

# 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

FREEDOM BORN FUND

ADDRESS (number and street) 4790 CAUGHLIN PARKWAY #767

Check if different than previously reported. (ACC) RENO NV 89519

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

C C00498519

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)
  - Mar 20 (M3)
  - Apr 20 (M4)
  - May 20 (M5)
  - Jun 20 (M6)
  - Jul 20 (M7)
  - Aug 20 (M8)
  - Sep 20 (M9)
  - Oct 20 (M10)
  - Nov 20 (M11) (Non-Election Year Only)
  - Dec 20 (M12) (Non-Election Year Only)
  - Jan 31 (YE)

- (c) 12-Day PRE-Election Report for the:
- Primary (12P)
  - Convention (12C)
  - General (12G)
  - Special (12S)
  - Runoff (12R)

Election on [MM] / [DD] / [YYYY] in the State of [ ]

- (d) 30-Day POST-Election Report for the:
- General (30G)
  - Runoff (30R)
  - Special (30S)

Election on [MM] / [DD] / [YYYY] in the State of [ ]

5. Covering Period [MM] / [DD] / [YYYY] 07 / 01 / 2015 through [MM] / [DD] / [YYYY] 12 / 30 / 2015

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 G. Dan Morgan

Signature of Treasurer G. Dan Morgan [Electronically Filed] Date 01 / 23 / 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.

Office Use Only									
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**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

**FREEDOM BORN FUND**

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="2015"/>		<input type="text" value="2945.50"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="2945.50"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="2187.49"/>	<input type="text" value="2187.49"/>
(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="5132.99"/>	<input type="text" value="5132.99"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="5132.99"/>	<input type="text" value="5132.99"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> 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

**FREEDOM BORN FUND**

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).....	2187.49	2187.49
(ii) Unitemized .....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	2187.49	2187.49
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	2187.49	2187.49
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.....	0.00	0.00
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))..... ▶	2187.49	2187.49
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	2187.49	2187.49

**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 .....	5132.99	5132.99
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	5132.99	5132.99
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
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)) ..	5132.99	5132.99
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	5132.99	5132.99

**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) .....	2187.49	2187.49
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	2187.49	2187.49
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ..... ▶	5132.99	5132.99
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....▶	5132.99	5132.99

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: F3XT  
Transaction ID :

Termination report satisfies the filing requirement for the Year End 2015 Report (covering 7/1/2015 - 12/31/2015).

Form/Schedule:  
Transaction ID:

**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 23  
(check only one)

<input checked="" 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 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)  
**FREEDOM BORN FUND**

**A. Gober Hilgers PLLC**  
Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 341016  
City Austin State TX Zip Code 78734  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 2187.49

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 30 / 2015  
**Transaction ID : SA11AI.4307**  
Amount of Each Receipt this Period  
2187.49  
In-kind - Legal Services

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

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

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	2187.49
<b>TOTAL</b> This Period (last page this line number only).....▶	2187.49

**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)  
**FREEDOM BORN FUND**

Full Name (Last, First, Middle Initial)

**A. Gober Hilgers PLLC**

Mailing Address PO Box 341016

City Austin State TX Zip Code 78734

Purpose of Disbursement  
Legal Services

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
12 / 11 / 2015

Transaction ID : **SB21B.4274**

Amount of Each Disbursement this Period

210.00

Full Name (Last, First, Middle Initial)

**B. Gober Hilgers PLLC**

Mailing Address PO Box 341016

City Austin State TX Zip Code 78734

Purpose of Disbursement  
Legal Services

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
12 / 11 / 2015

Transaction ID : **SB21B.4275**

Amount of Each Disbursement this Period

180.00

Full Name (Last, First, Middle Initial)

**C. Gober Hilgers PLLC**

Mailing Address PO Box 341016

City Austin State TX Zip Code 78734

Purpose of Disbursement  
Legal Services

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
12 / 11 / 2015

Transaction ID : **SB21B.4276**

Amount of Each Disbursement this Period

135.00

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

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

525.00

**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)  
**FREEDOM BORN FUND**

Full Name (Last, First, Middle Initial)  
**A. Gober Hilgers PLLC**

Date of Disbursement:  /  /

Mailing Address PO Box 341016

City Austin State TX Zip Code 78734

Purpose of Disbursement: Legal Services

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID : **SB21B.4277**

Amount of Each Disbursement this Period:

Full Name (Last, First, Middle Initial)  
**B. Gober Hilgers PLLC**

Date of Disbursement:  /  /

Mailing Address PO Box 341016

City Austin State TX Zip Code 78734

Purpose of Disbursement: Legal Services

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID : **SB21B.4278**

Amount of Each Disbursement this Period:

Full Name (Last, First, Middle Initial)  
**C. Gober Hilgers PLLC**

Date of Disbursement:  /  /

Mailing Address PO Box 341016

City Austin State TX Zip Code 78734

Purpose of Disbursement: Legal Services

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID : **SB21B.4279**

Amount of Each Disbursement this Period:

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

**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"/> 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)  
**FREEDOM BORN FUND**

Full Name (Last, First, Middle Initial)

**A. Gober Hilgers PLLC**

Mailing Address PO Box 341016

City Austin State TX Zip Code 78734

Purpose of Disbursement  
Legal Services

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 11 / 2015

Transaction ID : **SB21B.4281**

Amount of Each Disbursement this Period

135.00

Full Name (Last, First, Middle Initial)

**B. Gober Hilgers PLLC**

Mailing Address PO Box 341016

City Austin State TX Zip Code 78734

Purpose of Disbursement  
Legal Services

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 11 / 2015

Transaction ID : **SB21B.4282**

Amount of Each Disbursement this Period

180.00

Full Name (Last, First, Middle Initial)

**C. Gober Hilgers PLLC**

Mailing Address PO Box 341016

City Austin State TX Zip Code 78734

Purpose of Disbursement  
Legal Services

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 11 / 2015

Transaction ID : **SB21B.4283**

Amount of Each Disbursement this Period

75.00

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

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

390.00

**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)  
**FREEDOM BORN FUND**

Full Name (Last, First, Middle Initial)

**A. Gober Hilgers PLLC**

Mailing Address PO Box 341016

City Austin State TX Zip Code 78734

Purpose of Disbursement  
Legal Services

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
12 / 11 / 2015

Transaction ID : **SB21B.4284**

Amount of Each Disbursement this Period

87.50

Full Name (Last, First, Middle Initial)

**B. Gober Hilgers PLLC**

Mailing Address PO Box 341016

City Austin State TX Zip Code 78734

Purpose of Disbursement  
Legal Services

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
12 / 11 / 2015

Transaction ID : **SB21B.4285**

Amount of Each Disbursement this Period

87.50

Full Name (Last, First, Middle Initial)

**C. Gober Hilgers PLLC**

Mailing Address PO Box 341016

City Austin State TX Zip Code 78734

Purpose of Disbursement  
Legal Services

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
12 / 11 / 2015

Transaction ID : **SB21B.4286**

Amount of Each Disbursement this Period

87.50

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

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

262.50

**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"/> 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)  
**FREEDOM BORN FUND**

Full Name (Last, First, Middle Initial)

**A. Gober Hilgers PLLC**

Mailing Address PO Box 341016

City Austin State TX Zip Code 78734

Purpose of Disbursement  
Legal Services

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
12 / 11 / 2015

Transaction ID : **SB21B.4287**

Amount of Each Disbursement this Period

157.50

Full Name (Last, First, Middle Initial)

**B. Gober Hilgers PLLC**

Mailing Address PO Box 341016

City Austin State TX Zip Code 78734

Purpose of Disbursement  
Legal Services

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
12 / 11 / 2015

Transaction ID : **SB21B.4288**

Amount of Each Disbursement this Period

87.50

Full Name (Last, First, Middle Initial)

**C. Gober Hilgers PLLC**

Mailing Address PO Box 341016

City Austin State TX Zip Code 78734

Purpose of Disbursement  
Legal Services

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
12 / 11 / 2015

Transaction ID : **SB21B.4289**

Amount of Each Disbursement this Period

140.00

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

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

385.00

**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)  
**FREEDOM BORN FUND**

Full Name (Last, First, Middle Initial)

**A. Gober Hilgers PLLC**

Mailing Address PO Box 341016

City Austin State TX Zip Code 78734

Purpose of Disbursement  
Legal Services

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
12 / 11 / 2015

Transaction ID : **SB21B.4290**

Amount of Each Disbursement this Period

122.50

Full Name (Last, First, Middle Initial)

**B. Gober Hilgers PLLC**

Mailing Address PO Box 341016

City Austin State TX Zip Code 78734

Purpose of Disbursement  
Legal Services

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
12 / 11 / 2015

Transaction ID : **SB21B.4291**

Amount of Each Disbursement this Period

87.50

Full Name (Last, First, Middle Initial)

**C. Gober Hilgers PLLC**

Mailing Address PO Box 341016

City Austin State TX Zip Code 78734

Purpose of Disbursement  
Legal Services

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
12 / 11 / 2015

Transaction ID : **SB21B.4292**

Amount of Each Disbursement this Period

105.00

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

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

315.00

**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

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)  
**FREEDOM BORN FUND**

Full Name (Last, First, Middle Initial)

**A. Gober Hilgers PLLC**

Mailing Address PO Box 341016

City Austin State TX Zip Code 78734

Purpose of Disbursement  
Legal Services

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
12 / 11 / 2015

**Transaction ID : SB21B.4293**

Amount of Each Disbursement this Period

70.00

Full Name (Last, First, Middle Initial)

**B. Gober Hilgers PLLC**

Mailing Address PO Box 341016

City Austin State TX Zip Code 78734

Purpose of Disbursement  
Legal Services

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
12 / 11 / 2015

**Transaction ID : SB21B.4299**

Amount of Each Disbursement this Period

52.50

Full Name (Last, First, Middle Initial)

**C. Gober Hilgers PLLC**

Mailing Address PO Box 341016

City Austin State TX Zip Code 78734

Purpose of Disbursement  
Legal Services

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
12 / 11 / 2015

**Transaction ID : SB21B.4300**

Amount of Each Disbursement this Period

140.00

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

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

262.50

**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"/> 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

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)  
**FREEDOM BORN FUND**

Full Name (Last, First, Middle Initial)

**A. Gober Hilgers PLLC**

Mailing Address PO Box 341016

City Austin State TX Zip Code 78734

Purpose of Disbursement  
Legal Services

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
12 / 11 / 2015

Transaction ID : SB21B.4301

Amount of Each Disbursement this Period

22.51

Full Name (Last, First, Middle Initial)

**B. Gober Hilgers PLLC**

Mailing Address PO Box 341016

City Austin State TX Zip Code 78734

Purpose of Disbursement  
In-kind - Legal Services

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
12 / 30 / 2015

Transaction ID : SB21B.4308

Amount of Each Disbursement this Period

2187.49

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

MM / DD / YYYY

Amount of Each Disbursement this Period

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

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

2210.00

5093.99

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 16 OF 23
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/> 9	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**FREEDOM BORN FUND**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Gober Hilgers PLLC</b>	Nature of Debt (Purpose): Legal Services
Mailing Address PO Box 341016	
City State Zip Code Austin TX 78734	

Outstanding Balance Beginning This Period 9.00	<b>Transaction ID : SD10.4244</b>	
Amount Incurred This Period 0.00	Payment This Period 9.00	Outstanding Balance at Close of This Period 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Gober Hilgers PLLC</b>	Nature of Debt (Purpose): Legal Services
Mailing Address PO Box 341016	
City State Zip Code Austin TX 78734	

Outstanding Balance Beginning This Period 210.00	<b>Transaction ID : SD10.4245</b>	
Amount Incurred This Period 0.00	Payment This Period 210.00	Outstanding Balance at Close of This Period 0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Gober Hilgers PLLC</b>	Nature of Debt (Purpose): Legal Services
Mailing Address PO Box 341016	
City State Zip Code Austin TX 78734	

Outstanding Balance Beginning This Period 180.00	<b>Transaction ID : SD10.4246</b>	
Amount Incurred This Period 0.00	Payment This Period 180.00	Outstanding Balance at Close of This Period 0.00

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	0.00
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 17 OF 23
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/> 9	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**FREEDOM BORN FUND**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Gober Hilgers PLLC</b>	Nature of Debt (Purpose): Legal Services
Mailing Address PO Box 341016	
City State Zip Code Austin TX 78734	

Outstanding Balance Beginning This Period 135.00	<b>Transaction ID : SD10.4248</b>	
Amount Incurred This Period 0.00	Payment This Period 135.00	Outstanding Balance at Close of This Period 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Gober Hilgers PLLC</b>	Nature of Debt (Purpose): Legal Services
Mailing Address PO Box 341016	
City State Zip Code Austin TX 78734	

Outstanding Balance Beginning This Period 499.00	<b>Transaction ID : SD10.4250</b>	
Amount Incurred This Period 0.00	Payment This Period 499.00	Outstanding Balance at Close of This Period 0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Gober Hilgers PLLC</b>	Nature of Debt (Purpose): Legal Services
Mailing Address PO Box 341016	
City State Zip Code Austin TX 78734	

Outstanding Balance Beginning This Period 64.99	<b>Transaction ID : SD10.4251</b>	
Amount Incurred This Period 0.00	Payment This Period 64.99	Outstanding Balance at Close of This Period 0.00

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	0.00
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 18 OF 23
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**FREEDOM BORN FUND**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Gober Hilgers PLLC</b>	Nature of Debt (Purpose): Legal Services
Mailing Address PO Box 341016	
City State Zip Code Austin TX 78734	

Outstanding Balance Beginning This Period 180.00	<b>Transaction ID : SD10.4253</b>	
Amount Incurred This Period 0.00	Payment This Period 180.00	Outstanding Balance at Close of This Period 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Gober Hilgers PLLC</b>	Nature of Debt (Purpose): Legal Services
Mailing Address PO Box 341016	
City State Zip Code Austin TX 78734	

Outstanding Balance Beginning This Period 135.00	<b>Transaction ID : SD10.4254</b>	
Amount Incurred This Period 0.00	Payment This Period 135.00	Outstanding Balance at Close of This Period 0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Gober Hilgers PLLC</b>	Nature of Debt (Purpose): Legal Services
Mailing Address PO Box 341016	
City State Zip Code Austin TX 78734	

Outstanding Balance Beginning This Period 180.00	<b>Transaction ID : SD10.4255</b>	
Amount Incurred This Period 0.00	Payment This Period 180.00	Outstanding Balance at Close of This Period 0.00

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	0.00
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 19 OF 23
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/> 9	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**FREEDOM BORN FUND**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Gober Hilgers PLLC</b>	Nature of Debt (Purpose): Legal Services
Mailing Address PO Box 341016	
City State Zip Code Austin TX 78734	

Outstanding Balance Beginning This Period 75.00	<b>Transaction ID : SD10.4257</b>	
Amount Incurred This Period 0.00	Payment This Period 75.00	Outstanding Balance at Close of This Period 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Gober Hilgers PLLC</b>	Nature of Debt (Purpose): Legal Services
Mailing Address PO Box 341016	
City State Zip Code Austin TX 78734	

Outstanding Balance Beginning This Period 87.50	<b>Transaction ID : SD10.4258</b>	
Amount Incurred This Period 0.00	Payment This Period 87.50	Outstanding Balance at Close of This Period 0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Gober Hilgers PLLC</b>	Nature of Debt (Purpose): Legal Services
Mailing Address PO Box 341016	
City State Zip Code Austin TX 78734	

Outstanding Balance Beginning This Period 87.50	<b>Transaction ID : SD10.4259</b>	
Amount Incurred This Period 0.00	Payment This Period 87.50	Outstanding Balance at Close of This Period 0.00

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	0.00
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 20 OF 23
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**FREEDOM BORN FUND**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Gober Hilgers PLLC</b>	Nature of Debt (Purpose): Legal Services
Mailing Address PO Box 341016	
City State Zip Code Austin TX 78734	

Outstanding Balance Beginning This Period 87.50	<b>Transaction ID : SD10.4261</b>	
Amount Incurred This Period 0.00	Payment This Period 87.50	Outstanding Balance at Close of This Period 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Gober Hilgers PLLC</b>	Nature of Debt (Purpose): Legal Services
Mailing Address PO Box 341016	
City State Zip Code Austin TX 78734	

Outstanding Balance Beginning This Period 157.50	<b>Transaction ID : SD10.4262</b>	
Amount Incurred This Period 0.00	Payment This Period 157.50	Outstanding Balance at Close of This Period 0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Gober Hilgers PLLC</b>	Nature of Debt (Purpose): Legal Services
Mailing Address PO Box 341016	
City State Zip Code Austin TX 78734	

Outstanding Balance Beginning This Period 87.50	<b>Transaction ID : SD10.4264</b>	
Amount Incurred This Period 0.00	Payment This Period 87.50	Outstanding Balance at Close of This Period 0.00

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	0.00
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 21 OF 23
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/> 9	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**FREEDOM BORN FUND**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Gober Hilgers PLLC</b>	Nature of Debt (Purpose): Legal Services
Mailing Address PO Box 341016	
City State Zip Code Austin TX 78734	

Outstanding Balance Beginning This Period 140.00	<b>Transaction ID : SD10.4267</b>	
Amount Incurred This Period 0.00	Payment This Period 140.00	Outstanding Balance at Close of This Period 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Gober Hilgers PLLC</b>	Nature of Debt (Purpose): Legal Services
Mailing Address PO Box 341016	
City State Zip Code Austin TX 78734	

Outstanding Balance Beginning This Period 122.50	<b>Transaction ID : SD10.4268</b>	
Amount Incurred This Period 0.00	Payment This Period 122.50	Outstanding Balance at Close of This Period 0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Gober Hilgers PLLC</b>	Nature of Debt (Purpose): Legal Services
Mailing Address PO Box 341016	
City State Zip Code Austin TX 78734	

Outstanding Balance Beginning This Period 87.50	<b>Transaction ID : SD10.4269</b>	
Amount Incurred This Period 0.00	Payment This Period 87.50	Outstanding Balance at Close of This Period 0.00

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	0.00
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 22 OF 23
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/> 9	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**FREEDOM BORN FUND**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Gober Hilgers PLLC</b>	Nature of Debt (Purpose): Legal Services
Mailing Address PO Box 341016	
City State Zip Code Austin TX 78734	

Outstanding Balance Beginning This Period 105.00	Transaction ID : SD10.4270	
Amount Incurred This Period 0.00	Payment This Period 105.00	Outstanding Balance at Close of This Period 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Gober Hilgers PLLC</b>	Nature of Debt (Purpose): Legal Services
Mailing Address PO Box 341016	
City State Zip Code Austin TX 78734	

Outstanding Balance Beginning This Period 70.00	Transaction ID : SD10.4271	
Amount Incurred This Period 0.00	Payment This Period 70.00	Outstanding Balance at Close of This Period 0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Gober Hilgers PLLC</b>	Nature of Debt (Purpose): Legal Services
Mailing Address PO Box 341016	
City State Zip Code Austin TX 78734	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.4296	
Amount Incurred This Period 52.50	Payment This Period 52.50	Outstanding Balance at Close of This Period 0.00

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	0.00
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 23 OF 23
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**FREEDOM BORN FUND**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Gober Hilgers PLLC</b>	Nature of Debt (Purpose): Legal Services
Mailing Address PO Box 341016	
City State Zip Code Austin TX 78734	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID : SD10.4297</b>	
Amount Incurred This Period 140.00	Payment This Period 140.00	Outstanding Balance at Close of This Period 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Gober Hilgers PLLC</b>	Nature of Debt (Purpose): Legal Services
Mailing Address PO Box 341016	
City State Zip Code Austin TX 78734	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID : SD10.4298</b>	
Amount Incurred This Period 22.51	Payment This Period 22.51	Outstanding Balance at Close of This Period 0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
Mailing Address	
City State Zip Code	

Outstanding Balance Beginning This Period		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	0.00
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	0.00
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	