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07/12/2018 23 : 45

Image# 20180712911539	91487					PAGE 1 / 46	
FEC FORM 3X	ANI	PORT OF R D DISBURS her Than An Autho	SEMENT	S		Office Use Only	
1. NAME OF COMMITTEE (in fu		OR PRINT ▼	Example: If typir over the lines.	ng, type	12FE4M5		
ADDRESS (number and		30X 100072					
Check if different there provide use							
than previously reported. (ACC		INGTON				22201	
2. FEC IDENTIFICA	TION NUMBER			S		ZIP CODE	
C C00569251		3. IS T REF		NEW N) <b>OR</b>	AME (A)	NDED	
July 15	rts:	Monthly Report Due On: Apr 20 C) 12-Day PRE-Election	0 (M3)		General (1		òn (M12) on (YE)
January 3 Year-End	Report (Q3) 1 Report (YE)	Report for the:	on Convention (		Special (12	in the State of	]
July 31 Mi Report (No Year Only)	on-election	d) 30-Day <b>POST</b> -Election Report for the:	General (300	à)	Runoff (30	R) Special (	(30S)
Terminatio (TER)	n Report	Election	on/		Y Y Y Y Y	in the State of	
5. Covering Period	M M / 04	01 / Y Y Y Y Y 01 2018	through	M M 06	/ D D / 30	2018	
I certify that I have exactly Type or Print Name of	SĆH	ort and to the best of m IAEFFER, ADAM, , ,	y knowledge and I	pelief it is true	e, correct and	complete.	
Signature of Treasurer	SCHAEFFER,	ADAM, , ,	[Electronically	<i>Filed]</i> Da	ate 07	/ D D / Y Y Y Y 12 2018	Y
NOTE: Submission of fal	se, erroneous, or	incomplete information r	nay subject the per	son signing thi	s Report to the	penalties of 52 U.S.C. §	30109
Office Use Only						FEC FORM 3X Rev. 05/2016	

	FEC <b>Form 3X</b> (Rev. 05/2016)	SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS	Page 2
	OWA PRIORITIES		
R		04 01 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	b: 06 / 06 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
		COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand January 1, 2018		500.00
	(b) Cash on Hand at Beginning of Reporting Period	500.00	
	(c) Total Receipts (from Line 19)	4835.00	4835.00
	<ul><li>(d) Subtotal (add Lines 6(b) and</li><li>6(c) for Column A and Lines</li><li>6(a) and 6(c) for Column B)</li></ul>	5335.00	5335.00
7.	Total Disbursements (from Line 31)	4835.00	4835.00
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	500.00	500.00
9.	Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10.	Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D)	500.00	

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. 05/2016)

Write or Type Committee Name
IOWA PRIORITIES

R	eport Covering the Period: From:	/ 01 / 2018 To:	06 / D D / Y Y Y Y 2018
	I. Receipts	COLUMN B Calendar Year-to-Date	
1.	Contributions (other than loans) From: (a) Individuals/Persons Other		
	Than Political Committees		
	(i) Itemized (use Schedule A)	4835.00	4835.00
	(ii) Unitemized	0.00	0.00
	(iii) TOTAL (add		
	Lines 11(a)(i) and (ii)	4835.00	4835.00
	(b) Political Party Committees	0.00	0.00
	(c) Other Political Committees	0.00	
	(such as PACs)	0.00	0.00
	(d) Total Contributions (add Lines		
	11(a)(iii), (b), and (c)) (Carry	4835.00	4835.00
	Totals to Line 33, page 5)	4030.00	4835.00
	Transfers From Affiliated/Other	0.00	0.00
	Party Committees		
3.	All Loans Received	0.00	0.00
			0.00
	Loan Repayments Received	0.00	0.00
5.	Offsets To Operating Expenditures		
	(Refunds, Rebates, etc.)	0.00	0.00
2	(Carry Totals to Line 37, page 5) Refunds of Contributions Made		0.00
э.	to Federal Candidates and Other		
	Political Committees	0.00	0.00
7	Other Federal Receipts		
•	(Dividends, Interest, etc.)	0.00	0.00
3.	Transfers from Non-Federal and Levin Funds		4 4 4
	(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
9.	Total Receipts (add Lines 11(d),		
	12, 13, 14, 15, 16, 17, and 18(c))	4835.00	4835.00
)	Total Federal Receipts		
· ·	(subtract Line 18(c) from Line 19)▶	4835.00	4835.00

## DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)	of Disbursements	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	4835.00	4835.00	
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	4835.00	4835.00	
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	
Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F)			
	47. 47. 47.	0.00	
Loan Repayments Made	0.00	0.00	
Loans Made Refunds of Contributions To: (a) Individuals/Persons Other	0.00	0.00	
Than Political Committees	0.00	0.00	
<ul><li>(b) Political Party Committees</li><li>(c) Other Political Committees</li></ul>	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	
Federal Election Activity (52 U.S.C. § (a) Allocated Federal Election Activit (from Schedule H6)			
(i) Federal Share	0.00	0.00	
<ul><li>(ii) "Levin" Share</li><li>(b) Federal Election Activity Paid</li></ul>	0.00	0.00	
Entirely With Federal Funds (c) Total Federal Election Activity (ad	0.00	0.00	
Lines 30(a)(i), 30(a)(ii) and 30(b)		0.00	
Total Disbursements (add Lines 21(c) 23, 24, 25, 26, 27, 28(d), 29 and 30(		4835.00	
Total Federal Disbursements		<u> </u>	
(subtract Line 21(a)(ii) and Line 30(a) from Line 31)		4835.00	

#### DETAILED SUMMARY PAGE

of Disbursements

COLUMN A

**Total This Period** 

FFC	Form	3X	(Rev	05/2016	)
1 20	1 01111	57	(110 .	05/2010	,

#### III. Net Contributions/ Operating Expenditures

33.	Total Contributions (other than loans)
	(from Line 11(d), page 3)
34.	Total Contribution Refunds
	(from Line 28(d))
35.	Net Contributions (other than loans)
	(subtract Line 34 from Line 33)
36.	Total Federal Operating Expenditures
	(add Line 21(a)(i) and Line 21(b))
37.	Offsets to Operating Expenditures
	(from Line 15, page 3)
38.	Net Operating Expenditures

(subtract Line 37 from Line 36) .....

						4835.00
	-	-7	-	-	-7	1000100
						0.00
	4	-		4	-	
		_	_		_	4835.00
	÷	-	÷	÷	-	
L.,		-7			-7	4835.00
						0.00
		7			7	
						4835.00
- Longer	1.1	-7-	1	1.1	-7-	

- E					1	4835.00
1	-	-7		-7		4033.00
- E						0.00
		-7		-7		0.00
- E						4835.00
		-7		-7		485
- E						4835.00
		7		-7		
- E						0.00
	-	-7		-7		
- [						4835.00
	 	-7-	 	-7-		

#### Page 5

#### COLUMN B Calendar Year-to-Date

Form/Schedule: F3XN Transaction ID :

Report reflects an inkind contribution that is reported on Schedule A for the debt reported on Schedule D. A balancing entry has been entered on Schedule B for the inkind contributions reported on Schedule A. These entries are made as a work-around in the software since the FECFile does not permit the entry of inkind contributions as a payment method for transactions on Schedule D.

SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

(check only one)

PAGE 7 OF

46

	EMIZED RECEIPTS			ch category of the ed Summary Page	X         11a         11b         11c         12           13         14         15         16         17		
	y information copied from such Reports and Sta for commercial purposes, other than using the r						
	NAME OF COMMITTEE (In Full)						
Α.	Full Name of Individual (Last, First, Middle Initia RightSide Compliance	al) or Full C	Organizati	on Name	Date of Receipt		
	Mailing Address PO Box 341027				06 / D D / Y Y Y Y 06 2018		
	City Austin	State TX		Code 734	Transaction ID : SA11AI.4186 Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	С			87.50		
	Name of Employer (for Individual)	Occ	upation (	for Individual)	Memo Item In-kind - Compliance Services		
Receipt For: Primary General Other (specify) ▼				Date ▼ 87.50			
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name         B. RightSide Compliance							
	Mailing Address PO Box 341027				06 30 2018		
	City Austin	State TX		Code 734	Transaction ID : SA11AI.4187 Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	С			280.00		
	Name of Employer (for Individual)	Occ	upation (	for Individual)	Memo Item In-kind - Compliance Services		
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-I	Date ▼ 367.50			
С.	Full Name of Individual (Last, First, Middle Initia RightSide Compliance	al) or Full C	Organizati	on Name	Date of Receipt		
	Mailing Address PO Box 341027	1			06 / D D / Y Y Y Y 2018		
	City Austin	State TX		Code 734	Transaction ID : SA11AI.4188 Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	С			52.50		
	Name of Employer (for Individual)	Occ	upation (	for Individual)	Memo Item In-kind - Compliance Services		
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-I	Date ▼ 420.00			
s	UBTOTAL of Receipts This Page (optional)			••••••	420.00		
т	OTAL This Period (last page this line number or	וy)		••••••	1 1 gr 1 1 gr 1 1 m		

Form/Schedule: SA11AI Transaction ID : SA11AI.4186

Entry is for inkind contribution made to resolve debt and bring balances due as reported on Schedule D to zero for the purposes of termination.

Form/Schedule: SA11AI Transaction ID: SA11AI.4187

Entry is for inkind contribution made to resolve debt and bring balances due as reported on Schedule D to zero for the purposes of termination.

Form/Schedule: SA11AI Transaction ID : SA11AI.4188

Entry is for inkind contribution made to resolve debt and bring balances due as reported on Schedule D to zero for the purposes of termination.

SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

FOR LINE NUMBER:

PAGE 10 OF

46

	,	Use separate schedule(s)	(check only one)												
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	<b>X</b> 11a 11b 11c 12 13 14 15 16 17												
			person for the purpose of soliciting contributions te to solicit contributions from such committee.												
NAME OF COMMITTEE (In Full) IOWA PRIORITIES	-														
Full Name of Individual (Last, First, Mide <b>A.</b> RightSide Compliance	dle Initial) or Full O	rganization Name	Date of Receipt												
Mailing Address PO Box 341027			06 30 2018												
City Austin	State TX	Zip Code 78734	Transaction ID : SA11AI.4189 Amount of Each Receipt this Period												
FEC ID number of contributing federal political committee.	C		297.50												
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item In-kind - Compliance Services												
Receipt For: Primary General Other (specify) ▼	Primary General Aggregate real-to-bate v														
Full Name of Individual (Last, First, Mide B. RightSide Compliance	dle Initial) or Full O	rganization Name	Date of Receipt												
Mailing Address PO Box 341027			06 / D D / Y Y Y Y Y 2018												
City Austin	State TX	Zip Code 78734	Transaction ID : SA11AI.4190 Amount of Each Receipt this Period												
FEC ID number of contributing federal political committee.	С		315.00												
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item												
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1032.50	]												
Full Name of Individual (Last, First, Mide C. RightSide Compliance	dle Initial) or Full O	rganization Name	Date of Receipt												
Mailing Address PO Box 341027			M M / D D / Y Y Y Y 06 30 2018												
City Austin	State TX	Zip Code 78734	Transaction ID : SA11AI.4191 Amount of Each Receipt this Period												
FEC ID number of contributing federal political committee.	С		140.00												
Name of Employer (for Individual)	Occi	upation (for Individual)	Memo Item In-kind - Compliance Services												
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1172.50	]												
SUBTOTAL of Receipts This Page (option	al)		752.50												
TOTAL This Period (last page this line nu	mber only)														

Form/Schedule: SA11AI Transaction ID : SA11AI.4189

Entry is for inkind contribution made to resolve debt and bring balances due as reported on Schedule D to zero for the purposes of termination.

Form/Schedule: SA11AI Transaction ID: SA11AI.4190

Entry is for inkind contribution made to resolve debt and bring balances due as reported on Schedule D to zero for the purposes of termination.

Form/Schedule: SA11AI Transaction ID : SA11AI.4191

Entry is for inkind contribution made to resolve debt and bring balances due as reported on Schedule D to zero for the purposes of termination.

SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

Use separate schedule(s) for each category of the Detailed Summary Page FOR LINE NUMBER:

(check only one)

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46

		Detailed Summary Page	×	11a 13	$\vdash$	11b 14	11c		12 16	17					
Any information copied from such Reports or for commercial purposes, other than usi				or the		pose of	f solicitir		ntributi	ons					
NAME OF COMMITTEE (In Full) IOWA PRIORITIES	-														
Full Name of Individual (Last, First, Mid A. RightSide Compliance	dle Initial) or Full O	rganization Name		Date of	Re	eceipt									
Mailing Address PO Box 341027				06 30 / Y Y Y Y 2018											
City Austin	State TX	Zip Code 78734	Transaction ID : SA11AI.4192												
		10134	Amount of Each Receipt this Period												
FEC ID number of contributing federal political committee.	C		Memo Item In-kind - Compliance Services												
Name of Employer (for Individual)	Occ	upation (for Individual)													
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1207.50													
Full Name of Individual (Last, First, Mid			-												
B. RightSide Compliance		าฐลากะลแบบ เหล่าเษ	Date of Receipt												
Mailing Address PO Box 341027		м м 06	/	D 10 30			18	Y							
City	State	Zip Code					SA11A								
Austin	TX	78734	A	mount	of	Each F	Receipt	this P	eriod						
FEC ID number of contributing federal political committee.	C		350.00												
Name of Employer (for Individual)	Occ	upation (for Individual)	In-	Memo Item In-kind - Compliance Services											
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1557.50	]												
Full Name of Individual (Last, First, Mid	dle Initial) or Full O	rganization Name													
C. RightSide Compliance Mailing Address PO Box 341027				Date of Receipt											
City	State	Zip Code		Trans	act	ion ID :	: SA11A	1.4194	4						
Austin	ТХ	78734	Α	mount	of	Each F	Receipt	this P	eriod						
FEC ID number of contributing federal political committee.	C					y .	, , , , , , , , , , , , , , , , , , ,		112.5	0					
Name of Employer (for Individual)	Occi	upation (for Individual)	Memo Item In-kind - Compliance Services												
	Aggregate	Year-to-Date ▼													
Other (specify)		1670.00	]												
SUBTOTAL of Receipts This Page (option	nal)								497.5	0					
TOTAL This Period (last page this line nu	mber only)					-									

Form/Schedule: SA11AI Transaction ID : SA11AI.4192

Entry is for inkind contribution made to resolve debt and bring balances due as reported on Schedule D to zero for the purposes of termination.

Form/Schedule: SA11AI Transaction ID: SA11AI.4193

Entry is for inkind contribution made to resolve debt and bring balances due as reported on Schedule D to zero for the purposes of termination.

Form/Schedule: SA11AI Transaction ID : SA11AI.4194

Entry is for inkind contribution made to resolve debt and bring balances due as reported on Schedule D to zero for the purposes of termination.

SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

Use separate schedule(s) for each category of the Detailed Summary Page FOR LINE NUMBER:

(check only one)

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46

				etailed Summary Page	×	11a 13		11b		11c 15	12	17						
	tion copied from such Reports and a nercial purposes, other than using th					or the		pose		oliciting	contribu	tions						
	F COMMITTEE (In Full) PRIORITIES																	
	e of Individual (Last, First, Middle Ir de Compliance	nitial) or Full O	rgan	ization Name	[	Date of	Re	eceipt										
Mailing A	ddress PO Box 341027					M M / D D / Y Y Y Y 06 30 2018												
City Austin		State TX		Zip Code 78734		Transaction ID : SA11AI.4195 Amount of Each Receipt this Period												
	number of contributing olitical committee.	С			45.00													
Name of	Employer (for Individual)	Оссі	upati	on (for Individual)	Memo Item In-kind - Compliance Services													
	For: mary General ner (specify) <b>v</b>	Aggregate	Year	-to-Date ▼ 1715.00														
	e of Individual (Last, First, Middle Ir i <b>de Compliance</b>	nitial) or Full O	rgan	ization Name	Date of Receipt													
	Mailing Address PO Box 341027							06 / D D / Y Y Y Y 06 30 2018										
City Austin		State TX		Zip Code 78734						A11AL	<b>196</b> is Period							
	number of contributing olitical committee.	С					7			337.	50							
Name of	Employer (for Individual)	Осси	Memo Item In-kind - Compliance Services															
	<sup>E</sup> or: mary General ner (specify) <b>▼</b>	Aggregate																
	e of Individual (Last, First, Middle Ir Side Compliance	nitial) or Full O	rgan	ization Name		Date of	Re	eceipt										
	ddress PO Box 341027					<sup>M</sup> 06			30 D		ү ү 2018	Y						
City Austin		State TX		Zip Code 78734	-					SA11AL	4197 is Period							
	number of contributing olitical committee.	С						y		,	22.	50						
	Employer (for Individual)	Осси	upatio	on (for Individual)	In			o Iten mplia		Service	6							
	For: mary General ner (specify)	Aggregate																
SUBTOTAL	of Receipts This Page (optional)			••••••	.			,			405.	00						
TOTAL Thi	s Period (last page this line number	only)		••••••				-		-								

Form/Schedule: SA11AI Transaction ID : SA11AI.4195

Entry is for inkind contribution made to resolve debt and bring balances due as reported on Schedule D to zero for the purposes of termination.

Form/Schedule: SA11AI Transaction ID: SA11AI.4196

Entry is for inkind contribution made to resolve debt and bring balances due as reported on Schedule D to zero for the purposes of termination.

Form/Schedule: SA11AI Transaction ID : SA11AI.4197

Entry is for inkind contribution made to resolve debt and bring balances due as reported on Schedule D to zero for the purposes of termination.

SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

(check only one)

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46

			13 14 15 16 17											
or for	commercial purposes, other than using the		e to solicit contributions from such committee.											
\ \	ME OF COMMITTEE (In Full) DWA PRIORITIES													
<b>A</b> . R	I Name of Individual (Last, First, Middle Ini ightSide Compliance	Date of Receipt												
Ma Cit	iling Address PO Box 341027	State Zip Code	06 / 30 / 2018 Transaction ID : SA11AI.4198											
	stin	TX 78734	Amount of Each Receipt this Period											
	C ID number of contributing eral political committee.	С												
Na	me of Employer (for Individual)	Occupation (for Individual)	Memo Item In-kind - Compliance Services											
Re	ceipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2165.00												
	I Name of Individual (Last, First, Middle Ini ightSide Compliance	Date of Receipt												
	iling Address PO Box 341027	M M / D D / Y Y Y Y 06 30 2018												
City		State Zip Code	Transaction ID : SA11AI.4199											
Au	stin	TX 78734	Amount of Each Receipt this Period											
	C ID number of contributing eral political committee.	C	175.00											
Na	me of Employer (for Individual)	Occupation (for Individual)	Memo Item In-kind - Compliance Services											
Re	ceipt For:	Aggregate Year-to-Date ▼												
	Primary General Other (specify) ▼	2340.00	]											
<b>c</b> R	I Name of Individual (Last, First, Middle Ini ightSide Compliance	itial) or Full Organization Name	Date of Receipt											
	iling Address PO Box 341027		06 / D D / Y Y Y Y 2018											
City	/ Istin	State Zip Code TX 78734	Transaction ID : SA11AI.4200											
FE	C ID number of contributing eral political committee.	C	Amount of Each Receipt this Period											
Na	me of Employer (for Individual)	Occupation (for Individual)	Memo Item In-kind - Compliance Services											
Re	ceipt For:	Aggregate Year-to-Date ▼												
	Primary General Other (specify)	2835.00	]											
		only)	760.00											

Form/Schedule: SA11AI Transaction ID : SA11AI.4198

Entry is for inkind contribution made to resolve debt and bring balances due as reported on Schedule D to zero for the purposes of termination.

Form/Schedule: SA11AI Transaction ID: SA11AI.4199

Entry is for inkind contribution made to resolve debt and bring balances due as reported on Schedule D to zero for the purposes of termination.

Form/Schedule: SA11AI Transaction ID : SA11AI.4200

Entry is for inkind contribution made to resolve debt and bring balances due as reported on Schedule D to zero for the purposes of termination.

SCHEDULE A	(FEC	Form	3X)
ITEMIZED REC	EIPTS	;	

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

(check only one)

PAGE 22 OF

46

	for each categor Detailed Summa	
		sed by any person for the purpose of soliciting contributions cal committee to solicit contributions from such committee.
NAME OF COMMITTEE (In Full)		
Full Name of Individual (Last, First, Middle         RightSide Compliance         Mailing Address PO Box 341027         City         Austin         FEC ID number of contributing federal political committee.	Initial) or Full Organization Name State TX Zip Code 78734 C	Date of Receipt ID - 2018 Transaction ID : SA11AI.4201 Amount of Each Receipt this Period 1500.00
Name of Employer (for Individual)          Receipt For:         Primary       General         Other (specify)	Occupation (for Individua Aggregate Year-to-Date ▼	al) Memo Item In-kind - Compliance Services
Full Name of Individual (Last, First, Middle         B.       The Gober Group         Mailing Address PO Box 341016         City         Austin         FEC ID number of contributing federal political committee.         Name of Employer (for Individual)         Receipt For:         Primary       General         Other (specify) ▼	Initial) or Full Organization Name          State       Zip Code         TX       78734         C       Occupation (for Individual         Aggregate Year-to-Date ▼	Date of Receipt         Date of Receipt         06       30         2018         Transaction ID : SA11AL4185         Amount of Each Receipt this Period         al)         Memo Item         In-kind - Legal Services
Full Name of Individual (Last, First, Middle         C.         Mailing Address         City         FEC ID number of contributing federal political committee.         Name of Employer (for Individual)         Receipt For:         Primary       General         Other (specify)	Initial) or Full Organization Name          State       Zip Code         C       Occupation (for Individual         Aggregate Year-to-Date	Date of Receipt
SUBTOTAL of Receipts This Page (optional)		4925.00

Form/Schedule: SA11AI Transaction ID : SA11AI.4201

Entry is for inkind contribution made to resolve debt and bring balances due as reported on Schedule D to zero for the purposes of termination.

Form/Schedule: SA11AI Transaction ID: SA11AI.4185

Entry is for inkind contribution made to resolve debt and bring balances due as reported on Schedule D to zero for the purposes of termination.

SC	HEDULE B (FEC Form 3X)							NE NUMBER: PAGE 24 OF 46											
ITE	MIZED DISBURSEMENTS	Use separate schedule(s) for each category of the																	
			Detailed Summary Page 28a											9 30b					
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In-kind - Compliance Services       Candidate Name       Category/ Type       Transaction ID : SB21B.4213 Amount of Each Disbursement this Period         Office Sought:       House       Disbursement For:       350.00         State:       District:       Memo Item         Full Name (Last, First, Middle Initial)       C.       RightSide Compliance         Mailing Address PO Box 341027       Date of Disbursement       Date of Disbursement         City       State       Zip Code         Austin       Tx       78734         Purpose of Disbursement       Disbursement For:       Category/ Type         Office Sought:       House       Disbursement For:         State:       Disbursement For:       Transaction ID : SB21B.4214         Amount of Each Disbursement this Period       Transaction ID : SB21B.4214         Amount of Each Disbursement this Period       Transaction ID : SB21B.4214         Amount of Each Disbursement this Period       Transaction ID : SB21B.4214         Amount of Each Disbursement this Period       Transaction ID : SB21B.4214         Category/ Type       Memo Item         Office Sought:       House       Disbursement For:         State:       Disbursements This Page (optional)				/0/34	_																
Candidate Name       Category/ Type       Amount of Each Disbursement His Period         Office Sought:       House       Disbursement For:       350.00         State:       District:       Other (specify)       Memo Item         Full Name (Last, First, Middle Initial)       Date of Disbursement       Date of Disbursement         C. RightSide Compliance       Date of Disbursement       Date of Disbursement         Mailing Address PO Box 341027       State       Zip Code         City       State       Tx         Austin       TX       78734         Purpose of Disbursement       In-kind - Compliance Services       Category/ Type         Candidate Name       Disbursement For:       Category/ Type       Transaction ID : SB21B.4214         Office Sought:       House       Disbursement For:       Transaction ID : SB21B.4214         Office Sought:       House       Disbursement For:       112.50         Office Sought:       House       Disbursement For:       Memo Item         State:       District:       Memo Item       497.50		In-kind - Compliance Services							ane	action	יי ר		1R /	213							
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Senate   President   State:   District:     Full Name (Last, First, Middle Initial)     C. RightSide Compliance   Mailing Address PO Box 341027     City   Austin   TX   78734      FEC Identification Number   Candidate Name   Office Sought:   House   President   State:   Disbursement For:   President   Office Sought:   House   President   Other (specify)   State:   Disbursement For:   President   Other (specify)   Memo Item   497,50		Office Sought: House Dieburge	ement For		Ty	уре		350.0													
State:       District:       Memo Item         Full Name (Last, First, Middle Initial)       Date of Disbursement         C. RightSide Compliance       Date of Disbursement         Mailing Address PO Box 341027       Defection         City       State       Zip Code         Austin       TX       78734         Purpose of Disbursement       In-kind - Compliance Services       FEC Identification Number         Candidate Name       Disbursement For:       Transaction ID : SB21B.4214         Amount of Each Disbursement this Period       112.50         Office Sought:       House       Disbursement For:         State:       District:       Memo Item         Substrotal of Disbursements This Page (optional)			1	General							_		-	100.00							
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Austin       TX       78734         Purpose of Disbursement In-kind - Compliance Services       Image: Compliance Services       Image: Compliance Services         Candidate Name       Image: Compliance Services       Image: Compliance Services       Image: Compliance Services         Office Sought:       House       Disbursement For:       Senate       Primary       General         Office Sought:       President       Other (specify)       Image: Compliance Services       Image: Compliance Service         State:       District:       Other (specify)       Image: Compliance Services       Image: Compliance Service         SUBTOTAL of Disbursements This Page (optional)		Mailing Address PO Box 341027						06													
Purpose of Disbursement In-kind - Compliance Services       Image: Compliance Services         Candidate Name       Category/ Type         Office Sought:       House Senate President       Disbursement For: President         State:       District:         Subtrottal of Disbursements This Page (optional)								FEC I	dent	ificatic	on	Numbe	r								
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	CHEDULE B (FEC Form 3X)						E NUMBER: PAGE 27 OF 46									
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	NAME OF COMMITTEE (In Full)															
A.	Full Name (Last, First, Middle Initial) RightSide Compliance						Date o	of Dis	sburse	ement						
	Mailing Address PO Box 341027	· · ·							06 / D D / Y Y Y Y 06 2018							
	City Austin	State TX	Zip Code 78734				FEC lo	denti	ficatio	n Nur	nber		_			
	Purpose of Disbursement In-kind - Compliance Services				ī.		C	ansa	action	ID : S	SB21	B.42	215			
	Candidate Name				egory ype	<i>y1</i>	Transaction ID : SB21B.4215 Amount of Each Disbursement this Period									
	Office Sought: House Disburse Senate President	ment For: Primary Other (spec	General						45.00							
	State: District:		- , , ,				Memo Item									
в.	Full Name (Last, First, Middle Initial) 3. RightSide Compliance Mailing Address PO Box 341027							Date of Disbursement 06 / 0 / Y Y Y Y 2018								
	City Austin	State TX	Zip Code 78734				FEC lo	denti	ficatio	n Nur	nber					
	Purpose of Disbursement In-kind - Compliance Services					٦	C Transaction ID : SB21B.4217									
	Candidate Name		Category/ Type				Amount of Each Disbursement this Period									
	Senate	ment For: Primary	General				Memo Item						)			
	State: District:	Other (spec	cify)													
C.	Full Name (Last, First, Middle Initial) RightSide Compliance						Date o	_	sburse	_		V	Y	V		
	Mailing Address PO Box 341027						06		3		Ľ		)18			
	City Austin	State TX	Zip Code 78734				FEC lo	denti	ficatio	n Nur	nber	_	_			
	Purpose of Disbursement In-kind - Compliance Services Candidate Name	- Compliance Services						<b>Transaction ID : SB21B.4218</b> Amount of Each Disbursement this Period								
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$\backslash$	NAME OF COMMITTEE (In Full)													
$ \rangle$	IOWA PRIORITIES													
<u> </u>	Full Name (Last, First, Middle Initial)							( )						
А.	RightSide Compliance								isburse				V	V
	Mailing Address PO Box 341027						06 / D D / Y Y Y Y 2018							
	City Austin	State TX	Zip Code 78734				FEC	ldent	ificatio	n Nu	mber			
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	In-kind - Compliance Services							rans	action	JD ·	SB21	B 43	219	
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_	Full Name (Last, First, Middle Initial)													
В.	RightSide Compliance							-	isburse					
	Mailing Address PO Box 341027						06		D	30	/ Y		018	Ŷ
	City	State TX	Zip Code				FEC	ldent	ificatio	n Nu	mber			
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	In-kind - Compliance Services	d - Compliance Services					Transaction ID : SB21B.4220							
	Candidate Name	andidate Name Category/						Amount of Each Disbursement this Period						
	Office Sought: House Disburse	ment For:		1	ype		175.00						5	
	Senate	Primary	General				Memo Item							
	State: District:	Other (spec	cify)											
_	Full Name (Last, First, Middle Initial)													
C.	RightSide Compliance						Date	of Di	isburse	emen	t			
	Mailing Address PO Box 341027						M 06		3	D 0	/ Y		)18	Y
	City	State	Zip Code					lde at	fiection	n NI	mka			
	Austin	ТХ	78734				C	laent	ificatio	n nu	nder	-	-	
	Purpose of Disbursement In-kind - Compliance Services	rpose of Disbursement -kind - Compliance Services											_	
	Candidate Name						Transaction ID : SB21B.4221 Amount of Each Disbursement this Period							
	Office Sought: House Disburse	ment For:			, , , , , , , , , , , , , , , , , , , ,				_				495.00	D
	Senate	Primary	General				_		7		, <u>,</u> ,			
	State: District:	Other (spec	city) 🔻				Ν	lemo	Item					
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	EMIZED DISBURSEMENTS	for each	category of the Summary Page	<sup>e</sup> 🖌 🔽 21b			22 28b		23 28c	F	26 29		27 30b	
	y information copied from such Reports and State for commercial purposes, other than using the na													
	NAME OF COMMITTEE (In Full)													
A.	Full Name (Last, First, Middle Initial) RightSide Compliance						Date o			em		Y	Y	
	Mailing Address PO Box 341027						06		3	30		2	018	
	Austin	State TX	Zip Code 78734				FEC lo	denti	ificatio	on I	Numbe	ər	_	
	Purpose of Disbursement In-kind - Compliance Services Candidate Name			Cate	tegory/					ariod				
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в.	Full Name (Last, First, Middle Initial) The Gober Group						Date o		sburse			V	Ý	/
	Mailing Address PO Box 341016						06			30			018	
	City Austin	State TX	Zip Code 78734				FEC lo	denti	ificatio	on I	Numbe	ər	_	
	Purpose of Disbursement In-kind - Legal Services Candidate Name			Cata		]					) : SB2		<b>204</b> t this P	oriod
	Office Sought: House Disburse	ment For:		Cate Ty		_	Aniour		Lacii		ISDUIS		500.00	-
	State: District:	Primary Other (spe	General cify)				M	emo	Item					
<u></u> С.	Full Name (Last, First, Middle Initial)						Date o	of Di	sburse	em	ent			
	Mailing Address						MN	/	D	D	1	Y Y	Y	
	City	State	Zip Code				FEC lo	denti	ificatio	on I	Numbe	ər		
	Purpose of Disbursement			<b>—</b>		1	С							
	Candidate Name Category/ Type						Amount of Each Disbursement this Period							
	Office Sought: House Disburse Senate	ement For: Primary	General				L		-				1 40	
	State: District:	Other (spe	cify) ▼				M	emo	Item					
s	UBTOTAL of Disbursements This Page (optional).					•			- <b>J</b>				2000.0	0
Т	OTAL This Period (last page this line number only	/)			)	•	Γ.		,		. ,		4835.0	D

SCHEDULE D (FEC Form 3X) DEBTS AND OBLIGATIONS Excluding Loans			(Use separate schedule(s) for each numbered line)	PAGE30OF46FOR LINE NUMBER: (check only one)9X10
NAME OF COMMITTEE (In Full) IOWA PRIORITIES				
A. Full Name (Last, First, Middle Initial) of Debto RightSide Compliance	r or Creditor		Nature of D Compliance	ebt (Purpose): e Services
Mailing Address PO Box 341027				
City Austin	State TX	Zip Code 78734		
Outstanding Balance Beginning This Period 87.50			Transacti	on ID : SD10.4158
Amount Incurred This Period 0.00	Pay	ment This Period 87.5	50	ng Balance at Close of This Period
B. Full Name (Last, First, Middle Initial) of Debtor RightSide Compliance	or Creditor		Nature of D Compliance	ebt (Purpose): e Services
Mailing Address PO Box 341027				
City Austin	State TX	Zip Code 78734		
Outstanding Balance Beginning This Period 280.00			Transact	ion ID : SD10.4162
Amount Incurred This Period	Pay	ment This Period		ng Balance at Close of This Period 0.00
C. Full Name (Last, First, Middle Initial) of Debto RightSide Compliance	r or Creditor		Nature of D Complianc	ebt (Purpose): e Services
Mailing Address PO Box 341027				
City Austin	State TX	Zip Code 78734		
Outstanding Balance Beginning This Period 52.50			Transact	ion ID : SD10.4161
Amount Incurred This Period	Pay	ment This Period 52.5		ng Balance at Close of This Period
1) SUBTOTALS This Period This Page (optional)				0.00
2) TOTALS This Period (last page this line number	only)		··· •	<u>-</u>
3) TOTAL OUTSTANDING LOANS from Schedule	C (last page or	nly)		
4) ADD 2) and 3) and carry forward to appropriate	line of Summa	ry Page (last page or	ıly) ►	

## :97 A = G79 @ G5 B9CIG H9LH F9 @ 5 H98 HC 5 F9DCFH 2G7 < 98 I @ CF + H9A = N5 H= CB

Form/Schedule: SD10 Transaction ID : SD10.4158

This debt is resolved through an inkind contribution.

Form/Schedule: SD10 Transaction ID: SD10.4162

This debt is resolved through an inkind contribution.

Form/Schedule: SD10 Transaction ID : SD10.4161

This debt is resolved through an inkind contribution.

SCHEDULE D (FEC Form 3X) DEBTS AND OBLIGATIONS Excluding Loans	BTS AND OBLIGATIONS		Use separate schedule(s) for each umbered line)	PAGE 33 OF 46 FOR LINE NUMBER: (check only one) 9 10
NAME OF COMMITTEE (In Full) IOWA PRIORITIES				
A. Full Name (Last, First, Middle Initial) of Debte RightSide Compliance	or or Creditor		Nature of D Complianc	ebt (Purpose): e Services
Mailing Address PO Box 341027			_	
City Austin	State TX	Zip Code 78734	_	
Outstanding Balance Beginning This Period				on ID : SD10.4164
Amount Incurred This Period 0.00		ment This Period	Outstandi	ng Balance at Close of This Period 0.00
B. Full Name (Last, First, Middle Initial) of Debto RightSide Compliance	r or Creditor		Nature of D Compliance	ebt (Purpose): e Services
Mailing Address PO Box 341027	State	Zip Code		
Austin	TX	78734		
			Turner	tion ID : SD10.4166
Outstanding Balance Beginning This Period 315.00			Transact	
	Pa	ment This Period 315.00		ng Balance at Close of This Period
315.00 Amount Incurred This Period			Outstandi	ng Balance at Close of This Period
Amount Incurred This Period 0.00 C. Full Name (Last, First, Middle Initial) of Debt			Outstandi	ng Balance at Close of This Period
C. Full Name (Last, First, Middle Initial) of Debt RightSide Compliance			Outstandi	ng Balance at Close of This Period
315.00         Amount Incurred This Period         0.00         C. Full Name (Last, First, Middle Initial) of Debte         RightSide Compliance         Mailing Address         PO Box 341027         City         Austin         Outstanding Balance Beginning This Period	or or Creditor	315.00	Outstandii	ng Balance at Close of This Period
315.00         Amount Incurred This Period         0.00         C. Full Name (Last, First, Middle Initial) of Debte         RightSide Compliance         Mailing Address         PO Box 341027         City         Austin	or or Creditor	315.00 Zip Code 78734	Outstandii Nature of D Complianc	ebt (Purpose): e Services
315.00         Amount Incurred This Period         0.00         C. Full Name (Last, First, Middle Initial) of Debter RightSide Compliance         Mailing Address         PO Box 341027         City         Austin         Outstanding Balance Beginning This Period         140.00	or or Creditor	315.00	Outstandii Nature of D Complianc	ng Balance at Close of This Period 0.00 Pebt (Purpose): e Services
315.00         Amount Incurred This Period         0.00         C. Full Name (Last, First, Middle Initial) of Debter RightSide Compliance         Mailing Address         PO Box 341027         City         Austin         Outstanding Balance Beginning This Period         140.00         Amount Incurred This Period	or or Creditor	315.00 Zip Code 78734	Outstandii Nature of D Complianc	ng Balance at Close of This Period 0.00 ebt (Purpose): e Services tion ID : SD10.4168
315.00         Amount Incurred This Period         0.00         C. Full Name (Last, First, Middle Initial) of Debt         RightSide Compliance         Mailing Address         PO Box 341027         City         Austin         Outstanding Balance Beginning This Period         140.00         Amount Incurred This Period         0.00	or or Creditor	315.00 Zip Code 78734	Outstandii Nature of D Complianc	ng Balance at Close of This Period 0.00 ebt (Purpose): e Services tion ID : SD10.4168 ng Balance at Close of This Period 0.00
315.00         Amount Incurred This Period         0.00         C. Full Name (Last, First, Middle Initial) of Debter         RightSide Compliance         Mailing Address         PO Box 341027         City         Austin         Outstanding Balance Beginning This Period         140.00         Amount Incurred This Period         0.00	or or Creditor	315.00 Zip Code 78734	Outstandi	ng Balance at Close of This Period 0.00 ebt (Purpose): e Services tion ID : SD10.4168 ng Balance at Close of This Period 0.00

## :97 A = G79 @ G5 B9CIG H9LH F9 @ 5 H98 HC 5 F9DCFH 2G7 < 98 I @ CF + H9A = N5 H= CB

Form/Schedule: SD10 Transaction ID : SD10.4164

This debt is resolved through an inkind contribution.

Form/Schedule: SD10 Transaction ID: SD10.4166

This debt is resolved through an inkind contribution.

Form/Schedule: SD10 Transaction ID : SD10.4168

This debt is resolved through an inkind contribution.

SCHEDULE D (FEC Form 3X)		1		PAGE 36 OF 46			
			(Use separate schedule(s)	FOR LINE NUMBER:			
DEBTS AND OBLIGATIONS				each (check only one) 9			
Excluding Loans	numbered line)	<b>X</b> 10					
NAME OF COMMITTEE (In Full)							
A. Full Name (Last, First, Middle Initial) of Debto	r or Creditor		Naturo of D	ebt (Purpose):			
			Compliance	e Services			
RightSide Compliance							
Mailing Address PO Box 341027							
City	State	Zip Code					
Austin	TX	78734					
Outstanding Balance Beginning This Period			Transacti	on ID : SD10.4169			
35.00							
Amount Incurred This Period	Pav	ment This Period	Outstandir	ng Balance at Close of This Period			
	,						
0.00		35.0	00	0.00			
B. Full Name (Last, First, Middle Initial) of Debtor	or Creditor			ebt (Purpose):			
RightSide Compliance			Compliance	e Services			
Mailing Address PO Box 341027							
City	State	Zip Code					
Austin	ТХ	78734					
Outstanding Balance Beginning This Period	·		Transact	ion ID : SD10.4171			
350.00							
Amount Incurred This Period	Pay	ment This Period	Outstandir	ng Balance at Close of This Period			
0.00		350.0	00	0.00			
C. Full Name (Lest First Middle Initial) of Debte	n on Oreditor		Nature of D				
C. Full Name (Last, First, Middle Initial) of Debto RightSide Compliance	or or Creditor		Complianc	ebt (Purpose): e Services			
Mailing Address PO Box 341027							
City	State	Zip Code					
Austin	TX	78734					
Outstanding Balance Beginning This Period			Transact	ion ID : SD10.4172			
			Tansact	101110 : 3010.4172			
112.50							
Amount Incurred This Period	Pay	ment This Period	Outstandir	ng Balance at Close of This Period			
0.00		112.5	50	0.00			
7 7 7							
1) SUBTOTALS This Deviad This Dags (antional)				0.00			
1) SUBTOTALS This Period This Page (optional)							
2) TOTALS This Period (last page this line number	only)						
3) TOTAL OUTSTANDING LOANS from Schedule	C (last page o	nly)					
4) ADD 2) and 3) and carry forward to appropriate	line of Summa	ary Page (last page on	ıly) ►				

Image# 201807129115391522

## :97 A = G79 @ G5 B9CIG H9LH F9 @ 5 H98 HC 5 F9DCFH 2G7 < 98 I @ CF + H9A = N5 H= CB

Form/Schedule: SD10 Transaction ID : SD10.4169

This debt is resolved through an inkind contribution.

Form/Schedule: SD10 Transaction ID: SD10.4171

This debt is resolved through an inkind contribution.

Form/Schedule: SD10 Transaction ID : SD10.4172

This debt is resolved through an inkind contribution.

		I		
HEDULE D (FEC Form 3X)			(Use separate	PAGE 39 OF 46
EBTS AND OBLIGATIONS	BTS AND OBLIGATIONS		schedule(s)	FOR LINE NUMBER:
cluding Loans	ding Loans		for each numbered line)	(check only one) 9
ME OF COMMITTEE (In Full)				<b>~</b> 10
OWA PRIORITIES				
A. Full Name (Last, First, Middle Initial) of Debto	or or Creditor		Nature of D Complianc	ebt (Purpose): e Services
RightSide Compliance			Compliant	
Mailing Address PO Box 341027				
City	State	Zip Code		
Austin				
Outstanding Balance Beginning This Period		1	Transacti	on ID : SD10.4174
45.00				
	_			
Amount Incurred This Period	Pay	ment This Period	Outstandi	ng Balance at Close of This Period
0.00		45.0	00	0.00
, , , ,		,		, ,
B. Full Name (Last, First, Middle Initial) of Debtor	r or Creditor		Nature of D Compliance	ebt (Purpose):
RightSide Compliance			Compliance	e dervices
Mailing Address PO Box 341027				
City	State	Zip Code		
Austin	ТХ	78734		
Outstanding Balance Beginning This Period			Transact	tion ID : SD10.4175
337.50				
Amount Incurred This Period	Pay	ment This Period	Outstandi	ng Balance at Close of This Period
0.00		337.5	50	0.00
C. Full Name (Last, First, Middle Initial) of Debto	or or Creditor		Nature of D	ebt (Purpose):
RightSide Compliance			Complianc	,
Mailing Address PO Box 341027				
City	State	Zip Code		
Austin	TX	78734		
Outstanding Balance Beginning This Period			Transact	tion ID : SD10.4176
22.50				
Amount Incurred This Period	Pay	ment This Period	Outstandi	ng Balance at Close of This Period
0.00		22.8	50	0.00
) SUBTOTALS This Period This Page (optional)				0.00
) TOTALS This Period (last page this line number	only)		►	7 7
TOTAL OUTSTANDING LOANS from Onkedula	C (last page -	nly)		
) TOTAL OUTSTANDING LOANS from Schedule	o (last page 0	· · · y / · · · · · · · · · · · · · · ·		
) ADD 2) and 3) and carry forward to appropriate	line of Summa	ary Page (last page or	nly) ►	

## :97 A = G79 @ G5 B9CIG H9LH F9 @ 5 H98 HC 5 F9DCFH 2G7 < 98 I @ CF + H9A = N5 H= CB

Form/Schedule: SD10 Transaction ID : SD10.4174

This debt is resolved through an inkind contribution.

Form/Schedule: SD10 Transaction ID: SD10.4175

This debt is resolved through an inkind contribution.

Form/Schedule: SD10 Transaction ID : SD10.4176

This debt is resolved through an inkind contribution.

SCHEDULE D (FEC Form 3X) DEBTS AND OBLIGATIONS Excluding Loans			(Use separate schedule(s) for each numbered line)	PAGE42OF46FOR LINE NUMBER: (check only one)9X10
NAME OF COMMITTEE (In Full) IOWA PRIORITIES				
A. Full Name (Last, First, Middle Initial) of Deb RightSide Compliance	tor or Creditor		Nature of D Compliance	ebt (Purpose): e Services
Mailing Address PO Box 341027				
City Austin	State TX	Zip Code 78734		
Outstanding Balance Beginning This Period 90.00			Transacti	on ID : SD10.4178
Amount Incurred This Period	Pay	yment This Period 90.00		ng Balance at Close of This Period 0.00
B. Full Name (Last, First, Middle Initial) of Debto RightSide Compliance	or or Creditor		Nature of D Compliance	ebt (Purpose): e Services
Mailing Address PO Box 341027 City Austin	State TX	Zip Code 78734		
		10104		ion ID : SD10.4179
Outstanding Balance Beginning This Period 175.00			Transact	101110 . 3010.4179
	Pay	/ment This Period 175.00	Outstandi	ng Balance at Close of This Period
175.00 Amount Incurred This Period			Outstandii	ng Balance at Close of This Period 0.00 ebt (Purpose):
175.00 Amount Incurred This Period 0.00 C. Full Name (Last, First, Middle Initial) of Deb	tor or Creditor	175.00	Outstandii	ng Balance at Close of This Period 0.00 ebt (Purpose):
C. Full Name (Last, First, Middle Initial) of Deb RightSide Compliance			Outstandii	ng Balance at Close of This Period 0.00 ebt (Purpose):
C. Full Name (Last, First, Middle Initial) of Deb RightSide Compliance Mailing Address PO Box 341027 City	tor or Creditor	175.00 Zip Code	Outstandii	ng Balance at Close of This Period 0.00 ebt (Purpose):
175.00         Amount Incurred This Period         0.00         C. Full Name (Last, First, Middle Initial) of Deb         RightSide Compliance         Mailing Address         PO Box 341027         City         Austin         Outstanding Balance Beginning This Period	tor or Creditor State TX	175.00 Zip Code	Outstandii D Nature of D Complianc Transact Outstandii	ng Balance at Close of This Period 0.00 ebt (Purpose): e Services
175.00         Amount Incurred This Period         0.00         C. Full Name (Last, First, Middle Initial) of Deb         RightSide Compliance         Mailing Address         PO Box 341027         City         Austin         Outstanding Balance Beginning This Period         0.00         Amount Incurred This Period	tor or Creditor State TX Pay	175.00 Zip Code 78734 /ment This Period 495.00	Outstandin Nature of D Compliance Transact	ng Balance at Close of This Period 0.00 ebt (Purpose): e Services ion ID : SD10.4182 ng Balance at Close of This Period
175.00         Amount Incurred This Period         0.00         C. Full Name (Last, First, Middle Initial) of Deb         RightSide Compliance         Mailing Address         PO Box 341027         City         Austin         Outstanding Balance Beginning This Period         0.00         Amount Incurred This Period         495.00	tor or Creditor State TX Pay	Zip Code 78734 /ment This Period 495.00	Outstandii D Nature of D Complianc Transact	ng Balance at Close of This Period 0.00 ebt (Purpose): e Services ion ID : SD10.4182 ng Balance at Close of This Period 0.00
175.00         Amount Incurred This Period         0.00         C. Full Name (Last, First, Middle Initial) of Deb         RightSide Compliance         Mailing Address         PO Box 341027         City         Austin         Outstanding Balance Beginning This Period         0.00         Amount Incurred This Period         495.00	tor or Creditor          State         TX         Pay         er only)	Zip Code 78734 /ment This Period 495.00	Outstandin Duistandin Nature of D Compliance Transact Outstandin Duistandin	ng Balance at Close of This Period 0.00 ebt (Purpose): e Services ion ID : SD10.4182 ng Balance at Close of This Period 0.00

## :97 A = G79 @ G5 B9CIG H9LH F9 @ 5 H98 HC 5 F9DCFH 2G7 < 98 I @ CF + H9A = N5 H= CB

Form/Schedule: SD10 Transaction ID : SD10.4178

This debt is resolved through an inkind contribution.

Form/Schedule: SD10 Transaction ID: SD10.4179

This debt is resolved through an inkind contribution.

Form/Schedule: SD10 Transaction ID : SD10.4182

This debt is resolved through an inkind contribution.

SCHEDULE D (FEC Form 3X)				PAGE 45 OF 46
			(Use separate schedule(s)	FOR LINE NUMBER:
DEBTS AND OBLIGATIONS				(check only one) 9
Excluding Loans	numbered line)	<b>X</b> 10		
NAME OF COMMITTEE (In Full) IOWA PRIORITIES				
A. Full Name (Last, First, Middle Initial) of Debtor	or Creditor			ebt (Purpose):
RightSide Compliance			Compliance	e Services
Mailing Address PO Box 341027				
City	State	Zip Code		
Austin	ТХ	78734		
Outstanding Balance Beginning This Period			Transacti	on ID : SD10.4183
0.00				
	-			
Amount Incurred This Period	Pay	ment This Period	Outstandii	ng Balance at Close of This Period
2000.00		1500.0	00	500.00
B. Full Name (Last, First, Middle Initial) of Debtor	or Creditor		Nature of D	ebt (Purpose):
The Gober Group			Legal Servi	ices
Mailing Address PO Box 341016				
City	State	Zip Code		
Austin	TX	78734		
Outstanding Balance Beginning This Period			Transact	tion ID : SD10.4184
0.00				
Amount Incurred This Period	Pay	ment This Period	Outstandir	ng Balance at Close of This Period
500.00		500.0	00	0.00
C. Full Name (Last, First, Middle Initial) of Debtor	or Creditor		Nature of D	ebt (Purpose):
Mailing Address				
City	State	Zip Code		
Outstanding Balance Beginning This Period				
Amount Incurred This Period	Pav	ment This Period	Outstandir	ng Balance at Close of This Period
	,			
				7 7 7
1) SUBTOTALS This Period This Page (optional)				500.00
				500.00
2) TOTALS This Period (last page this line number	oriiy)			
3) TOTAL OUTSTANDING LOANS from Schedule (	C (last page or	ıly)		, , , , , , , , , , , , , , , , , , , ,
4) ADD 2) and 3) and carry forward to appropriate	line of Summa	ry Page (last page or	ıly) ►	500.00

Image# 201807129115391531

Form/Schedule: SD10 Transaction ID : SD10.4183

This debt is partially resolved through an inkind contribution.

Form/Schedule: SD10 Transaction ID: SD10.4184

This debt is resolved through an inkind contribution.