## GOVERNMENT OF THE DISTRICT OF COLUMBIA BOARD OF ETHICS AND GOVERNMENT ACCOUNTABILITY WASHINGTON D.C. 20001

Year 20/3	WASHINGTON	, D.C. 20001		
Original  Amendment	LOBBYIST ACTIV (See next page for	ITY REPORT * instructions) ID#	10B00012	245-3
Type of Report:	anuary <b>[5, 2</b> ]/ <b>3</b> If you are f intend to lobl	iling a January Repo	ort, please indicate whe	ether you .
□ J.				
1. (a) Registrant's Name	·	for Children (b)	Zoz z Daytime	280 -/972 Phone Number
(c) Permanent Address 1660	L Street NW, S (Street Address)	inite 1000	Washing ton (City, State, Zip Code)	, DC 20036
(d)	Temporary	Address	(while	lobbying)
	(Street Address)	1000	(City, State, Zip Code)	
2. Lobbyist (s) Working for Registrant:		onal space is needed.		
(a) Name Mrchae/ Mi	1 sante	(b) Name		
Address 411 11th	KH. NE dress)	Address	(Street Address)	
			,	
(City, Stat	2 000 Z e, Zip Code)		(City, State, Zip Code)	
Daytime Phone Number 20	2302-5983	Daytime Phone Number		
3. Person Compensating Registrant				
(a) Name American	Federation for Child	(b) Daytime Phone Number	er 202 280	-1972
(c) Address 1660 L (Street Address Ed)	Street, NV, Sur ucation Advocace		(City, State, Zip Code)	C 20036
4. Terms of Compensation: (a)	2,750 a Month	(b) <i>One</i>	Year Duration of Employme	nt
5. Identify matter(s) by subject and for space is needed.  Education	<i>b</i> 1 1		obby. Attach a Supplementa	
			4. D. 1. T.	15th .c
* REMINDER – Each new or pre	viously registered Lobbyist mus	st file a Lobbyist Regist		
Rev. 12/2012			BEGA For	m

6. Identify the official and title, if known, in the Executive or Legislative Branch with communication during the reporting period relating to lobbying activities, and the da Supplemental Sheet if additional space is needed.	n whom the registrant has had oral or written te that communication was made. Attach a
Name Chairman Phi/ Mendelson City Council Name Enika Wadlington, Chairman's Office Name Kathy Arnold, Education Advisor, Planin	Date 10/22/12  Date 11/16/12  Party 1/8/13
Name	Date
Name	Date
<ul><li>7. Total compensation/receipts paid to the Lobbyist for lobbying during the reporting per (Schedule A)</li></ul>	Date
<ul> <li>(Schedule A)</li> <li>8. Total of other compensation/receipts received for lobbying services and compensation (Schedule A-1)</li> <li>9. Total amount of Loans received by the Lobbyist in connection with lobbying during t</li> </ul>	n paid to others: \$
(Schedule A-2)	
10. Total receipts (Add Lines 7, 8, and 9)	\$ 13,500
11. Total of expenditures made for purposes of lobbying during the reporting period: (Schedule B)	s 13,500
12. Total of other expenditures related to lobbying activities:	\$
(Schedule B-1) 13. Total expenditures (Add Lines 11 and 12)	s_13,500

## BOARD OF ETHICS AND GOVERNMENT ACCOUNTABILITY LOBBYIST/EMPLOYEE LOBBYIST'S ACTIVITY REPORT PAGE / OF / SCHEDULE A – COMPENSATION/RECEIPTS PAID TO THE LOBBYIST FOR LOBBYING:

YEAR: <u>2013</u>				
Type of Report: January 10,13	July			
Period Covering: 06 80/12 through 0	1/10/13			
LOBBYIST/EMPLOYEE LOBBYIST'S NAME: AMERICAN Federa for	for children M	ichae/ Musante		
COMPENSATION/RECEIPTS PAID FOR LOBBYING (AMOUNTS MAY BE ROUN DOLLARS)	DED OFF TO WHOLE			
EMPLOYER'S NAME, ADDRESS AND TELEPHONE NUMBER (FEES/COMPENSATION)	TOTAL THIS PERIOD	CUMULATIVE TOTAL (FEES/COMPENSATION)		
AFC 1660 L St. NW Washington, DC 20036 FEES/RETAINER COMPENSATION \$ 2,250 \$ 13,500	13,500	13,500		
EMPLOYER'S NAME, ADDRESS AND TELEPHONE NUMBER FEES/COMPENSATION)	TOTAL THIS PERIOD	CUMULATIVE TOTAL (FEES/COMPENSATION)		
FEES/RETAINER COMPENSATION \$ \$	<b>\$</b>	\$		
EMPLOYER'S NAME, ADDRESS AND TELEPHONE NUMBER FEES/COMPENSATION)	TOTAL THIS PERIOD	CUMULATIVE TOTAL (FEES/COMPENSATION)		
FEES/RETAINER COMPENSATION \$ \$	\$	\$		
EMPLOYER'S NAME, ADDRESS AND TELEPHONE NUMBER FEES/COMPENSATION)	TOTAL THIS PERIOD	CUMULATIVE TOTAL (FEES/COMPENSATION)		
FEES/RETAINER COMPENSATION  \$	\$	\$		
TOTAL RECEIPTS RECEIVED FOR LOBBYING (CARRY TOTAL FORWARD TO LINE 7)	s 13,500	\$13,500		

IF MORE SPACE IS NEEDED, CHECK BOX AND ATTACH SUPPLEMENTAL SHEET (SEE NEXT PAGE FOR INSTRUCTIONS)

Rev 12/2012

#### BOARD OF ETHICS AND GOVERNMENT ACCOUNTABILITY PAGE /OF / LOBBYIST/EMPLOYEE LOBBYIST'S ACTIVITY REPORT SCHEDULE A-1 -- LOBBYIST COMPENSATION/RECEIPTS RECEIVED FOR LOBBYIST SERVICES AND COMPENSATION PAID TO OTHERS:

YEAR: <u>2013</u>

Type of Report: Danuary 2013

Type of Report: □January 20/3 □July							
LOBBYIST/EN NAME:	LOBBYIST/EMPLOYEE LOBBYIST'S  NAME: M. chael My sante						
OTHER COMPENS	ATION/RECEIPTS RE LOBBYIST ACTIVITI	CEIVED BY THE DIS	HE LOBBYIST	AND/OR LOBBYIS	T EMPLOYEE A	ND PAID BY THE	COMPENSATING
						TOTAL THIS PERIOD	CUMULATIVE TOTAL
AFC 60 L St. NW, Washington, DC 20036							
OFFICE EXPENSES	ADVERTISING & PUBLICATION EXP	PERSONAL EXPENSES	TRÁVEL EXPENSES	COMPENSATION TO OTHER	OTHER EXPENSES		$\sim$
s <i>O</i>	s O	s 6	\$ O	s 0	0	, 0	s 0
EMPLOYER'S	S NAME, ADDRESS, A	AND TELEPHO	ONE NUMBEI	R		TOTAL THIS PERIOD	CUMULATIVE TOTAL
OFFICE EXPENSES	ADVERTISING & PUBLICATION EXP	PERSONAL EXPENSES	TRAVEL EXPENSES	COMPENSATION TO OTHER	OTHER EXPENSES	1	
\$	\$	\$	\$	\$	}	\$	\$
EMPLOYER'S	S NAME, ADDRESS,	AND TELEPHO	ONE NUMBEI	₹		TOTAL THIS PERIOD	CUMULATIVE TOTAL
OFFICE EXPENSES	ADVERTISING & PUBLICATION EXP	PERSONAL EXPENSES	TRAVEL EXPENSES	COMPENSATION TO OTHER	OTHER EXPENSES	†	
\$	\$	\$	\$	\$	}	\$	\$
EMPLOYER'S	S NAME, ADDRESS, A	AND TELEPHO	ONE NUMBER	ł		TOTAL THIS PERIOD	CUMULATIVE TOTAL
OFFICE EXPENSES	ADVERTISING & PUBLICATION EXP	PERSONAL EXPENSES	TRAVEL EXPENSES	COMPENSATION TO OTHER	OTHER EXPENSES		
\$	\$	\$	\$	\$		\$	\$
TOTA	AL OTHER COMPI	ENSATION/R TOTAL FOR	ECEIPTS RE	ECEIVED FOR LO	OBBYING	$\circ$ $\circ$	s 0
IF MORE (SEE NEX	CARRI SPACE IS NEEDED, CH KT PAGE FOR INSTRU	IECK BOX AND	ATTACH SUPP	PLEMENTAL SHEET	A-1		
REV. 12/2012				BE	GA Form		

## BOARD OF ETHICS AND GOVERNMENT ACCOUNTABILITY LOBBYIST/EMPLOYEE LOBBYIST'S ACTIVITY REPORT PAGE / OF / SCHEDULE A-2 LOANS RECEIVED BY THE LOBBYIST

SCHEDULE A-2 LOANS RECEIVED BY THE LOBBYIST YEAR: 20/3

		P	eriod Covering:(	06/30/12	_through _O	1/10/13	
LC N	OBBYIST/ AME:	EMPLOYEE LOI	BBYIST Michae	Musinte			
LO	DANS RE	ECEIVED IN CO	NNECTION WITH	LOBBYING ACTIVI	TY.		
	EMD	LOVED'S NAME	ADDDESS AND TE	CLEPHONE NUMBE	D.	TOTAL LOANS THIS PERIOD TOTAL	CUMULATIVE LOAN
AI IG LOAN	EC 60 L	st, NW ashington, 1	DC 2003	6 \$ P	, , , , , , , , , , , , , , , , , , ,		
				ELEPHONE NUMBE	R	TOTAL LOANS THIS PERIOD	CUMULATIVE LOAN TOTAL
LOAN \$		\$ LOYER'S NAME	\$ , ADDRESS AND TE	\$ CLEPHONE NUMBE	R	S TOTAL LOANS THIS PERIOD	S CUMULATIVE LOAN TOTAL
LOA	N	\$	\$	S		•	
	EMPI TAL	<u> </u>		LEPHONE NUMBER	<b>t</b>	TOTAL LOANS THIS PERIOD	CUMULATIVE LOAN
LOAN						<u> </u>  -	
\$			ANS RECEIVED	\$ FOR THE PERIOR D TO LINE 9)	)		0
Е		RE SPACE IS NEEI		D ATTACH SUPPLEM	IENTAL SHEET	\$	\$

**BEGA Form** 

REV. 12/2012

# BOARD OF ETHICS AND GOVERNMENT ACCOUNTABILITY COMPENSATING REGISTRANT'S ACTIVITY REPORT PAGE / OF / SCHEDULE B – EXPENDITURES PAID BY COMPENSATING REGISTRANT TO THE LOBBYIST YEAR: 20/3

Type of Report: January 10, 2013 July						
	Period Covering: 06/30/12 through 01/10/13  COMPENSATING REGISTRANT'S NAME: A Morican Federation for Children					
COMPEN	SATING REGISTRANT'S NAME:A_M_O/	ican Federation for C	hildren			
PAYMEN	ITS MADE IN CONNECTION WITH LOBBYIN	G ACTIVITIES				
ACTIVITY EMPLOYE	EXPENSES INCURRED, OR PAID BY T ELOBBYIST FOR ACTIVITIES RELATIVE TO	HE COMPENSATING REGISTRANT TO CLOBBYING ACTIVITIES IN THE DISTR	O THE LOBBYIST ICT OF COLUMBIA	AND/OR IN-HOUSE		
DATE	NAME AND ADDRESS OF PAYEE	PURPOSE OF COMPENSATION	TOTAL THIS PERIOD	CUMULATIVE TOTAL		
OI liolis	Michael Musante 411 11th St. NE Washington	Ocars Lobbyist	s 13,500	s 13,500		
			. ,	,		
			<u> </u> \$	\$		
			\$	\$		
•			\$ 	\$		
			¢.	¢		
			\$	\$		
			<u> \$</u>	\$		
			\$	\$		
	TOTAL EXPENDITURES I		\$ 13,500	\$ 13,500		

☐ IF MORE SPACE IS NEEDED, CHECK BOX AND ATTACH SUPPLEMENTAL SHEET (SEE NEXT PAGE FOR INSTRUCTIONS)

REV. 12/2012

### **BOARD OF ETHICS AND GOVERNMENT ACCOUNTABILITY**

LOBBYIST/COMPENSATING REGISTRANT'S ACTIVITY REPORT PAGE\_OF\_\_

<b>SCHEDULE</b>	B-1	<b>OTHER</b>	<b>EXPENDITURES</b>
			_

SCHEDULE B-1 OTHER EXPENDITURES  YEAR: Z0/3
Type of Report: January 10+h July
Period Covering: 06/30/12 through 01/10/13
COMPENSATING REGISTRANT'S NAME: AMERICAN FEDGRAFION FOR Children

OTHER ACTIVITY EXPENSES INCURRED, OR PAID BY THE COMPENSATING REGISTRANT TO THE LOBBYIST AND/OR IN- HOUSE EMPLOYEE LOBBYIST FOR ACTIVITES RELATIVE TO LOBBYING ACTIVITIES IN THE DISTRICT.					
DATE	NAME OF RECIPIENT	DESCRIPTION OF CONSIDERATION	TYPE OF COMPENSATION PAID (LOANS, CONTRIBUTION, GIFT, HONORARIA, ETC.)	TOTAL	
OJN 13	Michael Musunte 411 11th St. NE Washingt	nDC 20002 Not applicable	Not applicable	\$ 8,00	
				\$	
				\$	
				\$	
				\$	
				\$	
				\$	

TOTAL OTHEREXPENDITURES PAID FOR LOBBYING (CARRY TOTAL FORWARD TO LINE 12)

IF MORE SPACE IS NEEDED, CHECK BOX AND ATTACH SUPPLEMENTAL SHEET TO SCHEDULE B-1
IF YOU HAVE NOT PAID, INCURRED, OR ARRANGED ANY OTHER ACTIVITY EXPENSES DURING THE PERIOD, CHECK THE BOX TO
INDICATE THAT YOU HAVE NOTHING TO REPORT

REV. 12/2012

### BOARD OF ETHICS AND GOVERNMENT ACCOUNTABILITY

### LOBBYIST ACTIVITY REPORT

SCHEDULE C

YEAR 2013

(See next page for Instructions)

Type of Report: January /0+h July						
Covering Peri	Covering Period O6/30/12 through O//10/13					
LOBBYIST/CO	MPENSATING'S REGISTRANT'S NAME	: American Federation for Children				
DATE	NAME	NATURE OF EMPLOYMENT WITH REGISTRANT				
1/10/13	Michael Musante	Consultant				
	·					
	:					
	·					
I, the undersigned, declare under oath and on penalty of perjury that the statements contained on this Lobbyist Activity Report are to the best of my knowledge, true, correct, and complete.						
$\frac{1}{2}$						
Signature of Registrant (or, if not an individual, an authorized officer or agent* of registrant must sign).						
*The lobbyist retained by contract to provide lobbying services may not sign on behalf of the compensating registrant.						
Subscribed and	sworn to before me on this	day of JANUAry				
My commission	Expires: 3/21/2015	Notary Public				