PAGE 1 / 29

#### FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

	other man An Ac	dinonized Committee	Office Use Only
NAME OF TOO COMMITTEE (in full)	YPE OR PRINT ▼	Example: If typing, type over the lines.	12FE4M5
MEGAPHONE			
<u> </u>			
ADDRESS (number and street)	PO BOX 341028		
▼			
Check if different than previously reported. (ACC)	AUSTIN		TX 78734 -
2. FEC IDENTIFICATION NUM	MBER ▼ C	CITY A	STATE ▲ ZIP CODE ▲
C C00569517	3.	IS THIS REPORT X NEW (N) O	R AMENDED (A)
4. TYPE OF REPORT (Choose One)	Report Due On:	eb 20 (M2) <b>x</b> May 20 (N	(Non-Election Year Only)
(a) Quarterly Reports:		pr 20 (M4) Jul 20 (M	(Non-Election Year Only)
April 15 Quarterly Report (Q1)		pi 20 (NI4) 3ui 20 (NIA	Jan 31 (TL)
July 15 Quarterly Report (Q2)	PRE-Election	Primary (12P)	General (12G) Runoff (12R)
October 15 Quarterly Report (Q3)	Report for the:		Special (12S)
January 31 Year-End Report (YE)	) Elec	etion on	in the State of
July 31 Mid-Year Report (Non-election Year Only) (MY)	(d) 30-Day  POST-Election  Report for the:	General (30G)	Runoff (30R) Special (30S)
Termination Report (TER)	Elec	etion on	in the State of
5. Covering Period 04	01 2018		30 / 2018
I certify that I have examined this	Report and to the best	of my knowledge and belief it is	true, correct and complete.
Type or Print Name of Treasurer	MČALPIN, LUKE, , ,		
Signature of Treasurer MCALF	PIN, LUKE, , ,	[Electronically Filed]	Date 05 / 18 / 2018
NOTE: Submission of false, erroneo	us, or incomplete informat	tion may subject the person signin	g this Report to the penalties of 52 U.S.C. § 30109
Office Use			FEC FORM 3X Rev. 05/2016

#### SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

OF RECEIPTS AND DISBURSEMENTS FEC Form 3X (Rev. 05/2016) Page 2 Write or Type Committee Name **MEGAPHONE** 01 2018 04 30 2018 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 174810.82 January 1, 2018 (b) Cash on Hand at 181836.26 Beginning of Reporting Period..... 0.00 238565.00 (c) Total Receipts (from Line 19) ..... (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 413375.82 181836.26 6(a) and 6(c) for Column B)..... 22423.73 253963.29 7. Total Disbursements (from Line 31)...... 8. Cash on Hand at Close of Reporting Period 159412.53 159412.53 (subtract Line 7 from Line 6(d))..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) ..... 10. Debts and Obligations Owed BY the Committee (Itemize all on 511639.49 Schedule C and/or Schedule D) ..... This committee has qualified as a multicandidate committee. (see FEC FORM 1M) For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-694-1100

#### **DETAILED SUMMARY PAGE**

of Receipts

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Nam	Write	or	Type	Committee	Nam
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#### **MEGAPHONE**

I. Receipts  Ins (other than loans) From:  uals/Persons Other  Political Committees  mized (use Schedule A)	0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.0	COLUMN B Calendar Year-to-Date  , 237250.00  0.00  237250.00  0.00  237250.00  0.00  0.00  0.00
uals/Persons Other Political Committees mized (use Schedule A)	0.00 0.00 0.00 0.00 0.00	0.00 237250.00 0.00 0.00 237250.00 0.00
Political Committees mized (use Schedule A)  DTAL (add nes 11(a)(i) and (ii)  al Party Committees  Political Committees as PACs)  Contributions (add Lines ii), (b), and (c)) (Carry to Line 33, page 5)  From Affiliated/Other mittees	0.00 0.00 0.00 0.00 0.00	0.00 237250.00 0.00 0.00 237250.00 0.00
mized (use Schedule A)  pitemized  DTAL (add les 11(a)(i) and (ii)  al Party Committees  Political Committees as PACs)  Contributions (add Lines lii), (b), and (c)) (Carry to Line 33, page 5)  From Affiliated/Other mittees	0.00 0.00 0.00 0.00 0.00	0.00 237250.00 0.00 0.00 237250.00 0.00
al Party Committees  Political Committees as PACs)  Contributions (add Lines ii), (b), and (c)) (Carry to Line 33, page 5)  From Affiliated/Other mittees	0.00 0.00 0.00 0.00 0.00	0.00 237250.00 0.00 0.00 237250.00 0.00
Portal (add des 11(a)(i) and (ii)	0.00 0.00 0.00 0.00	237250.00 0.00 0.00 237250.00 0.00 0.00
Portal (add des 11(a)(i) and (ii)	0.00 0.00 0.00 0.00	237250.00 0.00 0.00 237250.00 0.00 0.00
al Party Committees	0.00 0.00 0.00	0.00 0.00 237250.00 0.00
al Party Committees  Political Committees as PACs)  Contributions (add Lines ii), (b), and (c)) (Carry to Line 33, page 5)  From Affiliated/Other mittees	0.00	0.00 237250.00 0.00
Political Committees as PACs) Contributions (add Lines iii), (b), and (c)) (Carry to Line 33, page 5) From Affiliated/Other mittees	0.00	0.00 237250.00 0.00
Political Committees as PACs) Contributions (add Lines iii), (b), and (c)) (Carry to Line 33, page 5) From Affiliated/Other mittees	0.00	237250.00 0.00 0.00
Contributions (add Lines ii), (b), and (c)) (Carry to Line 33, page 5)  From Affiliated/Other mittees	0.00	237250.00 0.00 0.00
ii), (b), and (c)) (Carry to Line 33, page 5)	0.00	0.00
to Line 33, page 5) From Affiliated/Other mittees	0.00	0.00
rom Affiliated/Other mittees	0.00	0.00
mittees	4	0.00
-	4	0.00
Received	0.00	
Heceived	4	
	0.00	0.00
yments Received	0.00	0.00
- · · · · · · · · · · · · · ·		
	0.00	1315.00
	45 45	4
	0.00	0.00
	4 4	4 4
	0.00	0.00
rom Non-Federal and Levin Funds	4 4	4 4
deral Account		
Schedule H3)	0.00	0.00
unds (from Schedule H5)	0.00	0.00
ansfers (add 18(a) and 18(b))	0.00	0.00
	Operating Expenditures Rebates, etc.) als to Line 37, page 5)	Rebates, etc.) als to Line 37, page 5)

#### **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
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	1527.95	16464.51
Expenditures(c) Total Operating Expenditures	1327.33	10404.31
(add 21(a)(i), (a)(ii), and (b))▶  Transfers to Affiliated/Other Party	1527.95	16464.51
CommitteesContributions to	0.00	0.00
Federal Candidates/Committees and Other Political Committees	0.00	0.00
Independent Expenditures (use Schedule E)	20895.78	20895.78
Coordinated Party Expenditures (52 U.S.C. § 30116(d))		20093.70
(use Schedule F)	0.00	0.00
Loan Repayments Made	0.00	0.00
Loans MadeRefunds of Contributions To:	0.00	0.00
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(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
Other Disbursements (Including		04000000
Non-Federal Donations)	0.00	216603.00
Federal Election Activity (52 U.S.C. § 30101(20 (a) Allocated Federal Election Activity (from Schedule H6)	0))	
(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))		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
zinos solastis, solastis and solossim.	0.00	0.00
Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))	22423.73	253963.29
Total Federal Disbursements	7 7	
(subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)	22423.73	052002.00
,	22423.73	253963.29

#### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 05/2016)	or disbursements	Page <b>5</b>
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)	0.00	237250.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	0.00	237250.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	1527.95	16464.51
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	1315.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	1527.95	15149.51

CHEDULE B (FEC Form 3X)  FOR LINE NUMBER:					F	PAGE	6 (	OF 2	29			
ITEMIZED DISBURSEMENTS		rate schedule(s) category of the	(check	٠.				¬	, <sub>–</sub>	¬ ^-		
		Summary Page		21b 28a	22 28b	23		26 29		27 30b		
Any information copied from such Reports and Statem	Lante mov :	not be cold or use									tions	
or for commercial purposes, other than using the nam												
NAME OF COMMITTEE (In Full)										,		
MEGAPHONE												
Full Name (Last, First, Middle Initial)					5	5						
A. Tusk Digital					Date of	_	rsem	ent /	Y	YY	Υ	
Mailing Address 718 7th St NW 2nd Floor	State Zip Code DC 20001				04		20		:	2018		
,					FEC Ide	entifica	tion I	Numb	er			
Washington Purpose of Disbursement		20001										
Website Hosting					C				045			
Candidate Name			Category	,	Amount	nsacti of Ea		_			Period	
			Type				_	-	-		_	1
Office Sought: House Disbursem		0								299.9	95	
	Primary General Other (specify) ▼											
State: District:	Other (open	J., Y			Me	mo Iter	m					
Full Name (Last, First, Middle Initial)												
B. Tusk Digital					Date of	_	rsem	ent	Y	Y	Y	
Mailing Address 718 7th St NW 2nd Floor						] L	20	]		2018		
,	State DC	Zip Code			FEC Ide	entifica	tion I	Numb	er			
Washington Purpose of Disbursement		20001			С		-	_		$\neg$		
Website Hosting	te Hosting					nsacti	an ID	. CD	24 D	E220		
Candidate Name				/	Amount			_			Period	
Office Sought: House Disbursem	nent For:									297.0	00	Н
	Primary General					,		,				
State: President District:	Other (spec	cify)			Me	mo Iter	m					
Full Name (Last, First, Middle Initial)  C. Tusk Digital					Date of	Disbu	rsem	ent				
					M M	/ [	)   D	1	Υ	YY	Υ	
Mailing Address 718 7th St NW 2nd Floor							20			2018		
,	State	Zip Code			FEC Ide	entifica	tion I	Numb	er			
Washington Purpose of Dishursement	DC	20001		_	С		_		_	—		
Website Hosting	Purpose of Disbursement Website Hosting									لبي		
Candidate Name	Candidate Name  Category/ Type							_	321B. seme	<b>5229</b> nt this I	Period	
Office Sought: House Disbursem	nent For:		. , , , ,	$\dashv$						297.0	00	
	Primary	General				-		-				
	Other (spec	cify) ▼			Me	mo Iter	m					
State: District:					П							
SUBTOTAL of Disbursements This Page (optional)				<b>•</b>		-	Ξ			893.	95	

#### S П

Mailing Address 718 7th St NW  2nd Floor  City Washington  State DC  Zip Code DC  Zip Code 20001  FEC Identification Number	5
Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.  NAME OF COMMITTEE (In Full)  MEGAPHONE  Full Name (Last, First, Middle Initial)  A. Tusk Digital  Mailing Address 718 7th St NW 2nd Floor  City Washington  Detailed Summary Page  28a 28b 28c 29 30b  27 30c  28 28c 29 30b  PEC Identification Number	3
Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.  NAME OF COMMITTEE (In Full)  MEGAPHONE  Full Name (Last, First, Middle Initial)  A. Tusk Digital  Mailing Address 718 7th St NW  2nd Floor  City Washington  State DC  Zip Code 20001  FEC Identification Number	S
or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.  NAME OF COMMITTEE (In Full)  MEGAPHONE  Full Name (Last, First, Middle Initial)  Tusk Digital  Mailing Address 718 7th St NW 2nd Floor  City Washington  State DC  Zip Code DC  FEC Identification Number	S
MEGAPHONE  Full Name (Last, First, Middle Initial)  A. Tusk Digital  Mailing Address 718 7th St NW 2nd Floor  City Washington  State DC  DC  DC  DC  FEC Identification Number	
Full Name (Last, First, Middle Initial)  A. Tusk Digital  Mailing Address 718 7th St NW  2nd Floor  City  Washington  State  DC  DC  DC  DC  DC  DC  DC  DC  DC  D	
A. Tusk Digital  Mailing Address 718 7th St NW  2nd Floor  City Washington  Date of Disbursement  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
Mailing Address 718 7th St NW  2nd Floor  City Washington  State DC  Zip Code DC  Zip Code 20001  FEC Identification Number	
2nd Floor  City State Zip Code Washington DC 20001  FEC Identification Number	
Washington DC 20001	
1740/11/1907	
Purpose of Dispursement	
Website Hosting	
Candidate Name  Transaction ID : SB21B.5231  Category/ Amount of Each Disbursement this Period	od
Category/ Amount of Each Disbursement this Period Type	Ju
Office Sought: House Disbursement For: 594.00	
Senate Primary General	
President	
Full Name (Last, First, Middle Initial)	
B. Date of Disbursement	
M M / D D / Y Y Y Y	
Mailing Address	
City State Zip Code FEC Identification Number	
Purpose of Disbursement	
Candidate Name  Category/ Type  Amount of Each Disbursement this Period Type	od
Office Sought: House Disbursement For:	
Senate Primary General	
President Other (specify) Memo Item	
State: District: Full Name (Last, First, Middle Initial)	
C. Date of Disbursement	
Mailing Address Mail / D D / Y Y Y Y Y	
City State Zip Code FEC Identification Number	
Purpose of Disbursement	
Candidate Name  Category/ Type  Amount of Each Disbursement this Period Type	od
Office Sought: House Disbursement For:	
Senate Primary General	
President Other (specify) ▼ Memo Item	
State: District:	
SUBTOTAL of Disbursements This Page (optional)	
TOTAL This Paried (lest page this line number only)	

**Excluding Loans** 

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

OF 29 PAGE FOR LINE NUMBER: (check only one)

	<b>3</b> • • • • • • • • • • • • • • • • • • •			Trainiboroa iirio)	<b>X</b> 10
	ME OF COMMITTEE (In Full) IEGAPHONE				
	A. Full Name (Last, First, Middle Initial) of Debtor of RightSide Compliance	or Creditor		Nature of Compliar	Debt (Purpose): nce Services
	Mailing Address PO Box 341027				
	City	State	Zip Code		
	Austin Outstanding Balance Beginning This Period	TX	78734	Transac	etion ID : SD10.4724
	4725.82	4725.82			
	Amount Incurred This Period	Period Payment This Period			ding Balance at Close of This Period
	0.00	.00	4725.82		
	B. Full Name (Last, First, Middle Initial) of Debtor o RightSide Compliance		Debt (Purpose): ace Services		
	Mailing Address PO Box 341027				
	City Austin	State TX	Zip Code 78734		
	Amount Incurred This Period  0.00  Payment This Period  0.00  0.00			Outstand	ction ID: SD10.4744  ding Balance at Close of This Period  857.50
	C. Full Name (Last, First, Middle Initial) of Debtor or Creditor RightSide Compliance				Debt (Purpose): nce Services
	Mailing Address PO Box 341027				
	City Austin	State TX	Zip Code 78734		
	Outstanding Balance Beginning This Period 1242.50			Transa	ction ID : SD10.4756
	Amount Incurred This Period	Pay	ment This Period	Outstand	ding Balance at Close of This Period
	0.00		0	.00	1242.50
1)	SUBTOTALS This Period This Page (optional)				6825.82
2)	TOTALS This Period (last page this line number o	nly)		>	7 7 7
3)	TOTAL OUTSTANDING LOANS from Schedule C	(last page or	nly)		7 7
4)	ADD 2) and 3) and carry forward to appropriate lin	only) ►	7 7 7		

**Excluding Loans** 

(Use separate schedule(s) for each numbered line) PAGE 9 OF
FOR LINE NUMBER:
(check only one)

9 **X** 10

NAME OF COMMITTEE (In Full) MEGAPHONE		·	·		
A. Full Name (Last, First, Middle Initial) of Debtor RightSide Compliance  Mailing Address PO Box 341027	or Creditor		Nature of Debt (Purpose): Compliance Services		
City Austin	State TX	Zip Code 78734			
Outstanding Balance Beginning This Period			Transaction ID : SD10.4825		
11637.50					
Amount Incurred This Period	Amount Incurred This Period Payment This Period				
0.00		0.00	11637.50		
B. Full Name (Last, First, Middle Initial) of Debtor of RightSide Compliance	Nature of Debt (Purpose): Compliance Services				
Mailing Address PO Box 341027					
City Austin					
Outstanding Balance Beginning This Period 5530.00	Transaction ID : SD10.4855				
Amount Incurred This Period 0.00	Outstanding Balance at Close of This Period 5530.00				
O. F. II Name (Lock First Middle Leiter) of Debter					
C. Full Name (Last, First, Middle Initial) of Debtor RightSide Compliance	Nature of Debt (Purpose): Compliance Services				
Mailing Address PO Box 341027					
City Austin	State TX	Zip Code 78734			
Outstanding Balance Beginning This Period					
4 4	16800.00				
Amount Incurred This Period	Pay	ment This Period 0.00	Outstanding Balance at Close of This Period 16800.00		
0.00	<b>—</b>	0.00	10000.00		
1) SUBTOTALS This Period This Page (optional)		<b>&gt;</b>	33967.50		
2) TOTALS This Period (last page this line number o	nly)	<b>&gt;</b>			
3) TOTAL OUTSTANDING LOANS from Schedule C	(last page or	nly) ▶	7 7 7		
4) ADD 2) and 3) and carry forward to appropriate lin					

**Excluding Loans** 

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

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10 OF

	<b>3</b> • • • • • • • • • • • • • • • • • • •			Hambered IIIIe)	<b>X</b> 10
	ME OF COMMITTEE (In Full) EGAPHONE				
	A. Full Name (Last, First, Middle Initial) of Debtor of RightSide Compliance	or Creditor		Nature of Debt (Pur Compliance Service	rpose): es
	Mailing Address PO Box 341027				
-	City	State	Zip Code		
	Austin	TX	78734		
	Outstanding Balance Beginning This Period 7472.50	Transaction ID :	SD10.4981		
	Amount Incurred This Period	Amount Incurred This Period Payment This Period			
	0.00	00	7472.50		
	B. Full Name (Last, First, Middle Initial) of Debtor of RightSide Compliance	Nature of Debt (Pul Compliance Service			
Ì	Mailing Address PO Box 341027				
	City Austin				
	Outstanding Balance Beginning This Period  1575.00  Amount Incurred This Period  0.00	1575.00  nount Incurred This Period Payment This Period			SD10.4995  Ince at Close of This Period  1575.00
	C. Full Name (Last, First, Middle Initial) of Debtor of RightSide Compliance	Nature of Debt (Pul Compliance Service			
	Mailing Address PO Box 341027				
	City Austin	State TX	Zip Code 78734		
	Outstanding Balance Beginning This Period 2415.00	Transaction ID :	SD10.5024		
	Amount Incurred This Period	Pay	ment This Period	Outstanding Balar	nce at Close of This Period
	0.00	-	0.0	00	2415.00
1)	SUBTOTALS This Period This Page (optional)				11462.50
2)	TOTALS This Period (last page this line number of	nly)		>	
3)	TOTAL OUTSTANDING LOANS from Schedule C	(last page or	nly)	>	
4)	ADD 2) and 3) and carry forward to appropriate lin	ly) ▶			

**Excluding Loans** 

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

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X	10

29

NAME OF COMMITTEE (In Full) **MEGAPHONE** A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): **Compliance Services** RightSide Compliance Mailing Address PO Box 341027 State Zip Code Austin TX 78734 Transaction ID: SD10.5034 Outstanding Balance Beginning This Period 1792.31 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 1792.31 0.00 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): **Compliance Services** RightSide Compliance Mailing Address PO Box 341027 City State Zip Code Austin 78734 TX Outstanding Balance Beginning This Period Transaction ID: SD10.5037 3062.50 Outstanding Balance at Close of This Period Amount Incurred This Period Payment This Period 0.00 3062.50 0.00 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): **Compliance Services** RightSide Compliance Mailing Address PO Box 341027 City State Zip Code 78734 Austin TX Outstanding Balance Beginning This Period Transaction ID: SD10.5067 4455.00 Payment This Period Outstanding Balance at Close of This Period Amount Incurred This Period 0.00 4455.00 9309.81 1) SUBTOTALS This Period This Page (optional)..... 2) TOTALS This Period (last page this line number only)..... 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ...... 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶

**Excluding Loans** 

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

9 10

NAME OF COMMITTEE (In Full) MEGAPHONE				
A. Full Name (Last, First, Middle Initial) of De	ebtor or Creditor		Nature of Debt (Purpose):	
RightSide Compliance			Compliance Services	
Mailing Address PO Box 341027				
City Austin	State TX	Zip Code		
	17	78734	Transaction ID : SD10.5070	
Outstanding Balance Beginning This Period			Transaction ID: 3D10.5070	
1777.50				
Amount Incurred This Period	Payr	Outstanding Balance at Close of This Period		
0.00		0.00	1777.50	
B. Full Name (Last, First, Middle Initial) of Del	Nature of Debt (Purpose): Compliance Services			
RightSide Compliance	RightSide Compliance			
Mailing Address PO Box 341027				
City				
Austin	TX	78734		
Outstanding Balance Beginning This Period	Transaction ID : SD10.5103			
1462.50				
Amount Incurred This Period	Outstanding Balance at Close of This Period			
	0.00			
0.00	1462.50			
C. Full Name (Last, First, Middle Initial) of De RightSide Compliance	Nature of Debt (Purpose): Compliance Services			
Mailing Address PO Box 341027				
City	State	Zip Code		
Austin	TX	78734		
Outstanding Balance Beginning This Period			Transaction ID : SD10.5108	
2115.00				
Amount Incurred This Period	Pavr	nent This Period	Outstanding Balance at Close of This Period	
0.00		0.00	2115.00	
0.00		0.00	2110.00	
1) SUBTOTALS This Period This Page (optional	l)		5355.00	
2) TOTALS This Period (last page this line num	ber only)			
3) TOTAL OUTSTANDING LOANS from Schedu	ule C (last page on	y) I		
4) ADD 2) and 3) and carry forward to appropri				

**Excluding Loans** 

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

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NAME OF COMMITTEE (In Full) **MEGAPHONE** A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): **Compliance Services** RightSide Compliance Mailing Address PO Box 341027 State Zip Code Austin TX 78734 Transaction ID: SD10.5109 Outstanding Balance Beginning This Period 1012.50 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 1012.50 0.00 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): **Compliance Services** RightSide Compliance Mailing Address PO Box 341027 City State Zip Code Austin 78734 TX Outstanding Balance Beginning This Period Transaction ID: SD10.5120 742.50 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 742.50 0.00 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): **Compliance Services** RightSide Compliance Mailing Address PO Box 341027 City State Zip Code 78734 Austin TX Outstanding Balance Beginning This Period Transaction ID: SD10.5149 1147.50 Payment This Period Outstanding Balance at Close of This Period Amount Incurred This Period 0.00 1147.50 2902.50 1) SUBTOTALS This Period This Page (optional)..... 2) TOTALS This Period (last page this line number only)..... 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ...... 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶

**Excluding Loans** 

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

PAGE 14 OF FOR LINE (check only

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NAME OF COMMITTEE (In Full) MEGAPHONE				
A. Full Name (Last, First, Middle Initial) of Debtor of	Nature of Debt (Purpose): Compliance Services			
RightSide Compliance	RightSide Compliance			
Mailing Address PO Box 341027	Mailing Address PO Box 341027			
City	State	Zip Code		
Austin	TX	78734		
Outstanding Balance Beginning This Period			Transaction ID : SD10.5150	
157.50				
Amount Incurred This Period	Paym	nent This Period	Outstanding Balance at Close of This Period	
0.00		0.00	157.50	
B. Full Name (Last, First, Middle Initial) of Debtor or	Creditor		Nature of Debt (Purpose): Compliance Services	
RightSide Compliance			Compliance dervices	
Mailing Address PO Box 341027				
City	State	Zip Code		
Austin	TX	78734		
Outstanding Balance Beginning This Period	Outstanding Balance Beginning This Period			
697.50				
Amount Incurred This Period	Paym	nent This Period	Outstanding Balance at Close of This Period	
0.00	7	0.00	697.50	
C. Full Name (Last, First, Middle Initial) of Debtor of RightSide Compliance	C. Full Name (Last, First, Middle Initial) of Debtor or Creditor RightSide Compliance			
Mailing Address PO Box 341027				
City Austin	State TX	Zip Code 78734		
Outstanding Balance Beginning This Period 652.50	Transaction ID : SD10.5152			
Amount Incurred This Period	Paym	nent This Period	Outstanding Balance at Close of This Period	
0.00	1 4	0.00	652.50	
) SUBTOTALS This Period This Page (optional)			1507.50	
2) TOTALS This Period (last page this line number only)			7 7 7	
B) TOTAL OUTSTANDING LOANS from Schedule C (last page only)				
A) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)				

**Excluding Loans** 

(Use separate schedule(s) for each numbered line) PAGE 15 OF
FOR LINE NUMBER:
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NAME OF COMMITTEE (In Full) **MEGAPHONE** A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): **Compliance Services** RightSide Compliance Mailing Address PO Box 341027 State Zip Code Austin TX 78734 Transaction ID: SD10.5184 Outstanding Balance Beginning This Period 405.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 405.00 0.00 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): **Compliance Services** RightSide Compliance Mailing Address PO Box 341027 City State Zip Code Austin 78734 TX Outstanding Balance Beginning This Period Transaction ID: SD10.5208 562.50 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 562.50 0.00 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): **Compliance Services** RightSide Compliance Mailing Address PO Box 341027 City State Zip Code 78734 Austin TX Outstanding Balance Beginning This Period Transaction ID: SD10.5210 10170.00 Payment This Period Outstanding Balance at Close of This Period Amount Incurred This Period 0.00 10170.00 11137.50 1) SUBTOTALS This Period This Page (optional)..... 2) TOTALS This Period (last page this line number only)..... 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ...... 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶

**Excluding Loans** 

(Use separate schedule(s) for each numbered line) PAGE 16 OF
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NAME OF COMMITTEE (In Full) MEGAPHONE		1		
A. Full Name (Last, First, Middle Initial) of Debtor RightSide Compliance	Nature of Debt (Purpose): Compliance Services			
Mailing Address PO Box 341027	Mailing Address PO Box 341027			
City Austin	State	Zip Code 78734		
Outstanding Balance Beginning This Period	1/	76734	Transaction ID : SD10.5209	
1282.50				
Amount Incurred This Period	Pa	yment This Period	Outstanding Balance at Close of This Period	
0.00	7	0.00	1282.50	
B. Full Name (Last, First, Middle Initial) of Debtor RightSide Compliance	or Creditor		Nature of Debt (Purpose): Compliance Services	
Mailing Address PO Box 341027				
City Austin	State TX	Zip Code 78734		
Outstanding Balance Beginning This Period 225.00				
Amount Incurred This Period  0.00	Pa	yment This Period	Outstanding Balance at Close of This Period 225.00	
7 7	7	7	7 7	
C. Full Name (Last, First, Middle Initial) of Debtor RightSide Compliance	or Creditor		Nature of Debt (Purpose): Compliance Services	
Mailing Address PO Box 341027				
City Austin	State TX	Zip Code 78734		
Outstanding Balance Beginning This Period 4320.00			Transaction ID : SD10.5212	
Amount Incurred This Period	Pa	yment This Period	Outstanding Balance at Close of This Period	
0.00	-	0.00	4320.00	
1) SUBTOTALS This Period This Page (optional)		)	5827.50	
2) TOTALS This Period (last page this line number only)			7 7 7	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)				
4) ADD 2) and 3) and carry forward to appropriate I	ine of Summa	ary Page (last page only)		

**Excluding Loans** 

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

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NAME OF COMMITTEE (In Full) **MEGAPHONE** A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): **Compliance Services** RightSide Compliance Mailing Address PO Box 341027 State Zip Code Austin TX 78734 Transaction ID: SD10.5219 Outstanding Balance Beginning This Period 0.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 2565.00 2565.00 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Legal Services The Gober Group Mailing Address PO Box 341016 City State Zip Code Austin 78734 TX Outstanding Balance Beginning This Period Transaction ID: SD10.4853 5258.89 Outstanding Balance at Close of This Period Amount Incurred This Period Payment This Period 0.00 5258.89 0.00 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Legal Services The Gober Group Mailing Address PO Box 341016 City State Zip Code 78734 Austin TX Outstanding Balance Beginning This Period Transaction ID: SD10.4982 10994.00 Payment This Period Outstanding Balance at Close of This Period Amount Incurred This Period 0.00 10994.00 1) SUBTOTALS This Period This Page (optional)..... 2) TOTALS This Period (last page this line number only)..... 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ...... 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶

**Excluding Loans** 

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

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NAME OF COMMITTEE (In Full) **MEGAPHONE** A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Legal Services The Gober Group Mailing Address PO Box 341016 State Zip Code Austin TX 78734 Transaction ID: SD10.4983 Outstanding Balance Beginning This Period 8162.50 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 8162.50 0.00 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Legal Services The Gober Group Mailing Address PO Box 341016 City State Zip Code Austin 78734 TX Outstanding Balance Beginning This Period Transaction ID: SD10.5004 890.50 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 890.50 0.00 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Legal Services The Gober Group Mailing Address PO Box 341016 City State Zip Code 78734 Austin TX Outstanding Balance Beginning This Period Transaction ID: SD10.5021 332.00 Payment This Period Outstanding Balance at Close of This Period Amount Incurred This Period 0.00 332.00 9385.00 1) SUBTOTALS This Period This Page (optional)..... 2) TOTALS This Period (last page this line number only)..... 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ...... 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶

**Excluding Loans** 

(Use separate schedule(s) for each numbered line) PAGE 19 OF
FOR LINE NUMBER:
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	ME OF COMMITTEE (In Full) IEGAPHONE			
	A. Full Name (Last, First, Middle Initial) of Debtor	Nature of Debt (Purpose):		
	The Gober Group	Legal Services		
	Mailing Address PO Box 341016			
	City	State	Zip Code	
	Austin	TX	78734	
	Outstanding Balance Beginning This Period	1		Transaction ID : SD10.5038
	923.50			
	Amount Incurred This Period	Payr	ment This Period	Outstanding Balance at Close of This Period
	0.00		0.00	923.50
	B. Full Name (Last, First, Middle Initial) of Debtor o	r Creditor		Nature of Debt (Purpose):
	The Gober Group			Legal Services
	Mailing Address PO Box 341016			
	City Austin	State TX	Zip Code 78734	
	Outstanding Balance Beginning This Period			Transaction ID : SD10.5039
	7369.00			
	Amount Incurred This Period	Payr	ment This Period	Outstanding Balance at Close of This Period
	0.00		0.00	7369.00
	C. Full Name (Last, First, Middle Initial) of Debtor The Gober Group	or Creditor		Nature of Debt (Purpose): Legal Services
	Mailing Address PO Box 341016			
	City	State	Zip Code	
	Austin	TX	78734	
	Outstanding Balance Beginning This Period			Transaction ID : SD10.5066
	10049.50			
	Amount Incurred This Period	Payı	ment This Period	Outstanding Balance at Close of This Period
	0.00		0.00	10049.50
1)	SUBTOTALS This Period This Page (optional)			18342.00
2)	TOTALS This Period (last page this line number o	nly)		
3)	3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)			
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**Excluding Loans** 

(Use separate schedule(s) for each numbered line) PAGE 20 OF
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NAME OF COMMITTEE (In Full) **MEGAPHONE** A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Legal Services The Gober Group Mailing Address PO Box 341016 State Zip Code Austin TX 78734 Transaction ID: SD10.5071 Outstanding Balance Beginning This Period 200.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 200.00 0.00 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Legal Services The Gober Group Mailing Address PO Box 341016 City State Zip Code Austin 78734 TX Outstanding Balance Beginning This Period Transaction ID: SD10.5101 436.50 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 436.50 0.00 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Legal Services The Gober Group Mailing Address PO Box 341016 City State Zip Code 78734 Austin TX Outstanding Balance Beginning This Period Transaction ID: SD10.5121 15428.50 Payment This Period Outstanding Balance at Close of This Period Amount Incurred This Period 0.00 15428.50 16065.00 1) SUBTOTALS This Period This Page (optional)..... 2) TOTALS This Period (last page this line number only)..... 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ...... 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶

**Excluding Loans** 

(Use separate schedule(s) for each numbered line) PAGE 21 OF
FOR LINE NUMBER:
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NAME OF COMMITTEE (In Full) **MEGAPHONE** A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Legal Services The Gober Group Mailing Address PO Box 341016 State Zip Code Austin TX 78734 Transaction ID: SD10.5153 Outstanding Balance Beginning This Period 4980.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 4980.00 0.00 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Legal Services The Gober Group Mailing Address PO Box 341016 City State Zip Code Austin 78734 TX Outstanding Balance Beginning This Period Transaction ID: SD10.5155 401.50 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 401.50 0.00 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Legal Services The Gober Group Mailing Address PO Box 341016 City State Zip Code 78734 Austin TX Outstanding Balance Beginning This Period Transaction ID: SD10.5156 160.50 Payment This Period Outstanding Balance at Close of This Period Amount Incurred This Period 0.00 160.50 5542.00 1) SUBTOTALS This Period This Page (optional)..... 2) TOTALS This Period (last page this line number only)..... 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ...... 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶

**Excluding Loans** 

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

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NAME OF COMMITTEE (In Full) **MEGAPHONE** A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Legal Services The Gober Group Mailing Address PO Box 341016 State Zip Code Austin TX 78734 Transaction ID: SD10.5163 Outstanding Balance Beginning This Period 54000.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 54000.00 0.00 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Legal Services The Gober Group Mailing Address PO Box 341016 City State Zip Code Austin 78734 TX Outstanding Balance Beginning This Period Transaction ID: SD10.5180 107.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 107.00 0.00 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Legal Services The Gober Group Mailing Address PO Box 341016 City State Zip Code 78734 Austin TX Outstanding Balance Beginning This Period Transaction ID: SD10.5181 107.00 Payment This Period Outstanding Balance at Close of This Period Amount Incurred This Period 0.00 107.00 54214.00 1) SUBTOTALS This Period This Page (optional)..... 2) TOTALS This Period (last page this line number only)..... 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ...... 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶

**Excluding Loans** 

(Use separate schedule(s) for each numbered line) PAGE 23 OF
FOR LINE NUMBER:
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				/		
	ME OF COMMITTEE (In Full)  SERVICE (In Full)					
	A. Full Name (Last, First, Middle Initial) of Debtor	Nature of Debt (Purpose): Legal Services				
	The Gober Group					
	Mailing Address PO Box 341016					
	City	State	Zip Code			
	Austin	TX	78734	Transaction ID : SD10.5204		
	Outstanding Balance Beginning This Period 1690.00			Halisaction ID . 3D10.3204		
	Amount Incurred This Period	Par	yment This Period	Outstanding Balance at Close of This Period		
	0.00	ra	0.00	1690.00		
	0.00	7	0.00	1030.00		
	B. Full Name (Last, First, Middle Initial) of Debtor The Gober Group	or Creditor		Nature of Debt (Purpose): Legal Services		
	Mailing Address PO Box 341016					
	City Austin	State TX	Zip Code 78734			
	Outstanding Balance Beginning This Period	<u> </u>	I	Transaction ID : SD10.5205		
	14.97					
	Amount Incurred This Period	Outstanding Balance at Close of This Period				
	0.00			14.97		
	C. Full Name (Last, First, Middle Initial) of Debtor The Gober Group	Nature of Debt (Purpose): Legal Services				
	Mailing Address PO Box 341016					
	City Austin	State TX	Zip Code 78734			
	Outstanding Balance Beginning This Period		-	Transaction ID : SD10.5207		
	1979.50					
Amount Incurred This Period		Pa	yment This Period	Outstanding Balance at Close of This Period		
	0.00		0.00	1979.50		
1)	SUBTOTALS This Period This Page (optional)			3684.47		
2)	TOTALS This Period (last page this line number	only)		1171171171		
3)	TOTAL OUTSTANDING LOANS from Schedule C	C (last page o	nly)			
4)	ADD 2) and 3) and carry forward to appropriate	ine of Summa	ary Page (last page only)			

**Excluding Loans** 

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

FOR LINE NUMBER: (check only one)

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NAME OF COMMITTEE (In Full) **MEGAPHONE** A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Legal Services The Gober Group Mailing Address PO Box 341016 State Zip Code Austin TX 78734 Transaction ID: SD10.5220 Outstanding Balance Beginning This Period 0.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 53.50 53.50 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Legal Services The Gober Group Mailing Address PO Box 341016 City State Zip Code Austin 78734 TX Outstanding Balance Beginning This Period Transaction ID: SD10.5221 0.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 240.00 240.00 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Website Development and Design **Tusk Digital** Mailing Address 718 7th St NW 2nd Floor City State Zip Code Washington DC 20001 Outstanding Balance Beginning This Period Transaction ID: SD10.4139 297000.00 Payment This Period Outstanding Balance at Close of This Period Amount Incurred This Period 297000.00 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) ▶

**Excluding Loans** 

(Use separate schedule(s) for each numbered line) PAGE 25 OF

FOR LINE NUMBER:
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NAME OF COMMITTEE (In Full) MEGAPHONE			
A. Full Name (Last, First, Middle Initial) of Debto  Tusk Digital	Nature of Debt (Purpose): Website Hosting		
Mailing Address 718 7th St NW 2nd Floor			
City Washington	State DC	Zip Code 20001	
Outstanding Balance Beginning This Period			Transaction ID : SD10.5124
594.00			
Amount Incurred This Period	Pay	ment This Period	Outstanding Balance at Close of This Period
0.00		594.00	0.00
B. Full Name (Last, First, Middle Initial) of Debtor  Tusk Digital	or Creditor		Nature of Debt (Purpose): Website Hosting
Mailing Address 718 7th St NW 2nd Floor			
City Washington	State DC	Zip Code 20001	
Outstanding Balance Beginning This Period 297.00	Transaction ID : SD10.5125		
Amount Incurred This Period Payment This Period			Outstanding Balance at Close of This Period
0.00	7	297.00	0.00
C. Full Name (Last, First, Middle Initial) of Debtor or Creditor  Tusk Digital			Nature of Debt (Purpose): Website Hosting
Mailing Address 718 7th St NW 2nd Floor			_
City Washington	State DC	Zip Code 20001	
Outstanding Balance Beginning This Period			Transaction ID : SD10.5157
297.00	_		
Amount Incurred This Period  0.00	Pay	ment This Period 297.00	Outstanding Balance at Close of This Period  0.00
0.00		237.00	0.00
1) SUBTOTALS This Period This Page (optional)		<b>&gt;</b>	0.00
2) TOTALS This Period (last page this line number	7 7 7		
3) TOTAL OUTSTANDING LOANS from Schedule			
4) ADD 2) and 3) and carry forward to appropriate			

**Excluding Loans** 

(Use separate schedule(s) for each numbered line) PAGE 26 OF
FOR LINE NUMBER:
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NAME OF COMMITTEE (In Full) **MEGAPHONE** A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Website Hosting Tusk Digital Mailing Address 718 7th St NW 2nd Floor State Zip Code Washington DC 20001 Transaction ID: SD10.5215 Outstanding Balance Beginning This Period 299.95 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 299.95 0.00 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Mailing Address City State Zip Code Outstanding Balance Beginning This Period Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Mailing Address City State Zip Code Outstanding Balance Beginning This Period Payment This Period Outstanding Balance at Close of This Period Amount Incurred This Period 0.00 1) SUBTOTALS This Period This Page (optional)..... 511639.49 2) TOTALS This Period (last page this line number only)..... 0.00 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ...... 511639.49 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶

### SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

TEMIZED INDEPENDENT EXPENDITORES				PAGE 27 OF 29 FOR LINE 24 OF FORM 3X		
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼		
MEGAPHONE				C C00569517		
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M = M / D = D / Y = Y = Y		
Full Name of Payee		☐ Memo	Item Da	ate of Public Distribution/Dissemination		
Majority Strategies				04 23 7 2018		
Mailing Address 12854 Kenan Dr Ste 145			Ar	nount		
City	State	Zip Code	-	2783.23		
Jacksonville	FL	32258		ansaction ID : SE.5237 ate of Disbursement or Obligation		
Purpose of Expenditure Development of Social Media Ads		Category/ Type 004		04 / 27 / 2018		
Name of Federal Candidate:		<b>✗</b> Support	Office Sc	ought: X House District: 27		
BRUUN, BECH, , ,		Oppose		esident Senate State: TX		
Calendar Year-To-Date Per Election for Office Sought		2783.23	Disburser 2018	ment For:		
Full Name of Payee		☐ Memo	Item Da	ate of Public Distribution/Dissemination		
Majority Strategies		04 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
Mailing Address 12854 Kenan Dr Ste 145			Ar	nount		
	Ta					
City  Jacksonville	State	Zip Code		1250.00 ransaction ID : SE.5238		
Purpose of Expenditure	FL	32258		Date of Disbursement or Obligation		
Ad Video Development and Production		Category/ Type 004		04 / 27 / 2018		
Name of Federal Candidate:		<b>✗</b> Support	Office Sc	ought: X House District: 27		
BRUUN, BECH, , ,		Oppose	Pre	esident Senate State: TX		
Calendar Year-To-Date Per Election for Office Sought	7 7	4033.23	Disburse 2018	ment For:		
(a) SUBTOTAL of Itemized Independent Expenditures				4033.23		
(b) SUBTOTAL of Unitemized Independent Expenditur	'es					
			F			
(c) TOTAL Independent Expenditures			• _			
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized	•		· · · · · · · · · · · · · · · · · · ·		
MCALPIN, LUKE, , ,	Electronically File	edl -	M = M	/ D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
Signature		Date	e 05	18 2018		

#### SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

TEMIZED INDEPENDENT EXPENDITURES				PAGE 28 OF 29		
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X  FEC IDENTIFICATION NUMBER ▼		
MEGAPHONE				C C00569517		
Check if 24-hour report 48-hour report	New repo	ort Amends repo		M = M / D = D / Y = Y = Y		
Full Name of Payee		Memo	Item Date	e of Public Distribution/Dissemination		
Majority Strategies				M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
Mailing Address 12854 Kenan Dr Ste 145			Amo	ount		
City	State	Zip Code		4000.00		
Jacksonville	FL	32258		nsaction ID : SE.5247		
Purpose of Expenditure Digital Ad Development and Production		Category/ Type 004		04 / 27 / 2018		
Name of Federal Candidate:		<b>X</b> Support	Office Sou	ght: X House District: 27		
BRUUN, BECH, , ,		Oppose	Presi			
Calendar Year-To-Date Per Election for Office Sought	<b>7</b>     <b>7</b>	8033.23	Disburseme 2018	ent For:		
Full Name of Payee		Memo	Item Date	e of Public Distribution/Dissemination		
Majority Strategies		04 25 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
Mailing Address 12854 Kenan Dr Ste 145			Amo	ount		
City	State	Zin Codo	<u> </u>	999.00		
Jacksonville	City State Zip Code  Jacksonville FL 32258					
Purpose of Expenditure Development of Website	L'ategory/					
Name of Federal Candidate:						
BRUUN, BECH, , ,				dent Senate State: TX		
Calendar Year-To-Date Per Election for Office Sought	<u></u>	9032.23	Disburseme 2018	ent For:		
(a) SUBTOTAL of Itemized Independent Expenditures			• [	4999.00		
(b) SUBTOTAL of Unitemized Independent Expenditure	res		· •			
(c) TOTAL Independent Expenditures						
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized					
MCALPIN, LUKE, , ,	Electronically Fil	led1	M = M	/ D D / Y Y Y Y		
Signature	zaca omany Ph	_ Date	e 05	18 2018		

#### SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

TEMIZED INDEPENDENT EXPENDITURES				PAGE 29 OF 29 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
MEGAPHONE				C C00569517
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M / D D / Y Y Y Y
Full Name of Payee		Memo	Item Date of	of Public Distribution/Dissemination
Majority Strategies			N	04 / 25 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 12854 Kenan Dr Ste 145			Amou	
City	State	Zip Code	<u> —</u> Г	10000.00
Jacksonville	FL	32258		action ID : SE.5249
Purpose of Expenditure Development of Social Media Ads		Category/ Type 004	N	of Disbursement or Obligation  04 27 2018
Name of Federal Candidate:		<b>✗</b> Support	Office Sough	it: X House District:27
BRUUN, BECH, , ,		Oppose	Preside	
Calendar Year-To-Date Per Election for Office Sought	7 7	19032.23	Disbursemen 2018	t For:
Full Name of Payee		☐ Memo	Item Date of	of Public Distribution/Dissemination
Majority Strategies			N	04 / 26 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 12854 Kenan Dr Ste 145			Amou	
City	State	Zip Code	— r	1863.55
Jacksonville	FL	32258		saction ID : SE.5250 of Disbursement or Obligation
Purpose of Expenditure Development of Social Media Ads		Category/ Type 004	N	04 / D D D D D D D D D D D D D D D D D D
Name of Federal Candidate:		<b>x</b> Support	Office Sough	it: K House District: 27
BRUUN, BECH, , ,		Oppose	Preside	ent Senate State: TX
Calendar Year-To-Date Per Election for Office Sought	7 7	20895.78	Disbursemen 2018	t For: ☐ Primary ☐ General  where (specify) ▶ Runoff
(a) SUBTOTAL of Itemized Independent Expenditures			· [	11863.55
(b) SUBTOTAL of Unitemized Independent Expenditure	res		<b>→</b>	
(c) TOTAL Independent Expenditures			•	20895.78
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
MCALPIN, LUKE, , ,	Electronically Fil	ed]	M M /	18 2018
Signature		Date	9 05	18 2018