

#### 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 PAC	JE	
1. Full Name of Committee (Name of Candidate, if Candidate is reporting)	2. OCF Identification Number	
Re-Elect Muriel Bowser Our Mayor	PCCMYR186902	
Address	3. Is this report an Amendment? (Yes	or No)
7927 Orchid Street, NW	🗖 Yes 🗹 No	
City, State and Zip Code Washington, DC 20012		
4. TYPE OF REPORT: October 10th Report		
This REPORT contains activity for: General Election		
SUMMARY	COLUMN A	COLUMN B
5. Covering Period 8/11/2018 through 10/10/2018	THIS PERIOD	CUMULATIVE TO-DATE
6. (a) Cash on Hand (January 31 Year End Report Only)		\$ 0.00
(b) Cash on Hand at Beginning of Reporting Period	\$ 1,250,220.79	
(c) Total Receipts [from Line (16)]	\$ 6,821.00	\$ 2,525,864.72
(d) Subtotal [add Lines 6(b) and 6(c) for Column A]	\$ 1,257,041.79	
7. Total Expenditures (from Line 22)	\$ 113,651.10	\$ 1,382,474.03
8. Cash on Hand at Close of Reporting Period [subtract Line 7 from Line 6(d)]	\$ 1,143,390.69	
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

#### 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.

#### Ms. Jodi Ovca

TYPE OR PRINT FULL NAME OF TREASURER

**ELECTRONICALLY CERTIFIED** 

SIGNATURE OF TREASURER

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

10/10/2018

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.

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

<ol> <li>Full Name of Committee (Name of Candidate, if Candidate is reporting) Re-Elect Muriel Bowser Our Mayor</li> </ol>	REPORT COVERING THE PERIOD           FROM:         8/11/2018         TO:         10/10/2018						
I. RECEIPTS	COLUMN A TOTAL THIS PERIOD		I. RECEIPTS COLUMN A COLUMN B		CUMULATIVE T0-DATE		
11. CONTRIBUTIONS (OTHER THAN LOANS) FROM:			COF	VIULATIVE TEAK-TO-D	AIE		
(a) Individuals/Organizations Other Than Political Committees (Schedule A)	\$	1,911.00	\$	2,471,854.72	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)	\$	1,000.00	\$	48,600.00	11(c)		
(d) The Candidate (Schedule A-3)	\$	0.00	\$	1,500.00	11(d)		
<ul> <li>(e) Transfers From Authorized Committees of the Candidate identified in this Report (Schedule A-4)</li> <li>(f) Itemized Monetary Contributions received in excess of \$10,000 from source not associated with the candidate or committee (Schedule A-7)</li> </ul>	\$ \$	0.00	\$ \$	0.00	11(e) 11(f)		
(g) Total Contributions (Other than Loans) [add lines 11(a), (b), (c), (d), (e) and (f)]	\$	2,911.00	\$	2,521,954.72	11(g)		
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)	\$	3,910.00	\$	3,910.00	15		
16. TOTAL RECEIPTS [add Lines 11(g), 12, 13(c), 14 and 15]	\$	6,821.00	\$	2,525,864.72	16		
II. EXPENDITURES		112 (51 10		1 2 (2 5 ( 1 0 2			
17. OPERATING EXPENDITURES (Schedule B)	\$	113,651.10	\$	1,362,564.03	17		
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES (Schedule B-1)	\$	0.00	\$	0.00	18		
19. LOAN REPAYMENTS:	_	0.00		0.00			
(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:	\$	0.00	\$	5,100.00	20(a)		
<ul><li>(a) Individuals/Organizations Other Than Political Committees (Schedule B-2)</li><li>(b) Political Party Committees (Schedule B-3)</li></ul>	\$	0.00	3 S	0.00			
					20(b)		
(c) Other Political Committees and PACs (Schedule B-4)	\$	0.00	\$	0.00			
(d) Total Contribution Refunds [add Lines 20(a), (b), and (c)] 21. OTHER EXPENDITURES	\$	0.00	\$	5,100.00	20(d)		
(a) Independent Expenditures (Schedule B-5)	\$	0.00	\$	0.00	21(a)		
<ul><li>(b) Offsets to Receipts (Schedule B-6)</li><li>(c) Total Other Expenditures [add Lines 21(a), and 21(b)]</li></ul>	\$ \$	0.00	\$ \$	14,810.00 14,810.00	21(b)		
					21(c)		
22. TOTAL EXPENDITURES [add Lines 17, 18, 19(c), 20(d), and 21(c)]	\$	113,651.10	\$	1,382,474.03	22		
III. CASH SUMMARY							
23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD	\$			1,250,220.79	9		
24. TOTAL RECEIPTS THIS PERIOD (from Line 16)	\$			6,821.00	0		
25. SUBTOTAL (add Lines 23 and 24)	\$			1,257,041.79	9		
26. TOTAL EXPENDITURES THIS PERIOD (from Line 22)	\$			113,651.10	0		
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)	\$			1,143,390.69	9		

# SCHEDULE APage 1 of 4ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

Full Name of Committee (Name of Candidate, if Cand Re-Elect Muriel Bowser Our Mayor	idate is reporting)		
<ol> <li>Full Name, Mailing Address and Zip Code Michael R Swenson</li> <li>49 Deer Valley Dr, Lander, WY 82520</li> </ol>	Contribution Type         Cash       Money Order       Check         Cashier Check       Credit Card       Check         Other (Specify)       In Kind (Specify)	Date (month, day, year) 08/17/2018	Amount of Each Receipt This Period <b>\$ 25.00</b>
Contributor Type Individual	OccupationPhysicianName and Address of EmployerLander Clinic745 Buena Vista Dr, Lander, WY 82520		
	Aggregate Year-To-date	•	\$ 25.00
<ol> <li>Full Name, Mailing Address and Zip Code Fernando Armstrong-Fumero</li> <li>10 Prospect St Ofc 21, Northampton, MA 01063</li> </ol>	Contribution Type         Cash       Money Order       Check         Cashier Check       Credit Card         Other (Specify)       In Kind (Specify)	Date (month, day, year) 08/17/2018	Amount of Each Receipt This Perioc <b>\$ 5.00</b>
Contributor Type Individual	Occupation         TEACHER           Name and Address of Employer         Smith College           10 Prospect St Ofc 21, Northampton, MA 01063         Aggregate Year-To-date		\$ 5.00
<ul> <li>Full Name, Mailing Address and Zip Code Carol Smith</li> <li>6101 185th Ct NE Apt Z101, Redmond, WA 98052</li> </ul>	Contribution Type         Cash       Money Order       Check         Cashier Check       Credit Card         Other (Specify)       In Kind (Specify)	Date (month, day, year) 08/17/2018	Amount of Each Receipt This Period <b>\$ 10.00</b>
Contributor Type Individual	Occupation         Program Manager           Name and Address of Employer           Microsoft           1 Microsoft Way, Redmond, WA 98052		
	Aggregate Year-To-date		\$ 10.00
<ol> <li>Full Name, Mailing Address and Zip Code Michele Young</li> <li>904 Hollyberry Ct, Brandon, FL 33511</li> </ol>	Contribution Type         Cash       Money Order       Check         Cashier Check       Credit Card         Other (Specify)       In Kind (Specify)	Date (month, day, year) 08/17/2018	Amount of Each Receipt This Period <b>\$ 10.00</b>
Contributor Type Individual	OccupationTEACHERName and Address of EmployerHillsborough County schools901 E Kennedy Blvd, Tampa, FL 33602		
	Aggregate Year-To-date		\$ 10.00
<ol> <li>Full Name, Mailing Address and Zip Code Michael Kovner</li> <li>16 Jessica Dr Apt A, Stoughton, MA 02072</li> </ol>	Contribution Type         Cash       Money Order       Check         Cashier Check       Credit Card         Other (Specify)       In Kind (Specify)	Date (month, day, year) 08/17/2018	Amount of Each Receipt This Period <b>\$ 20.00</b>
Contributor Type Individual	Occupation         Healthcare IT Consultant           Name and Address of Employer         Self Employeed		

#### SCHEDULE A

Page 2 of 4 ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES for Line Number 11a

# 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) **Re-Elect Muriel Bowser Our Mayor** 

Re-Elect Muriel Bowser Our Mayor           6. Full Name, Mailing Address and Zip Code	Contribution Type	Date (month,	Amount of Each
Thomas Youngblood	Contribution Type	day, year)	Receipt This Period
615 Highland Ridge Ave, Gaithersburg, MD	$\Box$ Cashier Check $\blacksquare$ Credit Card		
20878	□ Other (Specify)	08/18/2018	\$ 25.00
	□ In Kind (Specify)		
Contributor Type	Occupation retired		
Individual	Name and Address of Employer		
	retired		
	615 Highland Ridge Ave, Gaithersburg, MD 20878		
	Aggregate Year-To-date		\$ 25.00
7. Full Name, Mailing Address and Zip Code	Contribution Type	Date (month,	Amount of Each
Gary G Hunter	Cash Money Order Check	day, year)	Receipt This Period
3528 19th St SE, Washington, DC 20020	Cashier Check I Credit Card	08/19/2018	\$ 100.00
	□ Other (Specify)	00,13,2010	\$ 100000
Contributor Tuno	□ In Kind (Specify) Occupation Business Owner	_	
Contributor Type Individual	Name and Address of Employer	_	
	Name and Address of Employer Hunter Brothers Productions		
	3528 19th St SE, Washington, DC 20020		
	Aggregate Year-To-date		\$ 200.00
8. Full Name, Mailing Address and Zip Code	Contribution Type	Date (month,	Amount of Each
Dean F Morehouse	Cash Money Order Check	day, year)	Receipt This Period
PO Box 609, Upper Marlboro, MD 20773	Cashier Check I Credit Card		
	□ Other (Specify)	08/23/2018	\$ 250.00
	In Kind (Specify)		
Contributor Type Individual	Occupation Builder/developer		
marviauai	Name and Address of Employer		
	Mtm builder/developer		
	PO Box 609, Upper Marlboro, MD 20773		© 500.00
	Aggregate Year-To-date		\$ 500.00
9. Full Name, Mailing Address and Zip Code	Contribution Type	Date (month,	Amount of Each
Mary M Jackson	Cash Money Order Check	day, year)	Receipt This Period
3222 Frankford St SE, Washington, DC 20020	Cashier Check Credit Card	09/10/2018	\$ 40.00
	□ In Kind (Specify)		
Contributor Type	Occupation retired	-	
Individual			
	Name and Address of Employer retired		
	3222 Frankford St SE, Washington, DC 20020		
	Aggregate Year-To-date		\$ 40.00
10. Full Name, Mailing Address and Zip Code	Contribution Type	Date (month	Amount of Each
<ol> <li>Full Name, Mailing Address and Zip Code Mary Greenan</li> </ol>	Contribution Type       □ Cash     □ Money Order     ☑ Check	Date (month, day, year)	Amount of Each Receipt This Period
		day, year)	Receipt This Period
Mary Greenan	Cash     Money Order     Check       Cashier Check     Credit Card       Other (Specify)		
Mary Greenan 2700 Virginia Ave NW # 303, Washington, DC 20037	Cash     Gashier Check     Check     Cashier Check     Credit Card     Other (Specify)     In Kind (Specify)	day, year)	Receipt This Period
Mary Greenan 2700 Virginia Ave NW # 303, Washington, DC 20037 Contributor Type	□ Cash       □ Money Order       ☑ Check         □ Cashier Check       □ Credit Card         □ Other (Specify)       □ In Kind (Specify)         Occupation       Executive	day, year)	Receipt This Period
Mary Greenan 2700 Virginia Ave NW # 303, Washington, DC 20037	□ Cash       □ Money Order       ☑ Check         □ Cashier Check       □ Credit Card         □ Other (Specify)       □ In Kind (Specify)         Occupation       Executive         Name and Address of Employer	day, year)	Receipt This Period
Mary Greenan 2700 Virginia Ave NW # 303, Washington, DC 20037 Contributor Type	□ Cash       □ Money Order       ☑ Check         □ Cashier Check       □ Credit Card         □ Other (Specify)       □ In Kind (Specify)         Occupation       Executive	day, year)	Receipt This Period

#### SCHEDULE A ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

Page 3 of 4

for Line Number 11a

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contributions, or for commercial purposes.

11. Full Name, Mailing Address and Zip Code	Contribution Type	Date (month,	Amount of Each
Rhonda Jenkins	$\Box$ Cash $\Box$ Money Order $\blacksquare$ Check	day, year)	Receipt This Period
237 Nicholson St NE, Washington, DC 20011	Cashier Check Credit Card	09/10/2018	\$ 50.00
	Chter (Specify)	07/10/2010	0.00
Contributor Trans	In Kind (Specify)      Occupation IT Specialist		
Contributor Type Individual	Name and Address of Employer		
	DOD AF		
	237 Nicholson St NE, Washington, DC 20011		
	Aggregate Year-To-date		\$ 50.00
12. Full Name, Mailing Address and Zip Code	Contribution Type	Date (month,	Amount of Each
Monte Hillis	Cash Money Order Check	day, year)	Receipt This Period
1360 Kearny St NE, Washington, DC 20017	Cashier Check Credit Card	09/10/2018	\$ 100.00
	□ Other (Specify) □ In Kind (Specify)		• • • • • • • •
Contributor Type	Occupation Good Faith Communities Coalition		
Individual	Name and Address of Employer		
	Coordinator		
	1360 Kearny St NE, Washington, DC 20017		
	Aggregate Year-To-date	-	\$ 100.00
13. Full Name, Mailing Address and Zip Code	Contribution Type	Date (month,	Amount of Each
Sharolyn Mack	□ Cash □ Money Order ☑ Check □ Cashier Check □ Credit Card	day, year)	Receipt This Period
510 Riggs Rd NE, Washington, DC 20011	$\Box$ Other (Specify)	09/10/2018	\$ 46.00
	$\Box \text{ In Kind (Specify)}$		
Contributor Type	Occupation retired		
Individual	Name and Address of Employer		
	retired		
	510 Riggs Rd NE, Washington, DC 20011		
	Aggregate Year-To-date		\$ 46.00
14. Full Name, Mailing Address and Zip Code	Contribution Type	Date (month,	Amount of Each
Rosetta Davis	Cash Money Order Check	day, year)	Receipt This Period
1708 Montello Ave NE, Washington, DC 20002	□ Clasher Check □ Credit Card	09/10/2018	\$ 55.00
	$\Box \text{ In Kind (Specify)}$		
Contributor Type	Occupation retired		
Individual	Name and Address of Employer		
	retired		
	1708 Montello Ave NE, Washington, DC 20002		
	Aggregate Year-To-date		\$ 55.00
15. Full Name, Mailing Address and Zip Code Lawrence I Nwankwo	Contribution Type	Date (month,	Amount of Each
Lawrence 1 Nwankwo 818 Buchanan St NW, Washington, DC 20011	□ Cash □ Money Order □ Check □ Cashier Check ☑ Credit Card	day, year)	Receipt This Period
oro buchanan Serviy, washington, DC 20011	$\Box$ Other (Specify)	09/23/2018	\$ 100.00
	$\Box \text{ In Kind (Specify)}$		
	······································		1
Contributor Type	Occupation Architect		
<b>Contributor Type</b> Individual		_	
	Occupation Architect	_	

#### SCHEDULE A

Page 4 of 4 ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES for Line Number 11a

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contributions, or for commercial purposes.

Full Name of Committee (Name of Candidate, if Candidate is reporting) **Re-Elect Muriel Bowser Our Mayor** 

16. Full Name, Mailing Address and Zip Code	Contribution Type	Date (month,	Amount of Each
Calvin L Osborne	Cash Money Order Check	day, year)	Receipt This Period
3659 Highwood Dr SE, Washington, DC 20020	□ Cashier Check  ☑ Credit Card □ Other (Specify) □ In Kind (Specify)	10/04/2018	\$ 500.00
Contributor Type	Occupation ATTORNEY		
Individual	Name and Address of Employer District of Columbia 1350 Pennsylvania Ave NW, Washington, DC 20004		
	Aggregate Year-To-date		\$ 500.00
17. Full Name, Mailing Address and Zip Code	Contribution Type	Date (month,	Amount of Each
Stephen D Horton	$\Box$ Cash $\Box$ Money Order $\blacksquare$ Check	day, year)	Receipt This Period
694 w kingsley st, Philadelphia, PA 19144	□ Cashier Check □ Credit Card □ Other (Specify) □ In Kind (Specify)	10/08/2018	\$ 75.00
Contributor Type	Occupation Self Employed		
<b>Contributor Type</b> Individual	Occupation         Self Employed           Name and Address of Employer           Freelancer           694 W Kingsley ST, Philadelphia, PA 19144		

OCF FORM 16	

## SCHEDULE A-2

Any information copied from such Reports or Statem contributions, or for commercial purposes.	ents may not be sold or used by any pers	son for the purpos	se of soliciting	
Full Name of Committee (Name of Candidate, if Candi Re-Elect Muriel Bowser Our Mayor	late is reporting)			
<ol> <li>Full Name, Mailing Address and Zip Code GM PAC</li> <li>25 Massachusetts Ave NW, Washington, DC</li> <li>20001</li> </ol>	Contribution Type         Cash       Money Order         Cashier Check       Credit Card         Other (Specify)         In Kind (Specify)	I Check	Date (month, day, year) 10/08/2018	Amount of Each Receipt This Period <b>\$ 1,000.00</b>
Contributor Type Corporate Sponsored PAC				

Aggregate Year-To-date

\$ 1,000.00

OCF FORM 16			for Line Number 14
	PERATING EXPENDITURES (REFUNDS, REBATES, ET		
Any information copied from such Reports or Statemer contributions, or for commercial purposes.	nts may not be sold or used by any person for the purp	oose of soliciting	
Full Name of Committee (Name of Candidate, if Candida Re-Elect Muriel Bowser Our Mayor	ate is reporting)		
<ol> <li>Full Name, Mailing Address and Zip Code WTTG-Fo</li> <li>5151 Wisconsin Ave NW, Washington, DC</li> </ol>	Receipt Type	Date (month, day, year) 10/08/2018	Amount of Each Offset This Period \$ 3,910.00
20016			
	Aggregate Year-To-date		\$ 3,910.00

### SCHEDULE B ITEMIZED OPERATING EXPENDITURES

FULL Name of Committee (Name of Candidat	e, if Candidate is reporting)		
Re-Elect Muriel Bowser Our Mayor			
<ol> <li>Full Name, Mailing Address and Zip Code Lark Toney</li> <li>2702 Wisconsin Ave NW, Washington, DC 20007</li> </ol>	Purpose of Expenditure Consultant	Date (month, day, year)	Amount of Each Expenditure This Period
Occupation Self Employed	Name and Address of Employer Self Employed	08/15/2018	\$ 2,375.00
<ol> <li>Full Name, Mailing Address and Zip Code Malik Williams</li> <li>2215 Perry St NE, Washington, DC</li> <li>20018</li> </ol>	2702 Wisconsin Ave NW, Washington, DC 20007 Purpose of Expenditure Consultant	Date (month, day, year) 08/15/2018	Amount of Each Expenditure This Period \$ 4,250.00
Occupation Consultant	Name and Address of Employer Self Employed 2215 Perry St NE, Washington, DC 20018	08/15/2018	5 4,250.00
<ol> <li>Full Name, Mailing Address and Zip Code American Express PO Box 650448, Dallas, TX 75265</li> </ol>	Purpose of Expenditure Campaign Materials	Date (month, day, year) 08/16/2018	Amount of Each Expenditure This Period \$ 12,403.70
Occupation	Name and Address of Employer	00/10/2018	\$ 12,403.70
<ol> <li>Full Name, Mailing Address and Zip Code American Express PO Box 650448, Dallas, TX 75265</li> </ol>	Purpose of Expenditure Campaign Materials	Date (month, day, year) 08/21/2018	Amount of Each Expenditure This Period \$ 9,470,71
Occupation	Name and Address of Employer	00/21/2010	\$ 7,470.71
<ul> <li>5. Full Name, Mailing Address and Zip Code Raffa PC</li> <li>1899 L street NW, Washington, DC</li> <li>20036</li> </ul>	Purpose of Expenditure Consultant	Date (month, day, year) 08/22/2018	Amount of Each Expenditure This Period \$ 4,160.00
Occupation	Name and Address of Employer		
6. Full Name, Mailing Address and Zip Code American Express PO Box 650448, Dallas, TX 75265	Purpose of Expenditure Catering/Refreshments	Date (month, day, year) 08/23/2018	Amount of Each Expenditure This Period \$ 32,014.88
Occupation	Name and Address of Employer	00/23/2018	\$ 52,014.00
7. Full Name, Mailing Address and Zip Code Office Equipment Management Inc 672 Old Mill Road Set E170, Millersville, MD 21108	Purpose of Expenditure Supplies	Date (month, day, year)	Amount of Each Expenditure This Period
Occupation	Name and Address of Employer	08/27/2018	\$ 200.00

8. Full Name, Mailing Address and Zip Code	Purpose of Expenditure	Date	Amount of Each
Raffa PC	Consultant	(month, day,	Expenditure This Period
1899 L street NW, Washington, DC		year)	
20036		08/28/2018	\$ 4,160.00
Occupation	Name and Address of Employer		
9. Full Name, Mailing Address and Zip Code	Purpose of Expenditure	Date	Amount of Each
Lark Tonev 2702 Wisconsin Ave NW, Washington, DC 20007	Consultant	(month, day, year)	Expenditure This Period
Occupation	Name and Address of Employer	08/30/2018	\$ 2,375.00
Self Employed	Self Employed 2702 Wisconsin Ave NW, Washington, DC 20007		
<ol> <li>Full Name, Mailing Address and Zip Code Malik Williams</li> <li>2215 Perry St NE, Washington, DC</li> </ol>	Purpose of Expenditure Consultant	Date (month, day, year)	Amount of Each Expenditure This Period
20018		08/30/2018	\$ 4,250.00
Occupation Consultant	Name and Address of Employer Self Employed 2215 Perry St NE, Washington, DC 20018		
<ol> <li>Full Name, Mailing Address and Zip Code</li> <li>Bradford Real Estate Group LLC</li> <li>4308 Georgia Ave NW, Washington,</li> </ol>	Purpose of Expenditure Rental	Date (month, day, year)	Amount of Each Expenditure This Period
DC 20011		09/01/2018	\$ 1,800.00
Occupation	Name and Address of Employer		
12. Full Name, Mailing Address and Zip Code	Purpose of Expenditure	Date	Amount of Each
Raffa PC 1899 L street NW, Washington, DC 20036	Consultant	(month, day, year)	Expenditure This Period
	Name and Address of Employer	09/04/2018	\$ 5,096.00
Occupation	Name and Address of Employer		
3. Full Name, Mailing Address and Zip Code	Purpose of Expenditure	Date	Amount of Each
Eagle Bank 7830 Old Georgetown Rd, Bethesda,	Bank Fees	(month, day, year)	Expenditure This Period
MD 20814		09/04/2018	\$ 48.10
Occupation	Name and Address of Employer		
14. Full Name, Mailing Address and Zip Code	Purpose of Expenditure	Date	Amount of Each
Blue Utopia PO Box 4486, Seattle, WA 98194	Bank Fees	(month, day, year)	Expenditure This Period
Occupation	Name and Address of Employer	09/04/2018	\$ 450.00
5. Full Name, Mailing Address and Zip Code Goldblatt Martin Pozen LLP 1625 K St NW Ste 700, Washington,	Purpose of Expenditure Consultant	Date (month, day, year)	Amount of Each Expenditure This Period
DC 20006		09/07/2018	\$ 311.56
Occupation	Name and Address of Employer		

16. Full Name, Mailing Address and Zip Code			
10. Full Name, Mannig Address and Zip Code	Purpose of Expenditure	Date	Amount of Each
TransFirst / TSYS	Bank Fees	(month, day,	Expenditure This Period
1 Tsys Way, Columbus, GA 31901		year)	
		00/10/0010	
		09/10/2018	\$ 37.00
Occupation	Name and Address of Employer		
17. Full Name, Mailing Address and Zip Code	Purpose of Expenditure	Date	Amount of Each
Lark Toney	Consultant	(month, day,	Expenditure This Period
2702 Wisconsin Ave NW, Washington,		year)	
DC 20007		09/14/2018	\$ 2,375.00
Occupation	Name and Address of Employer	0,711,2010	\$ 2,070,000
-	Self Employed		
Self Employed	2702 Wisconsin Ave NW, Washington, DC 20007		
8. Full Name, Mailing Address and Zip Code	Purpose of Expenditure	Date	Amount of Each
Malik Williams	Consultant	(month, day,	Expenditure This Period
2215 Perry St NE, Washington, DC		year)	
20018		00/14/2019	¢ 4 350.00
Occupation	Name and Address of Employer	09/14/2018	\$ 4,250.00
Occupation	Self Employed		
Consultant	2215 Perry St NE, Washington, DC 20018		
9. Full Name, Mailing Address and Zip Code	Purpose of Expenditure	Date	Amount of Each
Castle Gate Media	Advertising	(month, day,	Expenditure This Period
PO Box 15618, Washington, DC 20003	Auverusing	year)	
TO Box 15016, washington, DC 20005			
		09/24/2018	\$ 3,500.00
Occupation	Name and Address of Employer		
20. Full Name, Mailing Address and Zip Code	Purpose of Expenditure	Date	Amount of Each
Office Equipment Management Inc	Supplies	(month, day,	Expenditure This Period
672 Old Mill Road Set E170,	Supplies	year)	
Millersville, MD 21108			
		09/24/2018	\$ 200.00
Occupation	Name and Address of Employer		
21. Full Name, Mailing Address and Zip Code	Purpose of Expenditure	Date	Amount of Each
Raffa PC	Consultant	(month, day,	Expenditure This Period
1899 L street NW, Washington, DC		year)	
20036		09/25/2018	\$ 4,168.50
Occupation	Name and Address of Employer	0)/23/2010	\$ 4,100.50
22. Full Name, Mailing Address and Zip Code	Purpose of Expenditure	Date	Amount of Each
Bailiwick Clothing Company	Campaign Materials	(month, day,	Expenditure This Perio
1000 New Jersey Ave SE, Washington,		year)	
DC 20003		09/26/2018	\$ 6,777.50
Occupation	Name and Address of Employer	07/20/2010	\$ 0,777.30
· • • • •	· · · · · · · · · · · · · · · · · · ·		
3. Full Name, Mailing Address and Zip Code	Purpose of Expenditure	Date	Amount of Each
Bradford Real Estate Group LLC	Rental	(month, day,	Expenditure This Perio
4308 Georgia Ave NW, Washington,		year)	
		09/26/2018	\$ 1,800.00
DC 20011		09/20/2010	

24. Full Name, Mailing Address and Zip Code	Purpose of Expenditure	Date	Amount of Each
Lark Toney	Consultant	(month, day,	Expenditure This Period
2702 Wisconsin Ave NW, Washington,		year)	
DC 20007		09/28/2018	\$ 2,375.00
Occupation	Name and Address of Employer		
Self Employed	Self Employed		
	2702 Wisconsin Ave NW, Washington, DC 20007		
25. Full Name, Mailing Address and Zip Code	Purpose of Expenditure	Date	Amount of Each
Malik Williams	Consultant	(month, day,	Expenditure This Period
2215 Perry St NE, Washington, DC		year)	
20018		09/28/2018	\$ 4,250.00
Occupation	Name and Address of Employer		
Consultant	Self Employed		
	2215 Perry St NE, Washington, DC 20018		
26. Full Name, Mailing Address and Zip Code	Purpose of Expenditure	Date	Amount of Each
Eagle Bank	Bank Fees	(month, day,	Expenditure This Period
7830 Old Georgetown Rd, Bethesda,		year)	
MD 20814		10/01/2018	\$ 103.15
Occupation	Name and Address of Employer		
27. Full Name, Mailing Address and Zip Code	Purpose of Expenditure	Date	Amount of Each
Blue Utopia	Bank Fees	(month, day,	Expenditure This Period
PO Box 4486, Seattle, WA 98194		year)	-
		10/02/2018	\$ 450.00
Occupation	Name and Address of Employer		