

**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 341027

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)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

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

in the
State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

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

in the
State of

5. Covering Period

M M / D D / Y Y Y Y Y Y
01 01 2020

through

M M / D D / Y Y Y Y Y Y
04 10 2020

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
04 27 2020

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 01 / 01 / 2020 To: M M / D D / Y Y Y Y Y Y 04 / 10 / 2020

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y Y Y 2020		971.43
(b) Cash on Hand at Beginning of Reporting Period.....	971.43	
(c) Total Receipts (from Line 19)	488921.86	488921.86
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	489893.29	489893.29
7. Total Disbursements (from Line 31).....	489893.29	489893.29
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	0.00	0.00
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	



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

For further information contact:

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

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

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

MEGAPHONE

Report Covering the Period:

From:

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

To:

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

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).....	488921.86	488921.86
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	488921.86	488921.86
(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)	488921.86	488921.86
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	488921.86	488921.86
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	488921.86	488921.86

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	489893.29	489893.29
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	489893.29	489893.29
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	489893.29	489893.29
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	489893.29	489893.29

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)	488921.86	488921.86
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	488921.86	488921.86
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	489893.29	489893.29
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)▶	489893.29	489893.29

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

Form/Schedule: F3XA

Transaction ID :

Report is amended to add in-kind contributions to clear the pending debt originally reported. Since the FEC File Software does not permit a debt, reported on Schedule D, to be cleared by applying an in-kind contribution. Consequently, the described in-kind contributions have been added as if they were monetary transactions on Schedule A. Additionally, a monetary expenditure is applied to the debt on Schedule D but described as an in-kind expenditure; the expenditure transaction operates to offset the in-kind contribution just as it would if the FEC File Software automatically generated the offsetting expenditure for the in-kind contributions.

Form/Schedule:

Transaction ID:

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 OF 69

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

MEGAPHONE

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

A. RightSide Compliance

Mailing Address PO Box 341027

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

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

107242.75

Date of Receipt

M M	D D	Y Y Y Y
04	10	2020

Transaction ID : SA11AI.5491

Amount of Each Receipt this Period

107242.75

☐ Memo Item

In-kind - Compliance Services

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

B. The Gober Group

Mailing Address PO Box 341016

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

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

115665.11

Date of Receipt

M M	D D	Y Y Y Y
04	10	2020

Transaction ID : SA11AI.5587

Amount of Each Receipt this Period

115665.11

☐ Memo Item

In-kind - Legal Services

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

C. Tusk DigitalMailing Address 1441 L Street NW
12th FlCity
WashingtonState
DCZip Code
20005FEC 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 ▼

266014.00

Date of Receipt

M M	D D	Y Y Y Y
04	10	2020

Transaction ID : SA11AI.5494

Amount of Each Receipt this Period

266014.00

☐ Memo Item

In-kind - Website Development and Design

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

488921.86

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

488921.86

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

Form/Schedule: SA11AI

Transaction ID : SA11AI.5491

Receipt is added as a work around for the limitations of the FEC File Software. The FEC File Software does not have a functionality to clear debts with in-kind contributions. Receipt is properly described as an in-kind contribution but is added as a monetary transaction to permit the FEC File Software to clear the debts on Schedule D.

Form/Schedule: SA11AI

Transaction ID: SA11AI.5494

Receipt is added as a work around for the limitations of the FEC File Software. The FEC File Software does not have a functionality to clear debts with in-kind contributions. Receipt is properly described as an in-kind contribution but is added as a monetary transaction to permit the FEC File Software to clear the debts on Schedule D.

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

PAGE 9 OF 69

☒ 21b ☐ 22 ☐ 23 ☐ 26 ☐ 27
☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
MEGAPHONE

Full Name (Last, First, Middle Initial)

A. RightSide Compliance

Mailing Address PO Box 341027

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

Candidate Name

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

State: District:

Date of Disbursement

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

FEC Identification Number

C**Transaction ID : SB21B.5496**

Amount of Each Disbursement this Period

5515.46

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. RightSide Compliance

Mailing Address PO Box 341027

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

Candidate Name

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

State: District:

Date of Disbursement

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

FEC Identification Number

C**Transaction ID : SB21B.5497**

Amount of Each Disbursement this Period

5530.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. RightSide Compliance

Mailing Address PO Box 341027

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

Candidate Name

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

State: District:

Date of Disbursement

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

FEC Identification Number

C**Transaction ID : SB21B.5498**

Amount of Each Disbursement this Period

16800.00

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

27845.46

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

PAGE 10 OF 69

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

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NAME OF COMMITTEE (In Full)

MEGAPHONE

Full Name (Last, First, Middle Initial)

A. RightSide Compliance

Mailing Address PO Box 341027

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

Candidate Name

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

State: District:

Date of Disbursement

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

FEC Identification Number

C**Transaction ID : SB21B.5499**

Amount of Each Disbursement this Period

7472.50

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. RightSide Compliance

Mailing Address PO Box 341027

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

Candidate Name

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

State: District:

Date of Disbursement

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

FEC Identification Number

C**Transaction ID : SB21B.5500**

Amount of Each Disbursement this Period

1575.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. RightSide Compliance

Mailing Address PO Box 341027

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

Candidate Name

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

State: District:

Date of Disbursement

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

FEC Identification Number

C**Transaction ID : SB21B.5501**

Amount of Each Disbursement this Period

2415.00

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

11462.50

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

PAGE 11 OF 69

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

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NAME OF COMMITTEE (In Full)

MEGAPHONE

Full Name (Last, First, Middle Initial)

A. RightSide Compliance

Mailing Address PO Box 341027

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

Candidate Name

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

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
04		10		2020

FEC Identification Number

C**Transaction ID : SB21B.5502**

Amount of Each Disbursement this Period

1792.31

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. RightSide Compliance

Mailing Address PO Box 341027

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

Candidate Name

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

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
04		10		2020

FEC Identification Number

C**Transaction ID : SB21B.5503**

Amount of Each Disbursement this Period

3062.50

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. RightSide Compliance

Mailing Address PO Box 341027

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

Candidate Name

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

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
04		10		2020

FEC Identification Number

C**Transaction ID : SB21B.5504**

Amount of Each Disbursement this Period

4455.00

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

9309.81

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

PAGE 12 OF 69

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

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NAME OF COMMITTEE (In Full)

MEGAPHONE

Full Name (Last, First, Middle Initial)

A. RightSide Compliance

Mailing Address PO Box 341027

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

Candidate Name

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

State: District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : SB21B.5505

Amount of Each Disbursement this Period

1777.50

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. RightSide Compliance

Mailing Address PO Box 341027

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

Candidate Name

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

State: District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : SB21B.5506

Amount of Each Disbursement this Period

1462.50

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. RightSide Compliance

Mailing Address PO Box 341027

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

Candidate Name

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

State: District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : SB21B.5507

Amount of Each Disbursement this Period

2115.00

☐ Memo Item

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

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

5355.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE 13 OF 69

☒ 21b ☐ 22 ☐ 23 ☐ 26 ☐ 27
☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
MEGAPHONE

Full Name (Last, First, Middle Initial)

A. RightSide Compliance

Mailing Address PO Box 341027

City
Austin

State
TX

Zip Code
78734

Purpose of Disbursement
In-kind - Compliance Services

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
04 / 10 / 2020

FEC Identification Number

C

Transaction ID : SB21B.5508

Amount of Each Disbursement this Period

1012.50

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. RightSide Compliance

Mailing Address PO Box 341027

City
Austin

State
TX

Zip Code
78734

Purpose of Disbursement
In-kind - Compliance Services

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
04 / 10 / 2020

FEC Identification Number

C

Transaction ID : SB21B.5509

Amount of Each Disbursement this Period

742.50

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. RightSide Compliance

Mailing Address PO Box 341027

City
Austin

State
TX

Zip Code
78734

Purpose of Disbursement
In-kind - Compliance Services

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
04 / 10 / 2020

FEC Identification Number

C

Transaction ID : SB21B.5510

Amount of Each Disbursement this Period

1147.50

☐ Memo Item

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

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

2902.50

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

PAGE 14 OF 69

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

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NAME OF COMMITTEE (In Full)

MEGAPHONE

Full Name (Last, First, Middle Initial)

A. RightSide Compliance

Mailing Address PO Box 341027

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

Candidate Name

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

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		10		2020

FEC Identification Number

C**Transaction ID : SB21B.5511**

Amount of Each Disbursement this Period

157.50

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. RightSide Compliance

Mailing Address PO Box 341027

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

Candidate Name

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

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		10		2020

FEC Identification Number

C**Transaction ID : SB21B.5512**

Amount of Each Disbursement this Period

697.50

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. RightSide Compliance

Mailing Address PO Box 341027

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

Candidate Name

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

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		10		2020

FEC Identification Number

C**Transaction ID : SB21B.5513**

Amount of Each Disbursement this Period

652.50

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

1507.50

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

PAGE 15 OF 69

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

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NAME OF COMMITTEE (In Full)

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A. RightSide Compliance

Mailing Address PO Box 341027

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

Candidate Name

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

State: District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : SB21B.5514

Amount of Each Disbursement this Period

405.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. RightSide Compliance

Mailing Address PO Box 341027

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

Candidate Name

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

State: District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : SB21B.5515

Amount of Each Disbursement this Period

562.50

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. RightSide Compliance

Mailing Address PO Box 341027

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

Candidate Name

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

State: District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : SB21B.5516

Amount of Each Disbursement this Period

10170.00

☐ Memo Item

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

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

11137.50

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

PAGE 16 OF 69

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

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NAME OF COMMITTEE (In Full)

MEGAPHONE

Full Name (Last, First, Middle Initial)

A. RightSide Compliance

Mailing Address PO Box 341027

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

Candidate Name

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

State: District:

Date of Disbursement

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

FEC Identification Number

C **Transaction ID : SB21B.5517**

Amount of Each Disbursement this Period

 1282.50☐ Memo Item

Full Name (Last, First, Middle Initial)

B. RightSide Compliance

Mailing Address PO Box 341027

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

Candidate Name

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

State: District:

Date of Disbursement

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

FEC Identification Number

C **Transaction ID : SB21B.5518**

Amount of Each Disbursement this Period

 225.00☐ Memo Item

Full Name (Last, First, Middle Initial)

C. RightSide Compliance

Mailing Address PO Box 341027

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

Candidate Name

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

State: District:

Date of Disbursement

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

FEC Identification Number

C **Transaction ID : SB21B.5519**

Amount of Each Disbursement this Period

 4320.00☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ► 5827.50

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

PAGE 17 OF 69

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

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NAME OF COMMITTEE (In Full)

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A. RightSide Compliance

Mailing Address PO Box 341027

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

Candidate Name

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

State: District:

Date of Disbursement

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

FEC Identification Number

C**Transaction ID : SB21B.5520**

Amount of Each Disbursement this Period

2565.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. RightSide Compliance

Mailing Address PO Box 341027

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

Candidate Name

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

State: District:

Date of Disbursement

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

FEC Identification Number

C**Transaction ID : SB21B.5521**

Amount of Each Disbursement this Period

1147.50

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. RightSide Compliance

Mailing Address PO Box 341027

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

Candidate Name

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

State: District:

Date of Disbursement

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

FEC Identification Number

C**Transaction ID : SB21B.5522**

Amount of Each Disbursement this Period

2340.00

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

6052.50

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

PAGE 18 OF 69

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

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NAME OF COMMITTEE (In Full)

MEGAPHONE

Full Name (Last, First, Middle Initial)

A. RightSide Compliance

Mailing Address PO Box 341027

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

Candidate Name

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

State: District:

Date of Disbursement

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

FEC Identification Number

C**Transaction ID : SB21B.5523**

Amount of Each Disbursement this Period

2092.50

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. RightSide Compliance

Mailing Address PO Box 341027

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

Candidate Name

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

State: District:

Date of Disbursement

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

FEC Identification Number

C**Transaction ID : SB21B.5524**

Amount of Each Disbursement this Period

2610.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. RightSide Compliance

Mailing Address PO Box 341027

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

Candidate Name

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

State: District:

Date of Disbursement

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

FEC Identification Number

C**Transaction ID : SB21B.5525**

Amount of Each Disbursement this Period

135.00

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

4837.50

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

PAGE 19 OF 69

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

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NAME OF COMMITTEE (In Full)

MEGAPHONE

Full Name (Last, First, Middle Initial)

A. RightSide Compliance

Mailing Address PO Box 341027

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

Candidate Name

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

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
04		10		2020

FEC Identification Number

C

Transaction ID : SB21B.5526

Amount of Each Disbursement this Period

202.50

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. RightSide Compliance

Mailing Address PO Box 341027

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

Candidate Name

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

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
04		10		2020

FEC Identification Number

C

Transaction ID : SB21B.5527

Amount of Each Disbursement this Period

1057.50

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. RightSide Compliance

Mailing Address PO Box 341027

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

Candidate Name

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

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
04		10		2020

FEC Identification Number

C

Transaction ID : SB21B.5528

Amount of Each Disbursement this Period

22.50

☐ Memo Item

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

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

1282.50

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

PAGE 20 OF 69

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

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MEGAPHONE

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A. RightSide Compliance

Mailing Address PO Box 341027

City
AustinState
TXZip Code
78734

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
04		10		2020

FEC Identification Number

C**Transaction ID : SB21B.5529**

Amount of Each Disbursement this Period

202.50

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. RightSide Compliance

Mailing Address PO Box 341027

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

Candidate Name

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

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
04		10		2020

FEC Identification Number

C**Transaction ID : SB21B.5530**

Amount of Each Disbursement this Period

3082.50

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. RightSide Compliance

Mailing Address PO Box 341027

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

Candidate Name

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

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
04		10		2020

FEC Identification Number

C**Transaction ID : SB21B.5531**

Amount of Each Disbursement this Period

315.00

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

3600.00

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

PAGE 21 OF 69

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

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NAME OF COMMITTEE (In Full)
MEGAPHONE

Full Name (Last, First, Middle Initial)

A. RightSide Compliance

Mailing Address PO Box 341027

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

Candidate Name

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

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
04		10		2020

FEC Identification Number

C**Transaction ID : SB21B.5532**

Amount of Each Disbursement this Period

450.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. RightSide Compliance

Mailing Address PO Box 341027

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

Candidate Name

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

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
04		10		2020

FEC Identification Number

C**Transaction ID : SB21B.5533**

Amount of Each Disbursement this Period

450.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. RightSide Compliance

Mailing Address PO Box 341027

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

Candidate Name

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

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
04		10		2020

FEC Identification Number

C**Transaction ID : SB21B.5534**

Amount of Each Disbursement this Period

472.50

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

1372.50

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

PAGE 22 OF 69

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

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Mailing Address PO Box 341027

City
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78734Purpose of Disbursement
In-kind - Compliance Services

Candidate Name

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

State: District:

Date of Disbursement

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

FEC Identification Number

C**Transaction ID : SB21B.5535**

Amount of Each Disbursement this Period

472.50

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. RightSide Compliance

Mailing Address PO Box 341027

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

Candidate Name

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

State: District:

Date of Disbursement

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

FEC Identification Number

C**Transaction ID : SB21B.5536**

Amount of Each Disbursement this Period

495.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. RightSide Compliance

Mailing Address PO Box 341027

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

Candidate Name

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

State: District:

Date of Disbursement

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

FEC Identification Number

C**Transaction ID : SB21B.5537**

Amount of Each Disbursement this Period

495.00

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

1462.50

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

PAGE 23 OF 69

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

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NAME OF COMMITTEE (In Full)

MEGAPHONE

Full Name (Last, First, Middle Initial)

A. RightSide Compliance

Mailing Address PO Box 341027

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

Candidate Name

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

State: District:

Date of Disbursement

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

FEC Identification Number

C**Transaction ID : SB21B.5538**

Amount of Each Disbursement this Period

607.50

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. RightSide Compliance

Mailing Address PO Box 341027

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

Candidate Name

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

State: District:

Date of Disbursement

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

FEC Identification Number

C**Transaction ID : SB21B.5539**

Amount of Each Disbursement this Period

697.50

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. RightSide Compliance

Mailing Address PO Box 341027

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

Candidate Name

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

State: District:

Date of Disbursement

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

FEC Identification Number

C**Transaction ID : SB21B.5540**

Amount of Each Disbursement this Period

967.50

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

2272.50

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

PAGE 24 OF 69

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

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NAME OF COMMITTEE (In Full)

MEGAPHONE

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A. RightSide Compliance

Mailing Address PO Box 341027

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

Candidate Name

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

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
04		10		2020

FEC Identification Number

C**Transaction ID : SB21B.5541**

Amount of Each Disbursement this Period

1012.50

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. RightSide Compliance

Mailing Address PO Box 341027

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

Candidate Name

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

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
04		10		2020

FEC Identification Number

C**Transaction ID : SB21B.5542**

Amount of Each Disbursement this Period

1012.50

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. RightSide Compliance

Mailing Address PO Box 341027

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

Candidate Name

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

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
04		10		2020

FEC Identification Number

C**Transaction ID : SB21B.5543**

Amount of Each Disbursement this Period

1147.50

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

3172.50

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

PAGE 25 OF 69

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

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Mailing Address PO Box 341027

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

Candidate Name

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

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		10		2020

FEC Identification Number

C**Transaction ID : SB21B.5544**

Amount of Each Disbursement this Period

1327.50

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. RightSide Compliance

Mailing Address PO Box 341027

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

Candidate Name

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

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		10		2020

FEC Identification Number

C**Transaction ID : SB21B.5545**

Amount of Each Disbursement this Period

1500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. RightSide Compliance

Mailing Address PO Box 341027

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

Candidate Name

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

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		10		2020

FEC Identification Number

C**Transaction ID : SB21B.5546**

Amount of Each Disbursement this Period

1597.50

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

4425.00

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

PAGE 26 OF 69

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

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NAME OF COMMITTEE (In Full)

MEGAPHONE

Full Name (Last, First, Middle Initial)

A. RightSide Compliance

Mailing Address PO Box 341027

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

Candidate Name

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

State: District:

Date of Disbursement

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

FEC Identification Number

C**Transaction ID : SB21B.5547**

Amount of Each Disbursement this Period

1639.98

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. RightSide Compliance

Mailing Address PO Box 341027

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

Candidate Name

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

State: District:

Date of Disbursement

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

FEC Identification Number

C**Transaction ID : SB21B.5548**

Amount of Each Disbursement this Period

1777.50

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. The Gober Group

Mailing Address PO Box 341016

City
AustinState
TXZip Code
78734Purpose of Disbursement
Legal Services

Candidate Name

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

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	3		2	0	2	0

FEC Identification Number

C**Transaction ID : SB21B.5489**

Amount of Each Disbursement this Period

470.42

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

3887.90

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

PAGE 27 OF 69

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

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NAME OF COMMITTEE (In Full)

MEGAPHONE

Full Name (Last, First, Middle Initial)

A. The Gober Group

Mailing Address PO Box 341016

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

Candidate Name

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

State: District:

Date of Disbursement

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

FEC Identification Number

C**Transaction ID : SB21B.5549**

Amount of Each Disbursement this Period

14.97

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. The Gober Group

Mailing Address PO Box 341016

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

Candidate Name

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

State: District:

Date of Disbursement

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

FEC Identification Number

C**Transaction ID : SB21B.5550**

Amount of Each Disbursement this Period

53.50

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. The Gober Group

Mailing Address PO Box 341016

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

Candidate Name

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

State: District:

Date of Disbursement

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

FEC Identification Number

C**Transaction ID : SB21B.5551**

Amount of Each Disbursement this Period

55.50

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

123.97

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

PAGE 28 OF 69

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

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NAME OF COMMITTEE (In Full)

MEGAPHONE

Full Name (Last, First, Middle Initial)

A. The Gober Group

Mailing Address PO Box 341016

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

Candidate Name

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

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
04		10		2020

FEC Identification Number

C**Transaction ID : SB21B.5553**

Amount of Each Disbursement this Period

107.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. The Gober Group

Mailing Address PO Box 341016

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

Candidate Name

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

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
04		10		2020

FEC Identification Number

C**Transaction ID : SB21B.5554**

Amount of Each Disbursement this Period

107.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. The Gober Group

Mailing Address PO Box 341016

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

Candidate Name

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

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
04		10		2020

FEC Identification Number

C**Transaction ID : SB21B.5555**

Amount of Each Disbursement this Period

107.00

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

321.00

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

PAGE 29 OF 69

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

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NAME OF COMMITTEE (In Full)

MEGAPHONE

Full Name (Last, First, Middle Initial)

A. The Gober Group

Mailing Address PO Box 341016

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

Candidate Name

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

State: District:

Date of Disbursement

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

FEC Identification Number

C**Transaction ID : SB21B.5556**

Amount of Each Disbursement this Period

115.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. The Gober Group

Mailing Address PO Box 341016

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

Candidate Name

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

State: District:

Date of Disbursement

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

FEC Identification Number

C**Transaction ID : SB21B.5557**

Amount of Each Disbursement this Period

160.50

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. The Gober Group

Mailing Address PO Box 341016

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

Candidate Name

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

State: District:

Date of Disbursement

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

FEC Identification Number

C**Transaction ID : SB21B.5558**

Amount of Each Disbursement this Period

160.50

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

436.00

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

PAGE 30 OF 69

☒ 21b ☐ 22 ☐ 23 ☐ 26 ☐ 27
☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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A. The Gober Group

Mailing Address PO Box 341016

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

Candidate Name

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

State: District:

Date of Disbursement

M	M		D	D		Y	Y	Y	Y	Y	Y
0	4		1	0		2	0	2	0		

FEC Identification Number

C**Transaction ID : SB21B.5559**

Amount of Each Disbursement this Period

150.50

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. The Gober Group

Mailing Address PO Box 341016

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

Candidate Name

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

State: District:

Date of Disbursement

M	M		D	D		Y	Y	Y	Y	Y	Y
0	4		1	0		2	0	2	0		

FEC Identification Number

C**Transaction ID : SB21B.5560**

Amount of Each Disbursement this Period

10.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. The Gober Group

Mailing Address PO Box 341016

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

Candidate Name

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

State: District:

Date of Disbursement

M	M		D	D		Y	Y	Y	Y	Y	Y
0	4		1	0		2	0	2	0		

FEC Identification Number

C**Transaction ID : SB21B.5561**

Amount of Each Disbursement this Period

200.00

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

360.50

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

PAGE 31 OF 69

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

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NAME OF COMMITTEE (In Full)

MEGAPHONE

Full Name (Last, First, Middle Initial)

A. The Gober Group

Mailing Address PO Box 341016

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

Candidate Name

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

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
04		10		2020

FEC Identification Number

C**Transaction ID : SB21B.5562**

Amount of Each Disbursement this Period

217.50

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. The Gober Group

Mailing Address PO Box 341016

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

Candidate Name

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

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
04		10		2020

FEC Identification Number

C**Transaction ID : SB21B.5563**

Amount of Each Disbursement this Period

225.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. The Gober Group

Mailing Address PO Box 341016

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

Candidate Name

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

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
04		10		2020

FEC Identification Number

C**Transaction ID : SB21B.5564**

Amount of Each Disbursement this Period

231.25

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

673.75

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

PAGE 32 OF 69

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

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NAME OF COMMITTEE (In Full)

MEGAPHONE

Full Name (Last, First, Middle Initial)

A. The Gober Group

Mailing Address PO Box 341016

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

Candidate Name

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

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
04		10		2020

FEC Identification Number

C**Transaction ID : SB21B.5565**

Amount of Each Disbursement this Period

240.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. The Gober Group

Mailing Address PO Box 341016

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

Candidate Name

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

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
04		10		2020

FEC Identification Number

C**Transaction ID : SB21B.5566**

Amount of Each Disbursement this Period

261.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. The Gober Group

Mailing Address PO Box 341016

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

Candidate Name

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

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
04		10		2020

FEC Identification Number

C**Transaction ID : SB21B.5567**

Amount of Each Disbursement this Period

302.50

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

803.50

**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 33 OF 69

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

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NAME OF COMMITTEE (In Full)

MEGAPHONE

Full Name (Last, First, Middle Initial)

A. The Gober Group

Mailing Address PO Box 341016

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

Candidate Name

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

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
04		10		2020

FEC Identification Number

C**Transaction ID : SB21B.5568**

Amount of Each Disbursement this Period

327.50

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. The Gober Group

Mailing Address PO Box 341016

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

Candidate Name

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

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
04		10		2020

FEC Identification Number

C**Transaction ID : SB21B.5569**

Amount of Each Disbursement this Period

401.50

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. The Gober Group

Mailing Address PO Box 341016

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

Candidate Name

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

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
04		10		2020

FEC Identification Number

C**Transaction ID : SB21B.5570**

Amount of Each Disbursement this Period

436.50

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

1165.50

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

PAGE 34 OF 69

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

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NAME OF COMMITTEE (In Full)

MEGAPHONE

Full Name (Last, First, Middle Initial)

A. The Gober Group

Mailing Address PO Box 341016

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

Candidate Name

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

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y
04		10		2020

FEC Identification Number

C**Transaction ID : SB21B.5571**

Amount of Each Disbursement this Period

481.50

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. The Gober Group

Mailing Address PO Box 341016

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

Candidate Name

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

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y
04		10		2020

FEC Identification Number

C**Transaction ID : SB21B.5572**

Amount of Each Disbursement this Period

814.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. The Gober Group

Mailing Address PO Box 341016

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

Candidate Name

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

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y
04		10		2020

FEC Identification Number

C**Transaction ID : SB21B.5573**

Amount of Each Disbursement this Period

829.50

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

2125.00

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

PAGE 35 OF 69

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

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NAME OF COMMITTEE (In Full)

MEGAPHONE

Full Name (Last, First, Middle Initial)

A. The Gober Group

Mailing Address PO Box 341016

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

Candidate Name

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

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
04		10		2020

FEC Identification Number

C**Transaction ID : SB21B.5574**

Amount of Each Disbursement this Period

1044.50

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. The Gober Group

Mailing Address PO Box 341016

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

Candidate Name

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

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
04		10		2020

FEC Identification Number

C**Transaction ID : SB21B.5575**

Amount of Each Disbursement this Period

1500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. The Gober Group

Mailing Address PO Box 341016

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

Candidate Name

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

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
04		10		2020

FEC Identification Number

C**Transaction ID : SB21B.5576**

Amount of Each Disbursement this Period

1551.50

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

4096.00

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

PAGE 36 OF 69

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

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NAME OF COMMITTEE (In Full)

MEGAPHONE

Full Name (Last, First, Middle Initial)

A. The Gober Group

Mailing Address PO Box 341016

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

Candidate Name

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

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y
04		10		2020

FEC Identification Number

C**Transaction ID : SB21B.5577**

Amount of Each Disbursement this Period

1690.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. The Gober Group

Mailing Address PO Box 341016

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

Candidate Name

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

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y
04		10		2020

FEC Identification Number

C**Transaction ID : SB21B.5578**

Amount of Each Disbursement this Period

1979.50

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. The Gober Group

Mailing Address PO Box 341016

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

Candidate Name

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

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y
04		10		2020

FEC Identification Number

C**Transaction ID : SB21B.5579**

Amount of Each Disbursement this Period

3181.00

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

6850.50

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

PAGE 37 OF 69

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

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NAME OF COMMITTEE (In Full)

MEGAPHONE

Full Name (Last, First, Middle Initial)

A. The Gober Group

Mailing Address PO Box 341016

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

Candidate Name

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

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
04		10		2020

FEC Identification Number

C**Transaction ID : SB21B.5580**

Amount of Each Disbursement this Period

3557.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. The Gober Group

Mailing Address PO Box 341016

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

Candidate Name

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

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
04		10		2020

FEC Identification Number

C**Transaction ID : SB21B.5581**

Amount of Each Disbursement this Period

4980.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. The Gober Group

Mailing Address PO Box 341016

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

Candidate Name

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

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
04		10		2020

FEC Identification Number

C**Transaction ID : SB21B.5582**

Amount of Each Disbursement this Period

2944.39

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

11481.39

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

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

PAGE 38 OF 69

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

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NAME OF COMMITTEE (In Full)

MEGAPHONE

Full Name (Last, First, Middle Initial)

A. The Gober Group

Mailing Address PO Box 341016

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

Candidate Name

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

State: District:

Date of Disbursement

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

FEC Identification Number

C**Transaction ID : SB21B.5583**

Amount of Each Disbursement this Period

7750.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. The Gober Group

Mailing Address PO Box 341016

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

Candidate Name

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

State: District:

Date of Disbursement

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

FEC Identification Number

C**Transaction ID : SB21B.5584**

Amount of Each Disbursement this Period

10049.50

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. The Gober Group

Mailing Address PO Box 341016

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

Candidate Name

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

State: District:

Date of Disbursement

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

FEC Identification Number

C**Transaction ID : SB21B.5585**

Amount of Each Disbursement this Period

15428.50

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

33228.00

**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 39 OF 69

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

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NAME OF COMMITTEE (In Full)

MEGAPHONE

Full Name (Last, First, Middle Initial)

A. The Gober Group

Mailing Address PO Box 341016

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

Candidate Name

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

State: District:

Date of Disbursement

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

FEC Identification Number

C**Transaction ID : SB21B.5586**

Amount of Each Disbursement this Period

54000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Tusk DigitalMailing Address 1441 L Street NW
12th FlCity
WashingtonState
DCZip Code
20005Purpose of Disbursement
PAC Consulting

Candidate Name

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

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3				0	5		2	0	2	0		

FEC Identification Number

C**Transaction ID : SB21B.5490**

Amount of Each Disbursement this Period

441.01

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Tusk DigitalMailing Address 1441 L Street NW
12th FlCity
WashingtonState
DCZip Code
20005Purpose of Disbursement
In-Kind - Website Development and Design

Candidate Name

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

State: District:

Date of Disbursement

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

FEC Identification Number

C**Transaction ID : SB21B.5495**

Amount of Each Disbursement this Period

266014.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

320455.01

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

489833.29

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

PAGE 40 OF 69

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 ComplianceNature of Debt (Purpose):
Compliance Services

Mailing Address PO Box 341027

City
AustinState
TXZip Code
78734

Outstanding Balance Beginning This Period

5515.46

Transaction ID : SD10.4825

Amount Incurred This Period

0.00

Payment This Period

5515.46

Outstanding Balance at Close of This Period

0.00

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

RightSide ComplianceNature of Debt (Purpose):
Compliance Services

Mailing Address PO Box 341027

City
AustinState
TXZip Code
78734

Outstanding Balance Beginning This Period

5530.00

Transaction ID : SD10.4855

Amount Incurred This Period

0.00

Payment This Period

5530.00

Outstanding Balance at Close of This Period

0.00

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

RightSide ComplianceNature of Debt (Purpose):
Compliance Services

Mailing Address PO Box 341027

City
AustinState
TXZip Code
78734

Outstanding Balance Beginning This Period

16800.00

Transaction ID : SD10.4980

Amount Incurred This Period

0.00

Payment This Period

16800.00

Outstanding Balance at Close of This Period

0.00

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

0.00

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

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

PAGE 41 OF 69

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 ComplianceNature 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

7472.50

Outstanding Balance at Close of This Period

0.00

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

RightSide ComplianceNature of Debt (Purpose):
Compliance Services

Mailing Address PO Box 341027

City
AustinState
TXZip Code
78734

Outstanding Balance Beginning This Period

1575.00

Transaction ID : SD10.4995

Amount Incurred This Period

0.00

Payment This Period

1575.00

Outstanding Balance at Close of This Period

0.00

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

RightSide ComplianceNature of Debt (Purpose):
Compliance Services

Mailing Address PO Box 341027

City
AustinState
TXZip Code
78734

Outstanding Balance Beginning This Period

2415.00

Transaction ID : SD10.5024

Amount Incurred This Period

0.00

Payment This Period

2415.00

Outstanding Balance at Close of This Period

0.00

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

0.00

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

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

PAGE 42 OF 69

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 ComplianceNature 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

1792.31

Outstanding Balance at Close of This Period

0.00

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

RightSide ComplianceNature of Debt (Purpose):
Compliance Services

Mailing Address PO Box 341027

City
AustinState
TXZip Code
78734

Outstanding Balance Beginning This Period

3062.50

Transaction ID : SD10.5037

Amount Incurred This Period

0.00

Payment This Period

3062.50

Outstanding Balance at Close of This Period

0.00

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

RightSide ComplianceNature of Debt (Purpose):
Compliance Services

Mailing Address PO Box 341027

City
AustinState
TXZip Code
78734

Outstanding Balance Beginning This Period

4455.00

Transaction ID : SD10.5067

Amount Incurred This Period

0.00

Payment This Period

4455.00

Outstanding Balance at Close of This Period

0.00

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

0.00

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

PAGE 43 OF 69

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 ComplianceNature 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

1777.50

Outstanding Balance at Close of This Period

0.00

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

RightSide ComplianceNature of Debt (Purpose):
Compliance Services

Mailing Address PO Box 341027

City
AustinState
TXZip Code
78734

Outstanding Balance Beginning This Period

1462.50

Transaction ID : SD10.5103

Amount Incurred This Period

0.00

Payment This Period

1462.50

Outstanding Balance at Close of This Period

0.00

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

RightSide ComplianceNature of Debt (Purpose):
Compliance Services

Mailing Address PO Box 341027

City
AustinState
TXZip Code
78734

Outstanding Balance Beginning This Period

2115.00

Transaction ID : SD10.5108

Amount Incurred This Period

0.00

Payment This Period

2115.00

Outstanding Balance at Close of This Period

0.00

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

0.00

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

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

PAGE 44 OF 69

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 ComplianceNature 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

1012.50

Outstanding Balance at Close of This Period

0.00

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

RightSide ComplianceNature of Debt (Purpose):
Compliance Services

Mailing Address PO Box 341027

City
AustinState
TXZip Code
78734

Outstanding Balance Beginning This Period

742.50

Transaction ID : SD10.5120

Amount Incurred This Period

0.00

Payment This Period

742.50

Outstanding Balance at Close of This Period

0.00

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

RightSide ComplianceNature of Debt (Purpose):
Compliance Services

Mailing Address PO Box 341027

City
AustinState
TXZip Code
78734

Outstanding Balance Beginning This Period

1147.50

Transaction ID : SD10.5149

Amount Incurred This Period

0.00

Payment This Period

1147.50

Outstanding Balance at Close of This Period

0.00

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

0.00

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

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

PAGE 45 OF 69

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 ComplianceNature 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

157.50

Outstanding Balance at Close of This Period

0.00

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

RightSide ComplianceNature of Debt (Purpose):
Compliance Services

Mailing Address PO Box 341027

City
AustinState
TXZip Code
78734

Outstanding Balance Beginning This Period

697.50

Transaction ID : SD10.5151

Amount Incurred This Period

0.00

Payment This Period

697.50

Outstanding Balance at Close of This Period

0.00

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

RightSide ComplianceNature of Debt (Purpose):
Compliance Services

Mailing Address PO Box 341027

City
AustinState
TXZip Code
78734

Outstanding Balance Beginning This Period

652.50

Transaction ID : SD10.5152

Amount Incurred This Period

0.00

Payment This Period

652.50

Outstanding Balance at Close of This Period

0.00

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

0.00

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

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

PAGE 46 OF 69

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 ComplianceNature 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

405.00

Outstanding Balance at Close of This Period

0.00

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

RightSide ComplianceNature of Debt (Purpose):
Compliance Services

Mailing Address PO Box 341027

City
AustinState
TXZip Code
78734

Outstanding Balance Beginning This Period

562.50

Transaction ID : SD10.5208

Amount Incurred This Period

0.00

Payment This Period

562.50

Outstanding Balance at Close of This Period

0.00

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

RightSide ComplianceNature of Debt (Purpose):
Compliance Services

Mailing Address PO Box 341027

City
AustinState
TXZip Code
78734

Outstanding Balance Beginning This Period

10170.00

Transaction ID : SD10.5210

Amount Incurred This Period

0.00

Payment This Period

10170.00

Outstanding Balance at Close of This Period

0.00

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

0.00

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

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

PAGE 47 OF 69

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 ComplianceNature 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

1282.50

Outstanding Balance at Close of This Period

0.00

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

RightSide ComplianceNature of Debt (Purpose):
Compliance Services

Mailing Address PO Box 341027

City
AustinState
TXZip Code
78734

Outstanding Balance Beginning This Period

225.00

Transaction ID : SD10.5211

Amount Incurred This Period

0.00

Payment This Period

225.00

Outstanding Balance at Close of This Period

0.00

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

RightSide ComplianceNature of Debt (Purpose):
Compliance Services

Mailing Address PO Box 341027

City
AustinState
TXZip Code
78734

Outstanding Balance Beginning This Period

4320.00

Transaction ID : SD10.5212

Amount Incurred This Period

0.00

Payment This Period

4320.00

Outstanding Balance at Close of This Period

0.00

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

0.00

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

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

PAGE 48 OF 69

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 ComplianceNature 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

2565.00

Outstanding Balance at Close of This Period

0.00

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

RightSide ComplianceNature of Debt (Purpose):
Compliance Services

Mailing Address PO Box 341027

City
AustinState
TXZip Code
78734

Outstanding Balance Beginning This Period

1147.50

Transaction ID : SD10.5320

Amount Incurred This Period

0.00

Payment This Period

1147.50

Outstanding Balance at Close of This Period

0.00

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

RightSide ComplianceNature of Debt (Purpose):
Compliance Services

Mailing Address PO Box 341027

City
AustinState
TXZip Code
78734

Outstanding Balance Beginning This Period

2340.00

Transaction ID : SD10.5321

Amount Incurred This Period

0.00

Payment This Period

2340.00

Outstanding Balance at Close of This Period

0.00

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

0.00

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

PAGE 49 OF 69

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 ComplianceNature 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

2092.50

Outstanding Balance at Close of This Period

0.00

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

RightSide ComplianceNature of Debt (Purpose):
Compliance Services

Mailing Address PO Box 341027

City
AustinState
TXZip Code
78734

Outstanding Balance Beginning This Period

2610.00

Transaction ID : SD10.5324

Amount Incurred This Period

0.00

Payment This Period

2610.00

Outstanding Balance at Close of This Period

0.00

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

RightSide ComplianceNature of Debt (Purpose):
Compliance Services

Mailing Address PO Box 341027

City
AustinState
TXZip Code
78734

Outstanding Balance Beginning This Period

135.00

Transaction ID : SD10.5347

Amount Incurred This Period

0.00

Payment This Period

135.00

Outstanding Balance at Close of This Period

0.00

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

0.00

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

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

PAGE 50 OF 69

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 ComplianceNature 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

202.50

Outstanding Balance at Close of This Period

0.00

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

RightSide ComplianceNature of Debt (Purpose):
Compliance Services

Mailing Address PO Box 341027

City
AustinState
TXZip Code
78734

Outstanding Balance Beginning This Period

1057.50

Transaction ID : SD10.5349

Amount Incurred This Period

0.00

Payment This Period

1057.50

Outstanding Balance at Close of This Period

0.00

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

RightSide ComplianceNature of Debt (Purpose):
Compliance Services

Mailing Address PO Box 341027

City
AustinState
TXZip Code
78734

Outstanding Balance Beginning This Period

697.50

Transaction ID : SD10.5359

Amount Incurred This Period

0.00

Payment This Period

697.50

Outstanding Balance at Close of This Period

0.00

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

0.00

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

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

PAGE 51 OF 69

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 ComplianceNature 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

202.50

Outstanding Balance at Close of This Period

0.00

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

RightSide ComplianceNature of Debt (Purpose):
Compliance Services

Mailing Address PO Box 341027

City
AustinState
TXZip Code
78734

Outstanding Balance Beginning This Period

1597.50

Transaction ID : SD10.5361

Amount Incurred This Period

0.00

Payment This Period

1597.50

Outstanding Balance at Close of This Period

0.00

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

RightSide ComplianceNature of Debt (Purpose):
Compliance Services

Mailing Address PO Box 341027

City
AustinState
TXZip Code
78734

Outstanding Balance Beginning This Period

1012.50

Transaction ID : SD10.5370

Amount Incurred This Period

0.00

Payment This Period

1012.50

Outstanding Balance at Close of This Period

0.00

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

0.00

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

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

PAGE 52 OF 69

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 ComplianceNature of Debt (Purpose):
Compliance Services

Mailing Address PO Box 341027

City
AustinState
TXZip Code
78734

Outstanding Balance Beginning This Period

967.50

Transaction ID : SD10.5375

Amount Incurred This Period

0.00

Payment This Period

967.50

Outstanding Balance at Close of This Period

0.00

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

RightSide ComplianceNature of Debt (Purpose):
Compliance Services

Mailing Address PO Box 341027

City
AustinState
TXZip Code
78734

Outstanding Balance Beginning This Period

3082.50

Transaction ID : SD10.5406

Amount Incurred This Period

0.00

Payment This Period

3082.50

Outstanding Balance at Close of This Period

0.00

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

RightSide ComplianceNature of Debt (Purpose):
Compliance Services

Mailing Address PO Box 341027

City
AustinState
TXZip Code
78734

Outstanding Balance Beginning This Period

1147.50

Transaction ID : SD10.5407

Amount Incurred This Period

0.00

Payment This Period

1147.50

Outstanding Balance at Close of This Period

0.00

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

0.00

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

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

PAGE 53 OF 69

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 ComplianceNature of Debt (Purpose):
Compliance Services

Mailing Address PO Box 341027

City
AustinState
TXZip Code
78734

Outstanding Balance Beginning This Period

1777.50

Transaction ID : SD10.5408

Amount Incurred This Period

0.00

Payment This Period

1777.50

Outstanding Balance at Close of This Period

0.00

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

RightSide ComplianceNature of Debt (Purpose):
Compliance Services

Mailing Address PO Box 341027

City
AustinState
TXZip Code
78734

Outstanding Balance Beginning This Period

450.00

Transaction ID : SD10.5410

Amount Incurred This Period

0.00

Payment This Period

450.00

Outstanding Balance at Close of This Period

0.00

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

RightSide ComplianceNature of Debt (Purpose):
Compliance Services

Mailing Address PO Box 341027

City
AustinState
TXZip Code
78734

Outstanding Balance Beginning This Period

22.50

Transaction ID : SD10.5412

Amount Incurred This Period

0.00

Payment This Period

22.50

Outstanding Balance at Close of This Period

0.00

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

0.00

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

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

PAGE 54 OF 69

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 ComplianceNature of Debt (Purpose):
Compliance Services

Mailing Address PO Box 341027

City
AustinState
TXZip Code
78734

Outstanding Balance Beginning This Period

315.00

Transaction ID : SD10.5421

Amount Incurred This Period

0.00

Payment This Period

315.00

Outstanding Balance at Close of This Period

0.00

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

RightSide ComplianceNature of Debt (Purpose):
Compliance Services

Mailing Address PO Box 341027

City
AustinState
TXZip Code
78734

Outstanding Balance Beginning This Period

1327.50

Transaction ID : SD10.5422

Amount Incurred This Period

0.00

Payment This Period

1327.50

Outstanding Balance at Close of This Period

0.00

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

RightSide ComplianceNature of Debt (Purpose):
Compliance Services

Mailing Address PO Box 341027

City
AustinState
TXZip Code
78734

Outstanding Balance Beginning This Period

1639.98

Transaction ID : SD10.5434

Amount Incurred This Period

0.00

Payment This Period

1639.98

Outstanding Balance at Close of This Period

0.00

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

0.00

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

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

PAGE 55 OF 69

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 ComplianceNature of Debt (Purpose):
Compliance Services

Mailing Address PO Box 341027

City
AustinState
TXZip Code
78734

Outstanding Balance Beginning This Period

472.50

Transaction ID : SD10.5439

Amount Incurred This Period

0.00

Payment This Period

472.50

Outstanding Balance at Close of This Period

0.00

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

RightSide ComplianceNature of Debt (Purpose):
Compliance Services

Mailing Address PO Box 341027

City
AustinState
TXZip Code
78734

Outstanding Balance Beginning This Period

495.00

Transaction ID : SD10.5442

Amount Incurred This Period

0.00

Payment This Period

495.00

Outstanding Balance at Close of This Period

0.00

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

RightSide ComplianceNature of Debt (Purpose):
Compliance Services

Mailing Address PO Box 341027

City
AustinState
TXZip Code
78734

Outstanding Balance Beginning This Period

450.00

Transaction ID : SD10.5445

Amount Incurred This Period

0.00

Payment This Period

450.00

Outstanding Balance at Close of This Period

0.00

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

0.00

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

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

PAGE 56 OF 69

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 ComplianceNature of Debt (Purpose):
Compliance Services

Mailing Address PO Box 341027

City
AustinState
TXZip Code
78734

Outstanding Balance Beginning This Period

495.00

Transaction ID : SD10.5450

Amount Incurred This Period

0.00

Payment This Period

495.00

Outstanding Balance at Close of This Period

0.00

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

RightSide ComplianceNature of Debt (Purpose):
Compliance Services

Mailing Address PO Box 341027

City
AustinState
TXZip Code
78734

Outstanding Balance Beginning This Period

607.50

Transaction ID : SD10.5460

Amount Incurred This Period

0.00

Payment This Period

607.50

Outstanding Balance at Close of This Period

0.00

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

RightSide ComplianceNature of Debt (Purpose):
Compliance Services

Mailing Address PO Box 341027

City
AustinState
TXZip Code
78734

Outstanding Balance Beginning This Period

1012.50

Transaction ID : SD10.5463

Amount Incurred This Period

0.00

Payment This Period

1012.50

Outstanding Balance at Close of This Period

0.00

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

0.00

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

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

PAGE 57 OF 69

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 ComplianceNature of Debt (Purpose):
Compliance Services

Mailing Address PO Box 341027

City
AustinState
TXZip Code
78734

Outstanding Balance Beginning This Period

472.50

Transaction ID : SD10.5464

Amount Incurred This Period

0.00

Payment This Period

472.50

Outstanding Balance at Close of This Period

0.00

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

RightSide ComplianceNature of Debt (Purpose):
Compliance Services

Mailing Address PO Box 341027

City
AustinState
TXZip Code
78734

Outstanding Balance Beginning This Period

1500.00

Transaction ID : SD10.5466

Amount Incurred This Period

0.00

Payment This Period

1500.00

Outstanding Balance at Close of This Period

0.00

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

The Gober GroupNature of Debt (Purpose):
Legal Services

Mailing Address PO Box 341016

City
AustinState
TXZip Code
78734

Outstanding Balance Beginning This Period

2944.39

Transaction ID : SD10.5039

Amount Incurred This Period

0.00

Payment This Period

2944.39

Outstanding Balance at Close of This Period

0.00

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

0.00

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

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

PAGE 58 OF 69

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

10049.50

Transaction ID : SD10.5066

Amount Incurred This Period

0.00

Payment This Period

10049.50

Outstanding Balance at Close of This Period

0.00

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

200.00

Transaction ID : SD10.5071

Amount Incurred This Period

0.00

Payment This Period

200.00

Outstanding Balance at Close of This Period

0.00

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

436.50

Transaction ID : SD10.5101

Amount Incurred This Period

0.00

Payment This Period

436.50

Outstanding Balance at Close of This Period

0.00

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

0.00

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

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

PAGE 59 OF 69

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

15428.50

Transaction ID : SD10.5121

Amount Incurred This Period

0.00

Payment This Period

15428.50

Outstanding Balance at Close of This Period

0.00

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

4980.00

Transaction ID : SD10.5153

Amount Incurred This Period

0.00

Payment This Period

4980.00

Outstanding Balance at Close of This Period

0.00

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

401.50

Transaction ID : SD10.5155

Amount Incurred This Period

0.00

Payment This Period

401.50

Outstanding Balance at Close of This Period

0.00

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

0.00

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

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

PAGE 60 OF 69

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 : SD10.5156

Amount Incurred This Period

0.00

Payment This Period

160.50

Outstanding Balance at Close of This Period

0.00

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

54000.00

Transaction ID : SD10.5163

Amount Incurred This Period

0.00

Payment This Period

54000.00

Outstanding Balance at Close of This Period

0.00

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 : SD10.5180

Amount Incurred This Period

0.00

Payment This Period

107.00

Outstanding Balance at Close of This Period

0.00

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

0.00

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

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

PAGE 61 OF 69

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

107.00

Transaction ID : SD10.5181

Amount Incurred This Period

0.00

Payment This Period

107.00

Outstanding Balance at Close of This Period

0.00

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

1690.00

Transaction ID : SD10.5204

Amount Incurred This Period

0.00

Payment This Period

1690.00

Outstanding Balance at Close of This Period

0.00

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

14.97

Transaction ID : SD10.5205

Amount Incurred This Period

0.00

Payment This Period

14.97

Outstanding Balance at Close of This Period

0.00

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

0.00

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

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

PAGE 62 OF 69

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

1979.50

Transaction ID : SD10.5207

Amount Incurred This Period

0.00

Payment This Period

1979.50

Outstanding Balance at Close of This Period

0.00

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

53.50

Transaction ID : SD10.5220

Amount Incurred This Period

0.00

Payment This Period

53.50

Outstanding Balance at Close of This Period

0.00

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

240.00

Transaction ID : SD10.5221

Amount Incurred This Period

0.00

Payment This Period

240.00

Outstanding Balance at Close of This Period

0.00

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

0.00

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

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

PAGE 63 OF 69

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 : SD10.5315

Amount Incurred This Period

0.00

Payment This Period

160.50

Outstanding Balance at Close of This Period

0.00

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

7750.00

Transaction ID : SD10.5316

Amount Incurred This Period

0.00

Payment This Period

7750.00

Outstanding Balance at Close of This Period

0.00

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

217.50

Transaction ID : SD10.5325

Amount Incurred This Period

0.00

Payment This Period

217.50

Outstanding Balance at Close of This Period

0.00

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

0.00

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

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

PAGE 64 OF 69

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

829.50

Transaction ID : SD10.5326

Amount Incurred This Period

0.00

Payment This Period

829.50

Outstanding Balance at Close of This Period

0.00

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

160.50

Transaction ID : SD10.5327

Amount Incurred This Period

0.00

Payment This Period

160.50

Outstanding Balance at Close of This Period

0.00

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

327.50

Transaction ID : SD10.5328

Amount Incurred This Period

0.00

Payment This Period

327.50

Outstanding Balance at Close of This Period

0.00

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

0.00

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

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

PAGE 65 OF 69

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

1551.50

Transaction ID : SD10.5329

Amount Incurred This Period

0.00

Payment This Period

1551.50

Outstanding Balance at Close of This Period

0.00

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

481.50

Transaction ID : SD10.5345

Amount Incurred This Period

0.00

Payment This Period

481.50

Outstanding Balance at Close of This Period

0.00

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

231.25

Transaction ID : SD10.5346

Amount Incurred This Period

0.00

Payment This Period

231.25

Outstanding Balance at Close of This Period

0.00

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

0.00

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

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

PAGE 66 OF 69

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

261.00

Transaction ID : SD10.5362

Amount Incurred This Period

0.00

Payment This Period

261.00

Outstanding Balance at Close of This Period

0.00

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

55.50

Transaction ID : SD10.5368

Amount Incurred This Period

0.00

Payment This Period

55.50

Outstanding Balance at Close of This Period

0.00

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

3557.00

Transaction ID : SD10.5369

Amount Incurred This Period

0.00

Payment This Period

3557.00

Outstanding Balance at Close of This Period

0.00

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

0.00

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

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

PAGE 67 OF 69

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

1044.50

Transaction ID : SD10.5413

Amount Incurred This Period

0.00

Payment This Period

1044.50

Outstanding Balance at Close of This Period

0.00

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

3181.00

Transaction ID : SD10.5414

Amount Incurred This Period

0.00

Payment This Period

3181.00

Outstanding Balance at Close of This Period

0.00

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 : SD10.5428

Amount Incurred This Period

0.00

Payment This Period

107.00

Outstanding Balance at Close of This Period

0.00

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

0.00

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

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

PAGE 68 OF 69

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

814.00

Transaction ID : SD10.5429

Amount Incurred This Period

0.00

Payment This Period

814.00

Outstanding Balance at Close of This Period

0.00

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

225.00

Transaction ID : SD10.5435

Amount Incurred This Period

0.00

Payment This Period

225.00

Outstanding Balance at Close of This Period

0.00

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

115.00

Transaction ID : SD10.5436

Amount Incurred This Period

0.00

Payment This Period

115.00

Outstanding Balance at Close of This Period

0.00

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

0.00

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

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
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PAGE 69 OF 69

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

302.50

Transaction ID : SD10.5451

Amount Incurred This Period

0.00

Payment This Period

302.50

Outstanding Balance at Close of This Period

0.00

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

1500.00

Transaction ID : SD10.5467

Amount Incurred This Period

0.00

Payment This Period

1500.00

Outstanding Balance at Close of This Period

0.00

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

Tusk Digital

Nature of Debt (Purpose):

Website Development and Design

Mailing Address 1441 L Street NW
12th FlCity
WashingtonState
DCZip Code
20005

Outstanding Balance Beginning This Period

266014.00

Transaction ID : SD10.4139

Amount Incurred This Period

0.00

Payment This Period

266014.00

Outstanding Balance at Close of This Period

0.00

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

0.00

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

0.00

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