



**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) Vote No On Initiative 83	2. OCF Identification Number INTOOO246637
Address 14 Ridge Square NW, 3rd Floor	3. Is this report an Amendment? (Yes or No) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
City, State and Zip Code Washington, DC 20016	

4. TYPE OF REPORT: **8 Day Pre General Election Report**

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

SUMMARY	COLUMN A THIS PERIOD	COLUMN B CUMULATIVE TO-DATE
5. Covering Period 9/11/2024 through 10/28/2024		
6. (a) Cash on Hand (January 31 Year End Report Only)		\$ 0.00
(b) Cash on Hand at Beginning of Reporting Period	\$ 122.04	
(c) Total Receipts [from Line (16)]	\$ 2,503.35	\$ 5,758.29
(d) Subtotal [add Lines 6(b) and 6(c) for Column A]	\$ 2,625.39	
7. Total Expenditures (from Line 22)	\$ 2,164.70	\$ 5,297.60
8. Cash on Hand at Close of Reporting Period [subtract Line 7 from Line 6(d)]	\$ 460.69	
9. Debts and Obligations Owed BY the Committee or the Candidate (itemize all on Schedule D)	\$ 0.00	\$ 0.00
10. (a) Loans Owed By the Committee to the Candidate (itemize all on Schedule E)	\$ 0.00	\$ 0.00
(b) Loans from other sources made to the Committee (itemize all on Schedule E-1)	\$ 0.00	\$ 0.00

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

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.

Malynda Hill-Williams

TYPE OR PRINT FULL NAME OF TREASURER

ELECTRONICALLY CERTIFIED

10/28/2024

SIGNATURE OF TREASURER

DATE

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

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.

TYPE OR PRINT FULL NAME OF TREASURER

SIGNATURE OF TREASURER

DATE

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

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.

TYPE OR PRINT FULL NAME OF TREASURER

SIGNATURE OF TREASURER

DATE

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

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**

1. Full Name of Committee (Name of Candidate, if Candidate is reporting) Vote No On Initiative 83	REPORT COVERING THE PERIOD FROM: 9/11/2024 TO: 10/28/2024	
I. RECEIPTS	COLUMN A TOTAL THIS PERIOD	COLUMN B CUMULATIVE T0-DATE CUMULATIVE YEAR-TO-DATE
11. CONTRIBUTIONS (OTHER THAN LOANS) FROM:		
(a) Individuals/Organizations Other Than Political Committees (Schedule A)	\$ 2,503.35	\$ 5,723.29 11(a)
(b) Political Party Committees (Schedule A-1)	\$ 0.00	\$ 0.00 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	\$ 0.00 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) Non Contribution Receipts (Schedule A-8)	\$ 0.00	\$ 0.00 11(g)
(h) Total Contributions (Other than Loans) [add lines 11(a), (b), (c), (d), (e), (f) and (g)]	\$ 2,503.35	\$ 5,723.29 11(h)
12. SALES AND COLLECTIONS (Schedule C)	\$ 0.00	\$ 0.00 12
13. LOANS		
(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)
14. OTHER RECEIPTS (Dividends, Interest, etc.) (Schedule A-5)	\$ 0.00	\$ 0.00 14
15. OFFSETS TO OPERATING EXPENDITURES (Schedule A-6)	\$ 0.00	\$ 35.00 15
16. TOTAL RECEIPTS [add Lines 11(g), 12, 13(c), 14 and 15]	\$ 2,503.35	\$ 5,758.29 16
II. EXPENDITURES		
17. OPERATING EXPENDITURES (Schedule B)	\$ 1,823.70	\$ 4,956.60 17
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES (Schedule B-1)	\$ 0.00	\$ 0.00 18
19. LOAN REPAYMENTS:		
(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)
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Organizations Other Than Political Committees (Schedule B-2)	\$ 341.00	\$ 341.00 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)]	\$ 341.00	\$ 341.00 20(d)
21. OTHER EXPENDITURES		
(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)
22. TOTAL EXPENDITURES [add Lines 17, 18, 19(c), 20(d), and 21(c)]	\$ 2,164.70	\$ 5,297.60 22
III. CASH SUMMARY		
23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD		122.04
24. TOTAL RECEIPTS THIS PERIOD (from Line 16)		2,503.35
25. SUBTOTAL (add Lines 23 and 24)		2,625.39
26. TOTAL EXPENDITURES THIS PERIOD (from Line 22)		2,164.70
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)		460.69

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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Full Name of Committee (Name of Candidate, if Candidate is reporting) Vote No On Initiative 83			
1. Full Name, Mailing Address and Zip Code Lawrence Berman 1545 18th St NW, Washington, DC 20036	Contribution Type <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) 09/14/2024	Amount of Each Receipt This Period \$ 10.00
Contributor Type Individual	Occupation Name and Address of Employer Not Employed		
Aggregate Year-To-date			\$ 10.00
2. Full Name, Mailing Address and Zip Code Verna E Clayborne 1343 Franklin St NE, Washington, DC 20017	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input checked="" type="checkbox"/> In Kind (Specify) 50 stakes	Date (month, day, year) 09/16/2024	Amount of Each Receipt This Period \$ 52.95
Contributor Type Individual	Occupation Retired Name and Address of Employer Retired 1343 Franklin St NE, Washington, DC 20017		
Aggregate Year-To-date			\$ 601.89
3. Full Name, Mailing Address and Zip Code Linda Holland Jefferson PO Box 41433, Washington, DC 20018	Contribution Type <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) 09/17/2024	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Name and Address of Employer Not Employed		
Aggregate Year-To-date			\$ 100.00
4. Full Name, Mailing Address and Zip Code Vivian Wilds 5016 Eastern Ave NE, Washington, DC 20017	Contribution Type <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Money Order <input 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) 09/17/2024	Amount of Each Receipt This Period \$ 40.00
Contributor Type Individual	Occupation Name and Address of Employer Retired		
Aggregate Year-To-date			\$ 91.00
5. Full Name, Mailing Address and Zip Code Karen Gaal 1424 W St NW, Washington, DC 20009	Contribution Type <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Money Order <input 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) 09/17/2024	Amount of Each Receipt This Period \$ 10.00
Contributor Type Individual	Occupation Name and Address of Employer Self Employed		
Aggregate Year-To-date			\$ 10.00

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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

Vote No On Initiative 83

6. Full Name, Mailing Address and Zip Code Vivian Wilds 5016 Eastern Ave NE, Washington, DC 20017	Contribution Type <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) 09/17/2024	Amount of Each Receipt This Period \$ 51.00
Contributor Type Individual	Occupation Name and Address of Employer Retired		
Aggregate Year-To-date		\$ 91.00	
7. Full Name, Mailing Address and Zip Code Doxie McCoy 3142 Berry Rd NE, Washington, DC 20018	Contribution Type <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) 09/17/2024	Amount of Each Receipt This Period \$ 25.00
Contributor Type Individual	Occupation Senior Communications Manager Name and Address of Employer DC Government 3142 Berry Rd NE, Washington, DC 20018		
Aggregate Year-To-date		\$ 25.00	
8. Full Name, Mailing Address and Zip Code Verna E Clayborne 1343 Franklin St NE, Washington, DC 20017	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input checked="" type="checkbox"/> In Kind (Specify) 150 Yard Signs	Date (month, day, year) 09/21/2024	Amount of Each Receipt This Period \$ 188.10
Contributor Type Individual	Occupation Retired Name and Address of Employer Retired 1343 Franklin St NE, Washington, DC 20017		
Aggregate Year-To-date		\$ 789.99	
9. Full Name, Mailing Address and Zip Code Levonnia Jeannette Mobley 3725 17th St NE, Washington, DC 20018	Contribution Type <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) 09/22/2024	Amount of Each Receipt This Period \$ 251.00
Contributor Type Individual	Occupation Name and Address of Employer Not Employed		
Aggregate Year-To-date		\$ 251.00	
10. Full Name, Mailing Address and Zip Code Priscilla Wallace 3271 Van Hazen St NW, Washington, DC 20015	Contribution Type <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) 09/25/2024	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Name and Address of Employer Not Employed		
Aggregate Year-To-date		\$ 100.00	

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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

Vote No On Initiative 83

11. Full Name, Mailing Address and Zip Code Alice Walker 3516 28th St NE, Washington, DC 20018	Contribution Type <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) 09/27/2024	Amount of Each Receipt This Period \$ 51.00
Contributor Type Individual	Occupation Name and Address of Employer Retired		
Aggregate Year-To-date		\$ 51.00	
12. Full Name, Mailing Address and Zip Code Delia Houseal 5336 Call Pl SE, Washington, DC 20019	Contribution Type <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) 09/28/2024	Amount of Each Receipt This Period \$ 102.00
Contributor Type Individual	Occupation Health Policy Name and Address of Employer DHHS 5336 Call Pl SE, Washington, DC 20019		
Aggregate Year-To-date		\$ 102.00	
13. Full Name, Mailing Address and Zip Code Jennifer Blemur 230 Rhode Island Ave NE, Washington, DC 20002	Contribution Type <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) 09/28/2024	Amount of Each Receipt This Period \$ 25.00
Contributor Type Individual	Occupation Director, State Legislative Affairs Name and Address of Employer Coalition to Transform Advanced Care 230 Rhode Island Ave NE, Washington, DC 20002		
Aggregate Year-To-date		\$ 25.00	
14. Full Name, Mailing Address and Zip Code James Sydnor 411 Oneida Pl NW, Washington, DC 20011	Contribution Type <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) 09/28/2024	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Name and Address of Employer Not Employed		
Aggregate Year-To-date		\$ 100.00	
15. Full Name, Mailing Address and Zip Code Janice Davis 1420 Primrose Rd NW, Washington, DC 20012	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input checked="" type="checkbox"/> In Kind (Specify) 50 stakes	Date (month, day, year) 09/29/2024	Amount of Each Receipt This Period \$ 52.95
Contributor Type Individual	Occupation Owner Name and Address of Employer Davis Planning Associates 7059 Blair Rd NW, Washington, DC 20012		
Aggregate Year-To-date		\$ 103.95	

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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

Vote No On Initiative 83

16. Full Name, Mailing Address and Zip Code Janice Davis 1420 Primrose Rd NW, Washington, DC 20012	Contribution Type <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) 10/04/2024	Amount of Each Receipt This Period \$ 25.00
Contributor Type Individual	Occupation Owner		
Name and Address of Employer Davis Planning Associates 7059 Blair Rd NW, Washington, DC 20012			
Aggregate Year-To-date			\$ 128.95
17. Full Name, Mailing Address and Zip Code Enid Dogett 2924 10th St NE, Washington, DC 20017	Contribution Type <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) 10/08/2024	Amount of Each Receipt This Period \$ 151.00
Contributor Type Individual	Occupation Public Relations		
Name and Address of Employer INSPR Media 2924 10th St NE, Washington, DC 20017			
Aggregate Year-To-date			\$ 151.00
18. Full Name, Mailing Address and Zip Code Alice Walker 3516 28th St NE, Washington, DC 20018	Contribution Type <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) 10/14/2024	Amount of Each Receipt This Period \$ 51.00
Contributor Type Individual	Occupation		
Name and Address of Employer Retired			
Aggregate Year-To-date			\$ 102.00
19. Full Name, Mailing Address and Zip Code Frank Leone 2417 I St NW, Washington, DC 20037	Contribution Type <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) 10/16/2024	Amount of Each Receipt This Period \$ 251.00
Contributor Type Individual	Occupation		
Name and Address of Employer Not Employed			
Aggregate Year-To-date			\$ 251.00
20. Full Name, Mailing Address and Zip Code Verna E Clayborne 1343 Franklin St NE, Washington, DC 20017	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input checked="" type="checkbox"/> In Kind (Specify) Payment for yard sign distribution	Date (month, day, year) 10/17/2024	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Retired		
Name and Address of Employer Retired 1343 Franklin St NE, Washington, DC 20017			
Aggregate Year-To-date			\$ 889.99

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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

Vote No On Initiative 83

21. Full Name, Mailing Address and Zip Code Renee Bowser 5322 2nd St NW, Washington, DC 20011	Contribution Type <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) 10/17/2024	Amount of Each Receipt This Period \$ 51.00
Contributor Type Individual	Occupation Name and Address of Employer Not Employed		
Aggregate Year-To-date			\$ 51.00
22. Full Name, Mailing Address and Zip Code Levonnia Jeannette Mobley 3725 17th St NE, Washington, DC 20018	Contribution Type <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) 10/26/2024	Amount of Each Receipt This Period \$ 251.00
Contributor Type Individual	Occupation Name and Address of Employer Not Employed		
Aggregate Year-To-date			\$ 502.00
23. Full Name, Mailing Address and Zip Code Renee Bowser 5322 2nd St NW, Washington, DC 20011	Contribution Type <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) 10/27/2024	Amount of Each Receipt This Period \$ 51.00
Contributor Type Individual	Occupation Name and Address of Employer Not Employed		
Aggregate Year-To-date			\$ 102.00
24. Full Name, Mailing Address and Zip Code Rosalyn Coates 7820 12th St NW, Washington, DC 20012	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input checked="" type="checkbox"/> In Kind (Specify) Two Thousand Palm Cards	Date (month, day, year) 10/27/2024	Amount of Each Receipt This Period \$ 413.35
Contributor Type Individual	Occupation Name and Address of Employer Retired		
Aggregate Year-To-date			\$ 413.35
TOTAL This Period (Aggregate of all Receipt pages)			\$ 2,503.35

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

Vote No On Initiative 83

1. Full Name, Mailing Address and Zip Code Adobe Inc. 345 Park Avenue, San Jose, CA 95110	Purpose of Expenditure Computer and Web Expenses	Date (month, day, year) 09/13/2024	Amount of Each Expenditure This Period \$ 31.79
Occupation	Name and Address of Employer		
2. Full Name, Mailing Address and Zip Code ActBlue Technical Services 366 Summer Street , Somerville, MA 02144-3132	Purpose of Expenditure Bank Fees	Date (month, day, year) 09/15/2024	Amount of Each Expenditure This Period \$ 0.40
Occupation	Name and Address of Employer		
3. Full Name, Mailing Address and Zip Code Verna Clayborne 1343 Franklin St NE, Washington, DC 20017	Purpose of Expenditure In-Kind	Date (month, day, year) 09/16/2024	Amount of Each Expenditure This Period \$ 52.95
Occupation	Name and Address of Employer Retired 1343 Franklin St NE, Washington, DC 20017		
4. Full Name, Mailing Address and Zip Code Amazon Payments, Inc. PO Box 81226, Seattle, WA 98108-1226	Purpose of Expenditure Campaign Materials	Date (month, day, year) 09/16/2024	Amount of Each Expenditure This Period \$ 42.39
Occupation	Name and Address of Employer		
5. Full Name, Mailing Address and Zip Code USPS Click N Ship 475 LEnfant Plaza SW, Washington, DC 20260	Purpose of Expenditure Postage	Date (month, day, year) 09/17/2024	Amount of Each Expenditure This Period \$ 3.65
Occupation	Name and Address of Employer		
6. Full Name, Mailing Address and Zip Code Amazon Payments, Inc. PO Box 81226, Seattle, WA 98108-1226	Purpose of Expenditure Campaign Materials	Date (month, day, year) 09/18/2024	Amount of Each Expenditure This Period \$ 50.00
Occupation	Name and Address of Employer		
7. Full Name, Mailing Address and Zip Code Verna Clayborne 1343 Franklin St NE, Washington, DC 20017	Purpose of Expenditure In-Kind	Date (month, day, year) 09/21/2024	Amount of Each Expenditure This Period \$ 188.10
Occupation	Name and Address of Employer Retired 1343 Franklin St NE, Washington, DC 20017		

8. Full Name, Mailing Address and Zip Code ActBlue Technical Services 366 Summer Street , Somerville, MA 02144-3132	Purpose of Expenditure Bank Fees	Date (month, day, year) 09/22/2024	Amount of Each Expenditure This Period \$ 12.93
Occupation	Name and Address of Employer		
9. Full Name, Mailing Address and Zip Code CVS Pharmacy 4555 Wisconsin Ave NW, Washington, DC 20016	Purpose of Expenditure Supplies	Date (month, day, year) 09/23/2024	Amount of Each Expenditure This Period \$ 106.95
Occupation	Name and Address of Employer		
10. Full Name, Mailing Address and Zip Code Mailchimp c/o The Rocket Science Group, L 675 Ponce de Leon Ave NE Suite 5000, Atlanta, GA 30308	Purpose of Expenditure Computer and Web Expenses	Date (month, day, year) 09/23/2024	Amount of Each Expenditure This Period \$ 21.20
Occupation	Name and Address of Employer		
11. Full Name, Mailing Address and Zip Code Squarespace, Inc. 225 Varick Street 12th Floor, New York, NY 10014	Purpose of Expenditure Computer and Web Expenses	Date (month, day, year) 09/26/2024	Amount of Each Expenditure This Period \$ 38.16
Occupation	Name and Address of Employer		
12. Full Name, Mailing Address and Zip Code GoDaddy.com LLC 2155 E GoDaddy Way, Tempe, AZ 85284	Purpose of Expenditure Computer and Web Expenses	Date (month, day, year) 09/26/2024	Amount of Each Expenditure This Period \$ 2.99
Occupation	Name and Address of Employer		
13. Full Name, Mailing Address and Zip Code Amazon Payments, Inc. PO Box 81226, Seattle, WA 98108-1226	Purpose of Expenditure Campaign Materials	Date (month, day, year) 09/27/2024	Amount of Each Expenditure This Period \$ 50.00
Occupation	Name and Address of Employer		
14. Full Name, Mailing Address and Zip Code Amazon Payments, Inc. PO Box 81226, Seattle, WA 98108-1226	Purpose of Expenditure Campaign Materials	Date (month, day, year) 09/27/2024	Amount of Each Expenditure This Period \$ 42.39
Occupation	Name and Address of Employer		
15. Full Name, Mailing Address and Zip Code Janice Davis 1420 Primrose Rd NW, Washington, DC 20012	Purpose of Expenditure In-Kind	Date (month, day, year) 09/29/2024	Amount of Each Expenditure This Period \$ 52.95
Occupation Owner	Name and Address of Employer Davis Planning Associates 7059 Blair Rd NW, Washington, DC 20012		

16. Full Name, Mailing Address and Zip Code ActBlue Technical Services 366 Summer Street , Somerville, MA 02144-3132	Purpose of Expenditure Bank Fees	Date (month, day, year) 09/29/2024	Amount of Each Expenditure This Period \$ 14.94
Occupation	Name and Address of Employer		
17. Full Name, Mailing Address and Zip Code GoDaddy.com LLC 2155 E GoDaddy Way, Tempe, AZ 85284	Purpose of Expenditure Computer and Web Expenses	Date (month, day, year) 09/30/2024	Amount of Each Expenditure This Period \$ 31.97
Occupation	Name and Address of Employer		
18. Full Name, Mailing Address and Zip Code USPS Click N Ship 475 LEnfant Plaza SW, Washington, DC 20260	Purpose of Expenditure Postage	Date (month, day, year) 09/30/2024	Amount of Each Expenditure This Period \$ 14.60
Occupation	Name and Address of Employer		
19. Full Name, Mailing Address and Zip Code TD Bank 4849 Wisconsin Ave NW, Washington, DC 20016	Purpose of Expenditure Bank Fees	Date (month, day, year) 09/30/2024	Amount of Each Expenditure This Period \$ 25.00
Occupation	Name and Address of Employer		
20. Full Name, Mailing Address and Zip Code Amazon Payments, Inc. PO Box 81226, Seattle, WA 98108-1226	Purpose of Expenditure Campaign Materials	Date (month, day, year) 10/01/2024	Amount of Each Expenditure This Period \$ 50.00
Occupation	Name and Address of Employer		
21. Full Name, Mailing Address and Zip Code Amazon Payments, Inc. PO Box 81226, Seattle, WA 98108-1226	Purpose of Expenditure Campaign Materials	Date (month, day, year) 10/02/2024	Amount of Each Expenditure This Period \$ 40.00
Occupation	Name and Address of Employer		
22. Full Name, Mailing Address and Zip Code TD Bank 4849 Wisconsin Ave NW, Washington, DC 20016	Purpose of Expenditure Bank Fees	Date (month, day, year) 10/04/2024	Amount of Each Expenditure This Period \$ 8.00
Occupation	Name and Address of Employer		
23. Full Name, Mailing Address and Zip Code ActBlue Technical Services 366 Summer Street , Somerville, MA 02144-3132	Purpose of Expenditure Bank Fees	Date (month, day, year) 10/06/2024	Amount of Each Expenditure This Period \$ 0.99
Occupation	Name and Address of Employer		

24. Full Name, Mailing Address and Zip Code Amazon Payments, Inc. PO Box 81226, Seattle, WA 98108-1226	Purpose of Expenditure Campaign Materials	Date (month, day, year) 10/07/2024	Amount of Each Expenditure This Period \$ 50.00
Occupation	Name and Address of Employer		
25. Full Name, Mailing Address and Zip Code ABC Imaging 1919 M Street NW, Washington, DC 20036	Purpose of Expenditure Printing	Date (month, day, year) 10/07/2024	Amount of Each Expenditure This Period \$ 197.10
Occupation	Name and Address of Employer		
26. Full Name, Mailing Address and Zip Code Amazon Payments, Inc. PO Box 81226, Seattle, WA 98108-1226	Purpose of Expenditure Campaign Materials	Date (month, day, year) 10/07/2024	Amount of Each Expenditure This Period \$ 50.00
Occupation	Name and Address of Employer		
27. Full Name, Mailing Address and Zip Code Pictory, Corp. 17625 48th Ave SE, Bothell, WA 98012	Purpose of Expenditure Computer and Web Expenses	Date (month, day, year) 10/07/2024	Amount of Each Expenditure This Period \$ 20.00
Occupation	Name and Address of Employer		
28. Full Name, Mailing Address and Zip Code Pictory, Corp. 17625 48th Ave SE, Bothell, WA 98012	Purpose of Expenditure Computer and Web Expenses	Date (month, day, year) 10/07/2024	Amount of Each Expenditure This Period \$ 19.00
Occupation	Name and Address of Employer		
29. Full Name, Mailing Address and Zip Code ActBlue Technical Services 366 Summer Street , Somerville, MA 02144-3132	Purpose of Expenditure Bank Fees	Date (month, day, year) 10/13/2024	Amount of Each Expenditure This Period \$ 5.97
Occupation	Name and Address of Employer		
30. Full Name, Mailing Address and Zip Code Squarespace, Inc. 225 Varick Street 12th Floor, New York, NY 10014	Purpose of Expenditure Computer and Web Expenses	Date (month, day, year) 10/15/2024	Amount of Each Expenditure This Period \$ 38.16
Occupation	Name and Address of Employer		
31. Full Name, Mailing Address and Zip Code Adobe Inc. 345 Park Avenue, San Jose, CA 95110	Purpose of Expenditure Computer and Web Expenses	Date (month, day, year) 10/15/2024	Amount of Each Expenditure This Period \$ 31.79
Occupation	Name and Address of Employer		

32. Full Name, Mailing Address and Zip Code Verna Clayborne 1343 Franklin St NE, Washington, DC 20017	Purpose of Expenditure In-Kind	Date (month, day, year) 10/17/2024	Amount of Each Expenditure This Period \$ 100.00
Occupation	Name and Address of Employer Retired 1343 Franklin St NE, Washington, DC 20017		
33. Full Name, Mailing Address and Zip Code ActBlue Technical Services 366 Summer Street , Somerville, MA 02144-3132	Purpose of Expenditure Bank Fees	Date (month, day, year) 10/20/2024	Amount of Each Expenditure This Period \$ 4.04
Occupation	Name and Address of Employer		
34. Full Name, Mailing Address and Zip Code Rosalyn Coates 7820 12th St NW, Washington, DC 20012	Purpose of Expenditure In-Kind	Date (month, day, year) 10/27/2024	Amount of Each Expenditure This Period \$ 413.35
Occupation	Name and Address of Employer Retired		
35. Full Name, Mailing Address and Zip Code ActBlue Technical Services 366 Summer Street , Somerville, MA 02144-3132	Purpose of Expenditure Bank Fees	Date (month, day, year) 10/27/2024	Amount of Each Expenditure This Period \$ 11.94
Occupation	Name and Address of Employer		
TOTAL This Period (Aggregate of all expenditure pages)			\$ 1,823.70

REFUNDS OF CONTRIBUTIONS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN POLITICAL COMMITTEES

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

Vote No On Initiative 83

1. Full Name, Mailing Address and Zip Code	Purpose of Expenditure	Date (month, day, year)	Amount of Each Expenditure This Period
Deirdre Brown 5620 MacArthur Blvd NW, Washington, DC 20016		10/04/2024	\$ 90.00
Contributor Type Individual			
2. Full Name, Mailing Address and Zip Code Levonnia Jeannette Mobley 3725 17th St NE, Washington, DC 20018		10/22/2024	\$ 251.00
Contributor Type Individual			

TOTAL This Period (Aggregate of all expenditure pages)

\$ 341.00