THE ORAL MAJORITY

9/30/99 RE: C00342881

Dear Federal Election Commission!

Yesterday I was calling you + was told you hadn't received my report filed in July.

I'm enclosing a copy of my copy of Report also a copy of my Certified mail receipt # 2409 1568 46 to verify that I sent it on 7/28/99 + filed what was necessary & on time.

Please verify that you've received this report + info + meet our obligations.

Yours faithfully,

Bob Kunst

E-MAIL bobkunst@bellsouth.net
P.O. BOX 402263 MIAMI BEACH, FLORIDA 33140-0263
PHONE & FAX (305) [redacted] 864-5110
(305) 867-1976

Z 409 156 846

US Postal Service
Receipt for Certified Mail
No Insurance Coverage Provided.
Do not use for International Mail (See reverse)

Sent to FEDERAL ELECTIONS COMMISSION	
Street & Number 999 E St NW	
Post Office, State, & ZIP Code Wash., D.C. 20463	
Postage	$ .54
Certified Fee	1.00
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.00
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	3.20
Postmark or Date	JUL 28 1999

PS Form 3800, April 1985

FEDERAL ELECTION COMMISSION

WASHINGTON, DC 20463

NOTICE TO VIEWER

The following is as filed in the original report.

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

USE FOR MAILING LABEL OR TYPE OR PRINT

1. NAME OF COMMITTEE (Please Print)
CORY BOOKER
ADDRESS (Number and Street) [ ] Check if address has changed since last report
520 MLK JR BLVD
CITY, STATE and ZIP CODE
NEWARK, NJ 07102

2. FEC IDENTIFICATION NUMBER
C00394881
3. [ ] This committee has a joint fundraiser with multiple candidates (enter FEC ID number(s))

4. TYPE OF REPORT

(a) [ ] April 15 Quarterly Report
[ ] July 15 Quarterly Report
[ ] October 15 Quarterly Report
[ ] January 31 Year-End Report
[ ] 12-Day Pre-Election Report for the Election on ____ in the State of ____
[ ] Mid-Year Report (Election Year Only)
[ ] 30-Day Post-Election Report following the General Election on ____ in the State of ____
[ ] Termination Report
(b) [ ] 48-Hour Report on contributions received: [ ] YES [ ] NO

Monthly Report Covering:
[ ] February 20 [ ] June 20 [ ] October 20
[ ] March 20 [ ] July 20 [ ] November 20
[ ] April 20 [ ] August 20 [ ] December 20
[ ] May 20 [ ] September 20 [ ] January 21

SUMMARY

		COLUMN A This Period	COLUMN B Calendar Year-to-Date
1	Covering Period 1/1/19 through 6/30/19		
2	(a) Cash on Hand at Beginning of Reporting Period	$ 0	$
3	(b) Cash on Hand at Beginning of Reporting Period		
4	(c) Total Receipts (Page 2, Line 11)	$ 797,540	$
5	(d) Subtotal (Line 2(a) plus Line 3(c) for Column A and Line 2(b) plus Line 3(c) for Column B)	$ 797,540	$
6	Total Disbursements (Page 3, Line 18)	$ 697,275	$
7	Cash on Hand at Close of Reporting Period (Subtract Line 6 from Line 5)	$ 100,265	$
8	Debts and Obligations Owed by the Committee	$	$
9	Debts and Obligations Owed to the Committee	$	$
10	Indebtedness of Candidate and Family to Committee	$	$
11	Net Contributions (Other than Loans) to Date of Election	$	$

For further information contact: Federal Election Commission, 999 E Street, NW, Washington, DC 20463. Toll Free 800 424-9530, Local 202 694-1100

I certify that I have examined this report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name and Title
Robert Duncan

Signature of Treasurer
Robert Duncan

Date
7/23/19

OF RECEIPTS AND DISBURSEMENTS
PAGE 2, FEC FORM 3X

(revised 10/2/01)

E OF COMMITTEE: OPAL MAJORITY

REPORT COVERING PERIOD FROM 1/1/98 TO 6/30/98

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year	
11. Contributions (other than loans) (see Cover Page)			
a. Individuals/Persons Other Than Political Committees			
i. Itemized (see Schedule A)	4578.90		11(a)(i)
ii. Unitemized	3398.00		11(a)(ii)
iii. Total (add i and ii) ➤	~~[illegible]~~ 7976.90		11(a)(iii)
b. Political Party Committees			11(b)
c. Other Political Committees (including PACs)			11(c)
d. Total Contributions (add a iii, b and c) ➤	~~[illegible]~~ 7976.90		11(d)
12. Transfers From Affiliated/Other Party Committees			12
13. All Loans Received			13
14. Loan Repayments Received			14
15. Offsets To Operating Expenditures (from 18, Refunds, etc.)			15
16. Refunds of Contributions (other than Federal Candidates and Other Political Committees)			16
17. Other Federal Receipts (Dividends, Interest, etc.)			17
18. Transfers from Nonfederal Account Federal Activity			18
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) ➤	7976.90		19
20. Total Federal Receipts (subtract line 18 from line 19) ➤	7976.90		20
II. Disbursements			
21. Operating Expenditures:			
a. Shared Pack of Non-Federal Activity (from Schedule H)			
i. Federal Share	5080.00		21(a)(i)
ii. Non-Federal Share	1872.75		21(a)(ii)
b. Other Federal Operating Expenditures			21(b)
c. Total Operating Expenditures (add a i, a ii, and b) ➤	6952.75		21(c)
22. Transfers to Affiliated/Other Party Committees			22
23. Contributions to Federal Candidates/Committees and Other Political Committees			23
24. Independent Expenditures (Attach Schedule E)			24
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)			25
26. Loan Repayments Made			26
27. Loans Made			27
28. Refunds of Contributions To:			
a. Individuals/Persons Other Than Political Committees			28(a)
b. Political Party Committees			28(b)
c. Other Political Committees (including PACs)			28(c)
d. Total Contributions Refunds (add a, b and c) ➤			28(d)
29. Other Disbursements			29
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) ➤	6952.75		30
31. Total Federal Disbursements (subtract line 21a ii from line 30) ➤	6952.75		31
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans) (from 1 and 16)	7976.90		32
33. Total Contribution Refunds (from line 28d)			33
34. Net Contributions (other than loans) (subtract line 33 from 32)			34
35. Total Federal Operating Expenditures (add 21a i and 21b) ➤	6952.75		35
36. Offsets to Operating Expenditures (from line 15)			36
37. Net Operating Expenditures (subtract line 36 from 35) ➤	6952.75		37

FEC 3X-064

ITEMIZED RECEIPTS

For each category of the Detailed Summary Page

FORM LINE NUMBER: 11A I

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (Other): ORAL MAJORITY

Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
A. Full Name, Mailing Address and ZIP Code: GEORGES ARIM, 2206 [illegible] DR, Wilton Manors, FLA 33305	Name of Employer:	4/5/99	$ 200.00
Receipt For: [X] Other (specify) [illegible]	Occupation: BAR OWNER		
	Aggregate Year-to-Date: $ 200		
B. Full Name, Mailing Address and ZIP Code: GEORGES ARIM, 2206 [illegible] Manors Dr, Wilton Manors, FLA 33305	Name of Employer:	5/7/99	$ 200.00
Receipt For: [X] Other (specify) [illegible]	Occupation: BAR OWNER		
	Aggregate Year-to-Date: $ 400		
C. Full Name, Mailing Address and ZIP Code: GEORGES ARIM, 2206 [illegible] Manors Dr, Wilton Manors, FLA 33305	Name of Employer:	6/15/99	$ 200.00
Receipt For: [X] Other (specify) [illegible]	Occupation: BAR OWNER		
	Aggregate Year-to-Date: $ 600		
D. Full Name, Mailing Address and ZIP Code: Jerry McGuire, P.O. Box 990, Kensington, MA 20895	Name of Employer:	1/8/99	$ 250.00
Receipt For: [X] Other (specify) [illegible]	Occupation: Retired		
	Aggregate Year-to-Date: $ 250	$ 250.00	
E. Full Name, Mailing Address and ZIP Code: Jerry McGuire, P.O. Box 990, Kensington, MA 20895	Name of Employer:	2/11/99	250.00
Receipt For: [X] Other (specify) [illegible]	Occupation: Retired		
	Aggregate Year-to-Date: $ 500	$ $1200.00	
F. Full Name, Mailing Address and ZIP Code: Jerry McGuire, P.O. Box 990, Kensington, MA 20895	Name of Employer:	6/24/99	$ 100.00
Receipt For: [X] Other (specify) [illegible]	Occupation: Retired		
	Aggregate Year-to-Date: $ 600	$ $1200.00	
G. Full Name, Mailing Address and ZIP Code: Richard [illegible], 2[illegible] W [illegible] St, Miami, FLA 33131	Name of Employer:	1/10/99	$ 762.00
Receipt For: [X] Other (specify) [illegible]	Occupation: [illegible]		
	Aggregate Year-to-Date: $ 762.00	$ $1762.00	LOAN

SUBTOTAL of Receipts This Page (optional): $ 1962.00

TOTAL This Period (last page this Schedule only):

V4001

ITEMIZED RECEIPTS

For each Category of Item Detailed Summary Page | 2 | 2 | FOR LINE NUMBER: UAT

Any information copied from such reports and statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (in Full): ORAL MAJORITY

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. Richard [illegible] 28 W. [illegible] Miami, FL 33135	Occupation: A [illegible]	2/9/99	$ 568.[illegible]
Receipt For: [X] Other (specify) [illegible]	Aggregate Year-to-Date: $ 1330.[illegible]		Loan
B. Robert [illegible] 525 W. 49 St. Miami Beach, FL 33140	Name of Employer: ORAL MAJORITY	1/1/99 to 3/3/99	$ 985.17
Receipt For: [X] Other (specify) [illegible]	Occupation: PRES		Loan
	Aggregate Year-to-Date: $ 985.17		
C. Robert [illegible] 525 W. 49 St. Miami Beach, FL 33140	Name of Employer: ORAL MAJORITY	5/20/99	$ 631.06
Receipt For: [X] Other (specify) [illegible]	Occupation: PRES		Loan
	Aggregate Year-to-Date: $ 1616.23		
D. Marvin [illegible] 525 W. 49 St. Miami Beach, FL 33140	Name of Employer: Bell SOUTH	6/10/99	$ 432.67
Receipt For: [X] Other (specify) [illegible]	Occupation: Telephone Repair		Loan
	Aggregate Year-to-Date: $ 432.67		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: [ ] Other (specify)	Occupation		
	Aggregate Year-to-Date: $		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: [ ] Other (specify)	Occupation		
	Aggregate Year-to-Date: $		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: [ ] Other (specify)	Occupation		
	Aggregate Year-to-Date: $		

UBTOTAL of Receipts This Page (optional): 2616.90

OTAL This Period (last page this Year-to-Date): [illegible]

[illegible]EDULE B — **ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

PAGE 1 OF 2

FOR FEC NUMBER 21A1

[illegible] information copied from such [illegible] may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name [illegible] any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (in Full): ORAL MAJORITY

A. Full Name, Mailing Address and ZIP Code: Robert [illegible] 525 W 49 St Miami Beach, FL 33140	Purpose of Disbursement: Drawing Salary. Disbursement for: [ ] Primary [ ] General [✓] Other (specify): 99 PRE [illegible]	Date (month, day, year): 1/28/99	Amount of Each Disbursement This Period: $1,000.00
B. Full Name, Mailing Address and ZIP Code: Robert [illegible] 525 W 49 St Miami Beach, FL 33140	Purpose of Disbursement: TRAVEL - D.C. Disbursement for: [ ] Primary [ ] General [✓] Other (specify): 99 PRE [illegible]	Date (month, day, year): 2/4-6/99	Amount of Each Disbursement This Period: $450.00
C. Full Name, Mailing Address and ZIP Code: Robert [illegible] 525 W 49 St Miami Beach, FL 33140	Purpose of Disbursement: TRAVEL - D.C. Disbursement for: [ ] Primary [ ] General [✓] Other (specify): 99 PRE [illegible]	Date (month, day, year): 3/27-28/99	Amount of Each Disbursement This Period: $700.00
D. Full Name, Mailing Address and ZIP Code: Bill [illegible] Miami Beach, FL 33139	Purpose of Disbursement: TELEPHONE BILL. Disbursement for: [ ] Primary [ ] General [✓] Other (specify): 99 PRE [illegible]	Date (month, day, year): 4/5/99	Amount of Each Disbursement This Period: $400.00
E. Full Name, Mailing Address and ZIP Code: AD BADGE 18905 [illegible] Miami, FL 33179	Purpose of Disbursement: Buttons. Disbursement for: [ ] Primary [ ] General [✓] Other (specify): 99 PRE [illegible]	Date (month, day, year): 1/8/99	Amount of Each Disbursement This Period: $600.00
F. Full Name, Mailing Address and ZIP Code: AD BADGE 18905 [illegible] Miami, FL 33179	Purpose of Disbursement: Buttons. Disbursement for: [ ] Primary [ ] General [✓] Other (specify): 99 PRE [illegible]	Date (month, day, year): 3/15/99	Amount of Each Disbursement This Period: $300.00
G. Full Name, Mailing Address and ZIP Code: AD BADGE 18905 [illegible] Miami, FL 33179	Purpose of Disbursement: Buttons. Disbursement for: [ ] Primary [ ] General [✓] Other (specify): 99 PRE [illegible]	Date (month, day, year): 5/5/99	Amount of Each Disbursement This Period: $200.00
H. Full Name, Mailing Address and ZIP Code: Richard [illegible] 20 W [illegible] St Miami, FL 33[illegible]	Purpose of Disbursement: Repayment of Loan. Disbursement for: [ ] Primary [ ] General [✓] Other (specify): 99 PRE [illegible]	Date (month, day, year): 2/8/99	Amount of Each Disbursement This Period: $500.00
I. Full Name, Mailing Address and ZIP Code: Richard [illegible] 20 W [illegible] St Miami, FL 33139	Purpose of Disbursement: Repayment of Loan. Disbursement for: [ ] Primary [ ] General [✓] Other (specify): 99 PRE [illegible]	Date (month, day, year): 3/15/99	Amount of Each Disbursement This Period: $200.00

SUBTOTAL of Disbursements This Page (optional): $3750.00

TOTAL This Period (last page this line number only):

SCHEDULE B ITEMIZED DISBURSEMENTS

Use any available or necessary for each category of the Detailed Summary Page

PAGE 2 OF 2

FOR LINE NUMBER 4R1

Any information copied from such Reports and Statements may not be used or used by any person for the purpose of soliciting contributions or for commercial purposes, other than next. The name and address of any political committee to which any information from such committee.

NAME OF COMMITTEE (in Full) OPA MAJORITY

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
[illegible] 930 [illegible] Blvd. [illegible]	TRAVEL Disbursement for: [ ] Primary [ ] General [ ] Other (specify) [illegible]	2/9/99	$568.00
B. Full Name, Mailing Address and ZIP Code [illegible] 165 [illegible] [illegible]	Purpose of Disbursement [illegible] STICKERS Disbursement for: [ ] Primary [ ] General [ ] Other (specify) [illegible]	1/18/99	$162.00
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (Schedule)	$1330.00
TOTAL This Period (last page for this number only)	$5080.00

FEC/MAR/04

Federal Election Commission

ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS

The Commission has added this page to the end of this filing to indicate how it was received.

☐	Hand Delivered	Date of Receipt
☑	First Class Mail	POSTMARKED
☐	Registered/Certified Mail	POSTMARKED
☑	No Postmark	
☐	Postmark Illegible	
☐	Received from the House office of Records and Registration	Date of Receipt
☐	Received from the Senate Office of Public Records	Date of Receipt
☐	Other (Specify):	Postmarked _____ and/or Date of Receipt
☐	Electronic Filing	

SEI

PREPARER DATE PREPARED

(4/98)