

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

MEGAPHONE

ADDRESS (number and street)

PO BOX 341028

Check if different
than previously
reported. (ACC)

AUSTIN

TX

78734

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C

C00569517

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

April 15
Quarterly Report (Q1)July 15
Quarterly Report (Q2)October 15
Quarterly Report (Q3)January 31
Year-End Report (YE)July 31 Mid-Year
Report (Non-election
Year Only) (MY)Termination Report
(TER)(b) Monthly
Report
Due On:

Feb 20 (M2)



May 20 (M5)



Aug 20 (M8)

Nov 20 (M11)
(Non-Election
Year Only)

Mar 20 (M3)



Jun 20 (M6)



Sep 20 (M9)

Dec 20 (M12)
(Non-Election
Year Only)

Apr 20 (M4)



Jul 20 (M7)



Oct 20 (M10)



Jan 31 (YE)

(c) 12-Day



Primary (12P)



General (12G)



Runoff (12R)

PRE-Election



Convention (12C)



Special (12S)

Report for the:

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the
State of

M M M

(d) 30-Day



General (30G)



Runoff (30R)



Special (30S)

POST-Election



General (30G)



Runoff (30R)



Special (30S)

Report for the:

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the
State of

M M M

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y Y

01

01

2018

01

31

2018

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

MCALPIN, LUKE, , ,

Type or Print Name of Treasurer

Signature of Treasurer

MCALPIN, LUKE, , ,

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y Y

02

20

2018

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

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

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

MEGAPHONE

Report Covering the Period:

From:

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

To:

M M	/	D D	/	Y Y Y Y Y
01		31		2018

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <div><div>Y Y Y Y Y</div><div>2018</div></div>		<div><div></div><div>174810.82</div></div>
(b) Cash on Hand at Beginning of Reporting Period.....	<div><div></div><div>174810.82</div></div>	
(c) Total Receipts (from Line 19)	<div><div></div><div>50000.00</div></div>	<div><div></div><div>50000.00</div></div>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<div><div></div><div>224810.82</div></div>	<div><div></div><div>224810.82</div></div>
7. Total Disbursements (from Line 31).....	<div><div></div><div>50424.56</div></div>	<div><div></div><div>50424.56</div></div>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	<div><div></div><div>174386.26</div></div>	<div><div></div><div>174386.26</div></div>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<div><div></div><div>0.00</div></div>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<div><div></div><div>493524.52</div></div>	



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 Y Y
01	/	01	/	2018

To:

M M	/	D D	/	Y Y Y Y Y Y
01	/	31	/	2018

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).....

50000.00

50000.00

(ii) Unitemized

0.00

0.00

(iii) TOTAL (add

Lines 11(a)(i) and (ii).....▶

50000.00

50000.00

(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)

50000.00

50000.00

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))

50000.00

50000.00

20. Total Federal Receipts

(subtract Line 18(c) from Line 19)

50000.00

50000.00

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	11071.56	11071.56
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	11071.56	11071.56
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).....	39353.00	39353.00
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)) ..	50424.56	50424.56
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	50424.56	50424.56

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)	50000.00	50000.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	50000.00	50000.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	11071.56	11071.56
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	11071.56	11071.56

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

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

FOR LINE NUMBER: PAGE 6 OF 23

(check only one)

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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

MEGAPHONE

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

A. Hoffman Jr, Alfred, , ,

Mailing Address 12530 Seminole Beach Rd

City
North Palm Beach

State
FL

Zip Code
33408

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Hoffman Partners

Occupation (for Individual)
Real Estate Development

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

50000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 / 26 / 2018

Transaction ID : SA11AI.5179

Amount of Each Receipt this Period

50000.00

☐ Memo Item

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

B.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

☐ Memo Item

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

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

☐ Memo Item

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

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

50000.00

50000.00

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

PAGE 7 OF 23

<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. PML LLC

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01		05		2018

Mailing Address 100FoxchaseDrive

City
Pike RoadState
ALZip Code
36064Purpose of Disbursement
Polling Research
Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

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

State: District:

FEC Identification Number

C**Transaction ID : SB21B.5188**

Amount of Each Disbursement this Period

5647.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Tusk Digital

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01		26		2018

Mailing Address 718 7th St NW
2nd FloorCity
WashingtonState
DCZip Code
20001Purpose of Disbursement
Graphics Design and Website Development
Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

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

State: District:

FEC Identification Number

C**Transaction ID : SB21B.5176**

Amount of Each Disbursement this Period

4255.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Tusk Digital

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01		26		2018

Mailing Address 718 7th St NW
2nd FloorCity
WashingtonState
DCZip Code
20001Purpose of Disbursement
Media Consultant Travel Expense
Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

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

State: District:

FEC Identification Number

C**Transaction ID : SB21B.5177**

Amount of Each Disbursement this Period

1126.56

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

11028.56

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

11028.56

**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 8 OF 23

<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

MEGAPHONE

Full Name (Last, First, Middle Initial)

A. Connect Strategic Communications Inc

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01		24		2018

Mailing Address PO Box 141251

City
DallasState
TXZip Code
75214Purpose of Disbursement
Nonfederal Digital Ad Development, Production and Ad Buy

Candidate Name

Category/
TypeOffice Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

FEC Identification Number

C**Transaction ID : SB29.5185**

Amount of Each Disbursement this Period

10000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. PML LLC

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01		05		2018

Mailing Address 100FoxchaseDrive

City
Pike RoadState
ALZip Code
36064Purpose of Disbursement
Nonfederal Mailer Development, Production, Printing and Postage

Candidate Name

Category/
TypeOffice Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

FEC Identification Number

C**Transaction ID : SB29.5191**

Amount of Each Disbursement this Period

29353.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Date of Disbursement

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

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
TypeOffice Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

FEC Identification Number

C

Amount of Each Disbursement this Period

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

39353.00

39353.00

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

PAGE 9 OF 23

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

4725.82

Transaction ID : SD10.4724

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

4725.82

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

857.50

Transaction ID : SD10.4744

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

857.50

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

RightSide ComplianceNature of Debt (Purpose):
Compliance Services

Mailing Address PO Box 341027

City
AustinState
TXZip Code
78734

Outstanding Balance Beginning This Period

1242.50

Transaction ID : SD10.4756

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1242.50

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

6825.82

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

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

PAGE 10 OF 23

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

11637.50

Transaction ID : SD10.4825

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

11637.50

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

RightSide 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

0.00

Outstanding Balance at Close of This Period

5530.00

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

0.00

Outstanding Balance at Close of This Period

16800.00

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

33967.50

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

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

PAGE 11 OF 23

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

0.00

Outstanding Balance at Close of This Period

7472.50

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

0.00

Outstanding Balance at Close of This Period

1575.00

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

0.00

Outstanding Balance at Close of This Period

2415.00

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

11462.50

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

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

PAGE 12 OF 23

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

0.00

Outstanding Balance at Close of This Period

1792.31

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

0.00

Outstanding Balance at Close of This Period

3062.50

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

0.00

Outstanding Balance at Close of This Period

4455.00

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

9309.81

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

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

PAGE 13 OF 23

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

0.00

Outstanding Balance at Close of This Period

1777.50

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

0.00

Outstanding Balance at Close of This Period

1462.50

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

0.00

Outstanding Balance at Close of This Period

2115.00

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

5355.00

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

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

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(check only one)
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☒ 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

0.00

Outstanding Balance at Close of This Period

1012.50

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

0.00

Outstanding Balance at Close of This Period

742.50

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

0.00

Outstanding Balance at Close of This Period

1147.50

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

2902.50

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

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

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(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

0.00

Outstanding Balance at Close of This Period

157.50

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

0.00

Outstanding Balance at Close of This Period

697.50

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

0.00

Outstanding Balance at Close of This Period

652.50

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

1507.50

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

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

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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

0.00

Transaction ID : SD10.5184

Amount Incurred This Period

405.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

405.00

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

Right Way Strategies IncNature of Debt (Purpose):
Non-Federal Mailer Design, Production and
Postage

Mailing Address 3301 W Biterroot St

City
Sioux FallsState
SDZip Code
57108

Outstanding Balance Beginning This Period

3800.00

Transaction ID : SD10.5147

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

3800.00

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

5258.89

Transaction ID : SD10.4853

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

5258.89

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

9463.89

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)

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(check only one)
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NAME OF COMMITTEE (In Full)

MEGAPHONE

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

The Gober Group

Nature of Debt (Purpose):

Legal Services

Mailing Address PO Box 341016

City
AustinState
TXZip Code
78734

Outstanding Balance Beginning This Period

10994.00

Transaction ID : SD10.4982

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

10994.00

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

8162.50

Transaction ID : SD10.4983

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

8162.50

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

890.50

Transaction ID : SD10.5004

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

890.50

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

20047.00

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)

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(check only one)
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NAME OF COMMITTEE (In Full)

MEGAPHONE

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

The Gober Group

Nature of Debt (Purpose):

Legal Services

Mailing Address PO Box 341016

City
AustinState
TXZip Code
78734

Outstanding Balance Beginning This Period

332.00

Transaction ID : SD10.5021

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

332.00

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

923.50

Transaction ID : SD10.5038

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

923.50

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

7369.00

Transaction ID : SD10.5039

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

7369.00

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

8624.50

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

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

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(check only one)
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☒ 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

0.00

Outstanding Balance at Close of This Period

10049.50

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

The Gober Group

Nature of Debt (Purpose):

Legal Services

Mailing Address PO Box 341016

City
AustinState
TXZip Code
78734

Outstanding Balance Beginning This Period

200.00

Transaction ID : SD10.5071

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

200.00

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

0.00

Outstanding Balance at Close of This Period

436.50

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

10686.00

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)

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NAME OF COMMITTEE (In Full)
MEGAPHONE

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

The Gober GroupNature of Debt (Purpose):
Legal Services

Mailing Address PO Box 341016

City
AustinState
TXZip Code
78734

Outstanding Balance Beginning This Period

15428.50

Transaction ID : SD10.5121

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

15428.50

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

The Gober GroupNature of Debt (Purpose):
Legal Services

Mailing Address PO Box 341016

City
AustinState
TXZip Code
78734

Outstanding Balance Beginning This Period

4980.00

Transaction ID : SD10.5153

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

4980.00

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

401.50

Transaction ID : SD10.5155

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

401.50

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

20810.00

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)

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(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

0.00

Outstanding Balance at Close of This Period

160.50

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

The Gober Group

Nature of Debt (Purpose):

Legal Services

Mailing Address PO Box 341016

City
AustinState
TXZip Code
78734

Outstanding Balance Beginning This Period

54000.00

Transaction ID : SD10.5163

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

54000.00

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

0.00

Transaction ID : SD10.5180

Amount Incurred This Period

107.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

107.00

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

54267.50

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

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

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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 GroupNature of Debt (Purpose):
Legal Services

Mailing Address PO Box 341016

City
AustinState
TXZip Code
78734

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.5181

Amount Incurred This Period

107.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

107.00

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

Tusk DigitalNature of Debt (Purpose):
Website Development and DesignMailing Address 718 7th St NW
2nd FloorCity
WashingtonState
DCZip Code
20001

Outstanding Balance Beginning This Period

297000.00

Transaction ID : SD10.4139

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

297000.00

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

Tusk DigitalNature of Debt (Purpose):
Graphics Design and Website DevelopmentMailing Address 718 7th St NW
2nd FloorCity
WashingtonState
DCZip Code
20001

Outstanding Balance Beginning This Period

4255.00

Transaction ID : SD10.5117

Amount Incurred This Period

0.00

Payment This Period

4255.00

Outstanding Balance at Close of This Period

0.00

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

297107.00

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)

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NAME OF COMMITTEE (In Full)

MEGAPHONE

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

Tusk DigitalNature of Debt (Purpose):
Website HostingMailing Address 718 7th St NW
2nd FloorCity
WashingtonState
DCZip Code
20001

Outstanding Balance Beginning This Period

594.00

Transaction ID : SD10.5124

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

594.00

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

Tusk DigitalNature of Debt (Purpose):
Website HostingMailing Address 718 7th St NW
2nd FloorCity
WashingtonState
DCZip Code
20001

Outstanding Balance Beginning This Period

297.00

Transaction ID : SD10.5125

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

297.00

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

Tusk DigitalNature of Debt (Purpose):
Website HostingMailing Address 718 7th St NW
2nd FloorCity
WashingtonState
DCZip Code
20001

Outstanding Balance Beginning This Period

297.00

Transaction ID : SD10.5157

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

297.00

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

1188.00

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

493524.52

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

0.00

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

493524.52