



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

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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.

**Mr. Charles Thies**

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TYPE OR PRINT FULL NAME OF TREASURER

**ELECTRONICALLY CERTIFIED**

04/01/2021

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SIGNATURE OF TREASURER

DATE

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(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.

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TYPE OR PRINT FULL NAME OF TREASURER

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SIGNATURE OF TREASURER

DATE

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(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.

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TYPE OR PRINT FULL NAME OF TREASURER

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SIGNATURE OF TREASURER

DATE

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NOTARY PUBLIC

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**DETAILED SUMMARY PAGE  
OF RECEIPTS AND EXPENDITURES  
OCF Form 16, Page 2**

1. Full Name of Committee (Name of Candidate, if Candidate is reporting) Vince Gray 2020	REPORT COVERING THE PERIOD FROM: <b>3/11/2020</b> TO: <b>6/10/2020</b>	
<b>I. RECEIPTS</b>	COLUMN A TOTAL THIS PERIOD	COLUMN B CUMULATIVE TO-DATE CUMULATIVE YEAR-TO-DATE
<b>11. CONTRIBUTIONS (OTHER THAN LOANS) FROM:</b>		
(a) Individuals/Organizations Other Than Political Committees (Schedule A)	\$ 8,685.00	\$ 195,334.05 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)	\$ 2,700.00	\$ 6,795.95 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) Total Contributions (Other than Loans) [add lines 11(a), (b), (c), (d), (e) and (f)]	\$ 11,385.00	\$ 202,130.00 11(g)
<b>12. SALES AND COLLECTIONS (Schedule C)</b>	\$ 0.00	\$ 0.00 12
<b>13. LOANS</b>		
(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)
<b>14. OTHER RECEIPTS (Dividends, Interest, etc.) (Schedule A-5)</b>	\$ 0.00	\$ 0.00 14
<b>15. OFFSETS TO OPERATING EXPENDITURES (Schedule A-6)</b>	\$ 156.47	\$ 156.47 15
<b>16. TOTAL RECEIPTS [add Lines 11(g), 12, 13(c), 14 and 15]</b>	\$ 11,541.47	\$ 202,286.47 16
<b>II. EXPENDITURES</b>		
<b>17. OPERATING EXPENDITURES (Schedule B)</b>	\$ 21,878.67	\$ 165,612.26 17
<b>18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES (Schedule B-1)</b>	\$ 0.00	\$ 0.00 18
<b>19. LOAN REPAYMENTS:</b>		
(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)
<b>20. REFUNDS OF CONTRIBUTIONS TO:</b>		
(a) Individuals/Organizations Other Than Political Committees (Schedule B-2)	\$ 100.00	\$ 1,750.00 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)]	\$ 100.00	\$ 1,750.00 20(d)
<b>21. OTHER EXPENDITURES</b>		
(a) Independent Expenditures (Schedule B-5)	\$ 0.00	\$ 0.00 21(a)
(b) Offsets to Receipts (Schedule B-6)	\$ 0.00	\$ 1,560.00 21(b)
(c) Total Other Expenditures [add Lines 21(a), and 21(b)]	\$ 0.00	\$ 1,560.00 21(c)
<b>22. TOTAL EXPENDITURES [add Lines 17, 18, 19(c), 20(d), and 21(c)]</b>	\$ 21,978.67	\$ 168,922.26 22
<b>III. CASH SUMMARY</b>		
<b>23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD</b>		43,801.41
<b>24. TOTAL RECEIPTS THIS PERIOD (from Line 16)</b>		11,541.47
<b>25. SUBTOTAL (add Lines 23 and 24)</b>		55,342.88
<b>26. TOTAL EXPENDITURES THIS PERIOD (from Line 22)</b>		21,978.67
<b>27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)</b>		33,364.21

## 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)

Vince Gray 2020

1. Full Name, Mailing Address and Zip Code <b>Toni Collins</b> 4212 GRant St NE, Washington, DC 20019	<b>Contribution Type</b> <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) <b>05/26/2020</b>	Amount of Each Receipt This Period <b>\$ 25.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> Associate Director Name and Address of Employer <b>Wunerman Thompson</b>		
Aggregate Year-To-date			<b>\$ 25.00</b>
2. Full Name, Mailing Address and Zip Code <b>Kwame Brown</b> 1708 Good Hope Rd SE, Washington, DC 20020	<b>Contribution Type</b> <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) <b>05/26/2020</b>	Amount of Each Receipt This Period <b>\$ 100.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> Rep. Name and Address of Employer <b>Anacosta Rentals LS, LLC</b>		
Aggregate Year-To-date			<b>\$ 100.00</b>
3. Full Name, Mailing Address and Zip Code <b>Johnny Allem</b> 3615 Jenifer St NW, Washington, DC 20015	<b>Contribution Type</b> <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) <b>05/26/2020</b>	Amount of Each Receipt This Period <b>\$ 100.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> President Name and Address of Employer <b>Aquila Recovery Clinic</b>		
Aggregate Year-To-date			<b>\$ 100.00</b>
4. Full Name, Mailing Address and Zip Code <b>Luna Harrison</b> 336 35th St NE, Washington, DC 20019	<b>Contribution Type</b> <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) <b>05/26/2020</b>	Amount of Each Receipt This Period <b>\$ 50.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> Rec. Specialist Name and Address of Employer <b>DPR</b>		
Aggregate Year-To-date			<b>\$ 50.00</b>
5. Full Name, Mailing Address and Zip Code <b>Hector Rodriguez</b> 1868 Columbia Rd NW Apt 705, Washington, DC 20009	<b>Contribution Type</b> <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) <b>05/26/2020</b>	Amount of Each Receipt This Period <b>\$ 100.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> Program analyst Name and Address of Employer <b>DC Council</b>		
Aggregate Year-To-date			<b>\$ 100.00</b>

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

Vince Gray 2020

6. Full Name, Mailing Address and Zip Code <b>Howard Gassaway Sr.</b> 2806 32nd St SE, Washington, DC 20020	<b>Contribution Type</b> <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) <b>05/26/2020</b>	Amount of Each Receipt This Period <b>\$ 100.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> Retired Name and Address of Employer <b>Retired</b>		
Aggregate Year-To-date			<b>\$ 600.00</b>
7. Full Name, Mailing Address and Zip Code <b>Takoma Wellness Center, Inc.</b> 6925 Blair Rd NW Ste 418, Washington, DC 20012	<b>Contribution Type</b> <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) <b>05/27/2020</b>	Amount of Each Receipt This Period <b>\$ 500.00</b>
<b>Contributor Type</b> Business  <b>Business Type</b> Corporation	<b>Occupation</b> Name and Address of Employer		
Aggregate Year-To-date			<b>\$ 500.00</b>
8. Full Name, Mailing Address and Zip Code <b>Carolyn Nicholas</b> 6101 16th St NW Apt 514, Washington, DC 20011	<b>Contribution Type</b> <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) <b>05/27/2020</b>	Amount of Each Receipt This Period <b>\$ 50.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> Realtor Name and Address of Employer <b>Long &amp; Foster</b>		
Aggregate Year-To-date			<b>\$ 300.00</b>
9. Full Name, Mailing Address and Zip Code <b>Stacy Bang</b> PO Box 71066, Bethesda, MD 20813	<b>Contribution Type</b> <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) <b>05/29/2020</b>	Amount of Each Receipt This Period <b>\$ 500.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> Ophthalmology Name and Address of Employer <b>WDCMOS</b>		
Aggregate Year-To-date			<b>\$ 500.00</b>
10. Full Name, Mailing Address and Zip Code <b>Charlotte Douglass</b> 3507 East West Hwy, Chevy Chase, MD 20815	<b>Contribution Type</b> <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) <b>05/29/2020</b>	Amount of Each Receipt This Period <b>\$ 50.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> Not employed Name and Address of Employer N/A		
Aggregate Year-To-date			<b>\$ 50.00</b>

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

Vince Gray 2020

11. Full Name, Mailing Address and Zip Code <b>Sreethran Kupusamy</b> 8763 Weathered Stone Way, Laurel, MD 20723	<b>Contribution Type</b> <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) <b>05/30/2020</b>	Amount of Each Receipt This Period <b>\$ 200.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> <b>Solution Architect</b> Name and Address of Employer <b>Information Technology Svcs.</b>		
Aggregate Year-To-date		<b>\$ 200.00</b>	
12. Full Name, Mailing Address and Zip Code <b>Fessha Mollalign</b> 4009 Wintersweet Ct, Rockville, MD 20853	<b>Contribution Type</b> <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) <b>05/30/2020</b>	Amount of Each Receipt This Period <b>\$ 500.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> <b>Principal</b> Name and Address of Employer <b>Berhan Home Healthcare Agency</b>		
Aggregate Year-To-date		<b>\$ 500.00</b>	
13. Full Name, Mailing Address and Zip Code <b>Naomi Mandishona</b> 4308 Arbor Wood Ct, Burtonsville, MD 20866	<b>Contribution Type</b> <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) <b>05/30/2020</b>	Amount of Each Receipt This Period <b>\$ 500.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> <b>Nurse</b> Name and Address of Employer <b>Self</b>		
Aggregate Year-To-date		<b>\$ 500.00</b>	
14. Full Name, Mailing Address and Zip Code <b>Lifeline, Inc</b> 1615 Kenilworth Ave NE, Washington, DC 20019	<b>Contribution Type</b> <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) <b>05/30/2020</b>	Amount of Each Receipt This Period <b>\$ 500.00</b>
<b>Contributor Type</b> Business  <b>Business Type</b> Corporation	<b>Occupation</b> Name and Address of Employer		
Aggregate Year-To-date		<b>\$ 500.00</b>	
15. Full Name, Mailing Address and Zip Code <b>District Healthcare Services, LLC</b> 2811 Pennsylvania Ave SE Ste LL, Washington, DC 20020	<b>Contribution Type</b> <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) <b>05/30/2020</b>	Amount of Each Receipt This Period <b>\$ 500.00</b>
<b>Contributor Type</b> Business  <b>Business Type</b> Corporation	<b>Occupation</b> Name and Address of Employer		
Aggregate Year-To-date		<b>\$ 500.00</b>	

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

Vince Gray 2020

16. Full Name, Mailing Address and Zip Code <b>Laura Richards</b> 3524 Carpenter St SE, Washington, DC 20020	<b>Contribution Type</b> <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) <b>05/30/2020</b>	Amount of Each Receipt This Period <b>\$ 100.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> Not employed Name and Address of Employer N/A		
Aggregate Year-To-date			<b>\$ 100.00</b>
17. Full Name, Mailing Address and Zip Code <b>Renee Bovelie</b> 8201 16th St Apt 1005, Silver Spring, MD 20910	<b>Contribution Type</b> <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) <b>05/30/2020</b>	Amount of Each Receipt This Period <b>\$ 500.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> Ophthalmologist Name and Address of Employer Self		
Aggregate Year-To-date			<b>\$ 500.00</b>
18. Full Name, Mailing Address and Zip Code <b>Cheryle Adams</b> 614 H St SW Apt 308, Washington, DC 20024	<b>Contribution Type</b> <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) <b>05/30/2020</b>	Amount of Each Receipt This Period <b>\$ 25.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> OCME Name and Address of Employer Government		
Aggregate Year-To-date			<b>\$ 25.00</b>
19. Full Name, Mailing Address and Zip Code <b>Leland Burton</b> 2422 Alabama Ave SE, Washington, DC 20020	<b>Contribution Type</b> <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) <b>05/30/2020</b>	Amount of Each Receipt This Period <b>\$ 10.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> Not employed Name and Address of Employer N/A		
Aggregate Year-To-date			<b>\$ 10.00</b>
20. Full Name, Mailing Address and Zip Code <b>Pearl Butcher</b> 4209 Hildreth St SE, Washington, DC 20019	<b>Contribution Type</b> <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) <b>05/31/2020</b>	Amount of Each Receipt This Period <b>\$ 25.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> Not employed Name and Address of Employer N/A		
Aggregate Year-To-date			<b>\$ 25.00</b>

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

Vince Gray 2020

21. Full Name, Mailing Address and Zip Code <b>Kenneth Schor</b> 13001 N Commons Way, Potomac, MD 20854	<b>Contribution Type</b> <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) <b>05/31/2020</b>	Amount of Each Receipt This Period <b>\$ 50.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> Physician Name and Address of Employer <b>Eye Doctors of Washington</b>		
Aggregate Year-To-date			<b>\$ 50.00</b>
22. Full Name, Mailing Address and Zip Code <b>Ijeoma Arungwa</b> 7600 Georgia Ave NW Ste 323, Washington, DC 20012	<b>Contribution Type</b> <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) <b>06/01/2020</b>	Amount of Each Receipt This Period <b>\$ 500.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> Administrator Name and Address of Employer <b>Premier Health Services</b>		
Aggregate Year-To-date			<b>\$ 500.00</b>
23. Full Name, Mailing Address and Zip Code <b>Katalin Peter</b> 180 High Park Ln Apt 809, Silver Spring, MD 20910	<b>Contribution Type</b> <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) <b>06/01/2020</b>	Amount of Each Receipt This Period <b>\$ 100.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> Attorney Name and Address of Employer <b>GCA Assoc. of Realtors</b>		
Aggregate Year-To-date			<b>\$ 100.00</b>
24. Full Name, Mailing Address and Zip Code <b>Donna Cooper</b> 215 I St NE Apt 410, Washington, DC 20002	<b>Contribution Type</b> <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) <b>06/01/2020</b>	Amount of Each Receipt This Period <b>\$ 500.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> Region President Name and Address of Employer <b>PEPCO</b>		
Aggregate Year-To-date			<b>\$ 500.00</b>
25. Full Name, Mailing Address and Zip Code <b>Virgil McDonald</b> 2548 36th St SE, Washington, DC 20020	<b>Contribution Type</b> <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) <b>06/02/2020</b>	Amount of Each Receipt This Period <b>\$ 50.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> n/a Name and Address of Employer <b>Not employed</b>		
Aggregate Year-To-date			<b>\$ 175.00</b>

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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

Vince Gray 2020

26. Full Name, Mailing Address and Zip Code <b>Maria Nnaji</b> 3048 University Ter NW, Washington, DC 20016	<b>Contribution Type</b> <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) <b>06/02/2020</b>	Amount of Each Receipt This Period <b>\$ 50.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> Administrative Asst. Name and Address of Employer <b>KBC Nursing Agency</b>		
Aggregate Year-To-date			<b>\$ 50.00</b>
27. Full Name, Mailing Address and Zip Code <b>Kenneth Osuji</b> 2512 24th St NE, Washington, DC 20018	<b>Contribution Type</b> <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) <b>06/02/2020</b>	Amount of Each Receipt This Period <b>\$ 500.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> Not employed Name and Address of Employer N/A		
Aggregate Year-To-date			<b>\$ 500.00</b>
28. Full Name, Mailing Address and Zip Code <b>Ed Rogers</b> 4233 Benning Rd NE, Washington, DC 20019	<b>Contribution Type</b> <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) <b>06/02/2020</b>	Amount of Each Receipt This Period <b>\$ 250.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> Not employed Name and Address of Employer N/A		
Aggregate Year-To-date			<b>\$ 250.00</b>
29. Full Name, Mailing Address and Zip Code <b>Sally Levie</b> 2809 University Ter NW, Washington, DC 20016	<b>Contribution Type</b> <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) <b>06/03/2020</b>	Amount of Each Receipt This Period <b>\$ 200.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> Artist Name and Address of Employer <b>Self</b>		
Aggregate Year-To-date			<b>\$ 200.00</b>
30. Full Name, Mailing Address and Zip Code <b>William Patterson</b> 8708 Kittama Dr, Clinton, MD 20735	<b>Contribution Type</b> <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) <b>06/03/2020</b>	Amount of Each Receipt This Period <b>\$ 500.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> CEO Name and Address of Employer <b>Universal Healthcare Management Services</b>		
Aggregate Year-To-date			<b>\$ 500.00</b>

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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

Vince Gray 2020

31. Full Name, Mailing Address and Zip Code <b>Tawanda Makubika</b> 4308 Arbor Wood Ct, Burtonsville, MD 20866	<b>Contribution Type</b> <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) <b>06/03/2020</b>	Amount of Each Receipt This Period <b>\$ 500.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> Executive Name and Address of Employer <b>Direct Care Home Health Services</b>		
Aggregate Year-To-date			<b>\$ 500.00</b>
32. Full Name, Mailing Address and Zip Code <b>One Call Concepts, Inc.</b> 7223 Parkway Dr Ste 210, Hanover, MD 21076	<b>Contribution Type</b> <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) <b>06/03/2020</b>	Amount of Each Receipt This Period <b>\$ 500.00</b>
<b>Contributor Type</b> Business  <b>Business Type</b> Corporation	<b>Occupation</b> Name and Address of Employer		
Aggregate Year-To-date			<b>\$ 500.00</b>
33. Full Name, Mailing Address and Zip Code <b>Gilbert Douglass</b> 3025 Ontario Rd NW Apt 104, Washington, DC 20009	<b>Contribution Type</b> <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) <b>06/03/2020</b>	Amount of Each Receipt This Period <b>\$ 50.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> Attorney Name and Address of Employer <b>Self</b>		
Aggregate Year-To-date			<b>\$ 50.00</b>
34. Full Name, Mailing Address and Zip Code <b>HGE Consulting, LLC</b> 10132 Brookmoor Dr, Silver Spring, MD 20901	<b>Contribution Type</b> <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) <b>06/03/2020</b>	Amount of Each Receipt This Period <b>\$ 500.00</b>
<b>Contributor Type</b> Business  <b>Business Type</b> Corporation	<b>Occupation</b> Name and Address of Employer		
Aggregate Year-To-date			<b>\$ 500.00</b>
<b>TOTAL This Period (Aggregate of all Receipt pages)</b>			<b>\$ 8,685.00</b>

## ITEMIZED RECEIPTS FROM COMMITTEES OTHER THAN POLITICAL COMMITTEES AUTHORIZED BY THE SAME CANDIDATE

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)

Vince Gray 2020

1. Full Name, Mailing Address and Zip Code <b>Organic Wellness, LLC</b> 1900 W Park Dr Ste 280, Westborough, MA 01581	<b>Contribution Type</b> <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) <b>05/27/2020</b>	Amount of Each Receipt This Period <b>\$ 500.00</b>
<b>Contributor Type</b> Corporate Sponsored PAC			
Aggregate Year-To-date			<b>\$ 500.00</b>
2. Full Name, Mailing Address and Zip Code <b>SEIU MD/DC State Council DC PAC</b> 15 School St Fl 2, Annapolis, MD 21401	<b>Contribution Type</b> <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) <b>05/29/2020</b>	Amount of Each Receipt This Period <b>\$ 500.00</b>
<b>Contributor Type</b> Labor Sponsored PAC			
Aggregate Year-To-date			<b>\$ 500.00</b>
3. Full Name, Mailing Address and Zip Code <b>Premium Select Home Care Inc.</b> 5513 Illinois Ave NW, Washington, DC 20011	<b>Contribution Type</b> <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) <b>05/30/2020</b>	Amount of Each Receipt This Period <b>\$ 200.00</b>
<b>Contributor Type</b> Corporate Sponsored PAC			
Aggregate Year-To-date			<b>\$ 200.00</b>
4. Full Name, Mailing Address and Zip Code <b>DC EYE MD PAC</b> 191 Duke of Gloucester St, Annapolis, MD 21401	<b>Contribution Type</b> <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) <b>06/03/2020</b>	Amount of Each Receipt This Period <b>\$ 500.00</b>
<b>Contributor Type</b> Corporate Sponsored PAC			
Aggregate Year-To-date			<b>\$ 500.00</b>
5. Full Name, Mailing Address and Zip Code <b>Washington DC Realtors PAC</b> 1615 New Hampshire Ave NW Ste C4, Washington, DC 20009	<b>Contribution Type</b> <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) <b>06/03/2020</b>	Amount of Each Receipt This Period <b>\$ 500.00</b>
<b>Contributor Type</b> Corporate Sponsored PAC			
Aggregate Year-To-date			<b>\$ 500.00</b>
6. Full Name, Mailing Address and Zip Code <b>IUPAT PAC</b> 7234 Parkway Dr, Hanover, MD 21076	<b>Contribution Type</b> <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) <b>06/06/2020</b>	Amount of Each Receipt This Period <b>\$ 500.00</b>
<b>Contributor Type</b> Labor Sponsored PAC			
Aggregate Year-To-date			<b>\$ 500.00</b>

**TOTAL This Period (Aggregate of all Receipt pages)**

**\$ 2,700.00**

OFFSETS TO OPERATING EXPENDITURES (REFUNDS, REBATES, ETC.)

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

Vince Gray 2020

1. Full Name, Mailing Address and Zip Code	Receipt Type	Date (month, day, year)	Amount of Each Offset This Period
NationBuilder PO Box 811428, Los Angeles, CA 90081		06/09/2020	\$ 156.47
	Aggregate Year-To-date		\$ 156.47

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TOTAL This Period (Aggregate of all Receipt pages)

\$ 156.47

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

Vince Gray 2020

1. Full Name, Mailing Address and Zip Code <b>Facebook, Inc.</b> <b>1 Hacker Way, Menlo Park, CA 94025</b>	Purpose of Expenditure <b>Advertising</b>	Date (month, day, year) <b>05/26/2020</b>	Amount of Each Expenditure This Period  <b>\$ 500.00</b>
<b>Occupation</b>	Name and Address of Employer		
2. Full Name, Mailing Address and Zip Code <b>Facebook, Inc.</b> <b>1 Hacker Way, Menlo Park, CA 94025</b>	Purpose of Expenditure <b>Advertising</b>	Date (month, day, year) <b>05/27/2020</b>	Amount of Each Expenditure This Period  <b>\$ 500.00</b>
<b>Occupation</b>	Name and Address of Employer		
3. Full Name, Mailing Address and Zip Code <b>CoverWallet, Inc.</b> <b>100 Avenue of the Americas, New York, NY 10013</b>	Purpose of Expenditure <b>Rental</b>	Date (month, day, year) <b>05/28/2020</b>	Amount of Each Expenditure This Period  <b>\$ 119.13</b>
<b>Occupation</b>	Name and Address of Employer		
4. Full Name, Mailing Address and Zip Code <b>CoverWallet, Inc.</b> <b>100 Avenue of the Americas, New York, NY 10013</b>	Purpose of Expenditure <b>Rental</b>	Date (month, day, year) <b>05/28/2020</b>	Amount of Each Expenditure This Period  <b>\$ 138.35</b>
<b>Occupation</b>	Name and Address of Employer		
5. Full Name, Mailing Address and Zip Code <b>Costco</b> <b>2441 Market St NE, Washington, DC 20018</b>	Purpose of Expenditure <b>Supplies</b>	Date (month, day, year) <b>05/28/2020</b>	Amount of Each Expenditure This Period  <b>\$ 20.60</b>
<b>Occupation</b>	Name and Address of Employer		
6. Full Name, Mailing Address and Zip Code <b>Costco</b> <b>2441 Market St NE, Washington, DC 20018</b>	Purpose of Expenditure <b>Supplies</b>	Date (month, day, year) <b>05/28/2020</b>	Amount of Each Expenditure This Period  <b>\$ 60.06</b>
<b>Occupation</b>	Name and Address of Employer		
7. Full Name, Mailing Address and Zip Code <b>McDonald's</b> <b>3901 Minnesota Ave NE, Washington, DC 20019</b>	Purpose of Expenditure <b>Catering/Refreshments</b>	Date (month, day, year) <b>05/29/2020</b>	Amount of Each Expenditure This Period  <b>\$ 6.81</b>
<b>Occupation</b>	Name and Address of Employer		

8. Full Name, Mailing Address and Zip Code <b>Amazon.com, Inc.</b> <b>410 Terry Ave, Seattle, WA 98109</b>	Purpose of Expenditure <b>Supplies</b>	Date (month, day, year) <b>05/29/2020</b>	Amount of Each Expenditure This Period <b>\$ 58.16</b>
<b>Occupation</b>	Name and Address of Employer		
9. Full Name, Mailing Address and Zip Code <b>Facebook, Inc.</b> <b>1 Hacker Way, Menlo Park, CA 94025</b>	Purpose of Expenditure <b>Advertising</b>	Date (month, day, year) <b>05/29/2020</b>	Amount of Each Expenditure This Period <b>\$ 500.00</b>
<b>Occupation</b>	Name and Address of Employer		
10. Full Name, Mailing Address and Zip Code <b>The Contact Group</b> <b>4490A Ocean View Ave, Virginia Beach, VA 23455</b>	Purpose of Expenditure <b>Polling/Mailing List</b>	Date (month, day, year) <b>05/29/2020</b>	Amount of Each Expenditure This Period <b>\$ 1,810.63</b>
<b>Occupation</b>	Name and Address of Employer		
11. Full Name, Mailing Address and Zip Code <b>Jovan Davis</b> <b>49 Galveston St SW Apt 102,</b> <b>Washington, DC 20032</b>	Purpose of Expenditure <b>Supplies</b>	Date (month, day, year) <b>05/29/2020</b>	Amount of Each Expenditure This Period <b>\$ 750.00</b>
<b>Occupation</b>	Name and Address of Employer		
12. Full Name, Mailing Address and Zip Code <b>ActBlue</b> <b>PO Box 441146, Somerville, MA</b> <b>02144-0031</b>	Purpose of Expenditure <b>Bank Fees</b>	Date (month, day, year) <b>05/31/2020</b>	Amount of Each Expenditure This Period <b>\$ 117.94</b>
<b>Occupation</b>	Name and Address of Employer		
13. Full Name, Mailing Address and Zip Code <b>NationBuilder</b> <b>PO Box 811428, Los Angeles, CA</b> <b>90081</b>	Purpose of Expenditure <b>Computer and Web Expenses</b>	Date (month, day, year) <b>06/01/2020</b>	Amount of Each Expenditure This Period <b>\$ 156.47</b>
<b>Occupation</b>	Name and Address of Employer		
14. Full Name, Mailing Address and Zip Code <b>Facebook, Inc.</b> <b>1 Hacker Way, Menlo Park, CA 94025</b>	Purpose of Expenditure <b>Advertising</b>	Date (month, day, year) <b>06/01/2020</b>	Amount of Each Expenditure This Period <b>\$ 500.00</b>
<b>Occupation</b>	Name and Address of Employer		
15. Full Name, Mailing Address and Zip Code <b>Facebook, Inc.</b> <b>1 Hacker Way, Menlo Park, CA 94025</b>	Purpose of Expenditure <b>Advertising</b>	Date (month, day, year) <b>06/01/2020</b>	Amount of Each Expenditure This Period <b>\$ 500.00</b>
<b>Occupation</b>	Name and Address of Employer		

16. Full Name, Mailing Address and Zip Code <b>Lowe's</b> <b>2438 Market Street NE, Washington,</b> <b>DC 20018</b>	Purpose of Expenditure <b>Supplies</b>	Date (month, day, year) <b>06/01/2020</b>	Amount of Each Expenditure This Period <b>\$ 16.92</b>
<b>Occupation</b>	Name and Address of Employer		
17. Full Name, Mailing Address and Zip Code <b>Costco</b> <b>2441 Market St NE, Washington, DC</b> <b>20018</b>	Purpose of Expenditure <b>Supplies</b>	Date (month, day, year) <b>06/01/2020</b>	Amount of Each Expenditure This Period <b>\$ 17.22</b>
<b>Occupation</b>	Name and Address of Employer		
18. Full Name, Mailing Address and Zip Code <b>Costco</b> <b>2441 Market St NE, Washington, DC</b> <b>20018</b>	Purpose of Expenditure <b>Supplies</b>	Date (month, day, year) <b>06/01/2020</b>	Amount of Each Expenditure This Period <b>\$ 50.03</b>
<b>Occupation</b>	Name and Address of Employer		
19. Full Name, Mailing Address and Zip Code <b>Peter Brooks</b> <b>3513 Sequoia Ave, Baltimore, MD</b> <b>21215</b>	Purpose of Expenditure <b>Salary/Stipend</b>	Date (month, day, year) <b>06/01/2020</b>	Amount of Each Expenditure This Period <b>\$ 500.00</b>
<b>Occupation</b>	Name and Address of Employer		
20. Full Name, Mailing Address and Zip Code <b>Eclectic Cafe</b> <b>4058 Minnesota Ave NE, Washington,</b> <b>DC 20019</b>	Purpose of Expenditure <b>Catering/Refreshments</b>	Date (month, day, year) <b>06/01/2020</b>	Amount of Each Expenditure This Period <b>\$ 234.28</b>
<b>Occupation</b>	Name and Address of Employer		
21. Full Name, Mailing Address and Zip Code <b>Latisha Atkins</b> <b>3824 V St SE Apt 102, Washington,</b> <b>DC 20020</b>	Purpose of Expenditure <b>Salary/Stipend</b>	Date (month, day, year) <b>06/01/2020</b>	Amount of Each Expenditure This Period <b>\$ 3,000.00</b>
<b>Occupation</b>	Name and Address of Employer		
22. Full Name, Mailing Address and Zip Code <b>Keyshawn Hunter</b> <b>920 Eastern Ave NE, Washington, DC</b> <b>20019</b>	Purpose of Expenditure <b>Supplies</b>	Date (month, day, year) <b>06/01/2020</b>	Amount of Each Expenditure This Period <b>\$ 250.00</b>
<b>Occupation</b>	Name and Address of Employer		
23. Full Name, Mailing Address and Zip Code <b>Facebook, Inc.</b> <b>1 Hacker Way, Menlo Park, CA 94025</b>	Purpose of Expenditure <b>Advertising</b>	Date (month, day, year) <b>06/02/2020</b>	Amount of Each Expenditure This Period <b>\$ 500.00</b>
<b>Occupation</b>	Name and Address of Employer		

24. Full Name, Mailing Address and Zip Code <b>7-Eleven</b> <b>2310 Varnum St, Mt Rainier, MD</b> <b>20712</b>	Purpose of Expenditure <b>Catering/Refreshments</b>	Date (month, day, year) <b>06/02/2020</b>	Amount of Each Expenditure This Period  <b>\$ 9.62</b>
<b>Occupation</b>	Name and Address of Employer		
25. Full Name, Mailing Address and Zip Code <b>ActBlue</b> <b>PO Box 441146, Somerville, MA</b> <b>02144-0031</b>	Purpose of Expenditure <b>Bank Fees</b>	Date (month, day, year) <b>06/02/2020</b>	Amount of Each Expenditure This Period  <b>\$ 77.04</b>
<b>Occupation</b>	Name and Address of Employer		
26. Full Name, Mailing Address and Zip Code <b>Facebook, Inc.</b> <b>1 Hacker Way, Menlo Park, CA 94025</b>	Purpose of Expenditure <b>Advertising</b>	Date (month, day, year) <b>06/03/2020</b>	Amount of Each Expenditure This Period  <b>\$ 500.00</b>
<b>Occupation</b>	Name and Address of Employer		
27. Full Name, Mailing Address and Zip Code <b>Eclectic Cafe</b> <b>4058 Minnesota Ave NE, Washington,</b> <b>DC 20019</b>	Purpose of Expenditure <b>Catering/Refreshments</b>	Date (month, day, year) <b>06/03/2020</b>	Amount of Each Expenditure This Period  <b>\$ 176.69</b>
<b>Occupation</b>	Name and Address of Employer		
28. Full Name, Mailing Address and Zip Code <b>Eclectic Cafe</b> <b>4058 Minnesota Ave NE, Washington,</b> <b>DC 20019</b>	Purpose of Expenditure <b>Catering/Refreshments</b>	Date (month, day, year) <b>06/03/2020</b>	Amount of Each Expenditure This Period  <b>\$ 219.99</b>
<b>Occupation</b>	Name and Address of Employer		
29. Full Name, Mailing Address and Zip Code <b>Kenneth Bryant</b> <b>4233 Blaine St NE Apt 204,</b> <b>Washington, DC 20019</b>	Purpose of Expenditure <b>Salary/Stipend</b>	Date (month, day, year) <b>06/03/2020</b>	Amount of Each Expenditure This Period  <b>\$ 120.00</b>
<b>Occupation</b>	Name and Address of Employer		
30. Full Name, Mailing Address and Zip Code <b>William Johnson</b> <b>4276 East Capitol Street NE,</b> <b>Washington, DC 20019</b>	Purpose of Expenditure <b>Salary/Stipend</b>	Date (month, day, year) <b>06/03/2020</b>	Amount of Each Expenditure This Period  <b>\$ 360.00</b>
<b>Occupation</b>	Name and Address of Employer		
31. Full Name, Mailing Address and Zip Code <b>Deborah Johnson</b> <b>8238 Canning Terrace, Greenbelt, MD</b> <b>20770</b>	Purpose of Expenditure <b>Salary/Stipend</b>	Date (month, day, year) <b>06/03/2020</b>	Amount of Each Expenditure This Period  <b>\$ 60.00</b>
<b>Occupation</b>	Name and Address of Employer		

32. Full Name, Mailing Address and Zip Code <b>Saul Lewis Sr.</b> 422 37th Place, Washington, DC 20019	Purpose of Expenditure <b>Salary/Stipend</b>	Date (month, day, year) <b>06/03/2020</b>	Amount of Each Expenditure This Period <b>\$ 210.00</b>
<b>Occupation</b>	Name and Address of Employer		
33. Full Name, Mailing Address and Zip Code <b>Kim Blassingame</b> 4011 E St SE, Washington, DC 20019	Purpose of Expenditure <b>Salary/Stipend</b>	Date (month, day, year) <b>06/03/2020</b>	Amount of Each Expenditure This Period <b>\$ 180.00</b>
<b>Occupation</b>	Name and Address of Employer		
34. Full Name, Mailing Address and Zip Code <b>Santos Leon</b> 4268 East Capitol St NE Apt 4, Washington, DC 20019	Purpose of Expenditure <b>Salary/Stipend</b>	Date (month, day, year) <b>06/03/2020</b>	Amount of Each Expenditure This Period <b>\$ 240.00</b>
<b>Occupation</b>	Name and Address of Employer		
35. Full Name, Mailing Address and Zip Code <b>Facebook, Inc.</b> 1 Hacker Way, Menlo Park, CA 94025	Purpose of Expenditure <b>Advertising</b>	Date (month, day, year) <b>06/04/2020</b>	Amount of Each Expenditure This Period <b>\$ 225.45</b>
<b>Occupation</b>	Name and Address of Employer		
36. Full Name, Mailing Address and Zip Code <b>Costco</b> 2441 Market St NE, Washington, DC 20018	Purpose of Expenditure <b>Supplies</b>	Date (month, day, year) <b>06/05/2020</b>	Amount of Each Expenditure This Period <b>\$ 13.13</b>
<b>Occupation</b>	Name and Address of Employer		
37. Full Name, Mailing Address and Zip Code <b>PENN-BAMA, LLC</b> 6820-B Commercial Drive, Springfield, VA 22151	Purpose of Expenditure <b>Rental</b>	Date (month, day, year) <b>06/08/2020</b>	Amount of Each Expenditure This Period <b>\$ 2,506.97</b>
<b>Occupation</b>	Name and Address of Employer		
38. Full Name, Mailing Address and Zip Code <b>Latisha Atkins</b> 3824 V St SE Apt 102, Washington, DC 20020	Purpose of Expenditure <b>Supplies</b>	Date (month, day, year) <b>06/08/2020</b>	Amount of Each Expenditure This Period <b>\$ 173.18</b>
<b>Occupation</b>	Name and Address of Employer		
39. Full Name, Mailing Address and Zip Code <b>Chuck Thies</b> 1609 Buchanan St NE, Washington, DC 20017	Purpose of Expenditure <b>Consultant</b>	Date (month, day, year) <b>06/08/2020</b>	Amount of Each Expenditure This Period <b>\$ 2,500.00</b>
<b>Occupation</b>	Name and Address of Employer		

40. Full Name, Mailing Address and Zip Code <b>Latisha Atkins</b> <b>3824 V St SE Apt 102, Washington,</b> <b>DC 20020</b>	Purpose of Expenditure <b>Salary/Stipend</b>	Date (month, day, year) <b>06/08/2020</b>	Amount of Each Expenditure This Period  <b>\$ 1,500.00</b>
<b>Occupation</b>	Name and Address of Employer		
41. Full Name, Mailing Address and Zip Code <b>BarrComm</b> <b>16175 Golf Club Rd, Weston, FL 33326</b>	Purpose of Expenditure <b>Consultant</b>	Date (month, day, year) <b>06/08/2020</b>	Amount of Each Expenditure This Period  <b>\$ 2,500.00</b>
<b>Occupation</b>	Name and Address of Employer		
<b>TOTAL This Period (Aggregate of all expenditure pages)</b>			<b>\$ 21,878.67</b>

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)

Vince Gray 2020

1. Full Name, Mailing Address and Zip Code	Purpose of Expenditure	Date	Amount of Each Expenditure This Period
<b>Howard Gassaway Sr.</b> 2806 32nd St SE, Washington, DC 20020		(month, day, year)  <b>06/09/2020</b>	<b>\$ 100.00</b>
<b>Contributor Type</b> Individual			

TOTAL This Period (Aggregate of all expenditure pages)

\$ 100.00