

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 PLAINS ACTION NETWORK

ADDRESS (number and street) 4790 CAUGHLIN PARKWAY #767
Check if different than previously reported. (ACC) RENO NV 89519

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲
C C00509927 3. IS THIS REPORT NEW (N) OR AMENDED (A)

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

5. Covering Period 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)

Write or Type Committee Name

FREEDOM PLAINS ACTION NETWORK

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="2263.96"/>	<input type="text" value="2263.96"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="2263.96"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="2978.47"/>	<input type="text" value="2978.47"/>
(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="5242.43"/>	<input type="text" value="5242.43"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="5242.43"/>	<input type="text" value="5242.43"/>
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

Write or Type Committee Name

FREEDOM PLAINS ACTION NETWORK

Report Covering the Period: From: 07 / 01 / 2015 To: 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).....	2978.47	2978.47
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	2978.47	2978.47
(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)	2978.47	2978.47
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))..... ▶	2978.47	2978.47
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	2978.47	2978.47

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	5242.43	5242.43
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	5242.43	5242.43
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)) ..	5242.43	5242.43
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	5242.43	5242.43

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)	2978.47	2978.47
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	2978.47	2978.47
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ▶	5242.43	5242.43
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)▶	5242.43	5242.43

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

Form/Schedule: F3XT
Transaction ID :

Termination report satisfies the filing requirement for the Year End 2015 Report (covering 7/1/2015 - 12/31/2015). Certain debts owed to Gober Hilgers as previously reported for the committee are paid through in-kind contributions from Gober Hilgers. 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: PAGE 7 OF 27
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
FREEDOM PLAINS ACTION NETWORK

A. Gober Hilgers PLLC
Full Name (Last, First, Middle Initial)
Mailing Address PO Box 341016
City Austin State TX Zip Code 78734
FEC ID number of contributing federal political committee. C
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2978.47

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 30 / 2015
Transaction ID : SA11AI.4245
Amount of Each Receipt this Period
2978.47
In-kind - Legal Services

B.
Full Name (Last, First, Middle Initial)
Mailing Address
City State Zip Code
FEC ID number of contributing federal political committee. C
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y Y
Amount of Each Receipt this Period

C.
Full Name (Last, First, Middle Initial)
Mailing Address
City State Zip Code
FEC ID number of contributing federal political committee. C
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y Y
Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	2978.47
TOTAL This Period (last page this line number only).....▶	2978.47

**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 PLAINS ACTION NETWORK

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.4195

Amount of Each Disbursement this Period

174.96

Full Name (Last, First, Middle Initial)

B. Gober Hilgers PLLC

Mailing Address PO Box 341016

City Austin State TX Zip Code 78734

Purpose of Disbursement
Legal Services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
12 / 11 / 2015

Transaction ID : SB21B.4196

Amount of Each Disbursement this Period

34.02

Full Name (Last, First, Middle Initial)

C. Gober Hilgers PLLC

Mailing Address PO Box 341016

City Austin State TX Zip Code 78734

Purpose of Disbursement
Legal Services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
12 / 11 / 2015

Transaction ID : SB21B.4197

Amount of Each Disbursement this Period

274.50

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

483.48

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

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
FREEDOM PLAINS ACTION NETWORK

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.4198**

Amount of Each Disbursement this Period

30.00

Full Name (Last, First, Middle Initial)

B. Gober Hilgers PLLC

Mailing Address PO Box 341016

City Austin State TX Zip Code 78734

Purpose of Disbursement
Legal Services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
12 / 11 / 2015

Transaction ID : **SB21B.4199**

Amount of Each Disbursement this Period

165.00

Full Name (Last, First, Middle Initial)

C. Gober Hilgers PLLC

Mailing Address PO Box 341016

City Austin State TX Zip Code 78734

Purpose of Disbursement
Legal Services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
12 / 11 / 2015

Transaction ID : **SB21B.4200**

Amount of Each Disbursement this Period

135.00

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

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

330.00

**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 PLAINS ACTION NETWORK

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.4201**

Amount of Each Disbursement this Period

150.00

Full Name (Last, First, Middle Initial)

B. Gober Hilgers PLLC

Mailing Address PO Box 341016

City Austin State TX Zip Code 78734

Purpose of Disbursement
Legal Services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 11 / 2015

Transaction ID : **SB21B.4202**

Amount of Each Disbursement this Period

484.00

Full Name (Last, First, Middle Initial)

C. Gober Hilgers PLLC

Mailing Address PO Box 341016

City Austin State TX Zip Code 78734

Purpose of Disbursement
Legal Services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 11 / 2015

Transaction ID : **SB21B.4203**

Amount of Each Disbursement this Period

60.00

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

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

694.00

**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 PLAINS ACTION NETWORK

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.4204**

Amount of Each Disbursement this Period

120.00

Full Name (Last, First, Middle Initial)

B. Gober Hilgers PLLC

Mailing Address PO Box 341016

City Austin State TX Zip Code 78734

Purpose of Disbursement
Legal Services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
12 / 11 / 2015

Transaction ID : **SB21B.4205**

Amount of Each Disbursement this Period

105.00

Full Name (Last, First, Middle Initial)

C. Gober Hilgers PLLC

Mailing Address PO Box 341016

City Austin State TX Zip Code 78734

Purpose of Disbursement
Legal Services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
12 / 11 / 2015

Transaction ID : **SB21B.4206**

Amount of Each Disbursement this Period

60.00

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

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

285.00

**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 PLAINS ACTION NETWORK

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.4207**

Amount of Each Disbursement this Period

60.00

Full Name (Last, First, Middle Initial)

B. Gober Hilgers PLLC

Mailing Address PO Box 341016

City Austin State TX Zip Code 78734

Purpose of Disbursement
Legal Services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 11 / 2015

Transaction ID : **SB21B.4209**

Amount of Each Disbursement this Period

122.50

Full Name (Last, First, Middle Initial)

C. Gober Hilgers PLLC

Mailing Address PO Box 341016

City Austin State TX Zip Code 78734

Purpose of Disbursement
Legal Services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 11 / 2015

Transaction ID : **SB21B.4210**

Amount of Each Disbursement this Period

70.00

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

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

252.50

**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 PLAINS ACTION NETWORK

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) ▼

Date of Disbursement

MM / DD / YYYY
12 / 11 / 2015

Transaction ID : SB21B.4221

Amount of Each Disbursement this Period

35.00

Category/
Type

Full Name (Last, First, Middle Initial)

B. Gober Hilgers PLLC

Mailing Address PO Box 341016

City Austin State TX Zip Code 78734

Purpose of Disbursement
Legal Services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
12 / 11 / 2015

Transaction ID : SB21B.4225

Amount of Each Disbursement this Period

54.03

Category/
Type

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) ▼

Date of Disbursement

MM / DD / YYYY
12 / 30 / 2015

Transaction ID : SB21B.4231

Amount of Each Disbursement this Period

103.47

Category/
Type

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

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

192.50

**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 PLAINS ACTION NETWORK

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.4232

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

MM / DD / YYYY
12 / 30 / 2015

Transaction ID : SB21B.4235

Amount of Each Disbursement this Period

140.00

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.4236

Amount of Each Disbursement this Period

122.50

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

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

297.50

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
FREEDOM PLAINS ACTION NETWORK

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.4237

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

MM / DD / YYYY
12 / 30 / 2015

Transaction ID : SB21B.4238

Amount of Each Disbursement this Period

70.00

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.4239

Amount of Each Disbursement this Period

70.00

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

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

175.00

**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 PLAINS ACTION NETWORK

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.4240**

Amount of Each Disbursement this Period

52.50

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.4241**

Amount of Each Disbursement this Period

140.00

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.4242**

Amount of Each Disbursement this Period

52.50

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

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

245.00

**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 PLAINS ACTION NETWORK

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 / D D / Y Y Y Y
12 / 30 / 2015

Transaction ID : SB21B.4243

Amount of Each Disbursement this Period

52.50

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

M M / D D / Y Y Y Y
12 / 30 / 2015

Transaction ID : SB21B.4244

Amount of Each Disbursement this Period

2105.00

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y

Amount of Each Disbursement this Period

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

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

2157.50

5112.48

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 18 OF 27
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/> 9	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
FREEDOM PLAINS ACTION NETWORK

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Gober Hilgers PLLC	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	Transaction ID : SD10.4150	
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 Gober Hilgers PLLC	Nature of Debt (Purpose): Legal Services
Mailing Address PO Box 341016	
City State Zip Code Austin TX 78734	

Outstanding Balance Beginning This Period 84.95	Transaction ID : SD10.4162	
Amount Incurred This Period 0.00	Payment This Period 84.95	Outstanding Balance at Close of This Period 0.00

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

Outstanding Balance Beginning This Period 174.96	Transaction ID : SD10.4161	
Amount Incurred This Period 0.00	Payment This Period 174.96	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 19 OF 27
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
FREEDOM PLAINS ACTION NETWORK

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

Outstanding Balance Beginning This Period 34.02	Transaction ID : SD10.4163	
Amount Incurred This Period 0.00	Payment This Period 34.02	Outstanding Balance at Close of This Period 0.00

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

Outstanding Balance Beginning This Period 274.50	Transaction ID : SD10.4165	
Amount Incurred This Period 0.00	Payment This Period 274.50	Outstanding Balance at Close of This Period 0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Gober Hilgers PLLC	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	Transaction ID : SD10.4166	
Amount Incurred This Period 0.00	Payment This Period 30.00	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 20 OF 27
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
FREEDOM PLAINS ACTION NETWORK

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Gober Hilgers PLLC	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	Transaction ID : SD10.4167	
Amount Incurred This Period 0.00	Payment This Period 165.00	Outstanding Balance at Close of This Period 0.00

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

Outstanding Balance Beginning This Period 135.00	Transaction ID : SD10.4168	
Amount Incurred This Period 0.00	Payment This Period 135.00	Outstanding Balance at Close of This Period 0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Gober Hilgers PLLC	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	Transaction ID : SD10.4170	
Amount Incurred This Period 0.00	Payment This Period 150.00	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 21 OF 27
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
FREEDOM PLAINS ACTION NETWORK

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

Outstanding Balance Beginning This Period 484.00	Transaction ID : SD10.4171	
Amount Incurred This Period 0.00	Payment This Period 484.00	Outstanding Balance at Close of This Period 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Gober Hilgers PLLC	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	Transaction ID : SD10.4172	
Amount Incurred This Period 0.00	Payment This Period 60.00	Outstanding Balance at Close of This Period 0.00

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

Outstanding Balance Beginning This Period 120.00	Transaction ID : SD10.4174	
Amount Incurred This Period 0.00	Payment This Period 120.00	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 22 OF 27
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
FREEDOM PLAINS ACTION NETWORK

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

Outstanding Balance Beginning This Period 105.00	Transaction ID : SD10.4175	
Amount Incurred This Period 0.00	Payment This Period 105.00	Outstanding Balance at Close of This Period 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Gober Hilgers PLLC	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	Transaction ID : SD10.4176	
Amount Incurred This Period 0.00	Payment This Period 60.00	Outstanding Balance at Close of This Period 0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Gober Hilgers PLLC	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	Transaction ID : SD10.4178	
Amount Incurred This Period 0.00	Payment This Period 60.00	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 23 OF 27
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
FREEDOM PLAINS ACTION NETWORK

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Gober Hilgers PLLC	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	Transaction ID : SD10.4179	
Amount Incurred This Period 0.00	Payment This Period 122.50	Outstanding Balance at Close of This Period 0.00

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

Outstanding Balance Beginning This Period 70.00	Transaction ID : SD10.4180	
Amount Incurred This Period 0.00	Payment This Period 70.00	Outstanding Balance at Close of This Period 0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Gober Hilgers PLLC	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	Transaction ID : SD10.4182	
Amount Incurred This Period 0.00	Payment This Period 35.00	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 24 OF 27
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/> 9	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
FREEDOM PLAINS ACTION NETWORK

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

Outstanding Balance Beginning This Period 157.50	Transaction ID : SD10.4183	
Amount Incurred This Period 0.00	Payment This Period 157.50	Outstanding Balance at Close of This Period 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Gober Hilgers PLLC	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	Transaction ID : SD10.4185	
Amount Incurred This Period 0.00	Payment This Period 35.00	Outstanding Balance at Close of This Period 0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Gober Hilgers PLLC	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	Transaction ID : SD10.4187	
Amount Incurred This Period 0.00	Payment This Period 140.00	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 25 OF 27
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
FREEDOM PLAINS ACTION NETWORK

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Gober Hilgers PLLC	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	Transaction ID : SD10.4188	
Amount Incurred This Period 0.00	Payment This Period 122.50	Outstanding Balance at Close of This Period 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Gober Hilgers PLLC	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	Transaction ID : SD10.4189	
Amount Incurred This Period 0.00	Payment This Period 35.00	Outstanding Balance at Close of This Period 0.00

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

Outstanding Balance Beginning This Period 70.00	Transaction ID : SD10.4190	
Amount Incurred This Period 0.00	Payment This Period 70.00	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 26 OF 27
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/> 9	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
FREEDOM PLAINS ACTION NETWORK

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

Outstanding Balance Beginning This Period 70.00	Transaction ID : SD10.4191	
Amount Incurred This Period 0.00	Payment This Period 70.00	Outstanding Balance at Close of This Period 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Gober Hilgers PLLC	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 : SD10.4226	
Amount Incurred This Period 52.50	Payment This Period 52.50	Outstanding Balance at Close of This Period 0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Gober Hilgers PLLC	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 : SD10.4227	
Amount Incurred This Period 140.00	Payment This Period 140.00	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 27 OF 27
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/> 9	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
FREEDOM PLAINS ACTION NETWORK

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Gober Hilgers PLLC	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 : SD10.4228	
Amount Incurred This Period 52.50	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 Gober Hilgers PLLC	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 : SD10.4229	
Amount Incurred This Period 52.50	Payment This Period 52.50	Outstanding Balance at Close of This Period 0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Gober Hilgers PLLC	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 : SD10.4230	
Amount Incurred This Period 2105.00	Payment This Period 2105.00	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)..... ▶	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) ▶	