GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM GPAC COVER SHEET PG 1

Th	e GPAC Instruction	2 Total pages filed: 9								
3	COMMITTEE NAME					OFFICE USE ONLY				
	MEGAPHONE					Date Received				
						ELECTRONICALLY FILED				
						07/15/2010CC RECEIVED AT				
4	COMMITTEE	ADDRESS / PO BOX; APT / SUITE #; CIT	Υ;	STATE; ZIP C	ODE	JUL 16'19 PM4:22				
	ADDRESS	P.O. Box 341028				Date Hand-delivered or Date Postmarked				
					1	Date Halla delivered of Date Footharies				
	Change of Address	Austin, TX 78734				Receipt # Amount				
		Additi, 17 10104				Autount Panount				
						Date Processed				
						Date 11000000				
						Date Imaged				
5	CAMPAIGN	MS / MRS / MR FIRST				MI				
	TREASURER	Mr. Luke								
	NAME	Lunc								
		NICKAIAME				CULTIV				
		NICKNAME LAST				SUFFIX				
		McAlpin								
L										
6	CAMPAIGN TREASURER	STREET ADDRESS (NO PO BOX PLEASE);		APT / SUITE #;	CITY;	STATE; ZIP CODE				
	STREET	3595 RR 620 S								
	ADDRESS	Ste. 200								
	(Residence or Business)	Austin, TX 78738								
7	CAMPAIGN	STREET OR PO BOX;		APT / SUITE #;	CITY;	STATE; ZIP CODE				
	TREASURER	P.O. Box 341028								
	MAILING ADDRESS	1.16.26% 0.12020								
		A 4: TV 70704								
	Change of Address	Austin, TX 78734								
8	CAMPAIGN	AREA CODE PHONE NUMBER	EXT	ENSION						
	TREASURER PHONE	(662) 350-3711								
	FIONE									
9	REPORT	January 15	Oth d	ay before election		Dissolution (Attach PAC-DR)				
	TYPE			-	_					
		l	n da	y before election		10th day after campaign treasurer termination				
		X July 15	unof	f						
10	PERIOD	Month Day Year		Month	Day	Year				
۱40	COVERED	A STATE	HR(Day 30/2019					
		01/01/5013		00/	5012018					
11	ELECTION	ELECTION DATE		ELECTION T	YPF					
	LLECTION		rima		TEL	Other				
		03/03/2020				П				
			Sene	ral Special						
		•								
		GO.	го	PAGE 2						
	GO TO PAGE 2									

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM GPAC COVER SHEET PG 2

12 COMMITTEE NAME			13 Filer IC			
MEGAPHONE			08000	702		
14 COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported				
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed				
	2. Measures	A. Supported				
	(Describe by date and location of election and nature of issue.)					
		B. Opposed				
	Officeholders Assisted					
	(Identify by name or, if applicable, classify by party.)					
15 CONTRIBUTION	11. TOTAL UNITEMIZED	D POLITICAL CONTRIBUTIONS (OTHER THAN	T			
TOTALS	PLEDGES, LOANS,	OR GUARANTEES OF LOANS) qualifies for the higher itemization threshold	\$	0.00		
	2. TOTAL POLITICA		\$	0.00		
		DGES, LOANS, OR GUARANTEES OF LOANS)				
EXPENDITURE TOTALS	######################################					
	\$	46,609.69				
CONTRIBUTION BALANCE	5. TOTAL POLITICAL OF THE REPORTING	DAY \$	64,002.43			
OUTSTANDING LOAN TOTALS		AMOUNT OF ALL OUTSTANDING LOANS AS OF TREPORTING PERIOD	THE \$	0.00		
16 AFFIDAVIT						
		I swear, or affirm, under penalty of pe true and correct and includes all infor under Title 15, Election Code.				
		Mr. Luke	e McAlpin	1		
		Signature of Ca				
AFEIV NOTARY	CTAMB / SEAL ABOVE					
AFFIX NOTARY	STAMP / SEAL ABOVE					
Sworn to and subscribed before me, by the said day						
of	_, 20, to certify v	which, witness my hand and seal of office.				
Signature of officer ad	lministering oath	Printed name of officer administering oath	Title of	f officer administering oath		

SUBTOTALS - GPAC

FORM GPAC COVER SHEET PG 3

3 of 9

				3013
	MMITTE GAPH	EE NAME ONE	18 Filer ID 00080702	(Ethics Commission Filers)
19 SCH NAM	HEDULI ME OF		SUBTOTAL AMOUNT	
1.		SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$
2.		SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$
3.		SCHEDULE B: PLEDGED CONTRIBUTIONS		\$
4.		SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABO ORGANIZATION	R	\$
5.		SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORALABOR ORGANIZATION	ATION OR	\$
6.		SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORG	ANIZATION	\$
7.		SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION		\$
8.		SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR (ORGANIZATION	\$
9.		SCHEDULE E: LOANS		\$
10.	х	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	5	\$ 39,851.21
11.	Х	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$ 6,758.48
12.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$
13.		SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$
14.		SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$
15.		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS IT TO FILER	RETURNED	\$

SCHEDULE F1

Advertising Expense Accounting/Banking
Consulting Expense Contributions/ Donations Made By -

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees
Food/Beverage Expense
Git/Awards/Memorials Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

Credit Card Payment	The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 1/5 Rpt: 4/9	MEGAPHONE 00080702
4 Date	5 Payee name
06/21/2019	Citizen Super PAC Services LLC
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$3,500.00	1011 M Street NW
	Unit 402
Expenditure from corporate funds	Washington, DC 20001
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense Political Consulting Services
	1 Situation Services
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	
Date	Payee name
01/17/2019	Dropoff Inc
Amount (\$)	Payee address; City; State; Zip Code
\$66.87	PO Box 123696
φου.στ	FO BOX 123090
Expenditure from corporate funds	Dallas, TX 75312
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
LAFENDITORE	Check if Austin, TX, officeholder living expense
	Delivery Services
Consolete ONLY William	
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date	Payee name
06/21/2019	Grimes, Windi
Amount (\$)	Payee address; City; State; Zip Code
\$34,052.47	3310 W Main St
Expenditure from	
corporate funds	Houston, TX 77098
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense
	Refund of Contribution
Complete CNII V if direct	Condidate/Officeholder name
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
,	

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District

Contributions/ Donations Made B Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1:	
Sch: 2/5 Rpt: 5/9	MEGAPHONE Certific Continues Continu
4 Date	5 Payee name
01/03/2019	MCALPIN, LUKE
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$1,000.00	PO Box 341028
Expenditure from corporate funds	Austin, TX 78734
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense PAC Management Consulting Fee
	The Management Consulting Fee
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
2.1.	
Date	Payee name
01/15/2019	Tusk Digital
Amount (\$)	Payee address; City; State; Zip Code
\$297.00	777 6th St. NW
- Francisco from	11th Floor
Expenditure from corporate funds	Washington, DC 20001
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Office Overhead/Rental Expense Check if travel outside of Texas, Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Website Hosting
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	1
Date	Payee name
03/21/2019	Tusk Digital
Amount (\$)	Payee address; City; State; Zip Code
\$407.25	777 6th St. NW
	11th Floor
Expenditure from corporate funds	Washington, DC 20001
PURPOSE	
OF	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Website Hosting
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
1	

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense ons/ Donations Made By -

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Ex

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Tradel in District Travel Out of District

Candidate/Officeholder/Politic Credit Card Payment	al Committee Lega	Services Instruction Guide explains		ages/Contract Labor		OTHER (enter a	category not listed above)
1 Total pages Schedule F1:	2 FILER NAME				3	Filer ID	(Ethics Commission Filers)
Sch: 3/5 Rpt: 6/9	MEGAPHONE					00080702	,
4 Date	5 Payee name						
06/24/2019	Tusk Digital						
6 Amount (\$)	7 Payee address;	City; State	e; Zip Coo	de			
\$464.62	777 6th St. NW						
	11th Floor						
Expenditure from corporate funds	Washington, Do	20001					
8 PURPOSE	(a) Category (See Ca	regories listed at the top of this so	chedule)	(b) Description			
OF EXPENDITURE	Office Overhea	d/Rental Expense				de of Texas. Com	
EXI ENDITORE			1			officeholder living	expense
			- 1	Website Host	ung	ļ	
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeho	lder name	Office soug	Jht		Office he	eld
Date	Payee name						
01/10/2019	WELLS FARGO	BANK NA					
Amount (\$)	Payee address;	City; State	e; Zip Coo	de			
\$10.00	PO BOX 6995		-, -р				
Ψ10.00	1 0 50% 0000						
Expenditure from corporate funds	PORTLAND, O	R 97228					
PURPOSE	(a) Category (See Cat	egories listed at the top of this so	chedule)	(b) Description			
OF EXPENDITURE	Fees			Check if travel of	outsi	de of Texas. Com	olete Schedule T.
EXPENDITORE			1		, TX,	officeholder living	expense
			1	Bank Fees			
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeho	lder name	Office soug	ht		Office he	eld
Date	Payee name						
02/08/2019	WELLS FARGO	BANK NA					
Amount (\$)	Payee address;		e; Zip Cod	le .			
\$13.00	PO BOX 6995	Oity, State	c, 2ip 000				
\$13.00	PO BOX 0993						
Expenditure from corporate funds	PORTLAND, O	R 97228					
PURPOSE	(a) Category (See Cat	egories listed at the top of this so	chedule)	(b) Description			
OF	Fees	,	,		outsi	de of Texas. Com	olete Schedule T.
EXPENDITURE					TX,	officeholder living	expense
				Bank Fees			
Complete ONLY if direct	Candidate/Officeho	lder name	Office soug	ht		Office he	eld
expenditure to benefit C/O	Н						

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1: Sch: 4/5 Rpt: 7/9	2 FILER NAME MEGAPHONE 3 Filer ID (Ethics Commission Filers) 00080702
4 Date 03/08/2019	5 Payee name WELLS FARGO BANK NA
6 Amount (\$) \$10.00	7 Payee address; City; State; Zip Code PO BOX 6995
Expenditure from corporate funds	PORTLAND, OR 97228
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Bank Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date 04/08/2019	Payee name WELLS FARGO BANK NA
Amount (\$) \$10.00	Payee address; City; State; Zip Code PO BOX 6995
Expenditure from corporate funds	PORTLAND, OR 97228
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Bank Fees
Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought Office held
Date 05/08/2019	Payee name WELLS FARGO BANK NA
Amount (\$) \$10.00	Payee address; City; State; Zip Code PO BOX 6995
Expenditure from corporate funds	PORTLAND, OR 97228
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Bank Fees
Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District

	Candidate/Officeholder/Politica Credit Card Payment	l Cor	nmittee	The Ins	vices truction Guide				Contract Labor te this form.		OTHER (enter a	category not listed above)	
1	Total pages Schedule F1:	2	FILER NAME							3	Filer ID	(Ethics Commission Fil	ers)
	Sch: 5/5 Rpt: 8/9		MEGAPHO								00080702		
4	Date	5	Payee name										
	06/10/2019		WELLS FAR	RGO B	ANK NA								
6	Amount (\$)	7	Payee addres	ss;	City;	State; 2	Zip Co	ode					
	\$10.00		PO BOX 69	995									
	Expenditure from corporate funds		PORTLAND	D, OR 9	7228								
8	PURPOSE	(a)	Category (Se	ee Categor	ies listed at the top	o of this schedu	ıle)	(b)	Description				
	OF EXPENDITURE		Fees								de of Texas. Comp		
	EXI ENDITORE									, TX,	officeholder living	expense	
									Bank Fees				
9	Complete ONLY if direct		Candidate/Offic	iceholde	r name	Offi	ce sou	aht			Office he	ld	
	expenditure to benefit C/O	4						3				-	

UNPAID INCURRED OBLIGATIONS

SCHEDULE F2

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense Accounting/Banking

Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense

Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Co	committee	Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense Legal Services Salaries/Wages/Contract Labor				Travel in District Travel Out of Dis OTHER (enter a	strict category not listed above)		
		The Instruction Guide exp	plains how to	complet	te this form.				
1 Total pages Schedule F2: 2	FILER NAME					3	Filer ID	(Ethics Commission Filers)	
Sch: 1/1 Rpt: 9/9	MEGAPHO	NE					00080702		
4 TOTAL OF UNITEMIZE	ED UNPAID	INCURRED OBLIG	ATIONS			\$			
5 Date 6	Payee name								
06/30/2019	RightSide C	Compliance							
7 Amount (\$) 8	Payee addres	ss; City;	State; Zip	Code					
\$5,001.98	PO Box 341	1028							
Expenditure from corporate funds									
9 TYPE OF EXPENDITURE	Х	Political	Non-F	olitical					
10 PURPOSE (a	a) Category (Se	ee Categories listed at the top of	this schedule)	(b) [Description				
EXPENDITURE	Office Over	head/Rental Expense					ide of Texas. Com , officeholder living		
				'	Legal Service		, omeenoider living	CAPCING	
11 Complete ONLY if direct	Candidate/Offi	ceholder name	Office s	ought			Office he	eld	
expenditure to benefit C/OH									
Date	Payee name					-			
06/30/2019	The Gober	Group							
Amount (\$)	Payee addres		State; Zip	Code					
\$1,756.50	3595 RR 62								
	Ste 200								
Expenditure from corporate funds	Austin, TX 7	78738							
TYPE OF EXPENDITURE	X	Political	Non-P	olitical					
	a) Category (Se	ee Categories listed at the top of	this schedule)	(b) D	Description				
OF EXPENDITURE	Office Over	head/Rental Expense		[ide of Texas. Com		
EXI ENDITORE					_	stin, TX, officeholder living expense			
				1	Compliance a	ano	Reporting C	Consulting	
Complete ONLY if direct	Candidate/Offi	coholder name	Office s	ought			Office he	ald.	
expenditure to benefit C/OH	Candidate/Office	cenoider name	Office s	ougni			Office fie	au	