PAGE 1 / 17

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

(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) Report Due On: Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M10) Primary (12P) General (12G) Runoff (12R) Primary (12P) General (12G) Special (12S) (d) 30-Day POST-Election Report (Non-election Year Only) (MY) Election on Report Framination Report Framinati					Office U	Jse Only
ADDRESS (number and street) Check if different than previously reported. (ACC) 2. FEC IDENTIFICATION NUMBER C C C00617241 3. IS THIS REPORT (N) OR AMENDED (A) 4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15 Quarterly Report (Q1) July 15 Quarterly Report (Q2) C October 15 Quarterly Report (Q3) January 31 Year-End Report (YE) July 31 Mid-Year Report (Non-election Year Only) (MY) April Mid-Year Report (VI) July 31 Mid-Year Report (VI) April Mid-Year Chiloy (MY) Report Convention (12C) Election on Report Tor the: In the State of			'E OR PRINT ▼		12FE4M5	
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A. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15 Quarterly Report (Q1) Quarterly Report (Q2) October 15 Quarterly Report (Non-election Year-Only) (MY) April 31 Mid-Year Report (Non-election Year-Only) (MY) Termination Report (TER) 3. IS THIS REPORT (N) OR AMENDED (MA) Dec 20 (M1) Dec 20 (M10) Dec	reported.	(ACĆ)			7070	-
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(a) Quarterly Reports: Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M10) Dec 20 (M10) Jun 31 (YE) 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) Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M10) July 20 (M7) Oct 20 (M10) Jan 31 (YE) Report (12R) Primary (12P) General (12G) Runoff (12R) Flection on Mar 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE) Convention (12C) Special (12S) (d) 30-Day POST-Election Report for the: Election on Election on Election on Special (30S)		EPORT (Report	20 (M2) May 20 (M	M5) Aug 20 (M8)	(INON-Election
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Report (Non-election Year Only) (MY) Termination Report (TER) Report (Non-election Year Only) (MY) Report (Non-election Year Only) (MY) Report (Solution Special (30G) Runoff (30R) Report (30S) Report (TER) Report (Non-election Year Only) (MY) Report (Non-election Year Only) (MY) Report (Non-election Year Only) (MY) Report (TER) Report (Non-election Year Only) (MY) Report (10 Solution Year Only) (MY) Report for the:	Janua	ary 31	Election		/	
Termination Report (TER) Election on Election on	Repo	ort (Non-election	POST-Election	General (30G)	Runoff (30R)	Special (30S)
			·		/ Y = Y = Y = Y	
5. Covering Period 11 29 2016 through 12 20 2016	5. Covering Peric	od 11	29 2016			
I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.	I certify that I have			my knowledge and belief it is	true, correct and comple	ete.
O'Leary, Shannon, , , Type or Print Name of Treasurer	Type or Print Name		J'Leary, Shannon, , ,			
Signature of Treasurer O'Leary, Shannon, , , [Electronically Filed] Date Date Date O'Leary, Shannon, , , [Electronically Filed]	Signature of Treas	O'Leary, S	Shannon, , ,	[Electronically Filed]		
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 3010	NOTE: Submission	of false, erroneous	, or incomplete information	n may subject the person signin	g this Report to the penal	ties of 52 U.S.C. § 30109.
Office Use FEC FORM 3X Rev. 05/2016						

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS FEC Form 3X (Rev. 05/2016) Page 2 Write or Type Committee Name Louisiana Liberty Alliance 11 29 2016 12 20 2016 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 0.00 January 1, 2016 (b) Cash on Hand at 0.00 Beginning of Reporting Period..... 4659.22 4659.22 Total Receipts (from Line 19) (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 4659.22 4659.22 6(a) and 6(c) for Column B)..... 4659.22 4659.22 Total Disbursements (from Line 31)...... 8. Cash on Hand at Close of Reporting Period 0.00 0.00 (subtract Line 7 from Line 6(d))..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) 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. 05/2016) Page 3 Write or Type Committee Name Louisiana Liberty Alliance м = м 11 29 2016 Report Covering the Period: 12 20 2016 From: To: **COLUMN A COLUMN B** I. Receipts **Total This Period** Calendar Year-to-Date

	•	Total This Period	Calendar fear-to-Date
11.	Contributions (other than loans) From:		
	(a) Individuals/Persons Other		
	Than Political Committees	4050.00	1050.00
	(i) Itemized (use Schedule A)	4659.22	4659.22
	(ii) Unitemized	0.00	0.00
	(iii) TOTAL (add		
	Lines 11(a)(i) and (ii)▶	4659.22	4659.22
	(b) Political Party Committees	0.00	0.00
	(c) Other Political Committees		
	(such as PACs)	0.00	0.00
	(d) Total Contributions (add Lines	4 4	4 4
	11(a)(iii), (b), and (c)) (Carry		
	Totals to Line 33, page 5)	4659.22	4659.22
	Transfers From Affiliated/Other		
	Party Committees	0.00	0.00
	•	45	
	All Loans Received	0.00	0.00
		4 4	4 4
	Loan Repayments Received	0.00	0.00
	Offsets To Operating Expenditures	7	7 7
	(Refunds, Rebates, etc.)		
	(Carry Totals to Line 37, page 5)	0.00	0.00
6.	Refunds of Contributions Made	4 4	4 4
	to Federal Candidates and Other		
	Political Committees	0.00	0.00
7.	Other Federal Receipts		
	(Dividends, Interest, etc.)	0.00	0.00
	Transfers from Non-Federal and Levin Funds		4 4
	(a) Non-Federal Account		
	(from Schedule H3)	0.00	0.00
	(b) Levin Funds (from Schedule H5)	0.00	0.00
	,	4 4	
	(c) Total Transfers (add 18(a) and 18(b))	0.00	0.00
		4 4	4 1 4
	Total Receipts (add Lines 11(d),		
	12, 13, 14, 15, 16, 17, and 18(c))▶	4659.22	4659.22
			, , , , , , , , , , , , , , , , , , , ,
	Total Federal Receipts	4659.22	4050.00
	(subtract Line 18(c) from Line 19)▶	4009.22	4659.22

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
. 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	4659.22	4659.22
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))▶	4659.22	4659.22
Transfers to Affiliated/Other Party Committees	0.00	0.00
Contributions to Federal Candidates/Committees and Other Political Committees	0.00	0.00
Independent Expenditures (use Schedule E)	0.00	0.00
Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F)	0.00	
` '	495 495 495	0.00
Loan Repayments Made	0.00	0.00
Loans MadeRefunds of Contributions To: (a) Individuals/Persons Other	0.00	0.00
Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
Other Disbursements (Including Non-Federal Donations)	0.00	0.00
Federal Election Activity (52 U.S.C. § 30101(20)) (a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share(b) Federal Election Activity Paid	0.00	0.00
Entirely With Federal Funds	0.00	0.00
Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))	4659.22	4659.22
Total Federal Disbursements	45 45	4 4
(subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)	4659.22	4650.00
,	4009.22	4659.22

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016) III. Net Contributions/

Operating Expenditures

33. Total Contributions (other than loans)

35. Net Contributions (other than loans)

36. Total Federal Operating Expenditures

37. Offsets to Operating Expenditures

38. Net Operating Expenditures

34. Total Contribution Refunds

Page 5 **COLUMN A** COLUMN B **Total This Period** Calendar Year-to-Date 4659.22 4659.22 (from Line 11(d), page 3) 0.00 0.00 (from Line 28(d))..... 4659.22 4659.22 (subtract Line 34 from Line 33) 4659.22 4659.22 (add Line 21(a)(i) and Line 21(b))▶ 0.00 0.00 (from Line 15, page 3)..... 4659.22 4659.22 (subtract Line 37 from Line 36)

: 97 A = G7 9 @ 5 B9 CI G'H9 LHF9 @ 5 H98 'HC' 5 F9 DCFHz G7 < 98 I @ 'CF' ≠ H9 A = N5 H= CB

Form/Schedule: F3XT Transaction ID:

In order to resolve outstanding debt on Schedule D, the payments of the outstanding debt are made through the inkind contribution from this vendor. The in-kind contribution is reflected in the totals on the Summary Pages on Lines 6c and 11ai and is itemized on Schedule A. The payment is reflected on Summary Pages on Lines 7 and 21b and is itemized on Schedule B. The entry on Schedule B operates to offset in-kind contribution on Schedule A in order to disclose the committee's accurate cash on hand. The payments made on Schedule B operate to resolve the debt on Schedule D.

Form/Schedule: Transaction ID:

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

FOR LINE NUMBER: **PAGE** 7 Use separate schedule(s) (check only one) for each category of the **X** 11a 11b 11c

17

OF

12 Detailed Summary Page 13 14 15 16 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) Louisiana Liberty Alliance Full Name of Individual (Last, First, Middle Initial) or Full Organization Name RightSide Compliance Date of Receipt Mailing Address PO BOX 341027 2016 City Zip Code State Transaction ID: SA11AI.4136 TX **AUSTIN** 78734 Amount of Each Receipt this Period FEC ID number of contributing C 213.75 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) In-kind - For FEC Compliance Services Receipt For: Aggregate Year-to-Date ▼ Primary General 213.75 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. RightSide Compliance Date of Receipt Mailing Address PO BOX 341027 2016 City State Zip Code Transaction ID: SA11AI.4137 **AUSTIN** TX 78734 Amount of Each Receipt this Period FEC ID number of contributing 427.97 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) In-kind - For FEC Compliance Services Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 641.72 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. RightSide Compliance Date of Receipt Mailing Address PO BOX 341027 80 2016 City Zip Code State Transaction ID: SA11AI.4138 TX **AUSTIN** 78734 Amount of Each Receipt this Period FEC ID number of contributing C 337.50 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) In-kind - For FEC Compliance Services Receipt For: Aggregate Year-to-Date ▼ Primary General 979.22 Other (specify) 979.22 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

Use separate schedule(s)

F	OR	LINE	NU	MBER	:	PAGE		8	OF	17
(check only one)										
	X	11a		11b		11c		12		
		13		14		15		16		17

for each category of the Detailed Summary Page 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) Louisiana Liberty Alliance Full Name of Individual (Last, First, Middle Initial) or Full Organization Name RightSide Compliance Date of Receipt Mailing Address PO BOX 341027 2016 15 City Zip Code State Transaction ID: SA11AI.4155 TX **AUSTIN** 78734 Amount of Each Receipt this Period FEC ID number of contributing 180.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) In-kind - For FEC Compliance Services Receipt For: Aggregate Year-to-Date ▼ Primary General 1159.22 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. RightSide Compliance Date of Receipt Mailing Address PO BOX 341027 15 2016 City State Zip Code Transaction ID: SA11AI.4157 **AUSTIN** TX 78734 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) In-kind - For FEC Compliance Services Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 2159.22 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** The Gober Group Date of Receipt Mailing Address PO BOX 31016 80 2016 City State Zip Code Transaction ID: SA11AI.4140 TX **AUSTIN** 78734 Amount of Each Receipt this Period FEC ID number of contributing 1500.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) In-kind - For FEC Legal Services Receipt For: Aggregate Year-to-Date ▼ Primary General 1500.00 Other (specify) 2680.00 SUBTOTAL of Receipts This Page (optional).....

Other (specify)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the

FO	R LINE	NUMBER	: PAGE	: 9 OF	17			
(ch	(check only one)							
×	11a	11b	11c	12				
	13	14	15	16	17			

Detailed Summary Page 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) Louisiana Liberty Alliance Full Name of Individual (Last, First, Middle Initial) or Full Organization Name The Gober Group Date of Receipt Mailing Address PO BOX 31016 2016 15 City State Zip Code Transaction ID: SA11AI.4159 TX **AUSTIN** 78734 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Name of Employer (for Individual) Memo Item Occupation (for Individual) In-kind - For Legal Services Receipt For: Aggregate Year-to-Date ▼ Primary General 2500.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B Date of Receipt Mailing Address City State Zip Code Amount of Each Receipt this Period FEC ID number of contributing federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Date of Receipt Mailing Address City State Zip Code Amount of Each Receipt this Period FEC ID number of contributing C federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Receipt For: Aggregate Year-to-Date ▼ Primary General

SUBTOTAL of Receipts This Page (optional)		Ξ		,		I	,		1000.00	
TOTAL This Period (last page this line number	only)	_	_	7	_	_	7	_	4659.22	

17

SCHEDULE B (FEC Form 3X)	D	anata astronomico	andula(a) TOTT EINE NOMBETT.)F 17
ITEMIZED DISBURSEMENTS		arate schedule(s) category of the	(orlook only orlo)			00	
		Summary Page	X 21b 28a	22 28b	23 28c	26 27 30b	
Any information copied from such Reports and State	ments may	not he sold or us					ions
or for commercial purposes, other than using the na							
NAME OF COMMITTEE (In Full)							
Louisiana Liberty Alliance							
Full Name (Last, First, Middle Initial)							
A. RightSide Compliance				Date of Dis	sbursement	t /	V
Mailing Address PO BOX 341027		12	15	2016			
City AUSTIN	State TX	Zip Code 78734		FEC Identif	fication Nu	mber	
Purpose of Disbursement In-kind - For FEC Compliance Services	· · ·	C	otion ID	0D04D 4400			
Candidate Name			Category/			SB21B.4109 ursement this F	Period
Office Sought: House Disburse	ment For:		Type			213.7	5
Senate President			,				
State: District:	Other (spe	ony) 🔻		Memo	Item		
Full Name (Last, First, Middle Initial)							
B. RightSide Compliance	Date of Dis	sbursement	t /	V			
Mailing Address PO BOX 341027				12	15	2016	Ť
City	State	Zip Code		FEC Identit	fication Nu	mber	
AUSTIN Purpose of Disbursement	TX	78734		С			
In-kind - For FEC Compliance Services			ction ID : 3	SB21B.4110			
Candidate Name			Category/ Type			ursement this F	Period
Office Sought: House Disburse	ment For:		1,700			427.9	7
Senate	Primary	General			,	,	
State: District:	Other (spe	сіту)		Memo	Item		
Full Name (Last, First, Middle Initial)				D			
C. RightSide Compliance				Date of Dis	sbursemen	,	V
Mailing Address PO BOX 341027				12	15	2016	Y
City	State	Zip Code		FEC Identif	fication Nu	mber	
AUSTIN Purpose of Disbursement	TX	78734					
In-kind - For FEC Compliance Services Candidate Name		Transaction ID : SB21B.4111					
Candidate Name			Category/ Type	Amount of	Each Disb	ursement this F	Period
	ht: House Disbursement For: 337.5					337.5	0
Senate President	Primary Other (spe	General					
State: District: Other (specify) ▼ Memo Item							
SUBTOTAL of Disbursements This Page (optional).				T		979.2	22
COSTOTAL OF DISDUISEMENTS THIS Fage (optional).			<u> </u>	-	7	7	#
TOTAL This Period (last page this line number only	·)			1			

: 97 A = G7 9 @ G B9 C I G H9 L H F 9 @ 5 H9 8 HC 5 F 9 D C F H Z G7 < 98 I @ C F → H9 A = N 5 H = C B

Form/Schedule: SB21B Transaction ID: SB21B.4109

This entry is to zero out debt on Schedule D.

Form/Schedule: SB21B Transaction ID: SB21B.4110

This entry is to zero out debt on Schedule D.

: 97 A = G7 9 @ G B9 C I G H9 L H F 9 @ 5 H9 8 HC 5 F 9 D C F H Z G7 < 98 I @ C F → H9 A = N 5 H = C B

Form/Schedule: SB21B Transaction ID: SB21B.4111

This entry is to zero out debt on Schedule D.

Form/Schedule: Transaction ID:

17

SCHEDULE B (FEC Form 3X)	11	anata astronomico	odulo(s) FOR LINE NUMBER: PAGE			
ITEMIZED DISBURSEMENTS		arate schedule(s) category of the	(orlook orlly orlo)			
		Summary Page	X 21b 28a	22 28b	23 28c	26 27 29 30b
Any information copied from such Reports and Stater	nonte me:	not be sold or				
or for commercial purposes, other than using the nar						
NAME OF COMMITTEE (In Full)						
Louisiana Liberty Alliance						
/						
Full Name (Last, First, Middle Initial) A. RightSide Compliance				Date of D	isburseme	nt
1 RightSide Compliance				M	/ D D	/ Y Y Y Y
Mailing Address PO BOX 341027				12	15	2016
011		I				
City AUSTIN	State TX	Zip Code 78734		FEC Iden	tification N	umber
Purpose of Disbursement		70754		С		
In-kind - For FEC Compliance Services			action ID	: SB21B.4156		
Candidate Name			Category/			bursement this Period
Office Cought: House Dishurses			Type			180.00
Office Sought: House Disburser Senate	Primary	General			7	100.00
President		☐ Mame				
State: District:				Memo	nem	
Full Name (Last, First, Middle Initial)						
B. RightSide Compliance				Date of D	isburseme	nt
Mailing Address PO BOX 341027	12	15	2016			
Mailing Address PO BOX 341027				12	10	2010
City	State	Zip Code		FFC Iden	tification N	umber
AUSTIN Purpose of Disbursement	TX	78734				
In-kind - For FEC Compliance Services		C				
Candidate Name			Category/			: SB21B.4158 :bursement this Period
			Type	Amount	Lacii Dis	bursement this renou
Office Sought: House Disburser]	7	1000.00
Senate	Primary	General				
President State: District:	Other (spe	спу)		Memo	Item	
Full Name (Last, First, Middle Initial)						
C. The Gober Group				Date of D	isburseme	nt
<u> </u>				M = M	/ D D	/ Y Y Y Y Y
Mailing Address PO BOX 31016				12	15	2016
City	State	Zip Code		FFO Idam	utti Ai Ni	
AUSTIN	TX	78734		FEC Iden	tification N	umber
Purpose of Disbursement In-kind - For FEC Legal Services	C					
Candidate Name				: SB21B.4113		
Candidate Name			Category/ Type	Amount o	f Each Dis	sbursement this Period
Office Sought: House Disburser	ment For:		- , , , ,			1500.00
Senate	Primary	General			7	
President	Other (spe	ecify) 🔻		Memo	Item	
State: District:						
SUBTOTAL of Disbursements This Page (optional)						2680.00
CODITION DISDUISEMENTS THIS Fage (optional)			<u> </u>	-	7	4- 4-
TOTAL This Period (last page this line number only))			1		

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Form/Schedule: SB21B Transaction ID: SB21B.4113

This entry is to zero out debt on Schedule D.

Form/Schedule: Transaction ID:

17

SCHEDULE B (FEC Form 3X)	lles ser	wata ash a distarta	FOR LINE NUMBER: PAGE 1				E 15 (OF 17	
ITEMIZED DISBURSEMENTS		rate schedule(s) category of the	(check only one) X 21b 22 23 2			1.00			
		Summary Page	28		20		26 29	27 30b	
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NAME OF COMMITTEE (In Full)									
Louisiana Liberty Alliance									
Full Name (Last, First, Middle Initial)									
A. The Gober Group				Date	of Disbu	rseme		YY	V
Mailing Address PO BOX 31016						15	/ T	2016	Ť
AUSTIN	State TX	Zip Code 78734			dentifica	tion N	umber		
Purpose of Disbursement In-kind - For Legal Services	C		15	00045	1400				
Candidate Name			Category/		ransacti nt of Ea		-	ent this	Period
Office Sought: House Disbursen	nent For:		Type	- [1 00		40.	1000.0	00
Senate President		,		,					
State: District:	Other (spec	∑iiy) ▼		M	emo Ite	m			
Full Name (Last, First, Middle Initial) B.				Data	of Disbu	roomo	ot.		
	Bate		D		YY	Υ			
Mailing Address				L-	_	-	L		
City	State	Zip Code		FEC I	dentifica	tion N	umber		
Purpose of Disbursement	С								
Candidate Name	Amou	nt of Ea	ch Dis	bursem	ent this	Period			
Office Sought: House Disbursen	nent For:		Type	- [
	Primary	General					7		
State: President District:	Other (spec	сту)		M	emo Ite	m			
Full Name (Last, First, Middle Initial)				Data	of Disbu	rooms	ot.		
C.				Date		rseme		YY	V
Mailing Address							Ĺ		
City	State	Zip Code		FEC I	dentifica	tion N	umber		
Purpose of Disbursement	С	•	•	-					
Candidate Name		nt of Ea	ch Dis	bursem	ent this	Period			
Office Sought: House Disbursen	nent For		Category/ Type	-					
	Primary	General				-	7		
President State: District:	Other (spec	cify) 🔻		M	emo Ite	m			
2.5				 	-	-	_		
SUBTOTAL of Disbursements This Page (optional)			·····•	L			7	1000.	00
TOTAL This Period (last page this line number only).								4659.	22

SCHEDULE D (FEC Form 3X) **DEBTS AND OBLIGATIONS**

Excluding Loans

(Use separate schedule(s) for each numbered line)

PAGE 16 OF 17 FOR LINE NUMBER: (check only one)

9 **X** 10

NAME OF COMMITTEE (In Full) Louisiana Liberty Alliance		·				
RightSide Compliance	A. Full Name (Last, First, Middle Initial) of Debtor or Creditor RightSide Compliance Mailing Address PO BOX 341027					
Willing Address PO BOX 341027	Mailing Address PO BOX 341027					
City AUSTIN	State Zip Code TX 78734					
Outstanding Balance Beginning This Period			Transaction ID : SD10.4098			
213.75						
Amount Incurred This Period	Payr	nent This Period	Outstanding Balance at Close of This Period			
0.00	-	213.75	0.00			
B. Full Name (Last, First, Middle Initial) of Debtor of RightSide Compliance	Nature of Debt (Purpose): Compliance Services					
Mailing Address PO BOX 341027						
City AUSTIN	State TX	Zip Code 78734				
Outstanding Balance Beginning This Period 427.97	Transaction ID : SD10.4104					
Amount Incurred This Period	Outstanding Balance at Close of This Period					
0.00	7	427.97	0.00			
C. Full Name (Last, First, Middle Initial) of Debtor of RightSide Compliance	or Creditor		Nature of Debt (Purpose): Compliance Services			
Mailing Address PO BOX 341027						
City AUSTIN	State TX	Zip Code 78734				
Outstanding Balance Beginning This Period			Transaction ID : SD10.4106			
337.50						
Amount Incurred This Period	Payr	nent This Period	Outstanding Balance at Close of This Period			
0.00	7	337.50	0.00			
1) SUBTOTALS This Period This Page (optional)			0.00			
2) TOTALS This Period (last page this line number or	าly)	>				
3) TOTAL OUTSTANDING LOANS from Schedule C	(last page onl	y) >				
4) ADD 2) and 3) and carry forward to appropriate lin						

SCHEDULE D (FEC Form 3X) DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line) PAGE 17 OF
FOR LINE NUMBER:
(check only one)

	9
X	10

Louisiana Liberty Alliance							
A. Full Name (Last, First, Middle Initial) of Debtor The Gober Group	A. Full Name (Last, First, Middle Initial) of Debtor or Creditor The Gober Group						
Mailing Address PO BOX 31016							
City AUSTIN							
Outstanding Balance Beginning This Period			Transaction ID : SD10.4100				
1500.00	5						
Amount Incurred This Period 0.00	Pay	ment This Period	Outstanding Balance at Close of This Period 0.00				
B. Full Name (Last, First, Middle Initial) of Debtor	or Creditor		Nature of Debt (Purpose):				
Mailing Address							
City	City State Zip Code						
Outstanding Balance Beginning This Period	•						
Amount Incurred This Period	Outstanding Balance at Close of This Period						
C. Full Name (Last, First, Middle Initial) of Debtor	C. Full Name (Last, First, Middle Initial) of Debtor or Creditor						
Mailing Address							
City	State	Zip Code					
Outstanding Balance Beginning This Period		+					
		ment This Period					
Amount Incurred This Period	Outstanding Balance at Close of This Period						
	7						
1) SUBTOTALS This Period This Page (optional)		>	0.00				
2) TOTALS This Period (last page this line number of	only)	>	0.00				
3) TOTAL OUTSTANDING LOANS from Schedule C	(last page or	nly) ▶					
ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)							