Full Name (Last, First, Middle Initial)

B. Virgin America

Mailing Address 555 Airport Blvd

City Burlingame State CA Zip Code 94010-

Purpose of Disbursement
Airfare

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
06 / 30 / 2016

Transaction ID : 60707.E569

Amount of Each Disbursement this Period

211.20

Memo Item
MEMO: AIRFARE

Full Name (Last, First, Middle Initial)

C. 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
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
07 / 01 / 2016

Transaction ID : 60707.E562

Amount of Each Disbursement this Period

205.50

Memo Item
POSTAGE

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

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

416.70

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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FOR LINE NUMBER:
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| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
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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
Car Rental

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
07 / 01 / 2016

Transaction ID : 60707.E560

Amount of Each Disbursement this Period

53.83

Memo Item
CAR RENTAL

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
Travel Mileage Reimbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
07 / 01 / 2016

Transaction ID : 60707.E563

Amount of Each Disbursement this Period

3.79

Memo Item
TRAVEL MILEAGE REIMBURSEMENT

Full Name (Last, First, Middle Initial)

C. 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
07 / 01 / 2016

Transaction ID : 60707.E564

Amount of Each Disbursement this Period

514.92

Memo Item
SEE BELOW/AIRFARE

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

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

572.54

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

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|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
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NAME OF COMMITTEE (In Full)
HellerHighWater PAC

Full Name (Last, First, Middle Initial)

A. Southwest Airlines

Mailing Address PO Box 36611

City Dallas State TX Zip Code 75235-

Purpose of Disbursement
Airfare

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
06 / 16 / 2016

Transaction ID : 60707.E570

Amount of Each Disbursement this Period

514.92

Memo Item
MEMO: AIRFARE

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
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
07 / 01 / 2016

Transaction ID : 60707.E559

Amount of Each Disbursement this Period

3375.00

Memo Item
CONSULTING FUNDRAISING

Full Name (Last, First, Middle Initial)

C. 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
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
07 / 01 / 2016

Transaction ID : 60707.E565

Amount of Each Disbursement this Period

5132.85

Memo Item
SEE BELOW/CATERING & FACILITY FEES

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

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

8507.85

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

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|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
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NAME OF COMMITTEE (In Full)
HellerHighWater PAC

Full Name (Last, First, Middle Initial)

A. Joes Stone Crab

Mailing Address 11 Washington Avenue

City Miami Beach State FL Zip Code 33139-

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
04 / 29 / 2016

Transaction ID : 60707.E566

Amount of Each Disbursement this Period

3308.05

Memo Item
MEMO: CATERING & FACILITY FEES

Full Name (Last, First, Middle Initial)

B. Wolfgang Pucks

Mailing Address 3500 S. Las Vegas Boulevard #G -1

City Las Vegas State NV Zip Code 89109-

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
05 / 05 / 2016

Transaction ID : 60707.E567

Amount of Each Disbursement this Period

1532.20

Memo Item
MEMO: CATERING & FACILITY FEES

Full Name (Last, First, Middle Initial)

C. Napa Sonoma

Mailing Address 7671 South Virginia Street

City Reno State NV Zip Code 89511-

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
05 / 03 / 2016

Transaction ID : 60707.E568

Amount of Each Disbursement this Period

292.60

Memo Item
MEMO: CATERING & FACILITY FEES

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

0.00

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:
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| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
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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
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
07 / 01 / 2016

Transaction ID : 60707.E561

Amount of Each Disbursement this Period

20.39

Memo Item
OFFICE SUPPLIES

Full Name (Last, First, Middle Initial)

B. 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

MM / DD / YYYY
07 / 01 / 2016

Transaction ID : 60707.E558

Amount of Each Disbursement this Period

500.00

Memo Item
EMAIL SERVICES

Full Name (Last, First, Middle Initial)

C. Tagged Digital

Mailing Address 10697 West Centennial Parkway #204

City Las Vegas State NV Zip Code 89166-

Purpose of Disbursement
Website Services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
07 / 01 / 2016

Transaction ID : 60707.E557

Amount of Each Disbursement this Period

168.00

Memo Item
WEBSITE SERVICES

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

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

688.39

15194.12

**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)

| | | | | | |
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| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
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NAME OF COMMITTEE (In Full)
HellerHighWater PAC

Full Name (Last, First, Middle Initial)

A. NRSC Targeted State Victory

Mailing Address 228 South Washington Street #115

City Alexandria State VA Zip Code 22314-

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
07 / 13 / 2016

Transaction ID : 60714.E572

Amount of Each Disbursement this Period

75000.00

Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

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

Amount of Each Disbursement this Period

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) ▼

Category/
Type

Date of Disbursement

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

Amount of Each Disbursement this Period

Memo Item

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

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

75000.00

75000.00