

**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

MEGAPHONE

ADDRESS (number and street)

PO BOX 341028

Check if different  
than previously  
reported. (ACC)

AUSTIN

TX

78734

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00569517

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  
11 06 2018in 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  
10 01 2018

through

M M / D D / Y Y Y Y Y Y  
10 17 2018

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

MCALPIN, LUKE, , ,

Type or Print Name of Treasurer

Signature of Treasurer

MCALPIN, LUKE, , ,

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y  
10 25 2018

D D / Y Y Y Y Y Y

Y Y Y Y Y Y

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

MEGAPHONE

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y  
10 / 01 / 2018 To: M M / D D / Y Y Y Y Y Y  
10 / 17 / 2018

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span> <span style="border: 1px solid black; padding: 2px;">2018</span>		<span style="border: 1px solid black; padding: 2px;">174810.82</span>
(b) Cash on Hand at Beginning of Reporting Period.....	<span style="border: 1px solid black; padding: 2px;">107574.50</span>	
(c) Total Receipts (from Line 19) .....	<span style="border: 1px solid black; padding: 2px;">20000.00</span>	<span style="border: 1px solid black; padding: 2px;">334565.67</span>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<span style="border: 1px solid black; padding: 2px;">127574.50</span>	<span style="border: 1px solid black; padding: 2px;">509376.49</span>
7. Total Disbursements (from Line 31).....	<span style="border: 1px solid black; padding: 2px;">25.00</span>	<span style="border: 1px solid black; padding: 2px;">381826.99</span>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<span style="border: 1px solid black; padding: 2px;">127549.50</span>	<span style="border: 1px solid black; padding: 2px;">127549.50</span>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<span style="border: 1px solid black; padding: 2px;">0.00</span>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<span style="border: 1px solid black; padding: 2px;">541060.24</span>	



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

**MEGAPHONE**

Report Covering the Period:

From:

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

To:

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	7		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).....	20000.00	333250.00
(ii) Unitemized .....	0.00	0.67
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	20000.00	333250.67
(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) .....	20000.00	333250.67
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	1315.00
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)) .....	20000.00	334565.67
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	20000.00	334565.67

# **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 .....	25.00	34946.33
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	25.00	34946.33
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	90000.00
24. Independent Expenditures (use Schedule E) .....	0.00	40277.66
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	216603.00
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)) ..	25.00	381826.99
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	25.00	381826.99

**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) .....	20000.00	333250.67
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	20000.00	333250.67
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	25.00	34946.33
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	1315.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	25.00	33631.33

# **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)

PAGE 6 OF 32

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

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)

**MEGAPHONE**

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

**A. Epstein, Robert, , ,**

Mailing Address 5000 Plaza on the Lake

City  
Austin

State  
TX

Zip Code  
78746

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
PCM LLC

Occupation (for Individual)  
General Partner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

20000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 17 / 2018

Transaction ID : SA11AI.5377

Amount of Each Receipt this Period

20000.00

☐ Memo Item

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)..... ►

20000.00

20000.00

**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 7 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)

**MEGAPHONE**

Full Name (Last, First, Middle Initial)

**A. WELLS FARGO BANK NA**

Mailing Address PO BOX 6995

City  
PORTLANDState  
ORZip Code  
97228Purpose of Disbursement  
Bank Fee

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
10		09		2018

FEC Identification Number

**C****Transaction ID : SB21B.5378**

Amount of Each Disbursement this Period

10.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. WELLS FARGO BANK NA**

Mailing Address PO BOX 6995

City  
PORTLANDState  
ORZip Code  
97228Purpose of Disbursement  
Bank Fee

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
10		17		2018

FEC Identification Number

**C****Transaction ID : SB21B.5379**

Amount of Each Disbursement this Period

15.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

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
-----	---	-----	---	-------------

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).....▶

25.00

25.00

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

PAGE 8 OF 32

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

NAME OF COMMITTEE (In Full)

**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  
AustinState  
TXZip Code  
78734

Outstanding Balance Beginning This Period

4500.82

Transaction ID : SD10.4724

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

4500.82

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

**RightSide Compliance**Nature of Debt (Purpose):  
Compliance Services

Mailing Address PO Box 341027

City  
AustinState  
TXZip Code  
78734

Outstanding Balance Beginning This Period

857.50

Transaction ID : SD10.4744

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

857.50

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

**RightSide Compliance**Nature of Debt (Purpose):  
Compliance Services

Mailing Address PO Box 341027

City  
AustinState  
TXZip Code  
78734

Outstanding Balance Beginning This Period

1242.50

Transaction ID : SD10.4756

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1242.50

1) **SUBTOTALS** This Period This Page (optional)..... ►

6600.82

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 9 OF 32

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

NAME OF COMMITTEE (In Full)

**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  
AustinState  
TXZip Code  
78734

Outstanding Balance Beginning This Period

11637.50

Transaction ID : SD10.4825

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

11637.50

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

**RightSide Compliance**Nature of Debt (Purpose):  
Compliance Services

Mailing Address PO Box 341027

City  
AustinState  
TXZip Code  
78734

Outstanding Balance Beginning This Period

5530.00

Transaction ID : SD10.4855

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

5530.00

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

**RightSide Compliance**Nature of Debt (Purpose):  
Compliance Services

Mailing Address PO Box 341027

City  
AustinState  
TXZip Code  
78734

Outstanding Balance Beginning This Period

16800.00

Transaction ID : SD10.4980

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

16800.00

1) **SUBTOTALS** This Period This Page (optional)..... ►

33967.50

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 10 OF 32

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

NAME OF COMMITTEE (In Full)

**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  
AustinState  
TXZip Code  
78734

Outstanding Balance Beginning This Period

7472.50

Transaction ID : SD10.4981

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

7472.50

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

**RightSide Compliance**Nature of Debt (Purpose):  
Compliance Services

Mailing Address PO Box 341027

City  
AustinState  
TXZip Code  
78734

Outstanding Balance Beginning This Period

1575.00

Transaction ID : SD10.4995

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1575.00

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

**RightSide Compliance**Nature of Debt (Purpose):  
Compliance Services

Mailing Address PO Box 341027

City  
AustinState  
TXZip Code  
78734

Outstanding Balance Beginning This Period

2415.00

Transaction ID : SD10.5024

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2415.00

1) **SUBTOTALS** This Period This Page (optional)..... ►

11462.50

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

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

PAGE 11 OF 32

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

NAME OF COMMITTEE (In Full)

**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  
AustinState  
TXZip Code  
78734

Outstanding Balance Beginning This Period

1792.31

Transaction ID : SD10.5034

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1792.31

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

**RightSide Compliance**Nature of Debt (Purpose):  
Compliance Services

Mailing Address PO Box 341027

City  
AustinState  
TXZip Code  
78734

Outstanding Balance Beginning This Period

3062.50

Transaction ID : SD10.5037

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

3062.50

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

**RightSide Compliance**Nature of Debt (Purpose):  
Compliance Services

Mailing Address PO Box 341027

City  
AustinState  
TXZip Code  
78734

Outstanding Balance Beginning This Period

4455.00

Transaction ID : SD10.5067

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

4455.00

1) **SUBTOTALS** This Period This Page (optional)..... ►

9309.81

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

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

PAGE 12 OF 32

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

NAME OF COMMITTEE (In Full)

**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  
AustinState  
TXZip Code  
78734

Outstanding Balance Beginning This Period

1777.50

Transaction ID : SD10.5070

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1777.50

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

**RightSide Compliance**Nature of Debt (Purpose):  
Compliance Services

Mailing Address PO Box 341027

City  
AustinState  
TXZip Code  
78734

Outstanding Balance Beginning This Period

1462.50

Transaction ID : SD10.5103

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1462.50

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

**RightSide Compliance**Nature of Debt (Purpose):  
Compliance Services

Mailing Address PO Box 341027

City  
AustinState  
TXZip Code  
78734

Outstanding Balance Beginning This Period

2115.00

Transaction ID : SD10.5108

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2115.00

1) **SUBTOTALS** This Period This Page (optional)..... ►

5355.00

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 13 OF 32

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

NAME OF COMMITTEE (In Full)

**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  
AustinState  
TXZip Code  
78734

Outstanding Balance Beginning This Period

1012.50

Transaction ID : SD10.5109

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1012.50

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

**RightSide Compliance**Nature of Debt (Purpose):  
Compliance Services

Mailing Address PO Box 341027

City  
AustinState  
TXZip Code  
78734

Outstanding Balance Beginning This Period

742.50

Transaction ID : SD10.5120

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

742.50

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

**RightSide Compliance**Nature of Debt (Purpose):  
Compliance Services

Mailing Address PO Box 341027

City  
AustinState  
TXZip Code  
78734

Outstanding Balance Beginning This Period

1147.50

Transaction ID : SD10.5149

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1147.50

1) **SUBTOTALS** This Period This Page (optional)..... ►

2902.50

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 14 OF 32

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

NAME OF COMMITTEE (In Full)

**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  
AustinState  
TXZip Code  
78734

Outstanding Balance Beginning This Period

157.50

Transaction ID : SD10.5150

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

157.50

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

**RightSide Compliance**Nature of Debt (Purpose):  
Compliance Services

Mailing Address PO Box 341027

City  
AustinState  
TXZip Code  
78734

Outstanding Balance Beginning This Period

697.50

Transaction ID : SD10.5151

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

697.50

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

**RightSide Compliance**Nature of Debt (Purpose):  
Compliance Services

Mailing Address PO Box 341027

City  
AustinState  
TXZip Code  
78734

Outstanding Balance Beginning This Period

652.50

Transaction ID : SD10.5152

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

652.50

1) **SUBTOTALS** This Period This Page (optional)..... ►

1507.50

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 15 OF 32

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

NAME OF COMMITTEE (In Full)

**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  
AustinState  
TXZip Code  
78734

Outstanding Balance Beginning This Period

405.00

Transaction ID : SD10.5184

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

405.00

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

**RightSide Compliance**Nature of Debt (Purpose):  
Compliance Services

Mailing Address PO Box 341027

City  
AustinState  
TXZip Code  
78734

Outstanding Balance Beginning This Period

562.50

Transaction ID : SD10.5208

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

562.50

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

**RightSide Compliance**Nature of Debt (Purpose):  
Compliance Services

Mailing Address PO Box 341027

City  
AustinState  
TXZip Code  
78734

Outstanding Balance Beginning This Period

10170.00

Transaction ID : SD10.5210

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

10170.00

1) **SUBTOTALS** This Period This Page (optional)..... ►

11137.50

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 16 OF 32

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

NAME OF COMMITTEE (In Full)

**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  
AustinState  
TXZip Code  
78734

Outstanding Balance Beginning This Period

1282.50

Transaction ID : SD10.5209

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1282.50

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

**RightSide Compliance**Nature of Debt (Purpose):  
Compliance Services

Mailing Address PO Box 341027

City  
AustinState  
TXZip Code  
78734

Outstanding Balance Beginning This Period

225.00

Transaction ID : SD10.5211

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

225.00

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

**RightSide Compliance**Nature of Debt (Purpose):  
Compliance Services

Mailing Address PO Box 341027

City  
AustinState  
TXZip Code  
78734

Outstanding Balance Beginning This Period

4320.00

Transaction ID : SD10.5212

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

4320.00

1) **SUBTOTALS** This Period This Page (optional)..... ►

5827.50

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 17 OF 32

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

NAME OF COMMITTEE (In Full)

**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  
AustinState  
TXZip Code  
78734

Outstanding Balance Beginning This Period

2565.00

Transaction ID : SD10.5219

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2565.00

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

**RightSide Compliance**Nature of Debt (Purpose):  
Compliance Services

Mailing Address PO Box 341027

City  
AustinState  
TXZip Code  
78734

Outstanding Balance Beginning This Period

1147.50

Transaction ID : SD10.5320

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1147.50

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

**RightSide Compliance**Nature of Debt (Purpose):  
Compliance Services

Mailing Address PO Box 341027

City  
AustinState  
TXZip Code  
78734

Outstanding Balance Beginning This Period

2340.00

Transaction ID : SD10.5321

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2340.00

1) **SUBTOTALS** This Period This Page (optional)..... ►

6052.50

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 18 OF 32

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

NAME OF COMMITTEE (In Full)

**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  
AustinState  
TXZip Code  
78734

Outstanding Balance Beginning This Period

2092.50

Transaction ID : SD10.5322

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2092.50

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

**RightSide Compliance**Nature of Debt (Purpose):  
Compliance Services

Mailing Address PO Box 341027

City  
AustinState  
TXZip Code  
78734

Outstanding Balance Beginning This Period

2610.00

Transaction ID : SD10.5324

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2610.00

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

**RightSide Compliance**Nature of Debt (Purpose):  
Compliance Services

Mailing Address PO Box 341027

City  
AustinState  
TXZip Code  
78734

Outstanding Balance Beginning This Period

135.00

Transaction ID : SD10.5347

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

135.00

1) **SUBTOTALS** This Period This Page (optional)..... ►

4837.50

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

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

PAGE 19 OF 32

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

NAME OF COMMITTEE (In Full)

**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  
AustinState  
TXZip Code  
78734

Outstanding Balance Beginning This Period

202.50

Transaction ID : SD10.5348

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

202.50

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

**RightSide Compliance**Nature of Debt (Purpose):  
Compliance Services

Mailing Address PO Box 341027

City  
AustinState  
TXZip Code  
78734

Outstanding Balance Beginning This Period

1057.50

Transaction ID : SD10.5349

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1057.50

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

**RightSide Compliance**Nature of Debt (Purpose):  
Compliance Services

Mailing Address PO Box 341027

City  
AustinState  
TXZip Code  
78734

Outstanding Balance Beginning This Period

697.50

Transaction ID : SD10.5359

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

697.50

1) **SUBTOTALS** This Period This Page (optional)..... ►

1957.50

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

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

PAGE 20 OF 32

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

NAME OF COMMITTEE (In Full)

**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  
AustinState  
TXZip Code  
78734

Outstanding Balance Beginning This Period

202.50

Transaction ID : SD10.5360

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

202.50

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

**RightSide Compliance**Nature of Debt (Purpose):  
Compliance Services

Mailing Address PO Box 341027

City  
AustinState  
TXZip Code  
78734

Outstanding Balance Beginning This Period

1597.50

Transaction ID : SD10.5361

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1597.50

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

**RightSide Compliance**Nature of Debt (Purpose):  
Compliance Services

Mailing Address PO Box 341027

City  
AustinState  
TXZip Code  
78734

Outstanding Balance Beginning This Period

1012.50

Transaction ID : SD10.5370

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1012.50

1) **SUBTOTALS** This Period This Page (optional)..... ►

2812.50

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

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

PAGE 21 OF 32

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

NAME OF COMMITTEE (In Full)

**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  
AustinState  
TXZip Code  
78734

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.5375

Amount Incurred This Period

967.50

Payment This Period

0.00

Outstanding Balance at Close of This Period

967.50

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

**The Gober Group**Nature of Debt (Purpose):  
Legal Services

Mailing Address PO Box 341016

City  
AustinState  
TXZip Code  
78734

Outstanding Balance Beginning This Period

5258.89

Transaction ID : SD10.4853

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

5258.89

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

City  
AustinState  
TXZip Code  
78734

Outstanding Balance Beginning This Period

10994.00

Transaction ID : SD10.4982

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

10994.00

1) **SUBTOTALS** This Period This Page (optional)..... ►

17220.39

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

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

PAGE 22 OF 32

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

NAME OF COMMITTEE (In Full)

**MEGAPHONE**

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

**The Gober Group**

Nature of Debt (Purpose):

Legal Services

Mailing Address PO Box 341016

City  
AustinState  
TXZip Code  
78734

Outstanding Balance Beginning This Period

8162.50

Transaction ID : SD10.4983

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

8162.50

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

**The Gober Group**

Nature of Debt (Purpose):

Legal Services

Mailing Address PO Box 341016

City  
AustinState  
TXZip Code  
78734

Outstanding Balance Beginning This Period

890.50

Transaction ID : SD10.5004

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

890.50

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

City  
AustinState  
TXZip Code  
78734

Outstanding Balance Beginning This Period

332.00

Transaction ID : SD10.5021

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

332.00

1) **SUBTOTALS** This Period This Page (optional)..... ►

9385.00

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

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

PAGE 23 OF 32

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

NAME OF COMMITTEE (In Full)

**MEGAPHONE**

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

**The Gober Group**

Nature of Debt (Purpose):

Legal Services

Mailing Address PO Box 341016

City  
AustinState  
TXZip Code  
78734

Outstanding Balance Beginning This Period

923.50

Transaction ID : SD10.5038

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

923.50

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

**The Gober Group**

Nature of Debt (Purpose):

Legal Services

Mailing Address PO Box 341016

City  
AustinState  
TXZip Code  
78734

Outstanding Balance Beginning This Period

7369.00

Transaction ID : SD10.5039

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

7369.00

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

City  
AustinState  
TXZip Code  
78734

Outstanding Balance Beginning This Period

10049.50

Transaction ID : SD10.5066

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

10049.50

1) **SUBTOTALS** This Period This Page (optional)..... ►

18342.00

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

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

PAGE 24 OF 32

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

NAME OF COMMITTEE (In Full)

**MEGAPHONE**

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

**The Gober Group**

Nature of Debt (Purpose):

Legal Services

Mailing Address PO Box 341016

City  
AustinState  
TXZip Code  
78734

Outstanding Balance Beginning This Period

200.00

Transaction ID : SD10.5071

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

200.00

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

**The Gober Group**

Nature of Debt (Purpose):

Legal Services

Mailing Address PO Box 341016

City  
AustinState  
TXZip Code  
78734

Outstanding Balance Beginning This Period

436.50

Transaction ID : SD10.5101

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

436.50

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

City  
AustinState  
TXZip Code  
78734

Outstanding Balance Beginning This Period

15428.50

Transaction ID : SD10.5121

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

15428.50

1) **SUBTOTALS** This Period This Page (optional)..... ►

16065.00

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



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

PAGE 25 OF 32

FOR LINE NUMBER:  
(check only one)
☐ 9  
☒ 10
NAME OF COMMITTEE (In Full)  
**MEGAPHONE**

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

**The Gober Group**Nature of Debt (Purpose):  
Legal Services

Mailing Address PO Box 341016

City  
AustinState  
TXZip Code  
78734

Outstanding Balance Beginning This Period

4980.00

Transaction ID : SD10.5153

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

4980.00

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

**The Gober Group**Nature of Debt (Purpose):  
Legal Services

Mailing Address PO Box 341016

City  
AustinState  
TXZip Code  
78734

Outstanding Balance Beginning This Period

401.50

Transaction ID : SD10.5155

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

401.50

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

City  
AustinState  
TXZip Code  
78734

Outstanding Balance Beginning This Period

160.50

Transaction ID : SD10.5156

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

160.50

1) **SUBTOTALS** This Period This Page (optional)..... ►

5542.00

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

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

PAGE 26 OF 32

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

NAME OF COMMITTEE (In Full)

**MEGAPHONE**

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

**The Gober Group**

Nature of Debt (Purpose):

Legal Services

Mailing Address PO Box 341016

City  
AustinState  
TXZip Code  
78734

Outstanding Balance Beginning This Period

54000.00

Transaction ID : SD10.5163

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

54000.00

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

**The Gober Group**

Nature of Debt (Purpose):

Legal Services

Mailing Address PO Box 341016

City  
AustinState  
TXZip Code  
78734

Outstanding Balance Beginning This Period

107.00

Transaction ID : SD10.5180

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

107.00

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

City  
AustinState  
TXZip Code  
78734

Outstanding Balance Beginning This Period

107.00

Transaction ID : SD10.5181

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

107.00

1) **SUBTOTALS** This Period This Page (optional)..... ►

54214.00

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

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

PAGE 27 OF 32

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

NAME OF COMMITTEE (In Full)

**MEGAPHONE**

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

**The Gober Group**

Nature of Debt (Purpose):

Legal Services

Mailing Address PO Box 341016

City  
AustinState  
TXZip Code  
78734

Outstanding Balance Beginning This Period

1690.00

Transaction ID : SD10.5204

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1690.00

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

**The Gober Group**

Nature of Debt (Purpose):

Legal Services

Mailing Address PO Box 341016

City  
AustinState  
TXZip Code  
78734

Outstanding Balance Beginning This Period

14.97

Transaction ID : SD10.5205

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

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

City  
AustinState  
TXZip Code  
78734

Outstanding Balance Beginning This Period

1979.50

Transaction ID : SD10.5207

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1979.50

1) **SUBTOTALS** This Period This Page (optional)..... ►

3684.47

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 28 OF 32

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

NAME OF COMMITTEE (In Full)

**MEGAPHONE**

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

**The Gober Group**

Nature of Debt (Purpose):

Legal Services

Mailing Address PO Box 341016

City  
AustinState  
TXZip Code  
78734

Outstanding Balance Beginning This Period

53.50

Transaction ID : SD10.5220

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

53.50

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

**The Gober Group**

Nature of Debt (Purpose):

Legal Services

Mailing Address PO Box 341016

City  
AustinState  
TXZip Code  
78734

Outstanding Balance Beginning This Period

240.00

Transaction ID : SD10.5221

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

240.00

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

City  
AustinState  
TXZip Code  
78734

Outstanding Balance Beginning This Period

160.50

Transaction ID : SD10.5315

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

160.50

1) **SUBTOTALS** This Period This Page (optional)..... ►

454.00

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  
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PAGE 29 OF 32

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

NAME OF COMMITTEE (In Full)

**MEGAPHONE**

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

**The Gober Group**Nature of Debt (Purpose):  
Legal Services

Mailing Address PO Box 341016

City  
AustinState  
TXZip Code  
78734

Outstanding Balance Beginning This Period

7750.00

Transaction ID : SD10.5316

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

7750.00

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

**The Gober Group**Nature of Debt (Purpose):  
Legal Services

Mailing Address PO Box 341016

City  
AustinState  
TXZip Code  
78734

Outstanding Balance Beginning This Period

217.50

Transaction ID : SD10.5325

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

217.50

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

City  
AustinState  
TXZip Code  
78734

Outstanding Balance Beginning This Period

829.50

Transaction ID : SD10.5326

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

829.50

1) **SUBTOTALS** This Period This Page (optional)..... ►

8797.00

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  
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numbered line)

PAGE 30 OF 32

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

NAME OF COMMITTEE (In Full)

**MEGAPHONE**

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

**The Gober Group**

Nature of Debt (Purpose):

Legal Services

Mailing Address PO Box 341016

City  
AustinState  
TXZip Code  
78734

Outstanding Balance Beginning This Period

160.50

Transaction ID : SD10.5327

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

160.50

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

**The Gober Group**

Nature of Debt (Purpose):

Legal Services

Mailing Address PO Box 341016

City  
AustinState  
TXZip Code  
78734

Outstanding Balance Beginning This Period

327.50

Transaction ID : SD10.5328

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

327.50

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

City  
AustinState  
TXZip Code  
78734

Outstanding Balance Beginning This Period

1551.50

Transaction ID : SD10.5329

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1551.50

1) **SUBTOTALS** This Period This Page (optional)..... ►

2039.50

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  
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numbered line)

PAGE 31 OF 32

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

NAME OF COMMITTEE (In Full)

**MEGAPHONE**

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

**The Gober Group**

Nature of Debt (Purpose):

Legal Services

Mailing Address PO Box 341016

City

Austin

State

TX

Zip Code

78734

Outstanding Balance Beginning This Period

481.50

Transaction ID : SD10.5345

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

481.50

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

**The Gober Group**

Nature of Debt (Purpose):

Legal Services

Mailing Address PO Box 341016

City

Austin

State

TX

Zip Code

78734

Outstanding Balance Beginning This Period

231.25

Transaction ID : SD10.5346

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

231.25

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

City

Austin

State

TX

Zip Code

78734

Outstanding Balance Beginning This Period

261.00

Transaction ID : SD10.5362

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

261.00

1) **SUBTOTALS** This Period This Page (optional)..... ►

973.75

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  
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numbered line)

PAGE 32 OF 32

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

NAME OF COMMITTEE (In Full)

**MEGAPHONE**

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

**The Gober Group**

Nature of Debt (Purpose):

Legal Services

Mailing Address PO Box 341016

City  
AustinState  
TXZip Code  
78734

Outstanding Balance Beginning This Period

55.50

Transaction ID : SD10.5368

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

55.50

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

**The Gober Group**

Nature of Debt (Purpose):

Legal Services

Mailing Address PO Box 341016

City  
AustinState  
TXZip Code  
78734

Outstanding Balance Beginning This Period

3557.00

Transaction ID : SD10.5369

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

3557.00

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

**Tusk Digital**

Nature of Debt (Purpose):

Website Development and Design

Mailing Address 718 7th St NW  
2nd FloorCity  
WashingtonState  
DCZip Code  
20001

Outstanding Balance Beginning This Period

297000.00

Transaction ID : SD10.4139

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

297000.00

1) **SUBTOTALS** This Period This Page (optional)..... ►

300612.50

2) **TOTALS** This Period (last page this line number only)..... ►

541060.24

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ..... ►

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

541060.24