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FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

	For Other Than An Auti	norized Committee	Office Use Only
NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼	Example: If typing, type over the lines.	12FE4M5
MEGAPHONE			
ADDRESS (number and street)	PO BOX 341028		
▼ Check if different			
than previously reported. (ACC)	AUSTIN		TX 78734
2. FEC IDENTIFICATION N	UMBER ▼ CIT	YA	STATE ▲ ZIP CODE ▲
C C00569517		S THIS NEW (N) OF	AMENDED (A)
4. TYPE OF REPORT (Choose One)	Report Due On:	20 (M2) May 20 (M	(Non-Election Year Only)
(a) Quarterly Reports:		20 (M3) Jun 20 (M6	(Non-Election Year Only)
April 15 Quarterly Report (0		20 (M4) Jul 20 (M7	
July 15 Quarterly Report (0	(c) 12-Day	Primary (12P)	General (12G) Runoff (12R)
October 15 Quarterly Report (0	Report for the:	Convention (12C)	Special (12S)
January 31 Year-End Report (Floatio	n on	in the State of
July 31 Mid-Year Report (Non-electic Year Only) (MY)	(d) 30-Day	X General (30G)	Runoff (30R) Special (30S)
Termination Report (TER)		n on 11 06	in the State of
5. Covering Period 10		through 11	M / D D / Y Y Y Y Y Y Z Y Z Z 2018
I certify that I have examined the	nis Report and to the best of MCALPIN, LUKE, , ,	my knowledge and belief it is	true, correct and complete.
Type or Print Name of Treasure	Pr		
Signature of Treasurer MCA	ALPIN, LUKE, , ,	[Electronically Filed]	Date 12 / 06 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
NOTE: Submission of false, erron	eous, or incomplete information	n 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

OF RECEIPTS AND DISBURSEMENTS FEC Form 3X (Rev. 05/2016) Page 2 Write or Type Committee Name **MEGAPHONE** 10 18 2018 11 26 2018 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 174810.82 January 1, 2018 (b) Cash on Hand at 127549.50 Beginning of Reporting Period..... 29659.66 364225.33 (c) Total Receipts (from Line 19) (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 539036.15 157209.16 6(a) and 6(c) for Column B)..... 41592.66 423419.65 Total Disbursements (from Line 31)...... 8. Cash on Hand at Close of Reporting Period 115616.50 115616.50 (subtract Line 7 from Line 6(d))..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on 551293.24 Schedule C and/or Schedule D) This committee has qualified as a multicandidate committee. (see FEC FORM 1M) For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

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V	יםו	U	н		п	U	IV	

Report Covering the Period: From:	18 2018 To	11 26 2018		
I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date		
. Contributions (other than loans) From:				
(a) Individuals/Persons Other				
Than Political Committees (i) Itemized (use Schedule A)	29659.66	362909.66		
(i) iterrized (use schedule A)	4 4	, , , , , , , , , , , , ,		
(ii) Unitemized	0.00	0.67		
(iii) TOTAL (add		7 7 7		
Lines 11(a)(i) and (ii)▶	29659.66	362910.33		
	0.00	0.00		
(b) Political Party Committees	0.00	0.00		
(c) Other Political Committees	0.00	0.00		
(such as PACs)(d) Total Contributions (add Lines	4	4		
11(a)(iii), (b), and (c)) (Carry				
Totals to Line 33, page 5)	29659.66	362910.33		
Transfers From Affiliated/Other				
Party Committees	0.00	0.00		
B. All Loans Received	0.00	0.00		
		4 4		
Loan Repayments Received	0.00	0.00		
5. Offsets To Operating Expenditures	4 4	7 7		
(Refunds, Rebates, etc.)				
(Carry Totals to Line 37, page 5)	0.00	1315.00		
6. Refunds of Contributions Made				
to Federal Candidates and Other				
Political Committees	0.00	0.00		
Other Federal Receipts				
(Dividends, Interest, etc.)	0.00	0.00		
Transfers from Non-Federal and Levin Funds (a) Non-Federal Account				
(from Schedule H3)	0.00	0.00		
(non conocale rie)		0.00		
(b) Levin Funds (from Schedule H5)	0.00	0.00		
(b) Leviii i unus (iioiii schedule Fis)	4 4			
(c) Total Transfers (add 18(a) and 18(b))	0.00	0.00		
. Total Receipts (add Lines 11(d),				
12, 13, 14, 15, 16, 17, and 18(c))▶	29659.66	364225.33		
. Total Federal Receipts				
(subtract Line 18(c) from Line 19)▶	29659.66	364225.33		

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements		COLUMN A Total This Period	Column B		
	Operating Expenditures:	IOIdi IIIIS Period	Calendar Year-to-Date		
	(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	0492.00	44429.33		
	Expenditures(c) Total Operating Expenditures	9483.00	44429.33		
	(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))▶	9483.00	44429.33		
	Transfers to Affiliated/Other Party	7 7 7			
	Committees	0.00	0.00		
	Contributions to Federal Candidates/Committees	7 7 7			
	and Other Political Committees	0.00	90000.00		
	Independent Expenditures	0.00	40277.66		
	(use Schedule E) Coordinated Party Expenditures	0.00	40277.66		
	(52 U.S.C. § 30116(d)) (use Schedule F)	0.00	0.00		
	(400 00.104410 1)	495 495 455	0.00		
	Loan Repayments Made	0.00	0.00		
		4 4	4 4 4		
	Loans Made Refunds of Contributions To:	0.00	0.00		
	(a) Individuals/Persons Other				
	Than Political Committees	0.00	0.00		
	(b) Political Party Committees	0.00	0.00		
	(b) Political Party Committees(c) Other Political Committees	0.00	0.00		
	(such as PACs)	0.00	0.00		
	(d) Total Contribution Refunds	0.00	7 7		
	(add Lines 28(a), (b), and (c))	0.00	0.00		
		4 4	45 45		
	Other Disbursements (Including				
	Non-Federal Donations)	32109.66	248712.66		
	Federal Election Activity (52 U.S.C. § 30101(2	201)			
	(a) Allocated Federal Election Activity	.0))			
	(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		
	Total Dishurasments (add Lines 04/s) 00				
	Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))				
	20, 27, 20, 20, 21, 20(u), 29 and 30(0))	41592.66	423419.65		
	Total Federal Disbursements				
	(subtract Line 21(a)(ii) and Line 30(a)(ii)				
	from Line 31)	41592.66	423419.65		
	ŕ	4 4	723413.03		

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

		3.5
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)	29659.66	362910.33
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	29659.66	362910.33
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	9483.00	44429.33
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	1315.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	9483.00	43114.33

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

				PAGE	6	OF	36		
(check only one)									
	X	11a		11b		11c	12		
		13		14		15	16	;	17

	ny information copied from such Reports and Stator commercial purposes, other than using the r				
\geq	NAME OF COMMITTEE (In Full) MEGAPHONE				
Α.	Full Name of Individual (Last, First, Middle Initial Quadvest Mailing Address 26926 FM 2978 City Magnolia FEC ID number of contributing federal political committee. Name of Employer (for Individual) Receipt For: Primary General Other (specify) ▼	State TX C Occ Aggregat	Zip Code 77354 ccupation (for Individual) te Year-to-Date ▼	66	Date of Receipt 10 18 2018 Transaction ID: SA11Al.5382 Amount of Each Receipt this Period 29659.66 Memo Item
В.	Full Name of Individual (Last, First, Middle Initial Mailing Address City	State	Organization Name		Date of Receipt
	FEC ID number of contributing federal political committee. Name of Employer (for Individual) Receipt For: Primary General Other (specify) ▼		ccupation (for Individual) te Year-to-Date ▼		Amount of Each Receipt this Period Memo Item
С.	Full Name of Individual (Last, First, Middle Initial Mailing Address City FEC ID number of contributing federal political committee. Name of Employer (for Individual) Receipt For: Primary General Other (specify)	State	Organization Name Zip Code		Date of Receipt M M M / D D / Y Y Y Y Y Amount of Each Receipt this Period Memo Item
H	SUBTOTAL of Receipts This Page (optional)			<u> </u>	29659.66
Т	OTAL This Period (last page this line number or	nly)		······ ▶	29659.66

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ny information copied from such Reports and State for commercial purposes, other than using the national NAME OF COMMITTEE (In Full)	for each Detailed	arate schedule(s) category of the Summary Page	(check only 21b 28a	22 23 26 27 28b 28c 29 30b
r for commercial purposes, other than using the nat NAME OF COMMITTEE (In Full)				200 200 29 300
NAME OF COMMITTEE (In Full)	me and addr			
MEGAPHONE		, ,		
Full Name (Last, First, Middle Initial)				D
Four One Three Communications	LLC			Date of Disbursement
Mailing Address PO Box 1153				11 01 2018
City Austin	State TX	Zip Code 78767		FEC Identification Number
Purpose of Disbursement Media Consulting Candidate Name				C Transaction ID : SB21B.5401
			Category/ Type	Amount of Each Disbursement this Period
Office Sought: House Disburse Senate President	ment For: Primary Other (spec	General		9337.01
State: District:	(-1	- 3,		Memo Item
Full Name (Last, First, Middle Initial) WELLS FARGO BANK NA Mailing Address PO BOX 6995		Date of Disbursement 10		
City PORTLAND	State OR	Zip Code 97228		FEC Identification Number
Purpose of Disbursement Bank Fee Candidate Name			Category/	Transaction ID : SB21B.5398 Amount of Each Disbursement this Period
Office Sought: House Disburse Senate President	ment For: Primary Other (spec	General	Туре	15.00
State: District:	Other (spec	ony)		Memo Item
Full Name (Last, First, Middle Initial) WELLS FARGO BANK NA				Date of Disbursement
Mailing Address PO BOX 6995				10 19 2018
City PORTLAND	State OR	Zip Code 97228		FEC Identification Number
Purpose of Disbursement Bank Fee Candidate Name				Transaction ID : SB21B.5399
	ment For:		Category/ Type	Amount of Each Disbursement this Period 30.00
Senate President	Primary Other (spec	General		Memo Item
State: District:				Wollie Kelli

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SCHEDULE B (FEC Form 3X)			FOR LINE	FOR LINE NUMBER: PAGE 8 OF 36				
ITEMIZED DISBURSEMENTS		arate schedule(s) category of the	(check on	<i>'</i> ′ _	□ 00 □ 07			
		Summary Page	216		23 28c	26 27 29 30b		
Any information copied from such Reports and Staten								
or for commercial purposes, other than using the name								
NAME OF COMMITTEE (In Full)								
MEGAPHONE								
Full Name (Last, First, Middle Initial)								
A. WELLS FARGO BANK NA				Date of	Disbursen	nent		
Mailing Address DO DOV 0005				M M M	/ D [
Mailing Address PO BOX 6995				10	26	2018		
,	State	Zip Code		FEC Ide	ntification	Number		
PORTLAND Purpose of Disbursement	OR	97228						
Bank Fee				C				
Candidate Name			Category/			D : SB21B.5397 Disbursement this Period		
			Type	Amount	JI LACII L	Disbursement this Teriou		
Office Sought: House Disburser				7 L	75.1	30.00		
Senate President	Primary General							
State: District:	Other (spe	city) 🔻		Mem	no Item			
Full Name (Last, First, Middle Initial)								
B. WELLS FARGO BANK NA				Date of	Disbursen	nent		
				M = M	/ D = [
Mailing Address PO BOX 6995				11	01	2018		
,	State	Zip Code		FEC Ide	ntification	Number		
PORTLAND Purpose of Disbursement	OR	97228						
Bank Fee					Transaction ID : SB21B.5403			
Candidate Name	Candidate Name Category/					D: SB21B.5403 Disbursement this Period		
			Type					
Office Sought: House Disburser		Canaral						
Senate President	Primary Other (spe	General cify)						
State: District:	(0)	,,		Mem	no Item			
Full Name (Last, First, Middle Initial)								
C. WELLS FARGO BANK NA				Date of	Disbursen			
Mailing Address PO BOX 6995				MM	/ 08			
	State OR	Zip Code		FEC Ide	ntification	Number		
PORTLAND Purpose of Disbursement	OK	97228		C				
Bank Fee					saction	D : SB21B.5402		
Candidate Name			Category/			Disbursement this Period		
Office Country House			Type	-		10.00		
Office Sought: House Disburser Senate	nent For: Primary	General			7	10.00		
President	Other (spe							
State: District:				Mem	no Item			
				-		70.00		
SUBTOTAL of Disbursements This Page (optional)			·····•			70.00		
TOTAL This Period (last page this line number only)						9452.01		

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SCHEDULE B (FEC Form 3X)	Use separate schedule(s)		OR LINE NUMBER: PAGE 9 OF 36 check only one)			
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 28a	22 23 26 27 28b 28c x 29 30b			
Any information copied from such Reports and Stater or for commercial purposes, other than using the name						
NAME OF COMMITTEE (In Full) MEGAPHONE	and address of any points	<u>u. commuo to</u>				
Full Name (Last, First, Middle Initial)						
Go Big Media Inc			Date of Disbursement			
Mailing Address 1350 Connecticut Ave NW Ste 400			10 26 2018			
Washington	State Zip Code 20036		FEC Identification Number			
Purpose of Disbursement Nonfederal Production of TV Ad Candidate Name			Transaction ID : SB29.5395			
Calluldate Name		Category/ Type	Amount of Each Disbursement this Period			
Senate	ment For: Primary General		4995.00			
State: District:	Other (specify) ▼		Memo Item			
Full Name (Last, First, Middle Initial) 3. Lawson Strategies LLC		Date of Disbursement				
Mailing Address 1115 Kinney Ave Unit 5			10 19 2018			
City Austin Purpose of Disbursement	State Zip Code TX 78704		FEC Identification Number			
Nonfederal Design Print and Postage for Mailer Candidate Name		Category/ Type	Transaction ID : SB29.5392 Amount of Each Disbursement this Period			
Office Sought: House Disburser Senate President	ment For: Primary General Other (specify)	Турс	27114.66			
State: District:	Other (specify)		Memo Item			
Full Name (Last, First, Middle Initial)			Date of Disbursement			
Mailing Address			M M / D D / Y Y Y Y Y			
City	State Zip Code		FEC Identification Number			
Purpose of Disbursement			C			
Candidate Name		Category/ Type	Amount of Each Disbursement this Period			
Office Sought: House Disburser Senate President	ment For: Primary General Other (specify) ▼					
State: District:	Salor (opoony) ▼		Memo Item			
SUBTOTAL of Disbursements This Page (optional)			32109.66			
TOTAL This Period (last page this line number only)			32109.66			

Excluding Loans

(Use separate schedule(s) for each numbered line) PAGE 10 OF
FOR LINE NUMBER:
(check only one)

	9
X	10

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NAME OF COMMITTEE (In Full) **MEGAPHONE** A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): **Compliance Services** RightSide Compliance Mailing Address PO Box 341027 State Zip Code Austin TX 78734 Transaction ID: SD10.4724 Outstanding Balance Beginning This Period 4500.82 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 4500.82 0.00 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): **Compliance Services** RightSide Compliance Mailing Address PO Box 341027 City State Zip Code Austin 78734 TX Outstanding Balance Beginning This Period Transaction ID: SD10.4744 857.50 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 857.50 0.00 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): **Compliance Services** RightSide Compliance Mailing Address PO Box 341027 City State Zip Code 78734 Austin TX Outstanding Balance Beginning This Period Transaction ID: SD10.4756 1242.50 Payment This Period Outstanding Balance at Close of This Period Amount Incurred This Period 0.00 1242.50 6600.82 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 only) 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶

Excluding Loans

(Use separate schedule(s) for each numbered line) PAGE 11
FOR LINE NUMBER: (check only one)

9 10

OF

36

NAME OF COMMITTEE (In Full) **MEGAPHONE** A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): **Compliance Services** RightSide Compliance Mailing Address PO Box 341027 State Zip Code Austin TX 78734 Transaction ID: SD10.4825 Outstanding Balance Beginning This Period 11637.50 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 11637.50 0.00 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): **Compliance Services** RightSide Compliance Mailing Address PO Box 341027 City State Zip Code Austin 78734 TX Outstanding Balance Beginning This Period Transaction ID: SD10.4855 5530.00 Outstanding Balance at Close of This Period Amount Incurred This Period Payment This Period 0.00 5530.00 0.00 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): **Compliance Services** RightSide Compliance Mailing Address PO Box 341027 City State Zip Code 78734 Austin TX Outstanding Balance Beginning This Period Transaction ID: SD10.4980 16800.00 Payment This Period Outstanding Balance at Close of This Period Amount Incurred This Period 0.00 16800.00 33967.50 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 only) 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶

Excluding Loans

(Use separate schedule(s) for each numbered line) PAGE 12 OF
FOR LINE NUMBER:
(check only one)

9 **X** 10

NAME OF COMMITTEE (In Full) MEGAPHONE		1	1 12
A. Full Name (Last, First, Middle Initial) of Debtor RightSide Compliance	Nature of Debt (Purpose): Compliance Services		
Mailing Address PO Box 341027			
City Austin	State TX	Zip Code 78734	
Outstanding Balance Beginning This Period 7472.50			Transaction ID : SD10.4981
Amount Incurred This Period	Pa	yment This Period	Outstanding Balance at Close of This Period
0.00		0.00	7472.50
B. Full Name (Last, First, Middle Initial) of Debtor of RightSide Compliance	or Creditor		Nature of Debt (Purpose): Compliance Services
Mailing Address PO Box 341027			
City Austin	State TX	Zip Code 78734	
Outstanding Balance Beginning This Period			Transaction ID : SD10.4995
Amount Incurred This Period 0.00	Pay	yment This Period 0.00	Outstanding Balance at Close of This Period
C. Full Name (Last, First, Middle Initial) of Debtor RightSide Compliance	or Creditor		Nature of Debt (Purpose): Compliance Services
Mailing Address PO Box 341027			
City Austin	State TX	Zip Code 78734	
Outstanding Balance Beginning This Period 2415.00			Transaction ID : SD10.5024
Amount Incurred This Period	Pa	yment This Period	Outstanding Balance at Close of This Period
0.00		0.00	2415.00
1) SUBTOTALS This Period This Page (optional))	11462.50
2) TOTALS This Period (last page this line number of	only))	7 7 7
3) TOTAL OUTSTANDING LOANS from Schedule C	(last page o	nly)	
4) ADD 2) and 3) and carry forward to appropriate li	ne of Summa	ary Page (last page only)	·

Excluding Loans

(Use separate schedule(s) for each numbered line) PAGE 13 OF
FOR LINE NUMBER:
(check only one)

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		9
	X	10

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NAME OF COMMITTEE (In Full) **MEGAPHONE** A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): **Compliance Services** RightSide Compliance Mailing Address PO Box 341027 State Zip Code Austin TX 78734 Transaction ID: SD10.5034 Outstanding Balance Beginning This Period 1792.31 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 1792.31 0.00 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): **Compliance Services** RightSide Compliance Mailing Address PO Box 341027 City State Zip Code Austin 78734 TX Outstanding Balance Beginning This Period Transaction ID: SD10.5037 3062.50 Outstanding Balance at Close of This Period Amount Incurred This Period Payment This Period 0.00 3062.50 0.00 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): **Compliance Services** RightSide Compliance Mailing Address PO Box 341027 City State Zip Code 78734 Austin TX Outstanding Balance Beginning This Period Transaction ID: SD10.5067 4455.00 Payment This Period Outstanding Balance at Close of This Period Amount Incurred This Period 0.00 4455.00 9309.81 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 only) 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶

Excluding Loans

(Use separate schedule(s) for each numbered line) PAGE 14 OF

FOR LINE NUMBER:
(check only one)

9 10

			, 10
NAME OF COMMITTEE (In Full) MEGAPHONE			
A. Full Name (Last, First, Middle Initial) of Debtor or Creditor			Nature of Debt (Purpose):
RightSide Compliance			Compliance Services
Mailing Address PO Box 341027			
City	State	Zip Code	
Austin	TX	78734	
Outstanding Balance Beginning This Period			Transaction ID : SD10.5070
1777.50			
Amount Incurred This Period	Pa	yment This Period	Outstanding Balance at Close of This Period
0.00	7	0.00	1777.50
B. Full Name (Last, First, Middle Initial) of Debto RightSide Compliance	r or Creditor		Nature of Debt (Purpose): Compliance Services
RightSide Compliance			33.7
Mailing Address PO Box 341027			
City Austin	State TX	Zip Code 78734	
Outstanding Balance Beginning This Period	I		Transaction ID : SD10.5103
1462.50			Transaction iD: SD10.5103
Amount Incurred This Period	Pa	yment This Period	Outstanding Balance at Close of This Period
0.00	7	0.00	1462.50
C. Full Name (Last, First, Middle Initial) of Debte RightSide Compliance	or or Creditor		Nature of Debt (Purpose): Compliance Services
Mailing Address PO Box 341027			
City Austin	State TX	Zip Code 78734	
	1/		
Outstanding Balance Beginning This Period 2115.00			Transaction ID: SD10.5108
Amount Incurred This Period	Pa	yment This Period	Outstanding Balance at Close of This Period
0.00		0.00	2115.00
.)			5355.00
1) SUBTOTALS This Period This Page (optional)			5555.00
2) TOTALS This Period (last page this line number	only)		<u> </u>
3) TOTAL OUTSTANDING LOANS from Schedule	C (last page c	only)	>
4) ADD 2) and 3) and carry forward to appropriate	line of Summ	ary Page (last page only)	>

Excluding Loans

(Use separate schedule(s) for each numbered line) PAGE 15 OF
FOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full) **MEGAPHONE** A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): **Compliance Services** RightSide Compliance Mailing Address PO Box 341027 State Zip Code Austin TX 78734 Transaction ID: SD10.5109 Outstanding Balance Beginning This Period 1012.50 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 1012.50 0.00 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): **Compliance Services** RightSide Compliance Mailing Address PO Box 341027 City State Zip Code Austin 78734 TX Outstanding Balance Beginning This Period Transaction ID: SD10.5120 742.50 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 742.50 0.00 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): **Compliance Services** RightSide Compliance Mailing Address PO Box 341027 City State Zip Code 78734 Austin TX Outstanding Balance Beginning This Period Transaction ID: SD10.5149 1147.50 Payment This Period Outstanding Balance at Close of This Period Amount Incurred This Period 0.00 1147.50 2902.50 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 only) 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶

Excluding Loans

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

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NAME OF COMMITTEE (In Full) MEGAPHONE		1	
A. Full Name (Last, First, Middle Initial) of Debtor or Creditor RightSide Compliance			Nature of Debt (Purpose): Compliance Services
Mailing Address PO Box 341027			
City Austin	State TX	Zip Code 78734	
Outstanding Balance Beginning This Period			Transaction ID : SD10.5150
157.50			
Amount Incurred This Period	Pay	ment This Period	Outstanding Balance at Close of This Period
0.00		0.00	157.50
B. Full Name (Last, First, Middle Initial) of Debtor of RightSide Compliance	or Creditor		Nature of Debt (Purpose): Compliance Services
Mailing Address PO Box 341027			
City Austin	State TX	Zip Code 78734	
Outstanding Balance Beginning This Period 697.50			Transaction ID : SD10.5151
Amount Incurred This Period 0.00	Pay	ment This Period 0.00	Outstanding Balance at Close of This Period 697.50
C. Full Name (Last, First, Middle Initial) of Debtor RightSide Compliance	or Creditor		Nature of Debt (Purpose): Compliance Services
Mailing Address PO Box 341027			
City Austin	State TX	Zip Code 78734	
Outstanding Balance Beginning This Period 652.50			Transaction ID : SD10.5152
Amount Incurred This Period	Pay	ment This Period	Outstanding Balance at Close of This Period
0.00	-	0.00	652.50
1) SUBTOTALS This Period This Page (optional)			1507.50
2) TOTALS This Period (last page this line number of	only))	
3) TOTAL OUTSTANDING LOANS from Schedule C	(last page or	nly)	
4) ADD 2) and 3) and carry forward to appropriate li	ne of Summa	ry Page (last page only) ▶	

Excluding Loans

(Use separate schedule(s) for each numbered line) PAGE 17
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NAME OF COMMITTEE (In Full) **MEGAPHONE** A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): **Compliance Services** RightSide Compliance Mailing Address PO Box 341027 State Zip Code Austin TX 78734 Transaction ID: SD10.5184 Outstanding Balance Beginning This Period 405.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 405.00 0.00 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): **Compliance Services** RightSide Compliance Mailing Address PO Box 341027 City State Zip Code Austin 78734 TX Outstanding Balance Beginning This Period Transaction ID: SD10.5208 562.50 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 562.50 0.00 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): **Compliance Services** RightSide Compliance Mailing Address PO Box 341027 City State Zip Code 78734 Austin TX Outstanding Balance Beginning This Period Transaction ID: SD10.5210 10170.00 Payment This Period Outstanding Balance at Close of This Period Amount Incurred This Period 0.00 10170.00 11137.50 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 only) 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶

Excluding Loans

(Use separate schedule(s) for each numbered line) PAGE 18 OF
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(check only one)

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NAME OF COMMITTEE (In Full) **MEGAPHONE** A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): **Compliance Services** RightSide Compliance Mailing Address PO Box 341027 State Zip Code Austin TX 78734 Transaction ID: SD10.5209 Outstanding Balance Beginning This Period 1282.50 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 1282.50 0.00 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): **Compliance Services** RightSide Compliance Mailing Address PO Box 341027 City State Zip Code Austin 78734 TX Outstanding Balance Beginning This Period Transaction ID: SD10.5211 225.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 225.00 0.00 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): **Compliance Services** RightSide Compliance Mailing Address PO Box 341027 City State Zip Code 78734 Austin TX Outstanding Balance Beginning This Period Transaction ID: SD10.5212 4320.00 Payment This Period Outstanding Balance at Close of This Period Amount Incurred This Period 0.00 4320.00 5827.50 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 only) 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶

Excluding Loans

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

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NAME OF COMMITTEE (In Full) **MEGAPHONE** A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): **Compliance Services** RightSide Compliance Mailing Address PO Box 341027 State Zip Code Austin TX 78734 Transaction ID: SD10.5219 Outstanding Balance Beginning This Period 2565.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 2565.00 0.00 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): **Compliance Services** RightSide Compliance Mailing Address PO Box 341027 City State Zip Code Austin 78734 TX Outstanding Balance Beginning This Period Transaction ID: SD10.5320 1147.50 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 1147.50 0.00 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): **Compliance Services** RightSide Compliance Mailing Address PO Box 341027 City State Zip Code 78734 Austin TX Outstanding Balance Beginning This Period Transaction ID: SD10.5321 2340.00 Payment This Period Outstanding Balance at Close of This Period Amount Incurred This Period 0.00 2340.00 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 only) 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶

Excluding Loans

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NAME OF COMMITTEE (In Full) **MEGAPHONE** A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): **Compliance Services** RightSide Compliance Mailing Address PO Box 341027 State Zip Code Austin TX 78734 Transaction ID: SD10.5322 Outstanding Balance Beginning This Period 2092.50 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 2092.50 0.00 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): **Compliance Services** RightSide Compliance Mailing Address PO Box 341027 City State Zip Code Austin 78734 TX Outstanding Balance Beginning This Period Transaction ID: SD10.5324 2610.00 Outstanding Balance at Close of This Period Amount Incurred This Period Payment This Period 0.00 2610.00 0.00 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): **Compliance Services** RightSide Compliance Mailing Address PO Box 341027 City State Zip Code 78734 Austin TX Outstanding Balance Beginning This Period Transaction ID: SD10.5347 135.00 Payment This Period Outstanding Balance at Close of This Period Amount Incurred This Period 0.00 135.00 4837.50 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 only) 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶

Excluding Loans

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NAME OF COMMITTEE (In Full) **MEGAPHONE** A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): **Compliance Services** RightSide Compliance Mailing Address PO Box 341027 State Zip Code Austin TX 78734 Transaction ID: SD10.5348 Outstanding Balance Beginning This Period 202.50 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 202.50 0.00 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): **Compliance Services** RightSide Compliance Mailing Address PO Box 341027 City State Zip Code Austin 78734 TX Outstanding Balance Beginning This Period Transaction ID: SD10.5349 1057.50 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 1057.50 0.00 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): **Compliance Services** RightSide Compliance Mailing Address PO Box 341027 City State Zip Code 78734 Austin TX Outstanding Balance Beginning This Period Transaction ID: SD10.5359 697.50 Payment This Period Outstanding Balance at Close of This Period Amount Incurred This Period 0.00 697.50 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 only) 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶

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NAME OF COMMITTEE (In Full) **MEGAPHONE** A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): **Compliance Services** RightSide Compliance Mailing Address PO Box 341027 State Zip Code Austin TX 78734 Transaction ID: SD10.5360 Outstanding Balance Beginning This Period 202.50 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 202.50 0.00 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): **Compliance Services** RightSide Compliance Mailing Address PO Box 341027 City State Zip Code Austin 78734 TX Outstanding Balance Beginning This Period Transaction ID: SD10.5361 1597.50 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 1597.50 0.00 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): **Compliance Services** RightSide Compliance Mailing Address PO Box 341027 City State Zip Code 78734 Austin TX Outstanding Balance Beginning This Period Transaction ID: SD10.5370 1012.50 Payment This Period Outstanding Balance at Close of This Period Amount Incurred This Period 0.00 1012.50 2812.50 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 only) 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶

Excluding Loans

(Use separate schedule(s) for each numbered line) PAGE 23 OF
FOR LINE NUMBER:
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NAME OF COMMITTEE (In Full) MEGAPHONE			
A. Full Name (Last, First, Middle Initial) of Debtor or Creditor			Nature of Debt (Purpose): Compliance Services
RightSide Compliance	RightSide Compliance		
Mailing Address PO Box 341027			-
	1	T	
City Austin	State	Zip Code 78734	
Outstanding Balance Beginning This Period		10101	Transaction ID : SD10.5375
967.50			
7 7	Pove	aget This Pariod	Outstanding Polones at Class of This Povind
Amount Incurred This Period	Гауп	nent This Period	Outstanding Balance at Close of This Period
0.00		0.00	967.50
B. Full Name (Last, First, Middle Initial) of Debtor	or Creditor		Nature of Debt (Purpose):
RightSide Compliance			Compliance Services
Mailing Address PO Box 341027			-
1 0 50% 041027			
City Austin	State	Zip Code 78734	
	1/	10104	
Outstanding Balance Beginning This Period			Transaction ID : SD10.5406
0.00			
Amount Incurred This Period	Payn	nent This Period	Outstanding Balance at Close of This Period
3082.50		0.00	3082.50
C. Full Name (Last, First, Middle Initial) of Debtor	or Craditor	,	Nature of Debt (Durages)
RightSide Compliance	or Creditor		Nature of Debt (Purpose): Compliance Services
Mailing Address PO Box 341027			
City	State	Zip Code	
Austin	TX	78734	
Outstanding Balance Beginning This Period			Transaction ID : SD10.5407
0.00			
Amount Incurred This Period	Payn	nent This Period	Outstanding Balance at Close of This Period
1147.50		0.00	1147.50
7 7 7	7	7	7 7
			5197.50
1) SUBTOTALS This Period This Page (optional)		>	3197.30
2) TOTALS This Period (last page this line number of	only)	>	
3) TOTAL OUTSTANDING LOANS from Schedule C	(last page onl	y) ▶	
4) ADD 2) and 3) and carry forward to appropriate li	ine of Summar	y Page (last page only) ▶	

Excluding Loans

(Use separate schedule(s) for each numbered line) PAGE 24 OF
FOR LINE NUMBER:
(check only one)

9 10

MEGAPHONE			
A. Full Name (Last, First, Middle Initial) of Debtor or Creditor RightSide Compliance			Nature of Debt (Purpose): Compliance Services
Mailing Address PO Box 341027			
City Austin	State TX	Zip Code 78734	
Outstanding Balance Beginning This Period 0.00	1	'	Transaction ID : SD10.5408
Amount Incurred This Period 1777.50	Pay	yment This Period 0.00	Outstanding Balance at Close of This Period
B. Full Name (Last, First, Middle Initial) of Debtor The Gober Group	or Creditor		Nature of Debt (Purpose): Legal Services
Mailing Address PO Box 341016			
City Austin	State TX	Zip Code 78734	
Outstanding Balance Beginning This Period 5258.89			Transaction ID : SD10.4853
Amount Incurred This Period	Pay	yment This Period	Outstanding Balance at Close of This Period
0.00		0.00	5258.89
C. Full Name (Last, First, Middle Initial) of Debto The Gober Group	r or Creditor		Nature of Debt (Purpose): Legal Services
Mailing Address PO Box 341016			
City Austin	State TX	Zip Code 78734	
Outstanding Balance Beginning This Period 10994.00		•	Transaction ID : SD10.4982
Amount Incurred This Period	Pay	yment This Period	Outstanding Balance at Close of This Period
0.00		0.00	10994.00
1) SUBTOTALS This Period This Page (optional)		>	18030.39
2) TOTALS This Period (last page this line number	only)	>	7 7
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 only)▶	

Excluding Loans

(Use separate schedule(s) for each numbered line) PAGE 25
FOR LINE NUMBER: (check only one)

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NAME OF COMMITTEE (In Full) **MEGAPHONE** A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Legal Services The Gober Group Mailing Address PO Box 341016 State Zip Code Austin TX 78734 Transaction ID: SD10.4983 Outstanding Balance Beginning This Period 8162.50 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 8162.50 0.00 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Legal Services The Gober Group Mailing Address PO Box 341016 City State Zip Code Austin 78734 TX Outstanding Balance Beginning This Period Transaction ID: SD10.5004 890.50 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 890.50 0.00 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Legal Services The Gober Group Mailing Address PO Box 341016 City State Zip Code 78734 Austin TX Outstanding Balance Beginning This Period Transaction ID: SD10.5021 332.00 Payment This Period Outstanding Balance at Close of This Period Amount Incurred This Period 332.00 0.00 9385.00 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 only) 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶

Excluding Loans

(Use separate schedule(s) for each numbered line) PAGE 26 OF
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(check only one)

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			7 10
NAME OF COMMITTEE (In Full) MEGAPHONE			
A. Full Name (Last, First, Middle Initial) of Debtor or Creditor			Nature of Debt (Purpose):
The Gober Group			Legal Services
Mailing Address PO Box 341016			
City	State	Zip Code	
Austin	TX	78734	
Outstanding Balance Beginning This Period			Transaction ID: SD10.5038
923.50			
Amount Incurred This Period	Pa	yment This Period	Outstanding Balance at Close of This Period
0.00		0.00	923.50
B. Full Name (Last, First, Middle Initial) of Debto	or or Creditor		Nature of Debt (Purpose):
The Gober Group			Legal Services
Mailing Address PO Box 341016			
City	State	Zip Code	
Austin	TX	78734	
Outstanding Balance Beginning This Period 7369.00			Transaction ID : SD10.5039
Amount Incurred This Period	Pa	yment This Period	Outstanding Balance at Close of This Period
0.00	4	0.00	7369.00
C. Full Name (Last, First, Middle Initial) of Debi The Gober Group	tor or Creditor		Nature of Debt (Purpose): Legal Services
Mailing Address PO Box 341016			
City	State	Zip Code	
Austin	TX	78734	
Outstanding Balance Beginning This Period			Transaction ID : SD10.5066
10049.50			
Amount Incurred This Period	Pa	yment This Period	Outstanding Balance at Close of This Period
0.00	7	0.00	10049.50
1) SUBTOTALS This Period This Page (optional)			18342.00
2) TOTALS This Period (last page this line number	er only)		·
3) TOTAL OUTSTANDING LOANS from Schedule	C (last page o	only)	>
4) ADD 2) and 3) and carry forward to appropriate	e line of Summ	ary Page (last page only)	>

Excluding Loans

(Use separate schedule(s) for each numbered line) PAGE 27 OF
FOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full) **MEGAPHONE** A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Legal Services The Gober Group Mailing Address PO Box 341016 State Zip Code Austin TX 78734 Transaction ID: SD10.5071 Outstanding Balance Beginning This Period 200.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 200.00 0.00 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Legal Services The Gober Group Mailing Address PO Box 341016 City State Zip Code Austin 78734 TX Outstanding Balance Beginning This Period Transaction ID: SD10.5101 436.50 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 436.50 0.00 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Legal Services The Gober Group Mailing Address PO Box 341016 City State Zip Code 78734 Austin TX Outstanding Balance Beginning This Period Transaction ID: SD10.5121 15428.50 Payment This Period Outstanding Balance at Close of This Period Amount Incurred This Period 0.00 15428.50 16065.00 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 only) 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶

Excluding Loans

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NAME OF COMMITTEE (In Full) **MEGAPHONE** A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Legal Services The Gober Group Mailing Address PO Box 341016 State Zip Code Austin TX 78734 Transaction ID: SD10.5153 Outstanding Balance Beginning This Period 4980.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 4980.00 0.00 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Legal Services The Gober Group Mailing Address PO Box 341016 City State Zip Code Austin 78734 TX Outstanding Balance Beginning This Period Transaction ID: SD10.5155 401.50 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 401.50 0.00 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Legal Services The Gober Group Mailing Address PO Box 341016 City State Zip Code 78734 Austin TX Outstanding Balance Beginning This Period Transaction ID: SD10.5156 160.50 Payment This Period Outstanding Balance at Close of This Period Amount Incurred This Period 0.00 160.50 5542.00 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 only) 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶

Excluding Loans

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NAME OF COMMITTEE (In Full) **MEGAPHONE** A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Legal Services The Gober Group Mailing Address PO Box 341016 State Zip Code Austin TX 78734 Transaction ID: SD10.5163 Outstanding Balance Beginning This Period 54000.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 54000.00 0.00 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Legal Services The Gober Group Mailing Address PO Box 341016 City State Zip Code Austin 78734 TX Outstanding Balance Beginning This Period Transaction ID: SD10.5180 107.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 107.00 0.00 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Legal Services The Gober Group Mailing Address PO Box 341016 City State Zip Code 78734 Austin TX Outstanding Balance Beginning This Period Transaction ID: SD10.5181 107.00 Payment This Period Outstanding Balance at Close of This Period Amount Incurred This Period 0.00 107.00 54214.00 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 only) 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶

Excluding Loans

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(check only one)

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			1. 1.2
NAME OF COMMITTEE (In Full) MEGAPHONE			
A. Full Name (Last, First, Middle Initial) of Debtor or Creditor			Nature of Debt (Purpose):
The Gober Group			Legal Services
Mailing Address PO Box 341016			
City	State	Zip Code	
Austin	TX	78734	
Outstanding Balance Beginning This Period	Outstanding Balance Beginning This Period		
1690.00			
Amount Incurred This Period	Pa	yment This Period	Outstanding Balance at Close of This Period
0.00	4	0.00	1690.00
B. Full Name (Last, First, Middle Initial) of Debto	r or Creditor		Nature of Debt (Purpose):
The Gober Group			Legal Services
Mailing Address PO Box 341016			
City	State	Zip Code	_
Austin	TX	78734	
Outstanding Balance Beginning This Period 14.97			Transaction ID: SD10.5205
Amount Incurred This Period	Pa	yment This Period	Outstanding Balance at Close of This Period
0.00		0.00	14.97
C. Full Name (Last, First, Middle Initial) of Debtor or Creditor The Gober Group			Nature of Debt (Purpose): Legal Services
Mailing Address PO Box 341016	Mailing Address PO Box 341016		
City	State	Zip Code	
Austin	TX	78734	
Outstanding Balance Beginning This Period 1979.50			Transaction ID : SD10.5207
Amount Incurred This Period	Pa	yment This Period	Outstanding Balance at Close of This Period
0.00		0.00	1979.50
0.00		0.00	1010.00
1) SUBTOTALS This Period This Page (optional)			3684.47
2) TOTALS This Period (last page this line number	2) TOTALS This Period (last page this line number only)		
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)			
I) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)▶			

Excluding Loans

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FOR LINE NUMBER:
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	ME OF COMMITTEE (In Full) EGAPHONE					
	A. Full Name (Last, First, Middle Initial) of Debtor or Creditor			Nature of Debt (Purpo	ose):	
	The Gober Group			Legal Services		
	Mailing Address PO Box 341016					
-	City	State	Zip Code			
	Austin	TX	78734			
	Outstanding Balance Beginning This Period			Transaction ID : SD	10.5220	
	53.50					
	Amount Incurred This Period	Pay	ment This Period	Outstanding Balance	e at Close of This Period	
	0.00		0.0	00	53.50	
ŀ	B. Full Name (Last, First, Middle Initial) of Debtor or	r Creditor		Nature of Debt (Purpo	ose):	
	The Gober Group			Legal Services		
	Mailing Address PO Box 341016					
	City Austin	State TX	Zip Code 78734			
	Outstanding Balance Beginning This Period	1		Transaction ID : SI	210 5221	
	Outstanding Balance Beginning This Period 240.00			Transaction ib . Si	Transaction ID: SD10.5221	
	Amount Incurred This Period	Payment This Period		Outstanding Balance	e at Close of This Period	
	0.00		0.0	00	240.00	
	3.00	7	7		4 2.000	
Ī	C. Full Name (Last, First, Middle Initial) of Debtor or Creditor The Gober Group		Nature of Debt (Purpo Legal Services	ose):		
	Mailing Address PO Box 341016					
	City Austin	State TX	Zip Code 78734			
	Outstanding Balance Beginning This Period			Transaction ID : SI	D10.5315	
	160.50					
	Amount Incurred This Period	Pay	ment This Period	Outstanding Balance	e at Close of This Period	
	0.00		0.0	00	160.50	
	7 7 7	7	7 7		4	
1)	SUBTOTALS This Period This Page (optional)			>	454.00	
2)	2) TOTALS This Period (last page this line number only)			7		
3)	3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)				7	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶			nly) ►	7		

Excluding Loans

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NAME OF COMMITTEE (In Full) **MEGAPHONE** A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Legal Services The Gober Group Mailing Address PO Box 341016 State Zip Code Austin TX 78734 Transaction ID: SD10.5316 Outstanding Balance Beginning This Period 7750.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 7750.00 0.00 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Legal Services The Gober Group Mailing Address PO Box 341016 City State Zip Code Austin 78734 TX Outstanding Balance Beginning This Period Transaction ID: SD10.5325 217.50 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 217.50 0.00 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Legal Services The Gober Group Mailing Address PO Box 341016 City State Zip Code 78734 Austin TX Outstanding Balance Beginning This Period Transaction ID: SD10.5326 829.50 Payment This Period Outstanding Balance at Close of This Period Amount Incurred This Period 0.00 829.50 8797.00 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 only) 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶

Excluding Loans

(Use separate schedule(s) for each numbered line) PAGE 33
FOR LINE NUMBER: (check only one)

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OF

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NAME OF COMMITTEE (In Full) **MEGAPHONE** A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Legal Services The Gober Group Mailing Address PO Box 341016 State Zip Code Austin TX 78734 Transaction ID: SD10.5327 Outstanding Balance Beginning This Period 160.50 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 160.50 0.00 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Legal Services The Gober Group Mailing Address PO Box 341016 City State Zip Code Austin 78734 TX Outstanding Balance Beginning This Period Transaction ID: SD10.5328 327.50 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 327.50 0.00 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Legal Services The Gober Group Mailing Address PO Box 341016 City State Zip Code 78734 Austin TX Outstanding Balance Beginning This Period Transaction ID: SD10.5329 1551.50 Payment This Period Outstanding Balance at Close of This Period Amount Incurred This Period 0.00 1551.50 2039.50 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 only) 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶

Excluding Loans

(Use separate schedule(s) for each numbered line) PAGE 34
FOR LINE NUMBER: (check only one)

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OF

NAME OF COMMITTEE (In Full) **MEGAPHONE** A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Legal Services The Gober Group Mailing Address PO Box 341016 State Zip Code Austin TX 78734 Transaction ID: SD10.5345 Outstanding Balance Beginning This Period 481.50 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 481.50 0.00 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Legal Services The Gober Group Mailing Address PO Box 341016 City State Zip Code Austin 78734 TX Outstanding Balance Beginning This Period Transaction ID: SD10.5346 231.25 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 231.25 0.00 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Legal Services The Gober Group Mailing Address PO Box 341016 City State Zip Code 78734 Austin TX Outstanding Balance Beginning This Period Transaction ID: SD10.5362 261.00 Payment This Period Outstanding Balance at Close of This Period Amount Incurred This Period 0.00 261.00 973.75 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 only) 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶

Excluding Loans

(Use separate schedule(s) for each numbered line) PAGE 35 OF
FOR LINE NUMBER:
(check only one)

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36

NAME OF COMMITTEE (In Full) **MEGAPHONE** A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Legal Services The Gober Group Mailing Address PO Box 341016 State Zip Code Austin TX 78734 Transaction ID: SD10.5368 Outstanding Balance Beginning This Period 55.50 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 55.50 0.00 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Legal Services The Gober Group Mailing Address PO Box 341016 City State Zip Code Austin 78734 TX Outstanding Balance Beginning This Period Transaction ID: SD10.5369 3557.00 Outstanding Balance at Close of This Period Amount Incurred This Period Payment This Period 0.00 3557.00 0.00 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Legal Services The Gober Group Mailing Address PO Box 341016 City State Zip Code 78734 Austin TX Outstanding Balance Beginning This Period Transaction ID: SD10.5413 0.00 Payment This Period Outstanding Balance at Close of This Period Amount Incurred This Period 0.00 1044.50 1044.50 4657.00 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 only) 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶

Excluding Loans

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

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NAME OF COMMITTEE (In Full) **MEGAPHONE** A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Legal Services The Gober Group Mailing Address PO Box 341016 State Zip Code Austin TX 78734 Transaction ID: SD10.5414 Outstanding Balance Beginning This Period 0.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 3181.00 3181.00 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Website Development and Design Tusk Digital Mailing Address 777 6th St. NW 11th Floor City State Zip Code Washington 20001 DC Outstanding Balance Beginning This Period Transaction ID: SD10.4139 297000.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 297000.00 0.00 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 Payment This Period Outstanding Balance at Close of This Period Amount Incurred This Period 300181.00 1) SUBTOTALS This Period This Page (optional)..... 551293.24 2) TOTALS This Period (last page this line number only)..... 0.00 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) 551293.24 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶