



GOVERNMENT OF THE DISTRICT OF COLUMBIA  
OFFICE OF CAMPAIGN FINANCE  
WASHINGTON, D.C. 20003

REPORT OF RECEIPTS AND EXPENDITURES  
FOR CANDIDATES, PRINCIPAL CAMPAIGN OR POLITICAL COMMITTEES,  
POLITICAL ACTION COMMITTEES, INDEPENDENT EXPENDITURE COMMITTEES

SUMMARY PAGE

1. Full Name of Committee (Name of Candidate, if Candidate is reporting) <b>Marya DC 2020</b>	2. OCF Identification Number <b>PCCCCL207154</b>
Address <b>4402 44th Street, NW</b>	3. Is this report an Amendment? (Yes or No) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
City, State and Zip Code <b>Washington, DC 20016</b>	

4. TYPE OF REPORT: **December 10th Report for General Election Candidates**

This REPORT contains activity for: **General Election**

SUMMARY	COLUMN A THIS PERIOD	COLUMN B CUMULATIVE TO-DATE
5. Covering Period <b>10/27/2020</b> through <b>12/10/2020</b>		
6. (a) Cash on Hand (January 31 Year End Report Only)		<b>\$ 0.00</b>
(b) Cash on Hand at Beginning of Reporting Period	<b>\$ 3,380.55</b>	
(c) Total Receipts [from Line (16)]	<b>\$ 1,125.00</b>	<b>\$ 30,073.91</b>
(d) Subtotal [add Lines 6(b) and 6(c) for Column A]	<b>\$ 4,505.55</b>	
7. Total Expenditures (from Line 22)	<b>\$ 4,505.55</b>	<b>\$ 30,073.91</b>
8. Cash on Hand at Close of Reporting Period [subtract Line 7 from Line 6(d)]	<b>\$ 0.00</b>	
9. Debts and Obligations Owed BY the Committee or the Candidate (itemize all on Schedule D)	<b>\$ 0.00</b>	<b>\$ 0.00</b>
10. (a) Loans Owed By the Committee to the Candidate (itemize all on Schedule E)	<b>\$ 0.00</b>	<b>\$ 0.00</b>
(b) Loans from other sources made to the Committee (itemize all on Schedule E-1)	<b>\$ 0.00</b>	<b>\$ 0.00</b>

CERTIFICATIONS/OATHS AND AFFIRMATIONS OF FILERS OF REPORTS OF RECEIPTS AND EXPENDITURES

(1) OATH OR AFFIRMATION OF CANDIDATE IF FILING

I HEREBY SWEAR OR AFFIRM, SUBJECT TO PENALTIES OF PERJURY, THAT I HAVE USED ALL REASONABLE DUE DILIGENCE TO PREPARE THIS REPORT, AND TO THE BEST OF MY KNOWLEDGE AND BELIEF, THE REPORT IS TRUE AND COMPLETE; AND I FURTHER SWEAR OR AFFIRM THAT I USED ALL REASONABLE DUE DILIGENCE TO ENSURE THAT I AND THE POLITICAL COMMITTEES AFFILIATED/AUTHORIZED BY MY CAMPAIGN ARE IN COMPLIANCE WITH THE REPORTING REQUIREMENTS OF THE DISTRICT OF COLUMBIA CAMPAIGN FINANCE ACT OF 2011, AND HAVE ADVISED ALL CONTRIBUTORS OF THE OBLIGATIONS IMPOSED ON CONTRIBUTORS BY THE CAMPAIGN FINANCE ACT.

TYPE OR PRINT FULL NAME OF CANDIDATE

SIGNATURE OF CANDIDATE

DATE

SUBSCRIBED AND SWORN TO BEFORE ME THIS THE \_\_\_\_\_ DAY \_\_\_\_\_ OF \_\_\_\_\_, 20

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NOTARY PUBLIC

NOTE: SUBMISSION OF LATE, FALSE, ERRONEOUS, OR INCOMPLETE INFORMATION MAY SUBJECT THE PERSON TO THE PENALTIES OF D.C. OFFICIAL CODE § 1-1163.35.

(2) OATH OR AFFIRMATION OF COMMITTEE TREASURER

I HEREBY SWEAR OR AFFIRM, SUBJECT TO PENALTIES OF PERJURY THAT I HAVE USED ALL REASONABLE DUE DILIGENCE TO PREPARE THIS REPORT, AND TO THE BEST OF MY KNOWLEDGE AND BELIEF, THE REPORT IS TRUE, CORRECT AND COMPLETE.

**Mr. Michael McHugh**

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TYPE OR PRINT FULL NAME OF TREASURER

**ELECTRONICALLY CERTIFIED**

12/10/2020

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SIGNATURE OF TREASURER

DATE

SUBSCRIBED AND SWORN TO BEFORE ME THIS THE \_\_\_\_\_ DAY \_\_\_\_\_ OF \_\_\_\_\_, 20

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NOTARY PUBLIC

NOTE: SUBMISSION OF LATE, FALSE, ERRONEOUS, OR INCOMPLETE INFORMATION MAY SUBJECT THE PERSON TO THE PENALTIES OF D.C. OFFICIAL CODE § 1-1163.35.

(3) OATH OR AFFIRMATION OF COMMITTEE TREASURER OF INDEPENDENT EXPENDITURE COMMITTEE

I HEREBY SWEAR OR AFFIRM, SUBJECT TO PENALTIES OF PERJURY THAT I HAVE USED ALL REASONABLE DUE DILIGENCE TO PREPARE THIS REPORT, AND TO THE BEST OF MY KNOWLEDGE AND BELIEF, THE REPORT IS TRUE AND COMPLETE; AND I FURTHER SWEAR OR AFFIRM THAT THE COMMITTEE HAS MADE NO CONTRIBUTIONS OR TRANSFER OF FUNDS TO ANY PUBLIC OFFICIAL OR CANDIDATE, ANY POLITICAL COMMITTEE, OR ANY POLITICAL ACTION COMMITTEE.

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TYPE OR PRINT FULL NAME OF TREASURER

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SIGNATURE OF TREASURER

DATE

SUBSCRIBED AND SWORN TO BEFORE ME THIS THE \_\_\_\_\_ DAY \_\_\_\_\_ OF \_\_\_\_\_, 20

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NOTARY PUBLIC

NOTE: SUBMISSION OF LATE, FALSE, ERRONEOUS, OR INCOMPLETE INFORMATION MAY SUBJECT THE PERSON TO THE PENALTIES OF D.C. OFFICIAL CODE § 1-1163.35.

(4) OATH OR AFFIRMATION OF COMMITTEE TREASURER OF POLITICAL ACTION COMMITTEE

I HEREBY SWEAR OR AFFIRM, SUBJECT TO PENALTIES OF PERJURY THAT I HAVE USED ALL REASONABLE DUE DILIGENCE TO PREPARE THIS REPORT, AND TO THE BEST OF MY KNOWLEDGE AND BELIEF, THE REPORT IS TRUE AND COMPLETE; AND I FURTHER SWEAR OR AFFIRM THAT THE CONTRIBUTIONS RECEIVED BY THE COMMITTEE AND THE EXPENDITURES MADE HAVE NOT BEEN CONTROLLED OR DIRECTED BY ANY PUBLIC OFFICIAL OR CANDIDATE, ANY POLITICAL COMMITTEE, OR ANY POLITICAL PARTY.

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TYPE OR PRINT FULL NAME OF TREASURER

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SIGNATURE OF TREASURER

DATE

SUBSCRIBED AND SWORN TO BEFORE ME THIS THE \_\_\_\_\_ DAY \_\_\_\_\_ OF \_\_\_\_\_, 20

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NOTARY PUBLIC

NOTE: SUBMISSION OF LATE, FALSE, ERRONEOUS, OR INCOMPLETE INFORMATION MAY SUBJECT THE PERSON TO THE PENALTIES OF D.C. OFFICIAL CODE § 1-1163.35.

**DETAILED SUMMARY PAGE  
OF RECEIPTS AND EXPENDITURES  
OCF Form 16, Page 2**

<b>1. Full Name of Committee (Name of Candidate, if Candidate is reporting)</b> Marya DC 2020	<b>REPORT COVERING THE PERIOD</b> FROM: <b>10/27/2020</b> TO: <b>12/10/2020</b>	
<b>I. RECEIPTS</b>	<b>COLUMN A TOTAL THIS PERIOD</b>	<b>COLUMN B CUMULATIVE T0-DATE CUMULATIVE YEAR-TO-DATE</b>
<b>11. CONTRIBUTIONS (OTHER THAN LOANS) FROM:</b>		
(a) Individuals/Organizations Other Than Political Committees (Schedule A)	\$ 1,125.00	\$ 19,535.00 11(a)
(b) Political Party Committees (Schedule A-1)	\$ 0.00	\$ 1,000.00 11(b)
(c) Political Committees Other than Pol. Comms. Authorized by the same Candidate (Schedule A-2)	\$ 0.00	\$ 0.00 11(c)
(d) The Candidate (Schedule A-3)	\$ 0.00	\$ 9,503.15 11(d)
(e) Transfers From Authorized Committees of the Candidate identified in this Report (Schedule A-4)	\$ 0.00	\$ 0.00 11(e)
(f) Itemized Monetary Contributions received in excess of \$10,000 from source not associated with the candidate or committee (Schedule A-7)	\$ 0.00	\$ 0.00 11(f)
(g) Total Contributions (Other than Loans) [add lines 11(a), (b), (c), (d), (e) and (f)]	\$ 1,125.00	\$ 30,038.15 11(g)
<b>12. SALES AND COLLECTIONS (Schedule C)</b>	\$ 0.00	\$ 0.00 12
<b>13. LOANS</b>		
(a) Loans owed By the Committee to the Candidate (Schedule E)	\$ 0.00	\$ 0.00 13(a)
(b) Loans from other source made to the Committee (Schedule E-1)	\$ 0.00	\$ 0.00 13(b)
(c) Total Loans [add Lines 13(a) and (b)]	\$ 0.00	\$ 0.00 13(c)
<b>14. OTHER RECEIPTS (Dividends, Interest, etc.) (Schedule A-5)</b>	\$ 0.00	\$ 0.00 14
<b>15. OFFSETS TO OPERATING EXPENDITURES (Schedule A-6)</b>	\$ 0.00	\$ 35.76 15
<b>16. TOTAL RECEIPTS [add Lines 11(g), 12, 13(c), 14 and 15]</b>	\$ 1,125.00	\$ 30,073.91 16
<b>II. EXPENDITURES</b>		
<b>17. OPERATING EXPENDITURES (Schedule B)</b>	\$ 4,346.38	\$ 29,914.74 17
<b>18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES (Schedule B-1)</b>	\$ 159.17	\$ 159.17 18
<b>19. LOAN REPAYMENTS:</b>		
(a) Of Loans owed By the Committee to the Candidate (Schedule E)	\$ 0.00	\$ 0.00 19(a)
(b) Of Loans from other source made to the Committee (Schedule E-1)	\$ 0.00	\$ 0.00 19(b)
(c) Total Loan Repayments [add Lines 19(a) and 19(b)]	\$ 0.00	\$ 0.00 19(c)
<b>20. REFUNDS OF CONTRIBUTIONS TO:</b>		
(a) Individuals/Organizations Other Than Political Committees (Schedule B-2)	\$ 0.00	\$ 0.00 20(a)
(b) Political Party Committees (Schedule B-3)	\$ 0.00	\$ 0.00 20(b)
(c) Other Political Committees and PACs (Schedule B-4)	\$ 0.00	\$ 0.00 20(c)
(d) Total Contribution Refunds [add Lines 20(a), (b), and (c)]	\$ 0.00	\$ 0.00 20(d)
<b>21. OTHER EXPENDITURES</b>		
(a) Independent Expenditures (Schedule B-5)	\$ 0.00	\$ 0.00 21(a)
(b) Offsets to Receipts (Schedule B-6)	\$ 0.00	\$ 0.00 21(b)
(c) Total Other Expenditures [add Lines 21(a), and 21(b)]	\$ 0.00	\$ 0.00 21(c)
<b>22. TOTAL EXPENDITURES [add Lines 17, 18, 19(c), 20(d), and 21(c)]</b>	\$ 4,505.55	\$ 30,073.91 22
<b>III. CASH SUMMARY</b>		
<b>23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD</b>	\$	3,380.55
<b>24. TOTAL RECEIPTS THIS PERIOD (from Line 16)</b>	\$	1,125.00
<b>25. SUBTOTAL (add Lines 23 and 24)</b>	\$	4,505.55
<b>26. TOTAL EXPENDITURES THIS PERIOD (from Line 22)</b>	\$	4,505.55
<b>27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)</b>	\$	0.00

## ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions, or for commercial purposes.

Full Name of Committee (Name of Candidate, if Candidate is reporting)

**Marya DC 2020**

1. Full Name, Mailing Address and Zip Code <b>John S Lopatto</b> 1776 K St NW, Washington, DC 20006	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>10/27/2020</b>	Amount of Each Receipt This Period <b>\$ 400.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> Attorney at Law Name and Address of Employer Self		
Aggregate Year-To-date			<b>\$ 400.00</b>
2. Full Name, Mailing Address and Zip Code <b>Jacob Neilson</b> 523 Roxboro Pl NW, Washington, DC 20011	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>10/27/2020</b>	Amount of Each Receipt This Period <b>\$ 50.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> Associate Consultant Name and Address of Employer GovContractPros		
Aggregate Year-To-date			<b>\$ 50.00</b>
3. Full Name, Mailing Address and Zip Code <b>Rachel Miller</b> 360 N St SW, Washington, DC 20024	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>10/28/2020</b>	Amount of Each Receipt This Period <b>\$ 25.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> Business development Name and Address of Employer LMI		
Aggregate Year-To-date			<b>\$ 25.00</b>
4. Full Name, Mailing Address and Zip Code <b>Lorna D Kent</b> 4301 Massachusetts Ave NW, Washington, DC 20016	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>11/03/2020</b>	Amount of Each Receipt This Period <b>\$ 100.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> Retired Name and Address of Employer Retired		
Aggregate Year-To-date			<b>\$ 100.00</b>
5. Full Name, Mailing Address and Zip Code <b>Emmanuelle Cleland</b> 1340 Monroe St NW, Washington, DC 20010	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>11/03/2020</b>	Amount of Each Receipt This Period <b>\$ 50.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> Nurse Name and Address of Employer Washington children's hospital		
Aggregate Year-To-date			<b>\$ 50.00</b>

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Full Name of Committee (Name of Candidate, if Candidate is reporting)

**Marya DC 2020**

6. Full Name, Mailing Address and Zip Code <b>Nema Francois Cherif</b> <b>1340 Monroe St NW, Washington, DC 20010</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>11/03/2020</b>	Amount of Each Receipt This Period <b>\$ 200.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> <b>Retired</b> Name and Address of Employer <b>Retired</b>		
Aggregate Year-To-date			<b>\$ 200.00</b>
7. Full Name, Mailing Address and Zip Code <b>Thomas Weirich</b> <b>1902 Poplar Bud Way, Henrico, VA 23238</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>11/03/2020</b>	Amount of Each Receipt This Period <b>\$ 50.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> <b>VP, Business Development</b> Name and Address of Employer <b>Sun Tribe Solar</b>		
Aggregate Year-To-date			<b>\$ 50.00</b>
8. Full Name, Mailing Address and Zip Code <b>Anne Crossman</b> <b>2961A Hunter Mill Rd, Oakton, VA 22124</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>11/03/2020</b>	Amount of Each Receipt This Period <b>\$ 250.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> <b>Contractor</b> Name and Address of Employer <b>Government Contractor</b>		
Aggregate Year-To-date			<b>\$ 250.00</b>
<b>TOTAL This Period (Aggregate of all Receipt pages)</b>			<b>\$ 1,125.00</b>

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**FULL Name of Committee (Name of Candidate, if Candidate is reporting)**

Marya DC 2020

1. Full Name, Mailing Address and Zip Code <b>Minuteman Press Bethesda</b> <b>8210 Wisconsin Ave, Bethesda, MD</b> <b>20814</b>	Purpose of Expenditure <b>Campaign Materials</b>	Date (month, day, year) <b>10/29/2020</b>	Amount of Each Expenditure This Period <b>\$ 1,706.85</b>
<b>Occupation</b>	Name and Address of Employer		
2. Full Name, Mailing Address and Zip Code <b>The Washington Times</b> <b>3600 New York Ave NE, Washington,</b> <b>DC 20001</b>	Purpose of Expenditure <b>Advertising</b>	Date (month, day, year) <b>10/30/2020</b>	Amount of Each Expenditure This Period <b>\$ 1,500.00</b>
<b>Occupation</b>	Name and Address of Employer		
3. Full Name, Mailing Address and Zip Code <b>Global Print Masters</b> <b>2004 Rhode Island Ave NE,</b> <b>Washington, DC 20018</b>	Purpose of Expenditure <b>Campaign Materials</b>	Date (month, day, year) <b>10/30/2020</b>	Amount of Each Expenditure This Period <b>\$ 524.70</b>
<b>Occupation</b>	Name and Address of Employer		
4. Full Name, Mailing Address and Zip Code <b>Cole Penz</b> <b>3227 Reservoir Rd NW, Washington,</b> <b>DC 20007</b>	Purpose of Expenditure <b>Salary/Stipend</b>	Date (month, day, year) <b>11/06/2020</b>	Amount of Each Expenditure This Period <b>\$ 500.00</b>
<b>Occupation</b> <b>Communications</b>	Name and Address of Employer <b>Self</b>		
5. Full Name, Mailing Address and Zip Code <b>Squarespace, Inc.</b> <b>225 Varick Street 12th Floor, New</b> <b>York, NY 10014</b>	Purpose of Expenditure <b>Computer and Web Expenses</b>	Date (month, day, year) <b>11/13/2020</b>	Amount of Each Expenditure This Period <b>\$ 27.56</b>
<b>Occupation</b>	Name and Address of Employer		
6. Full Name, Mailing Address and Zip Code <b>Mailchimp</b> <b>675 Ponce De Leon Ave NE, Atlanta,</b> <b>GA 30308</b>	Purpose of Expenditure <b>Computer and Web Expenses</b>	Date (month, day, year) <b>11/16/2020</b>	Amount of Each Expenditure This Period <b>\$ 56.17</b>
<b>Occupation</b>	Name and Address of Employer		
7. Full Name, Mailing Address and Zip Code <b>Anedot</b> <b>10202 PERKINS ROWE STE 2006,</b> <b>Baton Rouge, LA 70810</b>	Purpose of Expenditure <b>Bank Fees</b>	Date (month, day, year) <b>11/30/2020</b>	Amount of Each Expenditure This Period <b>\$ 31.10</b>
<b>Occupation</b>	Name and Address of Employer		

TOTAL This Period (Aggregate of all expenditure pages)	\$ 4,346.38
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FULL Name of Committee (Name of Candidate, if Candidate is reporting)			
Marya DC 2020			
1. Full Name, Mailing Address and Zip Code	Purpose of Expenditure	Date (month, day, year)	Amount of Each Expenditure This Period
DC Republican Party PO Box 75135, Washington, DC 75153		12/02/2020	\$ 159.17
TOTAL This Period (Aggregate of all expenditure pages)			\$ 159.17