

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 COUNTRY FUND

ADDRESS (number and street) 4790 CAUGHLIN PARKWAY #757

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

2. FEC IDENTIFICATION NUMBER CITY STATE ZIP CODE

C C00509919

3. IS THIS REPORT NEW OR AMENDED (N) (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)
[X] 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 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 07/01/2015 through 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 Scott Bensing

Signature of Treasurer Scott Bensing [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.

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

**FREEDOM COUNTRY 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="150.00"/>	<input type="text" value="150.00"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="136.00"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="7718.29"/>	<input type="text" value="7718.29"/>
(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="7854.29"/>	<input type="text" value="7868.29"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="7854.29"/>	<input type="text" value="7868.29"/>
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 COUNTRY FUND**

Report Covering the Period: From: M M / D D / Y Y Y Y 07 / 01 / 2015 To: M M / D D / Y Y Y Y 12 / 30 / 2015

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).....	7718.29	7718.29
(ii) Unitemized .....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	7718.29	7718.29
(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) .....	7718.29	7718.29
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))..... ▶	7718.29	7718.29
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	7718.29	7718.29

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

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 .....	7854.29	7868.29
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	7854.29	7868.29
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)) ..	7854.29	7868.29
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	7854.29	7868.29

**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) .....	7718.29	7718.29
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	7718.29	7718.29
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ..... ▶	7854.29	7868.29
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ..... ▶	7854.29	7868.29

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`-H9A-N5H-CB

Form/Schedule: F3XT  
Transaction ID :

Termination report satisfies the filing requirement for the Year End 2015 Report (covering 7/1/2015 - 12/31/2015). Certain debts owed to Gober Hilgers and to Majority Strategies as previously reported for the committee are paid through in-kind contributions from Gober Hilgers and Majority Strategies. The corresponding entries for the 'payment' for such debts reflect 'in-kind' in the Purpose of Disbursement Field on Schedule B.

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: (check only one)	PAGE 7 OF 31
	<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	

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 COUNTRY FUND**

Full Name (Last, First, Middle Initial) <b>A. Gober Hilgers PLLC</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 30 / 2015
Mailing Address PO Box 341016		<b>Transaction ID : SA11AI.4229</b>
City Austin	State TX	Zip Code 78734
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 7468.29
Name of Employer	Occupation	In-kind - Legal Services
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 7468.29	

Full Name (Last, First, Middle Initial) <b>B. Majority Strategies</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 29 / 2015
Mailing Address 135 Professional Drive Suite 104		<b>Transaction ID : SA11AI.4190</b>
City Ponte Vedra Beach	State FL	Zip Code 32082
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 250.00
Name of Employer	Occupation	In-kind - Website
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

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

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	7718.29
<b>TOTAL</b> This Period (last page this line number only).....▶	7718.29

**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 COUNTRY 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.4193**

Amount of Each Disbursement this Period

50.00

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  
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.4194**

Amount of Each Disbursement this Period

227.79

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  
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.4195**

Amount of Each Disbursement this Period

737.00

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

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

1014.79



**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 COUNTRY FUND**

Full Name (Last, First, Middle Initial) <b>A. Gober Hilgers PLLC</b>		Date of Disbursement MM / DD / YYYY 12 / 30 / 2015
Mailing Address PO Box 341016		<b>Transaction ID : SB21B.4196</b>
City Austin	State TX	
Zip Code 78734	Purpose of Disbursement In-kind - Legal Services	Amount of Each Disbursement this Period 60.00
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Gober Hilgers PLLC</b>		Date of Disbursement MM / DD / YYYY 12 / 30 / 2015
Mailing Address PO Box 341016		<b>Transaction ID : SB21B.4197</b>
City Austin	State TX	
Zip Code 78734	Purpose of Disbursement In-kind - Legal Services	Amount of Each Disbursement this Period 333.50
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Gober Hilgers PLLC</b>		Date of Disbursement MM / DD / YYYY 12 / 30 / 2015
Mailing Address PO Box 341016		<b>Transaction ID : SB21B.4198</b>
City Austin	State TX	
Zip Code 78734	Purpose of Disbursement In-kind - Legal Services	Amount of Each Disbursement this Period 30.00
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional)..... ▶	423.50
<b>TOTAL</b> 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 COUNTRY 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  
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.4199**

Amount of Each Disbursement this Period

148.50

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  
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.4200**

Amount of Each Disbursement this Period

15.00

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  
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.4201**

Amount of Each Disbursement this Period

144.50

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

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

308.00

**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 COUNTRY 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  
In-kind - 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 / 30 / 2015

**Transaction ID : SB21B.4202**

Amount of Each Disbursement this Period

15.00

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  
In-kind - 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 / 30 / 2015

**Transaction ID : SB21B.4203**

Amount of Each Disbursement this Period

69.50

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  
In-kind - 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 / 30 / 2015

**Transaction ID : SB21B.4204**

Amount of Each Disbursement this Period

84.50

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

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

169.00

**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 COUNTRY 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  
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.4205**

Amount of Each Disbursement this Period

299.50

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  
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.4206**

Amount of Each Disbursement this Period

84.50

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  
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.4207**

Amount of Each Disbursement this Period

105.00

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

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

489.00

**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 COUNTRY 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  
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.4208**

Amount of Each Disbursement this Period

574.00

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  
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.4209**

Amount of Each Disbursement this Period

330.00

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  
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.4210**

Amount of Each Disbursement this Period

165.00

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

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

1069.00

**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 COUNTRY FUND**

Full Name (Last, First, Middle Initial) <b>A. Gober Hilgers PLLC</b>		Date of Disbursement MM / DD / YYYY 12 / 30 / 2015
Mailing Address PO Box 341016		<b>Transaction ID : SB21B.4211</b>
City Austin	State TX	
Zip Code 78734	Purpose of Disbursement In-kind - Legal Services	Amount of Each Disbursement this Period 405.00
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Gober Hilgers PLLC</b>		Date of Disbursement MM / DD / YYYY 12 / 30 / 2015
Mailing Address PO Box 341016		<b>Transaction ID : SB21B.4212</b>
City Austin	State TX	
Zip Code 78734	Purpose of Disbursement In-kind - Legal Services	Amount of Each Disbursement this Period 60.00
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Gober Hilgers PLLC</b>		Date of Disbursement MM / DD / YYYY 12 / 30 / 2015
Mailing Address PO Box 341016		<b>Transaction ID : SB21B.4213</b>
City Austin	State TX	
Zip Code 78734	Purpose of Disbursement In-kind - Legal Services	Amount of Each Disbursement this Period 45.00
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	510.00
<b>TOTAL</b> 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 COUNTRY FUND**

Full Name (Last, First, Middle Initial) <b>A. Gober Hilgers PLLC</b>		Date of Disbursement MM / DD / YYYY 12 / 30 / 2015
Mailing Address PO Box 341016		<b>Transaction ID : SB21B.4214</b>
City Austin	State TX	
Zip Code 78734	Purpose of Disbursement In-kind - Legal Services	Amount of Each Disbursement this Period 150.00
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Gober Hilgers PLLC</b>		Date of Disbursement MM / DD / YYYY 12 / 30 / 2015
Mailing Address PO Box 341016		<b>Transaction ID : SB21B.4215</b>
City Austin	State TX	
Zip Code 78734	Purpose of Disbursement In-kind - Legal Services	Amount of Each Disbursement this Period 45.00
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Gober Hilgers PLLC</b>		Date of Disbursement MM / DD / YYYY 12 / 30 / 2015
Mailing Address PO Box 341016		<b>Transaction ID : SB21B.4216</b>
City Austin	State TX	
Zip Code 78734	Purpose of Disbursement In-kind - Legal Services	Amount of Each Disbursement this Period 45.00
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	240.00
<b>TOTAL</b> 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 COUNTRY 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  
In-kind - 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 / 30 / 2015

**Transaction ID : SB21B.4217**

Amount of Each Disbursement this Period

35.00

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  
In-kind - 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 / 30 / 2015

**Transaction ID : SB21B.4218**

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  
In-kind - 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 / 30 / 2015

**Transaction ID : SB21B.4219**

Amount of Each Disbursement this Period

52.50

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

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

140.00



**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 COUNTRY 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  
In-kind - 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 / 30 / 2015

Transaction ID : **SB21B.4220**

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  
In-kind - 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 / 30 / 2015

Transaction ID : **SB21B.4221**

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  
In-kind - 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 / 30 / 2015

Transaction ID : **SB21B.4222**

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

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NAME OF COMMITTEE (In Full)  
**FREEDOM COUNTRY 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  
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.4223**

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  
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.4224**

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  
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.4225**

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 COUNTRY FUND**

Full Name (Last, First, Middle Initial) <b>A. Gober Hilgers PLLC</b>		Date of Disbursement MM / DD / YYYY 12 / 30 / 2015
Mailing Address PO Box 341016		<b>Transaction ID : SB21B.4226</b>
City Austin	State TX	
Zip Code 78734	Purpose of Disbursement In-kind - Legal Services	Amount of Each Disbursement this Period 70.00
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Gober Hilgers PLLC</b>		Date of Disbursement MM / DD / YYYY 12 / 30 / 2015
Mailing Address PO Box 341016		<b>Transaction ID : SB21B.4238</b>
City Austin	State TX	
Zip Code 78734	Purpose of Disbursement In-kind - Legal Services	Amount of Each Disbursement this Period 2590.00
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Majority Strategies</b>		Date of Disbursement MM / DD / YYYY 12 / 29 / 2015
Mailing Address 135 Professional Drive Suite 104		<b>Transaction ID : SB21B.4191</b>
City Ponte Vedra Beach	State FL	
Zip Code 32082	Purpose of Disbursement In-kind - Website	Amount of Each Disbursement this Period 250.00
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	2910.00
<b>TOTAL</b> This Period (last page this line number only).....▶	7798.29

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

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 20 OF 31
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**FREEDOM COUNTRY 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 <input type="text" value="277.79"/>	<b>Transaction ID : SD10.4101</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="277.79"/>	Outstanding Balance at Close of This Period <input type="text" value="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 <input type="text" value="737.00"/>	<b>Transaction ID : SD10.4099</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="737.00"/>	Outstanding Balance at Close of This Period <input type="text" value="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 <input type="text" value="60.00"/>	<b>Transaction ID : SD10.4103</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="60.00"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

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

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

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 21 OF 31
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**FREEDOM COUNTRY 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 333.50	<b>Transaction ID : SD10.4104</b>	
Amount Incurred This Period 0.00	Payment This Period 333.50	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 30.00	<b>Transaction ID : SD10.4116</b>	
Amount Incurred This Period 0.00	Payment This Period 30.00	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 148.50	<b>Transaction ID : SD10.4117</b>	
Amount Incurred This Period 0.00	Payment This Period 148.50	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 31
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**FREEDOM COUNTRY 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 15.00	<b>Transaction ID : SD10.4118</b>	
Amount Incurred This Period 0.00	Payment This Period 15.00	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 144.50	<b>Transaction ID : SD10.4124</b>	
Amount Incurred This Period 0.00	Payment This Period 144.50	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 15.00	<b>Transaction ID : SD10.4129</b>	
Amount Incurred This Period 0.00	Payment This Period 15.00	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 23 OF 31
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**FREEDOM COUNTRY 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 69.50	<b>Transaction ID : SD10.4142</b>	
Amount Incurred This Period 0.00	Payment This Period 69.50	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 84.50	<b>Transaction ID : SD10.4143</b>	
Amount Incurred This Period 0.00	Payment This Period 84.50	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 299.50	<b>Transaction ID : SD10.4145</b>	
Amount Incurred This Period 0.00	Payment This Period 299.50	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 24 OF 31
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/> 9	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**FREEDOM COUNTRY 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 84.50	<b>Transaction ID : SD10.4146</b>	
Amount Incurred This Period 0.00	Payment This Period 84.50	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 105.00	<b>Transaction ID : SD10.4147</b>	
Amount Incurred This Period 0.00	Payment This Period 105.00	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 574.00	<b>Transaction ID : SD10.4153</b>	
Amount Incurred This Period 0.00	Payment This Period 574.00	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 25 OF 31
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**FREEDOM COUNTRY 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 330.00	<b>Transaction ID : SD10.4154</b>	
Amount Incurred This Period 0.00	Payment This Period 330.00	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 165.00	<b>Transaction ID : SD10.4156</b>	
Amount Incurred This Period 0.00	Payment This Period 165.00	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 405.00	<b>Transaction ID : SD10.4159</b>	
Amount Incurred This Period 0.00	Payment This Period 405.00	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 26 OF 31
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**FREEDOM COUNTRY 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 60.00	<b>Transaction ID : SD10.4160</b>	
Amount Incurred This Period 0.00	Payment This Period 60.00	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 45.00	<b>Transaction ID : SD10.4162</b>	
Amount Incurred This Period 0.00	Payment This Period 45.00	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 150.00	<b>Transaction ID : SD10.4164</b>	
Amount Incurred This Period 0.00	Payment This Period 150.00	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 27 OF 31
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/> 9	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**FREEDOM COUNTRY 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 45.00	<b>Transaction ID : SD10.4165</b>	
Amount Incurred This Period 0.00	Payment This Period 45.00	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 45.00	<b>Transaction ID : SD10.4167</b>	
Amount Incurred This Period 0.00	Payment This Period 45.00	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 35.00	<b>Transaction ID : SD10.4168</b>	
Amount Incurred This Period 0.00	Payment This Period 35.00	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 28 OF 31
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**FREEDOM COUNTRY 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 <input type="text" value="52.50"/>	<b>Transaction ID : SD10.4169</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="52.50"/>	Outstanding Balance at Close of This Period <input type="text" value="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 <input type="text" value="52.50"/>	<b>Transaction ID : SD10.4177</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="52.50"/>	Outstanding Balance at Close of This Period <input type="text" value="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 <input type="text" value="70.00"/>	<b>Transaction ID : SD10.4178</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="70.00"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

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

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

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 29 OF 31
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**FREEDOM COUNTRY 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 52.50	<b>Transaction ID : SD10.4180</b>	
Amount Incurred This Period 0.00	Payment This Period 52.50	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 140.00	<b>Transaction ID : SD10.4182</b>	
Amount Incurred This Period 0.00	Payment This Period 140.00	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 122.50	<b>Transaction ID : SD10.4183</b>	
Amount Incurred This Period 0.00	Payment This Period 122.50	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 30 OF 31
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**FREEDOM COUNTRY 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 <input type="text" value="52.50"/>	<b>Transaction ID : SD10.4184</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="52.50"/>	Outstanding Balance at Close of This Period <input type="text" value="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 <input type="text" value="87.50"/>	<b>Transaction ID : SD10.4185</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="87.50"/>	Outstanding Balance at Close of This Period <input type="text" value="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 <input type="text" value="70.00"/>	<b>Transaction ID : SD10.4186</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="70.00"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

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

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

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 31 OF 31
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**FREEDOM COUNTRY 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	Transaction ID : SD10.4237	
Amount Incurred This Period 2590.00	Payment This Period 2590.00	Outstanding Balance at Close of This Period 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Majority Strategies</b>	Nature of Debt (Purpose): Website
Mailing Address 135 Professional Drive Suite 104	
City State Zip Code Ponte Vedra Beach FL 32082	

Outstanding Balance Beginning This Period 250.00	Transaction ID : SD10.4105	
Amount Incurred This Period 0.00	Payment This Period 250.00	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) ▶	