

**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

LET AMERICA DREAM AGAIN ACTION NETWORK (Dream PAC)

ADDRESS (number and street)

PO BOX 341027

Check if different
than previously
reported. (ACC)

AUSTIN

TX

78734

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00631440

3. IS THIS
REPORTNEW
(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

M M / D D / Y Y Y Y Y Y
04 01 2018

through

M M / D D / Y Y Y Y Y Y
06 30 2018

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

KEUSSEYAN, TONY, , ,

Type or Print Name of Treasurer

Signature of Treasurer

KEUSSEYAN, TONY, , ,

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
07 12 2018

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

Office
Use
Only**FEC FORM 3X**
Rev. 05/2016

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

LET AMERICA DREAM AGAIN ACTION NETWORK (Dream PAC)

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y
04 / 01 / 2018 To: M M / D D / Y Y Y Y Y Y
06 / 30 / 2018

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y Y Y 2018		- 3.00
(b) Cash on Hand at Beginning of Reporting Period.....	0.00	
(c) Total Receipts (from Line 19)	5472.50	5495.50
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	5472.50	5492.50
7. Total Disbursements (from Line 31).....	5472.50	5492.50
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	0.00	0.00
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	



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

For further information contact:

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

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

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

LET AMERICA DREAM AGAIN ACTION NETWORK (Dream PAC)

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	1		2	0	1	8

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	1	8

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).....	5472.50	5472.50
(ii) Unitemized	0.00	10.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	5472.50	5482.50
(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)	5472.50	5482.50
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	13.00
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))	5472.50	5495.50
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	5472.50	5495.50

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
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	5472.50	5492.50
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	5472.50	5492.50
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 (52 U.S.C. § 30116(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 (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	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)) ..	5472.50	5492.50
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	5472.50	5492.50

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

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)	5472.50	5482.50
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	5472.50	5482.50
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	5472.50	5492.50
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	13.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)▶	5472.50	5479.50

: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +H9A-N5HCB
.

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.

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 32

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LET AMERICA DREAM AGAIN ACTION NETWORK (Dream PAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. RightSide Compliance

Mailing Address PO Box 341027

City
AustinState
TXZip Code
78734FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

90.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 30 / 2018

Transaction ID : SA11AI.4159

Amount of Each Receipt this Period

90.00

☐ Memo Item

In-kind - Compliance Services

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. RightSide Compliance

Mailing Address PO Box 341027

City
AustinState
TXZip Code
78734FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

157.50

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 30 / 2018

Transaction ID : SA11AI.4160

Amount of Each Receipt this Period

67.50

☐ Memo Item

In-kind - Compliance Services

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. RightSide Compliance

Mailing Address PO Box 341027

City
AustinState
TXZip Code
78734FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

607.50

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 30 / 2018

Transaction ID : SA11AI.4161

Amount of Each Receipt this Period

450.00

☐ Memo Item

In-kind - Compliance Services

SUBTOTAL of Receipts This Page (optional)..... ►

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

607.50

: 97 `A-G79 @G B9CI G`H9LH`F9 @G H98 `HC`5 `F9DCFHŽG7 <98I @G `CF`+H9A-N5HCB
.

Form/Schedule: SA11AI

Transaction ID : SA11AI.4159

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.4160

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.

: 97 `A-G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A-N5HCB
.

Form/Schedule: SA11AI

Transaction ID : SA11AI.4161

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:

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 10 OF 32

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LET AMERICA DREAM AGAIN ACTION NETWORK (Dream PAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. RightSide Compliance

Mailing Address PO Box 341027

City
AustinState
TXZip Code
78734FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1192.50

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 30 / 2018

Transaction ID : SA11AI.4162

Amount of Each Receipt this Period

585.00

☐ Memo Item

In-kind - Compliance Services

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. RightSide Compliance

Mailing Address PO Box 341027

City
AustinState
TXZip Code
78734FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1385.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 30 / 2018

Transaction ID : SA11AI.4163

Amount of Each Receipt this Period

192.50

☐ Memo Item

In-kind - Compliance Services

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. RightSide Compliance

Mailing Address PO Box 341027

City
AustinState
TXZip Code
78734FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2172.50

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 30 / 2018

Transaction ID : SA11AI.4164

Amount of Each Receipt this Period

787.50

☐ Memo Item

In-kind - Compliance Services

SUBTOTAL of Receipts This Page (optional)..... ►

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

1565.00

: 97 `A-G79 @G B9CI G`H9LH`F9 @G H98 `HC`5 `F9DCFHŽG7 <98I @G `CF`+H9A-N5HCB
.

Form/Schedule: SA11AI
Transaction ID : SA11AI.4162

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.4163

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.

: 97 `A-G79 @G B9CI G`H9LH`F9 @G H98 `HC`5 `F9DCFHŽG7 <98I @G `CF`+H9A-N5HCB
.

Form/Schedule: SA11AI
Transaction ID : SA11AI.4164

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:
Transaction ID:

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LET AMERICA DREAM AGAIN ACTION NETWORK (Dream PAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. RightSide Compliance

Mailing Address PO Box 341027

City
Austin

State
TX

Zip Code
78734

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4172.50

Date of Receipt

06 / 30 / 2018

Transaction ID : SA11AI.4165

Amount of Each Receipt this Period

2000.00

☐ Memo Item

In-kind - Compliance Services

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. The Gober Group

Mailing Address PO Box 341016

City
Austin

State
TX

Zip Code
78734

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

187.50

Date of Receipt

06 / 30 / 2018

Transaction ID : SA11AI.4154

Amount of Each Receipt this Period

187.50

☐ Memo Item

In-kind - Legal Services

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. The Gober Group

Mailing Address PO Box 341016

City
Austin

State
TX

Zip Code
78734

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

06 / 30 / 2018

Transaction ID : SA11AI.4157

Amount of Each Receipt this Period

112.50

☐ Memo Item

In-kind - Legal Services

SUBTOTAL of Receipts This Page (optional)..... ►

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

2300.00

: 97 `A-G79 @G B9CI G`H9LH`F9 @G H98 `HC`5 `F9DCFHŽG7 <98I @G `CF`+H9A-N5HCB
.

Form/Schedule: SA11AI
Transaction ID : SA11AI.4165

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.4154

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.

: 97 `A=G79 @G B9CI G`H9LH`F9 @G H98 `HC`5 `F9DCFHŽG7 <98I @G `CF`+H9A=N5HCB
.

Form/Schedule: SA11AI
Transaction ID : SA11AI.4157

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:
Transaction ID:

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LET AMERICA DREAM AGAIN ACTION NETWORK (Dream PAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. The Gober Group

Mailing Address PO Box 341016

City
Austin

State
TX

Zip Code
78734

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 30 / 2018

Transaction ID : SA11AI.4158

Amount of Each Receipt this Period

1000.00

☐ Memo Item

In-kind - Legal Services

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

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

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

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

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

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

1000.00

5472.50

: 97 `A-G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A-N5HCB
.

Form/Schedule: SA11AI

Transaction ID : SA11AI.4158

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:

Transaction ID:

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 18 OF 32

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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)

LET AMERICA DREAM AGAIN ACTION NETWORK (Dream PAC)

Full Name (Last, First, Middle Initial)

A. RightSide Compliance

Mailing Address PO Box 341027

City
AustinState
TXZip Code
78734Purpose of Disbursement
In-kind - Compliance Services

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M		D	D		Y	Y	Y	Y	Y	Y
0	6		3	0		2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21B.4146

Amount of Each Disbursement this Period

 90.00☐ Memo Item

Full Name (Last, First, Middle Initial)

B. RightSide Compliance

Mailing Address PO Box 341027

City
AustinState
TXZip Code
78734Purpose of Disbursement
In-kind - Compliance Services

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M		D	D		Y	Y	Y	Y	Y	Y
0	6		3	0		2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21B.4147

Amount of Each Disbursement this Period

 67.50☐ Memo Item

Full Name (Last, First, Middle Initial)

C. RightSide Compliance

Mailing Address PO Box 341027

City
AustinState
TXZip Code
78734Purpose of Disbursement
In-kind - Compliance Services

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M		D	D		Y	Y	Y	Y	Y	Y
0	6		3	0		2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21B.4148

Amount of Each Disbursement this Period

 450.00☐ Memo Item

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

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

 607.50

: 97 `A-G79 @C B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A-N5HCB
.

Form/Schedule: SB21B
Transaction ID : SB21B.4146

This debt is resolved through an inkind contribution.

Form/Schedule: SB21B
Transaction ID: SB21B.4147

This debt is resolved through an inkind contribution.

: 97 `A=G79 @G B9CI G`H9LH`F9 @G H98 `HC`5 `F9DCFHŽG7 <98I @G `CF`+H9A=N5HCB
.

Form/Schedule: SB21B

Transaction ID : SB21B.4148

This debt is resolved through an inkind contribution.

Form/Schedule:

Transaction ID:

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 21 OF 32

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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)

LET AMERICA DREAM AGAIN ACTION NETWORK (Dream PAC)

Full Name (Last, First, Middle Initial)

A. RightSide Compliance

Mailing Address PO Box 341027

City
AustinState
TXZip Code
78734Purpose of Disbursement
In-kind - Compliance Services

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		30		2018

FEC Identification Number

C

Transaction ID : SB21B.4149

Amount of Each Disbursement this Period

 585.00☐ Memo Item

Full Name (Last, First, Middle Initial)

B. RightSide Compliance

Mailing Address PO Box 341027

City
AustinState
TXZip Code
78734Purpose of Disbursement
In-kind - Compliance Services

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		30		2018

FEC Identification Number

C

Transaction ID : SB21B.4150

Amount of Each Disbursement this Period

 192.50☐ Memo Item

Full Name (Last, First, Middle Initial)

C. RightSide Compliance

Mailing Address PO Box 341027

City
AustinState
TXZip Code
78734Purpose of Disbursement
In-kind - Compliance Services

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		30		2018

FEC Identification Number

C

Transaction ID : SB21B.4151

Amount of Each Disbursement this Period

 787.50☐ Memo Item

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

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

 1565.00

: 97 `A-G79 @C B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A-N5HCB
.

Form/Schedule: SB21B

Transaction ID : SB21B.4149

This debt is resolved through an inkind contribution.

Form/Schedule: SB21B

Transaction ID: SB21B.4150

This debt is resolved through an inkind contribution.

: 97 `A=G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A=N5HCB
.

Form/Schedule: SB21B
Transaction ID : SB21B.4151

This debt is resolved through an inkind contribution.

Form/Schedule:
Transaction ID:

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 24 OF 32

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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)

LET AMERICA DREAM AGAIN ACTION NETWORK (Dream PAC)

Full Name (Last, First, Middle Initial)

A. RightSide Compliance

Mailing Address PO Box 341027

City
AustinState
TXZip Code
78734Purpose of Disbursement
In-kind - Compliance Services

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		30		2018

FEC Identification Number

C

Transaction ID : SB21B.4152

Amount of Each Disbursement this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. The Gober Group

Mailing Address PO Box 341016

City
AustinState
TXZip Code
78734Purpose of Disbursement
In-kind - Legal Services

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		30		2018

FEC Identification Number

C

Transaction ID : SB21B.4144

Amount of Each Disbursement this Period

187.50

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. The Gober Group

Mailing Address PO Box 341016

City
AustinState
TXZip Code
78734Purpose of Disbursement
In-kind - Legal Services

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		30		2018

FEC Identification Number

C

Transaction ID : SB21B.4145

Amount of Each Disbursement this Period

112.50

☐ Memo Item

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

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

2300.00

: 97 `A-G79 @C B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFHŽG7 <98I @ `CF`+H9A-N5HCB
.

Form/Schedule: SB21B

Transaction ID : SB21B.4152

This debt is resolved through an inkind contribution.

Form/Schedule: SB21B

Transaction ID: SB21B.4144

This debt is resolved through an inkind contribution.

: 97 `A=G79 @G B9CI G`H9LH`F9 @G H98 `HC`5 `F9DCFHŽG7 <98I @G `CF`+H9A=N5HCB
.

Form/Schedule: SB21B

Transaction ID : SB21B.4145

This debt is resolved through an inkind contribution.

Form/Schedule:

Transaction ID:

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 27 OF 32

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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)

LET AMERICA DREAM AGAIN ACTION NETWORK (Dream PAC)

Full Name (Last, First, Middle Initial)

A. The Gober Group

Mailing Address PO Box 341016

City
AustinState
TXZip Code
78734Purpose of Disbursement
In-kind - Legal Services

Candidate Name

 Office Sought: ☐ House
☐ Senate
☐ President

 Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
06		30		2018

FEC Identification Number

C**Transaction ID : SB21B.4156**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

 Office Sought: ☐ House
☐ Senate
☐ President

 Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

 Office Sought: ☐ House
☐ Senate
☐ President

 Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

1000.00

5472.50

: 97 `A=G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A=N5HCB
.

Form/Schedule: SB21B
Transaction ID : SB21B.4156

This debt is resolved through an inkind contribution.

Form/Schedule:
Transaction ID:

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 29 OF 32

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

LET AMERICA DREAM AGAIN ACTION NETWORK (Dream PAC)

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

RightSide ComplianceNature of Debt (Purpose):
Compliance Services

Mailing Address PO Box 341027

City
AustinState
TXZip Code
78734

Outstanding Balance Beginning This Period

90.00

Transaction ID : SD10.4112

Amount Incurred This Period

0.00

Payment This Period

90.00

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

RightSide ComplianceNature of Debt (Purpose):
Compliance Services

Mailing Address PO Box 341027

City
AustinState
TXZip Code
78734

Outstanding Balance Beginning This Period

67.50

Transaction ID : SD10.4114

Amount Incurred This Period

0.00

Payment This Period

67.50

Outstanding Balance at Close of This Period

0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

RightSide ComplianceNature of Debt (Purpose):
Compliance Services

Mailing Address PO Box 341027

City
AustinState
TXZip Code
78734

Outstanding Balance Beginning This Period

450.00

Transaction ID : SD10.4121

Amount Incurred This Period

0.00

Payment This Period

450.00

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 30 OF 32

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

LET AMERICA DREAM AGAIN ACTION NETWORK (Dream PAC)

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

RightSide ComplianceNature of Debt (Purpose):
Compliance Services

Mailing Address PO Box 341027

City
AustinState
TXZip Code
78734

Outstanding Balance Beginning This Period

585.00

Transaction ID : SD10.4131

Amount Incurred This Period

0.00

Payment This Period

585.00

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

RightSide ComplianceNature of Debt (Purpose):
Compliance Services

Mailing Address PO Box 341027

City
AustinState
TXZip Code
78734

Outstanding Balance Beginning This Period

192.50

Transaction ID : SD10.4132

Amount Incurred This Period

0.00

Payment This Period

192.50

Outstanding Balance at Close of This Period

0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

RightSide ComplianceNature of Debt (Purpose):
Compliance Services

Mailing Address PO Box 341027

City
AustinState
TXZip Code
78734

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.4142

Amount Incurred This Period

787.50

Payment This Period

787.50

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 31 OF 32

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

LET AMERICA DREAM AGAIN ACTION NETWORK (Dream PAC)

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

RightSide ComplianceNature of Debt (Purpose):
Compliance Services

Mailing Address PO Box 341027

City
AustinState
TXZip Code
78734

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.4143

Amount Incurred This Period

2000.00

Payment This Period

2000.00

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

The Gober GroupNature of Debt (Purpose):
Legal Services

Mailing Address PO Box 341016

City
AustinState
TXZip Code
78734

Outstanding Balance Beginning This Period

187.50

Transaction ID : SD10.4111

Amount Incurred This Period

0.00

Payment This Period

187.50

Outstanding Balance at Close of This Period

0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

The Gober GroupNature of Debt (Purpose):
Legal Services

Mailing Address PO Box 341016

City
AustinState
TXZip Code
78734

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.4139

Amount Incurred This Period

112.50

Payment This Period

112.50

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 32 OF 32

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

LET AMERICA DREAM AGAIN ACTION NETWORK (Dream PAC)

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

The Gober GroupNature of Debt (Purpose):
Legal Services

Mailing Address PO Box 341016

City
AustinState
TXZip Code
78734

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.4155

Amount Incurred This Period

1000.00

Payment This Period

1000.00

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) **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) ►