



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) Re-Elect Muriel Bowser Our Mayor	2. OCF Identification Number PCCMYR186902
Address 7927 Orchid Street, NW	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 20012	

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 10/11/2018 through 10/29/2018		
6. (a) Cash on Hand (January 31 Year End Report Only)		\$ 0.00
(b) Cash on Hand at Beginning of Reporting Period	\$ 1,143,390.69	
(c) Total Receipts [from Line (16)]	\$ 3,570.77	\$ 2,529,435.49
(d) Subtotal [add Lines 6(b) and 6(c) for Column A]	\$ 1,146,961.46	
7. Total Expenditures (from Line 22)	\$ 426,097.17	\$ 1,808,571.20
8. Cash on Hand at Close of Reporting Period [subtract Line 7 from Line 6(d)]	\$ 720,864.29	
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.

Ms. Jodi Ovca

TYPE OR PRINT FULL NAME OF TREASURER

ELECTRONICALLY CERTIFIED

10/29/2018

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) Re-Elect Muriel Bowser Our Mayor	REPORT COVERING THE PERIOD FROM: 10/11/2018 TO: 10/29/2018	
I. RECEIPTS	COLUMN A TOTAL THIS PERIOD	COLUMN B CUMULATIVE TO-DATE CUMULATIVE YEAR-TO-DATE
11. CONTRIBUTIONS (OTHER THAN LOANS) FROM:		
(a) Individuals/Organizations Other Than Political Committees (Schedule A)	\$ 2,570.77	\$ 2,474,425.49 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	\$ 49,600.00 11(c)
(d) The Candidate (Schedule A-3)	\$ 0.00	\$ 1,500.00 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) Total Contributions (Other than Loans) [add lines 11(a), (b), (c), (d), (e) and (f)]	\$ 3,570.77	\$ 2,525,525.49 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)	\$ 0.00	\$ 3,910.00 15
16. TOTAL RECEIPTS [add Lines 11(g), 12, 13(c), 14 and 15]	\$ 3,570.77	\$ 2,529,435.49 16
II. EXPENDITURES		
17. OPERATING EXPENDITURES (Schedule B)	\$ 426,097.17	\$ 1,788,661.20 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)	\$ 0.00	\$ 5,100.00 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	\$ 5,100.00 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	\$ 14,810.00 21(b)
(c) Total Other Expenditures [add Lines 21(a), and 21(b)]	\$ 0.00	\$ 14,810.00 21(c)
22. TOTAL EXPENDITURES [add Lines 17, 18, 19(c), 20(d), and 21(c)]	\$ 426,097.17	\$ 1,808,571.20 22
III. CASH SUMMARY		
23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD		1,143,390.69
24. TOTAL RECEIPTS THIS PERIOD (from Line 16)		3,570.77
25. SUBTOTAL (add Lines 23 and 24)		1,146,961.46
26. TOTAL EXPENDITURES THIS PERIOD (from Line 22)		426,097.17
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)		720,864.29

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)

Re-Elect Muriel Bowser Our Mayor

1. Full Name, Mailing Address and Zip Code Outerbridge Horsey 1285 31st St NW, Washington, DC 20007	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) 10/11/2018	Amount of Each Receipt This Period \$ 250.00
Contributor Type Individual	Occupation Architect Name and Address of Employer self 1285 31st St NW, Washington, DC 20007		
Aggregate Year-To-date		\$ 250.00	
2. Full Name, Mailing Address and Zip Code Lameka Short 3960 2nd St SW, Washington, DC 20032	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) 10/13/2018	Amount of Each Receipt This Period \$ 300.00
Contributor Type Individual	Occupation Real Estate Development & Consulting Name and Address of Employer Blueprint technologies llc 3960 2nd St SW, Washington, DC 20032		
Aggregate Year-To-date		\$ 300.00	
3. Full Name, Mailing Address and Zip Code Candace Nelson 1000 Rittenhouse ST NW Apt G, 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) 10/14/2018	Amount of Each Receipt This Period \$ 200.00
Contributor Type Individual	Occupation Special Assistant Name and Address of Employer DC Government		
Aggregate Year-To-date		\$ 400.00	
4. Full Name, Mailing Address and Zip Code Eric Shaw 1301 U St NW Apt 208, Washington, DC 20009	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) 10/21/2018	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Director Name and Address of Employer DC Government		
Aggregate Year-To-date		\$ 300.00	
5. Full Name, Mailing Address and Zip Code Justin K Staley 3386 High View Ter SE, Washington, DC 20020	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) 10/23/2018	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation IT Consultant Name and Address of Employer Blueprint technologies llc 3386 High View Ter SE, Washington, DC 20020		
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)

Re-Elect Muriel Bowser Our Mayor

6. Full Name, Mailing Address and Zip Code Caremark Rx Inc 1 CVS Dr, Woonsocket, RI 02895	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) 10/28/2018	Amount of Each Receipt This Period \$ 1,000.00
Contributor Type Business Business Type Corporation	Occupation Name and Address of Employer		
	Aggregate Year-To-date \$ 2,000.00		
7. Full Name, Mailing Address and Zip Code Ledo Pizza 7435 Georgia Ave 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) Food	Date (month, day, year) 10/29/2018	Amount of Each Receipt This Period \$ 670.77
Contributor Type Business Business Type Corporation	Occupation Name and Address of Employer		
	Aggregate Year-To-date \$ 670.77		
TOTAL This Period (Aggregate of all Receipt pages)			\$ 2,570.77

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

1. Full Name, Mailing Address and Zip Code DC Dental Political Action Committee 2025 M St NW, Washington, DC 20036	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) 10/28/2018	Amount of Each Receipt This Period \$ 1,000.00
Contributor Type Labor Sponsored PAC			
	Aggregate Year-To-date		\$ 1,000.00

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

Re-Elect Muriel Bowser Our Mayor

1. Full Name, Mailing Address and Zip Code Shurland Oliver 2636 Sheridan Rd SE, Washington, DC 20020	Purpose of Expenditure Consultant	Date (month, day, year) 10/15/2018	Amount of Each Expenditure This Period \$ 2,000.00
Occupation Consultant	Name and Address of Employer Self Employed 2636 Sheridan Rd SE, Washington, DC 20020		
2. Full Name, Mailing Address and Zip Code Malik Williams 2215 Perry St NE, Washington, DC 20018	Purpose of Expenditure Consultant	Date (month, day, year) 10/15/2018	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		
3. Full Name, Mailing Address and Zip Code Lark Toney 2702 Wisconsin Ave NW, Washington, DC 20007	Purpose of Expenditure Consultant	Date (month, day, year) 10/15/2018	Amount of Each Expenditure This Period \$ 2,375.00
Occupation Self Employed	Name and Address of Employer Self Employed 2702 Wisconsin Ave NW, Washington, DC 20007		
4. Full Name, Mailing Address and Zip Code DJ Soyo 724 Barnes St NE, Washington, DC 20019	Purpose of Expenditure Consultant	Date (month, day, year) 10/15/2018	Amount of Each Expenditure This Period \$ 300.00
Occupation	Name and Address of Employer		
5. Full Name, Mailing Address and Zip Code Resonance Campaigns 1020 16th St NW Ste 701, Washington, DC 20036	Purpose of Expenditure Consultant	Date (month, day, year) 10/15/2018	Amount of Each Expenditure This Period \$ 126,108.85
Occupation	Name and Address of Employer		
6. Full Name, Mailing Address and Zip Code Three and One Contractors 557 23rd Pl NE, Washington, DC 20002	Purpose of Expenditure Campaign Materials	Date (month, day, year) 10/16/2018	Amount of Each Expenditure This Period \$ 943.00
Occupation	Name and Address of Employer		
7. Full Name, Mailing Address and Zip Code Hart Research Associates 1724 Connecticut Ave, Washington, DC 20009	Purpose of Expenditure Polling/Mailing List	Date (month, day, year) 10/16/2018	Amount of Each Expenditure This Period \$ 36,000.00
Occupation	Name and Address of Employer		

8. Full Name, Mailing Address and Zip Code Shurland Oliver 2636 Sheridan Rd SE, Washington, DC 20020	Purpose of Expenditure Consultant	Date (month, day, year) 10/17/2018	Amount of Each Expenditure This Period \$ 2,000.00
Occupation Consultant	Name and Address of Employer Self Employed 2636 Sheridan Rd SE, Washington, DC 20020		
9. Full Name, Mailing Address and Zip Code Goldblatt Martin Pozen LLP 506 9th St NW, Washington, DC 20004	Purpose of Expenditure Consultant	Date (month, day, year) 10/17/2018	Amount of Each Expenditure This Period \$ 300.00
Occupation	Name and Address of Employer		
10. Full Name, Mailing Address and Zip Code Wildfire Contact LLC 290 Broadway Ste 132, Methuen, MA 01844	Purpose of Expenditure Consultant	Date (month, day, year) 10/18/2018	Amount of Each Expenditure This Period \$ 1,883.32
Occupation	Name and Address of Employer		
11. Full Name, Mailing Address and Zip Code Kim Lockett 510 Decatur St NW, Washington, DC 20011	Purpose of Expenditure Consultant	Date (month, day, year) 10/20/2018	Amount of Each Expenditure This Period \$ 62,350.00
Occupation Self Employed	Name and Address of Employer Self Employed 510 Decatur St NW, Washington, DC 20011		
12. Full Name, Mailing Address and Zip Code Community Economics 3115 Martin Luther King Jr Ave SE, Washington, DC 20032	Purpose of Expenditure Consultant	Date (month, day, year) 10/20/2018	Amount of Each Expenditure This Period \$ 74,112.00
Occupation	Name and Address of Employer		
13. Full Name, Mailing Address and Zip Code Resonance Campaigns 1020 16th St NW Ste 701, Washington, DC 20036	Purpose of Expenditure Consultant	Date (month, day, year) 10/22/2018	Amount of Each Expenditure This Period \$ 53,130.00
Occupation	Name and Address of Employer		
14. Full Name, Mailing Address and Zip Code Raffa PC 1899 L street NW, Washington, DC 20036	Purpose of Expenditure Catering/Refreshments	Date (month, day, year) 10/23/2018	Amount of Each Expenditure This Period \$ 4,160.00
Occupation	Name and Address of Employer		
15. Full Name, Mailing Address and Zip Code Office Equipment Management Inc 672 Old Mill Road Set E170, Millersville, MD 21108	Purpose of Expenditure Consultant	Date (month, day, year) 10/23/2018	Amount of Each Expenditure This Period \$ 200.00
Occupation	Name and Address of Employer		

16. Full Name, Mailing Address and Zip Code Lark Toney 2702 Wisconsin Ave NW, Washington, DC 20007	Purpose of Expenditure Consultant	Date (month, day, year) 10/24/2018	Amount of Each Expenditure This Period \$ 2,375.00
Occupation Self Employed	Name and Address of Employer Self Employed 2702 Wisconsin Ave NW, Washington, DC 20007		
17. Full Name, Mailing Address and Zip Code Malik Williams 2215 Perry St NE, Washington, DC 20018	Purpose of Expenditure Consultant	Date (month, day, year) 10/24/2018	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		
18. Full Name, Mailing Address and Zip Code Radio One 8515 Georgia Ave, Silver Spring, MD 20910	Purpose of Expenditure Advertising	Date (month, day, year) 10/25/2018	Amount of Each Expenditure This Period \$ 15,005.00
Occupation	Name and Address of Employer		
19. Full Name, Mailing Address and Zip Code WPGC 1015 Half Street SE, Washington, DC 20003	Purpose of Expenditure Advertising	Date (month, day, year) 10/25/2018	Amount of Each Expenditure This Period \$ 10,055.00
Occupation	Name and Address of Employer		
20. Full Name, Mailing Address and Zip Code WHUR 529 Bryant St NW, Washington, DC 20059	Purpose of Expenditure Advertising	Date (month, day, year) 10/25/2018	Amount of Each Expenditure This Period \$ 20,000.00
Occupation	Name and Address of Employer		
21. Full Name, Mailing Address and Zip Code Resonance Campaigns 1020 16th St NW Ste 701, Washington, DC 20036	Purpose of Expenditure Consultant	Date (month, day, year) 10/25/2018	Amount of Each Expenditure This Period \$ 4,300.00
Occupation	Name and Address of Employer		
TOTAL This Period (Aggregate of all expenditure pages)			\$ 426,097.17