

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.
OPPORTUNITY ALLIANCE PAC

ADDRESS (number and street)

 Check if different than previously reported. (ACC)

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

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

5. Covering Period / / through / /

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 Cabell Hobbs

Signature of Treasurer Cabell Hobbs [Electronically Filed] Date / /

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

OPPORTUNITY ALLIANCE PAC

Report Covering the Period: From: / / To: / /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2015"/>		<input type="text" value="12526.34"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="12526.34"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="12526.34"/>	<input type="text" value="12526.34"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="12526.34"/>	<input type="text" value="12526.34"/>
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 TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

OPPORTUNITY ALLIANCE PAC

Report Covering the Period: From: 01 / 01 / 2015 To: 07 / 24 / 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).....	0.00	0.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	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 Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	0.00	0.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	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))..... ▶	0.00	0.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	0.00	0.00

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	12526.34	12526.34
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	12526.34	12526.34
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)) ..	12526.34	12526.34
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	12526.34	12526.34

DETAILED SUMMARY PAGE
of Disbursements

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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)	0.00	0.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	0.00	0.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ▶	12526.34	12526.34
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)▶	12526.34	12526.34

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

Form/Schedule: F3XT
Transaction ID :

This report is Opportunity Alliance PAC's termination report covering 1/1/2015 - 7/24/2015. This termination report is inclusive of transactions that would have otherwise been disclosed on the committee's July Mid-Year report (1/1/2015 - 6/30/2015). Therefore, this report simultaneously fulfills the committee's reporting obligations with regard to the July Mid-Year report and terminates the committee's registration with the Commission.

Form/Schedule:
Transaction ID:

**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)
OPPORTUNITY ALLIANCE PAC

Full Name (Last, First, Middle Initial) A. Gober Hilgers LLC		Date of Disbursement MM / DD / YYYY 02 / 10 / 2015
Mailing Address 1005 Congress Ave		Transaction ID : SB21B.4179
City Austin State TX Zip Code 78701	Amount of Each Disbursement this Period 1100.00	
Purpose of Disbursement Legal and Compliance Services	Candidate Name	Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Gober Hilgers LLC		Date of Disbursement MM / DD / YYYY 02 / 11 / 2015
Mailing Address 1005 Congress Ave		Transaction ID : SB21B.4180
City Austin State TX Zip Code 78701	Amount of Each Disbursement this Period 1020.00	
Purpose of Disbursement Legal and Compliance Services	Candidate Name	Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Gober Hilgers LLC		Date of Disbursement MM / DD / YYYY 04 / 07 / 2015
Mailing Address 1005 Congress Ave		Transaction ID : SB21B.4181
City Austin State TX Zip Code 78701	Amount of Each Disbursement this Period 194.97	
Purpose of Disbursement Legal and Compliance Services	Candidate Name	Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional).....▶	2314.97
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)
OPPORTUNITY ALLIANCE PAC

Full Name (Last, First, Middle Initial)

A. Gober Hilgers LLC

Mailing Address 1005 Congress Ave

City Austin State TX Zip Code 78701

Purpose of Disbursement
Legal and Compliance Services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
06 / 18 / 2015

Transaction ID : **SB21B.4182**

Amount of Each Disbursement this Period

140.00

Full Name (Last, First, Middle Initial)

B. Gober Hilgers LLC

Mailing Address 1005 Congress Ave

City Austin State TX Zip Code 78701

Purpose of Disbursement
Legal and Compliance Services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
06 / 18 / 2015

Transaction ID : **SB21B.4183**

Amount of Each Disbursement this Period

80.00

Full Name (Last, First, Middle Initial)

C. Gober Hilgers LLC

Mailing Address 1005 Congress Ave

City Austin State TX Zip Code 78701

Purpose of Disbursement
Legal and Compliance Services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
07 / 21 / 2015

Transaction ID : **SB21B.4185**

Amount of Each Disbursement this Period

2100.00

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

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

2320.00

**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)
OPPORTUNITY ALLIANCE PAC

Full Name (Last, First, Middle Initial)

A. Prevail Strategies

Mailing Address 400 First St SW
Second Floor

City Washington State DC Zip Code 20003

Purpose of Disbursement
Political Strategic Consulting

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 28 / 2015

Transaction ID : SB21B.4189

Amount of Each Disbursement this Period

3237.40

Full Name (Last, First, Middle Initial)

B. Prevail Strategies

Mailing Address 400 First St SW
Second Floor

City Washington State DC Zip Code 20003

Purpose of Disbursement
Political Strategic Consulting

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
06 / 05 / 2015

Transaction ID : SB21B.4192

Amount of Each Disbursement this Period

2408.24

Full Name (Last, First, Middle Initial)

C. Prevail Strategies

Mailing Address 400 First St SW
Second Floor

City Washington State DC Zip Code 20003

Purpose of Disbursement
Political Strategic Consulting

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
07 / 23 / 2015

Transaction ID : SB21B.4196

Amount of Each Disbursement this Period

2185.73

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

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

7831.37

12466.34

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 10 OF 12
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
OPPORTUNITY ALLIANCE PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Gober Hilgers LLC	Nature of Debt (Purpose): Legal and Compliance Services
Mailing Address 1005 Congress Ave	
City State Zip Code Austin TX 78701	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.4173	
Amount Incurred This Period 1100.00	Payment This Period 1100.00	Outstanding Balance at Close of This Period 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Gober Hilgers LLC	Nature of Debt (Purpose): Legal and Compliance Services
Mailing Address 1005 Congress Ave	
City State Zip Code Austin TX 78701	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.4174	
Amount Incurred This Period 1020.00	Payment This Period 1020.00	Outstanding Balance at Close of This Period 0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Gober Hilgers LLC	Nature of Debt (Purpose): Legal and Compliance Services
Mailing Address 1005 Congress Ave	
City State Zip Code Austin TX 78701	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.4175	
Amount Incurred This Period 194.97	Payment This Period 194.97	Outstanding Balance at Close of This Period 0.00

1) SUBTOTALS This Period This Page (optional)..... ▶	0.00
2) TOTALS This Period (last page this line number only)..... ▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	
4) ADD 2) and 3) 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 11 OF 12
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
OPPORTUNITY ALLIANCE PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Gober Hilgers LLC	Nature of Debt (Purpose): Legal and Compliance Services
Mailing Address 1005 Congress Ave	
City State Zip Code Austin TX 78701	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.4176	
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 Gober Hilgers LLC	Nature of Debt (Purpose): Legal and Compliance Services
Mailing Address 1005 Congress Ave	
City State Zip Code Austin TX 78701	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.4177	
Amount Incurred This Period 80.00	Payment This Period 80.00	Outstanding Balance at Close of This Period 0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Gober Hilgers LLC	Nature of Debt (Purpose): Legal and Compliance Services
Mailing Address 1005 Congress Ave	
City State Zip Code Austin TX 78701	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.4178	
Amount Incurred This Period 2100.00	Payment This Period 2100.00	Outstanding Balance at Close of This Period 0.00

1) SUBTOTALS This Period This Page (optional)..... ▶	0.00
2) TOTALS This Period (last page this line number only)..... ▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	
4) ADD 2) and 3) 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 12 OF 12
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
OPPORTUNITY ALLIANCE PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Prevail Strategies	Nature of Debt (Purpose): Political Strategic Consulting
Mailing Address 400 First St SW Second Floor	
City State Zip Code Washington DC 20003	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.4188	
Amount Incurred This Period 3237.40	Payment This Period 3237.40	Outstanding Balance at Close of This Period 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Prevail Strategies	Nature of Debt (Purpose): Political Strategic Consulting
Mailing Address 400 First St SW Second Floor	
City State Zip Code Washington DC 20003	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.4191	
Amount Incurred This Period 2408.24	Payment This Period 2408.24	Outstanding Balance at Close of This Period 0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Prevail Strategies	Nature of Debt (Purpose): Political Strategic Consulting
Mailing Address 400 First St SW Second Floor	
City State Zip Code Washington DC 20003	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.4194	
Amount Incurred This Period 2185.73	Payment This Period 2185.73	Outstanding Balance at Close of This Period 0.00

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