



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) Marcus Goodwin For DC 2020	2. OCF Identification Number PCCCCL207143
Address 1407 Webster 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 20011	

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 10/11/2020 through 10/26/2020		
6. (a) Cash on Hand (January 31 Year End Report Only)		\$ 0.00
(b) Cash on Hand at Beginning of Reporting Period	\$ 57,061.99	
(c) Total Receipts [from Line (16)]	\$ 42,465.00	\$ 412,482.39
(d) Subtotal [add Lines 6(b) and 6(c) for Column A]	\$ 99,526.99	
7. Total Expenditures (from Line 22)	\$ 70,882.12	\$ 383,837.52
8. Cash on Hand at Close of Reporting Period [subtract Line 7 from Line 6(d)]	\$ 28,644.87	
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.

Mr. Robert Cunningham III

TYPE OR PRINT FULL NAME OF TREASURER

ELECTRONICALLY CERTIFIED

10/28/2020

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) Marcus Goodwin For DC 2020	REPORT COVERING THE PERIOD FROM: 10/11/2020 TO: 10/26/2020	
I. RECEIPTS	COLUMN A TOTAL THIS PERIOD	COLUMN B CUMULATIVE T0-DATE CUMULATIVE YEAR-TO-DATE
11. CONTRIBUTIONS (OTHER THAN LOANS) FROM:		
(a) Individuals/Organizations Other Than Political Committees (Schedule A)	\$ 42,465.00	\$ 412,482.39 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)	\$ 0.00	\$ 0.00 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)]	\$ 42,465.00	\$ 412,482.39 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	\$ 0.00 15
16. TOTAL RECEIPTS [add Lines 11(g), 12, 13(c), 14 and 15]	\$ 42,465.00	\$ 412,482.39 16
II. EXPENDITURES		
17. OPERATING EXPENDITURES (Schedule B)	\$ 69,232.12	\$ 380,317.52 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)	\$ 1,650.00	\$ 3,520.00 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)]	\$ 1,650.00	\$ 3,520.00 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	\$ 0.00 21(b)
(c) Total Other Expenditures [add Lines 21(a), and 21(b)]	\$ 0.00	\$ 0.00 21(c)
22. TOTAL EXPENDITURES [add Lines 17, 18, 19(c), 20(d), and 21(c)]	\$ 70,882.12	\$ 383,837.52 22
III. CASH SUMMARY		
23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD	\$	57,061.99
24. TOTAL RECEIPTS THIS PERIOD (from Line 16)	\$	42,465.00
25. SUBTOTAL (add Lines 23 and 24)	\$	99,526.99
26. TOTAL EXPENDITURES THIS PERIOD (from Line 22)	\$	70,882.12
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)	\$	28,644.87

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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

Marcus Goodwin For DC 2020

1. Full Name, Mailing Address and Zip Code Anita Bonds 202 Bates St NW, Washington, DC 20001	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) 10/11/2020	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Councilmember Name and Address of Employer DC Government 202 Bates St NW, Washington, DC 20001		
Aggregate Year-To-date		\$ 100.00	
2. Full Name, Mailing Address and Zip Code Diarra McKinney 701 Lamont St NW, Washington, DC 20010	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) 10/11/2020	Amount of Each Receipt This Period \$ 250.00
Contributor Type Individual	Occupation CEO Name and Address of Employer Rosewood Strategies 701 Lamont St NW Apt 56, Washington, DC 20010		
Aggregate Year-To-date		\$ 250.00	
3. Full Name, Mailing Address and Zip Code Sandra Bradford 2413 39th 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) 10/11/2020	Amount of Each Receipt This Period \$ 31.00
Contributor Type Individual	Occupation Not Employed Name and Address of Employer Not Employed 2413 39th St NW, Washington, DC 20007		
Aggregate Year-To-date		\$ 31.00	
4. Full Name, Mailing Address and Zip Code Sandra Tuttle 234 G St NE, Washington, DC 20002	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) 10/11/2020	Amount of Each Receipt This Period \$ 25.00
Contributor Type Individual	Occupation Not Employed Name and Address of Employer Not Employed 234 G St NE, Washington, DC 20002		
Aggregate Year-To-date		\$ 45.00	
5. Full Name, Mailing Address and Zip Code Elisabeth Pendleton 3410 Lowell St NW, Washington, DC 20016-5023	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) 10/11/2020	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Not Employed Name and Address of Employer Not Employed 3410 Lowell St NW, Washington, DC 20016-5023		
Aggregate Year-To-date		\$ 75.00	

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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

Marcus Goodwin For DC 2020

6. Full Name, Mailing Address and Zip Code Robert Carey 5404 Mohican Rd, Bethesda, MD 20816	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) 10/11/2020	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Policy Analyst Name and Address of Employer Self 6100 Bradley Blvd, Bethesda, MD 20817		
Aggregate Year-To-date			\$ 100.00
7. Full Name, Mailing Address and Zip Code edward felton 12138 Central Ave, Mitchellville, MD 20721	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) 10/11/2020	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Broker Name and Address of Employer Felton Home Group 12138 Central Ave # 524, Mitchellville, MD 20721		
Aggregate Year-To-date			\$ 50.00
8. Full Name, Mailing Address and Zip Code DALE KENNEY 2110 O St NW Apt 3, Washington, DC 20037	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) 10/11/2020	Amount of Each Receipt This Period \$ 31.00
Contributor Type Individual	Occupation Not Employed Name and Address of Employer Not Employed 2110 O St NW Apt 3, Washington, DC 20037		
Aggregate Year-To-date			\$ 62.00
9. Full Name, Mailing Address and Zip Code Peter Yochum 1000 New Jersey Ave SE Apt 914, Washington, DC 20003	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) 10/11/2020	Amount of Each Receipt This Period \$ 20.00
Contributor Type Individual	Occupation Consultant Name and Address of Employer Booz Allen Hamilton 1000 New Jersey Ave SE Apt 914, Washington, DC 20003		
Aggregate Year-To-date			\$ 20.00
10. Full Name, Mailing Address and Zip Code DALE KENNEY 2110 O St NW Apt 3, Washington, DC 20037	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) 10/11/2020	Amount of Each Receipt This Period \$ 31.00
Contributor Type Individual	Occupation Not Employed Name and Address of Employer Not Employed 2110 O St NW Apt 3, Washington, DC 20037		

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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

Marcus Goodwin For DC 2020

		Aggregate Year-To-date		\$ 62.00
11. Full Name, Mailing Address and Zip Code Anne Fricker 1104 Panorama Dr, Chattanooga, TN 37421		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) 10/11/2020 Amount of Each Receipt This Period \$ 20.00
Contributor Type Individual		Occupation Probate deputy Name and Address of Employer Hamilton county 1104 Panorama Dr, Chattanooga, TN 37421		
		Aggregate Year-To-date		\$ 20.00
12. Full Name, Mailing Address and Zip Code Catherine Carlstedt 1215 Independence Ave SE, Washington, DC 20003		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) 10/11/2020 Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual		Occupation Director Name and Address of Employer LISC 1825 K St NW Ste 1100, Washington, DC 20006		
		Aggregate Year-To-date		\$ 50.00
13. Full Name, Mailing Address and Zip Code Micah Salb 1331 Locust Rd 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 checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)		Date (month, day, year) 10/11/2020 Amount of Each Receipt This Period \$ 54.00
Contributor Type Individual		Occupation Attorney Name and Address of Employer Lippman Semsler & Salb LLC 7979 Old Georgetown Rd Ste 1100, Bethesda, MD 20814		
		Aggregate Year-To-date		\$ 54.00
14. Full Name, Mailing Address and Zip Code Ken Kelly 1401 Mercantile Ln Ste 501, Largo, MD 20774		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) 10/11/2020 Amount of Each Receipt This Period \$ 1,000.00
Contributor Type Individual		Occupation Not Employed Name and Address of Employer Not Employed 1401 Mercantile Ln Ste 501, Largo, MD 20774		
		Aggregate Year-To-date		\$ 1,000.00

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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

Marcus Goodwin For DC 2020

15. Full Name, Mailing Address and Zip Code Nils Nichols 3903 Albemarle St NW, Washington, DC 20016	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) 10/11/2020	Amount of Each Receipt This Period \$ 250.00
Contributor Type Individual	Occupation Not Employed Name and Address of Employer Not Employed 3903 Albemarle St NW, Washington, DC 20016		
Aggregate Year-To-date			\$ 250.00
16. Full Name, Mailing Address and Zip Code Kelsie Wright 825 10th St NW, Washington, DC 20001	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) 10/11/2020	Amount of Each Receipt This Period \$ 1,000.00
Contributor Type Individual	Occupation GRM & Assoc Name and Address of Employer Owner 825 10th St NW, Washington, DC 20001		
Aggregate Year-To-date			\$ 1,000.00
17. Full Name, Mailing Address and Zip Code Raquel Saltsman 5334 42nd St NW, WASHINGTON, DC 20015	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) 10/11/2020	Amount of Each Receipt This Period \$ 250.00
Contributor Type Individual	Occupation Not Employed Name and Address of Employer Not Employed 5334 42nd St NW, WASHINGTON, DC 20015		
Aggregate Year-To-date			\$ 250.00
18. Full Name, Mailing Address and Zip Code Theodore Lerner 2000 Tower Oaks Blvd Fl 8, Rockville, MD 20852	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) 10/11/2020	Amount of Each Receipt This Period \$ 750.00
Contributor Type Individual	Occupation Founder Name and Address of Employer Lerner Enterprises 2000 Tower Oaks Blvd Fl 8, Rockville, MD 20852		
Aggregate Year-To-date			\$ 750.00
19. Full Name, Mailing Address and Zip Code Robert Tanenbaum 2000 Tower Oaks Blvd Fl 8, Rockville, MD 20852	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) 10/11/2020	Amount of Each Receipt This Period \$ 750.00
Contributor Type Individual	Occupation Principal Name and Address of Employer Lerner Enterprises 2000 Tower Oaks Blvd Fl 8, Rockville, MD 20852		
Aggregate Year-To-date			\$ 750.00

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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

Marcus Goodwin For DC 2020

20. Full Name, Mailing Address and Zip Code Edward Cohen 2000 Tower Oaks Blvd Fl 8, Rockville, MD 20852	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) 10/11/2020	Amount of Each Receipt This Period \$ 750.00
Contributor Type Individual	Occupation Principal Name and Address of Employer Lerner Enterprises 2000 Tower Oaks Blvd Fl 8, Rockville, MD 20852		
Aggregate Year-To-date		\$ 750.00	
21. Full Name, Mailing Address and Zip Code Mark Lerner 2000 Tower Oaks Blvd Fl 8, Rockville, MD 20852	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) 10/11/2020	Amount of Each Receipt This Period \$ 750.00
Contributor Type Individual	Occupation Principal Name and Address of Employer Lerner Enterprises 2000 Tower Oaks Blvd Fl 8, Rockville, MD 20852		
Aggregate Year-To-date		\$ 750.00	
22. Full Name, Mailing Address and Zip Code Thornell Page 2815 Arizona Ter NW, Washington, DC 20016	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) 10/11/2020	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Budget Analyst, Office of Child Support Ent Name and Address of Employer HHS 330 C St SW, Washington, DC 20416		
Aggregate Year-To-date		\$ 200.00	
23. Full Name, Mailing Address and Zip Code James Short 2400 Branch Ave SE, Washington, DC 20020	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) 10/11/2020	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Retired Name and Address of Employer Retired 2400 Branch Ave SE, Washington, DC 20020		
Aggregate Year-To-date		\$ 50.00	
24. Full Name, Mailing Address and Zip Code Washington Metropolitan PAC 1050 17th 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) 10/11/2020	Amount of Each Receipt This Period \$ 1,000.00
Contributor Type Business Business Type Limited Liability Company	Occupation Name and Address of Employer		
Aggregate Year-To-date		\$ 1,000.00	

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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

Marcus Goodwin For DC 2020

25. Full Name, Mailing Address and Zip Code Sullivan & Barros LLP 1166 16th St NW Ste 1000, 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) 10/12/2020	Amount of Each Receipt This Period \$ 500.00
Contributor Type Business Business Type Limited Liability Company	Occupation Name and Address of Employer		
Aggregate Year-To-date			\$ 500.00
26. Full Name, Mailing Address and Zip Code Candace Chazen 15305 Chinaberry St, North Potomac, MD 20878	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) 10/12/2020	Amount of Each Receipt This Period \$ 250.00
Contributor Type Individual	Occupation SVP, Director of Client Relationships Name and Address of Employer Fidelity National Title Insurance Company 1620 L St NW Fl 4, Washington, DC 20036		
Aggregate Year-To-date			\$ 250.00
27. Full Name, Mailing Address and Zip Code SUSAN MITCHELL 4205 Van Ness St NW, Washington, DC 20016-2127	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) 10/12/2020	Amount of Each Receipt This Period \$ 25.00
Contributor Type Individual	Occupation receptionist Name and Address of Employer Iona Senior Services 4125 Albemarle St NW, Washington, DC 20016-2127		
Aggregate Year-To-date			\$ 25.00
28. Full Name, Mailing Address and Zip Code yvonne howerton 3212 Theodore R Hagans Dr NE, Washington, DC 20018	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) 10/12/2020	Amount of Each Receipt This Period \$ 10.00
Contributor Type Individual	Occupation Contract Manager Name and Address of Employer USDA 1400 Independence Ave SW, Washington, DC 20250		
Aggregate Year-To-date			\$ 10.00
29. Full Name, Mailing Address and Zip Code Katherine Davis 1751 Lanier Pl NW, 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) 10/12/2020	Amount of Each Receipt This Period \$ 20.00
Contributor Type Individual	Occupation Not Employed Name and Address of Employer Not Employed 1751 Lanier Pl NW, Washington, DC 20009		

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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

Marcus Goodwin For DC 2020

		Aggregate Year-To-date		\$ 20.00
30. Full Name, Mailing Address and Zip Code Samuel Stephens 850 Quincy St NW Apt 427, 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) 10/12/2020 Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual		Occupation Employee Name and Address of Employer DC Government 850 Quincy St NW 427, WASHINGTON, DC 20011		
		Aggregate Year-To-date		\$ 200.00
31. Full Name, Mailing Address and Zip Code Theophilus Ogbemor 911 O St NW, Washington, DC 20001		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) 10/12/2020 Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual		Occupation Engineering Name and Address of Employer Nu Strat 1725 I St NW Ste 300, Washington, DC 20006		
		Aggregate Year-To-date		\$ 100.00
32. Full Name, Mailing Address and Zip Code Caroline Kenney 1305 D St SE, Washington, DC 20003		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) 10/12/2020 Amount of Each Receipt This Period \$ 250.00
Contributor Type Individual		Occupation Real Estate Development Name and Address of Employer Urban Atlantic 7735 Old Georgetown Rd Ste 600, Bethesda, MD 20814		
		Aggregate Year-To-date		\$ 250.00
33. Full Name, Mailing Address and Zip Code Charles Redmond 343 Cedar St 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 checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)		Date (month, day, year) 10/12/2020 Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual		Occupation Nonprofit management Name and Address of Employer Venture Philanthropy Partners 1201 15TH ST NW SUITE 510, Washington, DC 20005		
		Aggregate Year-To-date		\$ 70.00

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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

Marcus Goodwin For DC 2020

34. Full Name, Mailing Address and Zip Code Judith Perlson 725 Gaslight Dr, Algonquin, IL 60102	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) 10/12/2020	Amount of Each Receipt This Period \$ 20.00
Contributor Type Individual	Occupation Not Employed Name and Address of Employer Not Employed 725 Gaslight Dr, Algonquin, IL 60102		
Aggregate Year-To-date			\$ 20.00
35. Full Name, Mailing Address and Zip Code Zina Greene 3133 Connecticut Ave NW, Washington, DC 20008	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) 10/12/2020	Amount of Each Receipt This Period \$ 25.00
Contributor Type Individual	Occupation Not Employed Name and Address of Employer Not Employed 3133 Connecticut Ave NW, Washington, DC 20008		
Aggregate Year-To-date			\$ 65.00
36. Full Name, Mailing Address and Zip Code Margaret Allen 311 Broxton Rd, Baltimore, MD 21212	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) 10/12/2020	Amount of Each Receipt This Period \$ 250.00
Contributor Type Individual	Occupation Mortgage Banker Name and Address of Employer AGM Financial Services Inc 20 S Charles St Ste 1000, Baltimore, MD 21201		
Aggregate Year-To-date			\$ 250.00
37. Full Name, Mailing Address and Zip Code Sharon Buck 3003 Van Ness St NW Apt W208, Washington, DC 20008-4821	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) 10/12/2020	Amount of Each Receipt This Period \$ 5.00
Contributor Type Individual	Occupation Not Employed Name and Address of Employer Not Employed 3003 Van Ness St NW Apt W208, Washington, DC 20008-4821		
Aggregate Year-To-date			\$ 5.00
38. Full Name, Mailing Address and Zip Code Maria Elena Anderson 2550 17th St NW, 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) 10/12/2020	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Not Employed Name and Address of Employer Not Employed 2550 17th St NW, WASHINGTON, DC 20009		

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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

Marcus Goodwin For DC 2020

	Aggregate Year-To-date		\$ 50.00
39. Full Name, Mailing Address and Zip Code Edward Levin 1919 Pennsylvania Ave NW, Washington, DC 20006	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) 10/12/2020	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Not Employed Name and Address of Employer Not Employed 1919 Pennsylvania Ave NW, Washington, DC 20006		
	Aggregate Year-To-date		\$ 50.00
40. Full Name, Mailing Address and Zip Code Carrie Carter 3283 Sutton Pl NW Apt D, Washington, DC 20016	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) 10/12/2020	Amount of Each Receipt This Period \$ 10.00
Contributor Type Individual	Occupation Not Employed Name and Address of Employer Not Employed 3283 Sutton Pl NW Apt D, Washington, DC 20016		
	Aggregate Year-To-date		\$ 10.00
41. Full Name, Mailing Address and Zip Code Eden Weinstein 1426 35th 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) 10/12/2020	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Waitress Name and Address of Employer Call your mother 3500 O St NW, Washington, DC 20007		
	Aggregate Year-To-date		\$ 50.00
42. Full Name, Mailing Address and Zip Code Grant Wayne Smith 3412 P 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) 10/12/2020	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Consultant Name and Address of Employer The Potomac group 3412 P St NW, Washington, DC 20007		
	Aggregate Year-To-date		\$ 300.00
43. Full Name, Mailing Address and Zip Code Polly Cassidy 38 Norfolk Ave, Lynchburg, VA 24503	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) 10/12/2020	Amount of Each Receipt This Period \$ 10.00
Contributor Type Individual	Occupation Not Employed Name and Address of Employer Not Employed 38 Norfolk Ave, Lynchburg, VA 24503		

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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

Marcus Goodwin For DC 2020

		Aggregate Year-To-date		\$ 10.00
44. Full Name, Mailing Address and Zip Code Anthony Lanier 3307 M 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) 10/12/2020	Amount of Each Receipt This Period \$ 250.00	
Contributor Type Individual	Occupation RE Developer Name and Address of Employer EastBanc 3307 M St NW Suite 400, Washington, DC 20007			
		Aggregate Year-To-date		\$ 350.00
45. Full Name, Mailing Address and Zip Code Sean Combs 318 I St NE, Washington, DC 20002	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) 10/12/2020	Amount of Each Receipt This Period \$ 10.00	
Contributor Type Individual	Occupation Not Employed Name and Address of Employer Not Employed 318 I St NE, Washington, DC 20002			
		Aggregate Year-To-date		\$ 10.00
46. Full Name, Mailing Address and Zip Code Carol Meyers 1862 Mintwood Pl NW Apt 401, 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) 10/12/2020	Amount of Each Receipt This Period \$ 10.00	
Contributor Type Individual	Occupation Communications strategist Name and Address of Employer American Psychological Association 750 1st St NE, Washington, DC 20002			
		Aggregate Year-To-date		\$ 10.00
47. Full Name, Mailing Address and Zip Code Amaal Scroggins 3815 Porter St NW Apt 302, Washington, DC 20016	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) 10/12/2020	Amount of Each Receipt This Period \$ 5.00	
Contributor Type Individual	Occupation Attorney Name and Address of Employer Federal Government 3815 Porter St NW, Washington, DC 20016			
		Aggregate Year-To-date		\$ 55.00
48. Full Name, Mailing Address and Zip Code Carmen Jean-Baptiste 5112 E Capitol St NE, Washington, DC 20019	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) 10/12/2020	Amount of Each Receipt This Period \$ 100.00	
Contributor Type Individual	Occupation Not Employed Name and Address of Employer Not Employed 5112 E Capitol St NE, Washington, DC 20019			

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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

Marcus Goodwin For DC 2020

		Aggregate Year-To-date		\$ 150.00
49. Full Name, Mailing Address and Zip Code Gail Lelyveld 4201 Butterworth Pl NW Apt 432, Washington, DC 20016	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) 10/12/2020	Amount of Each Receipt This Period \$ 10.00	
Contributor Type Individual	Occupation Not Employed Name and Address of Employer Not Employed 4201 Butterworth Place NW Apt 432, Washington, DC 20016			
		Aggregate Year-To-date		\$ 20.00
50. Full Name, Mailing Address and Zip Code Amaal Scroggins 3815 Porter St NW Apt 302, Washington, DC 20016	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) 10/12/2020	Amount of Each Receipt This Period \$ 50.00	
Contributor Type Individual	Occupation Attorney Name and Address of Employer Federal Government 3815 Porter St NW, Washington, DC 20016			
		Aggregate Year-To-date		\$ 55.00
51. Full Name, Mailing Address and Zip Code Francesca Britton 1413 Whittier St 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 checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 10/12/2020	Amount of Each Receipt This Period \$ 100.00	
Contributor Type Individual	Occupation Not Employed Name and Address of Employer Not Employed 1413 Whittier St NW, Washington, DC 20012			
		Aggregate Year-To-date		\$ 150.00
52. Full Name, Mailing Address and Zip Code Jackie Greenbaum 2723 ONTARIO RD NW, WASHINGTON, DC 20009-2294	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) 10/12/2020	Amount of Each Receipt This Period \$ 50.00	
Contributor Type Individual	Occupation Not Employed Name and Address of Employer Not Employed 2723 ONTARIO RD NW, WASHINGTON, DC 20009-2294			
		Aggregate Year-To-date		\$ 50.00

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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

Marcus Goodwin For DC 2020

53. Full Name, Mailing Address and Zip Code Joan Danzansky 3609 Edmunds 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) 10/12/2020	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Not Employed Name and Address of Employer Not Employed 3609 Edmunds St NW, Washington, DC 20007		
Aggregate Year-To-date			\$ 50.00
54. Full Name, Mailing Address and Zip Code District Construction Corporation 100 M St SE Ste 600, Washington, DC 20003	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) 10/12/2020	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			\$ 1,000.00
55. Full Name, Mailing Address and Zip Code Rania Saber 4245 Buckskin Wood Dr, Ellicott City, MD 21042	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) 10/13/2020	Amount of Each Receipt This Period \$ 1,000.00
Contributor Type Individual	Occupation President Name and Address of Employer Boldmark Steel Industries 4245 Buckskin Wood Dr, Ellicott City, MD 21042		
Aggregate Year-To-date			\$ 1,000.00
56. Full Name, Mailing Address and Zip Code Ann Keep 140 11th St SE, Washington, DC 20003	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) 10/13/2020	Amount of Each Receipt This Period \$ 20.00
Contributor Type Individual	Occupation Not Employed Name and Address of Employer Not Employed 140 11th Street SE, Washington, DC 20003		
Aggregate Year-To-date			\$ 40.00
57. Full Name, Mailing Address and Zip Code Marlene Johnson 560 N St SW, Washington, DC 20024	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) 10/13/2020	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Not Employed Name and Address of Employer Not Employed 560 N Street SW, Washington, DC 20024		
Aggregate Year-To-date			\$ 200.00

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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

Marcus Goodwin For DC 2020

58. Full Name, Mailing Address and Zip Code Anita Herrick 2500 Massachusetts Ave NW, Washington, DC 20008-2843	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) 10/13/2020	Amount of Each Receipt This Period \$ 20.00
Contributor Type Individual	Occupation Not Employed Name and Address of Employer Not Employed 2500 Massachusetts Ave NW, Washington, DC 20008-2843		
Aggregate Year-To-date		\$ 20.00	
59. Full Name, Mailing Address and Zip Code Kathleen Carr 2500 Massachusetts Ave NW, Washington, DC 20008	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) 10/13/2020	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Director Name and Address of Employer National Capital Bank 2500 Massachusetts Ave NW, Washington, DC 20008		
Aggregate Year-To-date		\$ 100.00	
60. Full Name, Mailing Address and Zip Code Henry Schoellkopf 5607 Namakagan Rd, Bethesda, MD 20816	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) 10/13/2020	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Not Employed Name and Address of Employer Not Employed 5607 Namakagan Road, Bethesda, MD 20816		
Aggregate Year-To-date		\$ 100.00	
61. Full Name, Mailing Address and Zip Code WILLIAM BONSTRA 1519 Vermont Ave NW, Washington, DC 20005	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) 10/13/2020	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Architect Name and Address of Employer Bonstra Haresign Architects 1728 14th St NW Ste 300, Washington, DC 20009		
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)

Marcus Goodwin For DC 2020

62. Full Name, Mailing Address and Zip Code Freddie Greene Biddle 1747 Irving St NW, Washington, DC 20010	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) 10/13/2020	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Not Employed Name and Address of Employer Not Employed 1747 Irving St NW, Washington, DC 20010		
Aggregate Year-To-date		\$ 50.00	
63. Full Name, Mailing Address and Zip Code Corey Powell 1207 Floral St 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 checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 10/13/2020	Amount of Each Receipt This Period \$ 250.00
Contributor Type Individual	Occupation RE Professional Name and Address of Employer Dantes Partners 701 Lamont St NW Apt 11, Washington, DC 20010		
Aggregate Year-To-date		\$ 250.00	
64. Full Name, Mailing Address and Zip Code Fatoumata Goodwin 1225 Kenyon St NW, Washington, DC 20010	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) 10/13/2020	Amount of Each Receipt This Period \$ 10.00
Contributor Type Individual	Occupation Teacher Name and Address of Employer DC Public Schools 1225 Kenyon Street NW, Washington, DC 20010		
Aggregate Year-To-date		\$ 190.00	
65. Full Name, Mailing Address and Zip Code LYNNETTE ASSELIN 700 NEW HAMPSHIRE AVE NW, WASHINGTON, DC 20037	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) 10/13/2020	Amount of Each Receipt This Period \$ 10.00
Contributor Type Individual	Occupation Not Employed Name and Address of Employer Not Employed 700 NEW HAMPSHIRE AVE NW, WASHINGTON, DC 20037		
Aggregate Year-To-date		\$ 10.00	
66. Full Name, Mailing Address and Zip Code Camille Glover 1603 U St NW Apt 18, 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) 10/13/2020	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Attorney Name and Address of Employer DC Government 2000 14th St NW Fl 6, Washington, DC 20009		

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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

Marcus Goodwin For DC 2020

		Aggregate Year-To-date		\$ 50.00
67. Full Name, Mailing Address and Zip Code Ben Lazarus 4219 37th St NW, Washington, DC 20008		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) 10/13/2020 Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual		Occupation Real Estate Name and Address of Employer Wood Partners 11 N Washington St, Rockville, MD 20850		
		Aggregate Year-To-date		\$ 50.00
68. Full Name, Mailing Address and Zip Code MaryAnn Miller 3001 Veazey Ter NW, WASHINGTON, DC 20008		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) 10/14/2020 Amount of Each Receipt This Period \$ 20.00
Contributor Type Individual		Occupation Not Employed Name and Address of Employer Not Employed 3001 Veazey Terr NW, Washington, DC 20008		
		Aggregate Year-To-date		\$ 51.00
69. Full Name, Mailing Address and Zip Code Sasha-Gaye Angus 1269 DELAFIELD PL NE, Washington, DC 20017		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) 10/14/2020 Amount of Each Receipt This Period \$ 25.00
Contributor Type Individual		Occupation Sr. Vice President Name and Address of Employer McCormack Baron 720 Olive Street, Saint Louis, MO 63101		
		Aggregate Year-To-date		\$ 75.00
70. Full Name, Mailing Address and Zip Code Lee Reno 233 9th St SE, Washington, DC 20003		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) 10/14/2020 Amount of Each Receipt This Period \$ 250.00
Contributor Type Individual		Occupation Not Employed Name and Address of Employer Not Employed 233 9th Street SE, Washington, DC 20003		
		Aggregate Year-To-date		\$ 500.00

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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

Marcus Goodwin For DC 2020

71. Full Name, Mailing Address and Zip Code Cindy Sherman 3326 Stuyvesant Pl NW, Washington, DC 20015	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) 10/14/2020	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation SLP Name and Address of Employer self 4000 ALBEMARLE ST NW STE 402A, WASHINGTON, DC 20016		
Aggregate Year-To-date		\$ 100.00	
72. Full Name, Mailing Address and Zip Code John Cross 136 Tennessee Ave NE, Washington, DC 20002	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) 10/14/2020	Amount of Each Receipt This Period \$ 10.00
Contributor Type Individual	Occupation Not employed Name and Address of Employer Not employed 136 Tennessee Avenue NE, Washington, DC 20002		
Aggregate Year-To-date		\$ 336.00	
73. Full Name, Mailing Address and Zip Code Bernard Saul 4440 Willard ave apt 1510, Chevy chase, MD 20815	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) 10/14/2020	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Real estate Name and Address of Employer Self 7700 old Georgetown rd, Bethesda, MD 20814		
Aggregate Year-To-date		\$ 100.00	
74. Full Name, Mailing Address and Zip Code Deborah Wulff 1614 Tuckerman St NW, 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) 10/14/2020	Amount of Each Receipt This Period \$ 500.00
Contributor Type Individual	Occupation Not Employed Name and Address of Employer Not Employed 1614 Tuckerman St NW, Washington, DC 20011		
Aggregate Year-To-date		\$ 500.00	
75. Full Name, Mailing Address and Zip Code Lyle Blanchard 5609 32nd St NW, Washington, DC 20015	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) 10/14/2020	Amount of Each Receipt This Period \$ 35.00
Contributor Type Individual	Occupation Attorney Name and Address of Employer Greenstein DeLorme & Luchs 5609 32nd St NW, Washington, DC 20015		

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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

Marcus Goodwin For DC 2020

		Aggregate Year-To-date		\$ 35.00
76. Full Name, Mailing Address and Zip Code James Ehrenhaft 2925 39th St NW, Washington, DC 20016		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) 10/15/2020 Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual		Occupation Teacher Name and Address of Employer PECF 2925 39th St NW, Washington, DC 20016		
		Aggregate Year-To-date		
77. Full Name, Mailing Address and Zip Code Todd Valentine 1539 Locust Rd 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 checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)		Date (month, day, year) 10/15/2020 Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual		Occupation Policy Analyst Name and Address of Employer Government of the District of Columbia 1539 Locust Rd NW, Washington, DC 20012		
		Aggregate Year-To-date		
78. Full Name, Mailing Address and Zip Code Rebecca Zimmermann 1521 Otis st NE, WASHINGTON, DC 20017		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) 10/15/2020 Amount of Each Receipt This Period \$ 5.00
Contributor Type Individual		Occupation Senior advisor Name and Address of Employer DHHS/CMS 1521 Otis st NE, WASHINGTON, DC 20017		
		Aggregate Year-To-date		
79. Full Name, Mailing Address and Zip Code Kenneth Samet 8820 Burdette Rd, Bethesda, MD 20817		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) 10/15/2020 Amount of Each Receipt This Period \$ 500.00
Contributor Type Individual		Occupation Healthcare Executive Name and Address of Employer MedStar Health 8820 Burdette Rd, Bethesda, MD 20817		
		Aggregate Year-To-date		
80. Full Name, Mailing Address and Zip Code Sarah Beemsterboer 1518 Buchanan St NW, Washington, DC 20011		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) 10/15/2020 Amount of Each Receipt This Period \$ 200.00
Contributor Type Individual		Occupation Not Employed Name and Address of Employer Not Employed 1518 Buchanan St NW, Washington, DC 20011		
		Aggregate Year-To-date		

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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

Marcus Goodwin For DC 2020

		Aggregate Year-To-date		\$ 200.00
81. Full Name, Mailing Address and Zip Code Alison Ritz 1401 R St NW Apt 403, Washington, DC 20009	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) 10/15/2020	Amount of Each Receipt This Period \$ 250.00	
Contributor Type Individual	Occupation Assistant VP Name and Address of Employer WC Smith & Co 1100 New Jersey Ave SE Ste 1000, Washington, DC 20003			
		Aggregate Year-To-date		\$ 250.00
82. Full Name, Mailing Address and Zip Code Judith Ritz 4625 36th St NW, Washington, DC 20008	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) 10/15/2020	Amount of Each Receipt This Period \$ 1,000.00	
Contributor Type Individual	Occupation Not Employed Name and Address of Employer Not Employed 4625 36th St NW, Washington, DC 20008			
		Aggregate Year-To-date		\$ 1,000.00
83. Full Name, Mailing Address and Zip Code Ioannis Xanthos 3920 49th St NW, Washington, DC 20016	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) 10/16/2020	Amount of Each Receipt This Period \$ 1,000.00	
Contributor Type Individual	Occupation Owner Name and Address of Employer John Xanthos Inc 3422 Georgia Ave NW, Washington, DC 20010			
		Aggregate Year-To-date		\$ 1,000.00
84. Full Name, Mailing Address and Zip Code John Xanthos Inc. 3422 Georgia Ave NW, Washington, DC 20010	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) 10/16/2020	Amount of Each Receipt This Period \$ 1,000.00	
Contributor Type Business	Occupation Name and Address of Employer			
Business Type Sole Proprietorship				
		Aggregate Year-To-date		\$ 1,000.00

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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

Marcus Goodwin For DC 2020

85. Full Name, Mailing Address and Zip Code Brenda Harper 4628 Livingston Rd SE Apt 202, 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) 10/16/2020	Amount of Each Receipt This Period \$ 20.00
Contributor Type Individual	Occupation Administrative Assistant Name and Address of Employer The Pew Charitable Trusts 901 E Street NW, Washington, DC 20004		
Aggregate Year-To-date			\$ 40.00
86. Full Name, Mailing Address and Zip Code Betty Tara Cooksey 5310 42nd St NW, Washington, DC 20015	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) 10/16/2020	Amount of Each Receipt This Period \$ 10.00
Contributor Type Individual	Occupation Not Employed Name and Address of Employer Not Employed 5310 42nd St NW, Washington, DC 20015		
Aggregate Year-To-date			\$ 65.00
87. Full Name, Mailing Address and Zip Code Eva Cheung 2 Artisan Way, Menlo Park, CA 94025	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) 10/16/2020	Amount of Each Receipt This Period \$ 30.00
Contributor Type Individual	Occupation Not Employed Name and Address of Employer Not Employed 2 Artisan Way, Menlo Park, CA 94025		
Aggregate Year-To-date			\$ 60.00
88. Full Name, Mailing Address and Zip Code Stephanie Finigan 3871 Porter St NW Apt E293, Washington, DC 20016	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) 10/16/2020	Amount of Each Receipt This Period \$ 20.00
Contributor Type Individual	Occupation Self Name and Address of Employer Self 3871 Porter St NW Apt E293, Washington, DC 20016		
Aggregate Year-To-date			\$ 20.00

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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

Marcus Goodwin For DC 2020

89. Full Name, Mailing Address and Zip Code Mary C Beyda 2555 Pennsylvania Ave NW Apt 306, Washington, DC 20037	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) 10/16/2020	Amount of Each Receipt This Period \$ 10.00
Contributor Type Individual	Occupation Not Employed Name and Address of Employer Not Employed 2555 Pennsylvania Ave NW Apt 306, Washington, DC 20037		
Aggregate Year-To-date			\$ 10.00
90. Full Name, Mailing Address and Zip Code Susan Kay 17 Gardenia Dr, Oxford, OH 45056	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) 10/16/2020	Amount of Each Receipt This Period \$ 10.00
Contributor Type Individual	Occupation Not Employed Name and Address of Employer Not Employed 17 Gardenia Drive, Oxford, OH 45056		
Aggregate Year-To-date			\$ 20.00
91. Full Name, Mailing Address and Zip Code Kimberly McKinley 3229 Massachusetts Ave SE, WASHINGTON, DC 20019	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) 10/16/2020	Amount of Each Receipt This Period \$ 10.00
Contributor Type Individual	Occupation Director Name and Address of Employer Assumption Catholic Church 3401 Martin Luther King Jr Ave SE, Washington, DC 20032		
Aggregate Year-To-date			\$ 10.00
92. Full Name, Mailing Address and Zip Code John Perazich 2126 Connecticut Ave NW, Washington, DC 20008	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) 10/16/2020	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Not Employed Name and Address of Employer Not Employed 2126 Connecticut Avenue NW, Washington, DC 20008		
Aggregate Year-To-date			\$ 350.00

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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

Marcus Goodwin For DC 2020

93. Full Name, Mailing Address and Zip Code Patricia Elwood 2740 34th St NW, Washington, DC 20008	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) 10/16/2020	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Director. Intl affairs Name and Address of Employer Dc government. 1350 Pennsylvania Avenue nw, Washington, DC 20004		
Aggregate Year-To-date			\$ 100.00
94. Full Name, Mailing Address and Zip Code Carmela Veneroso 3506 Garfield 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) 10/16/2020	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Not Employed Name and Address of Employer Not Employed 3506 Garfield St NW, Washington, DC 20007		
Aggregate Year-To-date			\$ 100.00
95. Full Name, Mailing Address and Zip Code John Massey 1855 Shepherd St NW, 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) 10/17/2020	Amount of Each Receipt This Period \$ 250.00
Contributor Type Individual	Occupation Physician Name and Address of Employer DOD 1855 Shepherd St NE, Washington, DC 20018		
Aggregate Year-To-date			\$ 250.00
96. Full Name, Mailing Address and Zip Code philip mause 5108 Palisade Ln NW, Washington, DC 20016	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) 10/17/2020	Amount of Each Receipt This Period \$ 1,000.00
Contributor Type Individual	Occupation Not Employed Name and Address of Employer Not Employed 5108 Palisade Ln NW, Washington, DC 20016		
Aggregate Year-To-date			\$ 1,000.00
97. Full Name, Mailing Address and Zip Code Philip Hampton 1439 Juniper St 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 checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 10/17/2020	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Attorney Name and Address of Employer Polsinelli 1401 I St NW, Washington, DC 20005		

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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

Marcus Goodwin For DC 2020

		Aggregate Year-To-date		\$ 150.00
98. Full Name, Mailing Address and Zip Code John Ritz 4625 36th St NW, Washington, DC 20008	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) 10/17/2020	Amount of Each Receipt This Period \$ 1,000.00	
Contributor Type Individual	Occupation realtor Name and Address of Employer we smith & Co 4625 36TH ST NW, WASHINGTON, DC 20008			
		Aggregate Year-To-date		\$ 1,000.00
99. Full Name, Mailing Address and Zip Code Metty Fisseha 515 Summit Ave E Apt 403, Seattle, WA 98102	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) 10/17/2020	Amount of Each Receipt This Period \$ 100.00	
Contributor Type Individual	Occupation Product Management Name and Address of Employer Capital One 1725 New Hampshire Ave NW Apt 602, Washington, DC 20009			
		Aggregate Year-To-date		\$ 100.00
100. Full Name, Mailing Address and Zip Code William Lightfoot 2140 L St NW Apt 413, Washington, DC 20037	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) 10/17/2020	Amount of Each Receipt This Period \$ 500.00	
Contributor Type Individual	Occupation Lawyer Name and Address of Employer May Lightfoot pllc 3200 Martin Luther King Jr Ave SE, Washington, DC 20032			
		Aggregate Year-To-date		\$ 500.00
101. Full Name, Mailing Address and Zip Code Ginger Pape 4350 50th St NW, Washington, DC 20016	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) 10/17/2020	Amount of Each Receipt This Period \$ 31.00	
Contributor Type Individual	Occupation Not Employed Name and Address of Employer Not Employed 4350 50th St NW, Washington, DC 20016			
		Aggregate Year-To-date		\$ 31.00

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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

Marcus Goodwin For DC 2020

102. Full Name, Mailing Address and Zip Code Lea Adams Ashby 7464 7th St 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 checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 10/18/2020	Amount of Each Receipt This Period \$ 51.00
Contributor Type Individual	Occupation Not Employed Name and Address of Employer Not Employed 7464 7th St NW, Washington, DC 20012		
Aggregate Year-To-date			\$ 253.00
103. Full Name, Mailing Address and Zip Code Neil Williams 5205 Klinge St NW, Washington, DC 20016-2656	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) 10/18/2020	Amount of Each Receipt This Period \$ 10.00
Contributor Type Individual	Occupation Not Employed Name and Address of Employer Not Employed 5205 Klinge St NW, Washington, DC 20016-2656		
Aggregate Year-To-date			\$ 10.00
104. Full Name, Mailing Address and Zip Code elinor bacon 1311 Delaware Ave SW Apt S748, Washington, DC 20024	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) 10/18/2020	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Real estate development Name and Address of Employer ER Bacon Development LLC 525 Water St SW Unit 430, Washington, DC 20024		
Aggregate Year-To-date			\$ 100.00
105. Full Name, Mailing Address and Zip Code Michael Kam 514 Fitzwater St, Philadelphia, PA 19147	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) 10/18/2020	Amount of Each Receipt This Period \$ 5.00
Contributor Type Individual	Occupation Not Employed Name and Address of Employer Not Employed 514 Fitzwater St, Philadelphia, PA 19147		
Aggregate Year-To-date			\$ 5.00
106. Full Name, Mailing Address and Zip Code Robert Muse 3463 Macomb st NW, Washington, DC 20016	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) 10/18/2020	Amount of Each Receipt This Period \$ 250.00
Contributor Type Individual	Occupation Lawyer Name and Address of Employer Lev Firestone 3463 Macomb st NW, Washington, DC 20016		
Aggregate Year-To-date			\$ 250.00

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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

Marcus Goodwin For DC 2020

107. Full Name, Mailing Address and Zip Code John Aggrey 12703 LAURIE DR, SILVER SPRING, MD 20904	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) 10/18/2020	Amount of Each Receipt This Period \$ 250.00
Contributor Type Individual	Occupation CEO Name and Address of Employer The Unicorn Group 8000 Towers Crescent Dr Fl 13, Vienna, VA 22182		
Aggregate Year-To-date			\$ 250.00
108. Full Name, Mailing Address and Zip Code Margery Yeager 5332 Sherier Pl NW, Washington, DC 20016	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) 10/18/2020	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Partner Advocacy Name and Address of Employer Education Forward DC 1805 7th St NW, Washington, DC 20001		
Aggregate Year-To-date			\$ 50.00
109. Full Name, Mailing Address and Zip Code Stefan Lallinger 991 Ocean Ave Apt 7A, Brooklyn, NY 11226	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) 10/18/2020	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Administrator Name and Address of Employer NYC DOE 52 Chambers St, New York, NY 10007		
Aggregate Year-To-date			\$ 50.00
110. Full Name, Mailing Address and Zip Code Greg Marchand 1520 Kalmia Rd 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 checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 10/18/2020	Amount of Each Receipt This Period \$ 25.00
Contributor Type Individual	Occupation Attorney Name and Address of Employer Usaid 1520 Kalmia Rd NW, Washington, DC 20012		
Aggregate Year-To-date			\$ 25.00
111. Full Name, Mailing Address and Zip Code MICHAEL HARDIMAN 507 Seward Sq SE, Washington, DC 20003	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) 10/18/2020	Amount of Each Receipt This Period \$ 10.00
Contributor Type Individual	Occupation Accounting Name and Address of Employer U S Govt 111 Classified St, Washington, DC 20520		
Aggregate Year-To-date			\$ 10.00

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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

Marcus Goodwin For DC 2020

112. Full Name, Mailing Address and Zip Code Eastern Branch Demolition LLC 3150 V St NE, Washington, DC 20018	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) 10/19/2020	Amount of Each Receipt This Period \$ 1,000.00
Contributor Type Business Business Type Limited Liability Company	Occupation Name and Address of Employer		
Aggregate Year-To-date		\$ 1,000.00	
113. Full Name, Mailing Address and Zip Code Gail Lelyveld 4201 Butterworth Pl NW Apt 432, Washington, DC 20016	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) 10/19/2020	Amount of Each Receipt This Period \$ 10.00
Contributor Type Individual	Occupation Not Employed Name and Address of Employer Not Employed 4201 Butterworth Place NW Apt 432, Washington, DC 20016		
Aggregate Year-To-date		\$ 30.00	
114. Full Name, Mailing Address and Zip Code Thomas McCullough 2830 Chesterfield Pl NW, Washington, DC 20008	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) 10/19/2020	Amount of Each Receipt This Period \$ 1,000.00
Contributor Type Individual	Occupation President Name and Address of Employer McCullough Construction LLC 5513 Connecticut Ave NW Ste 200, Washington, DC 20015		
Aggregate Year-To-date		\$ 1,000.00	
115. Full Name, Mailing Address and Zip Code Jordan Ghrist 5711 Colorado Ave NW, 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) 10/19/2020	Amount of Each Receipt This Period \$ 25.00
Contributor Type Individual	Occupation Developer Name and Address of Employer Self 5711 Colorado Ave NW, Washington, DC 20011		
Aggregate Year-To-date		\$ 25.00	

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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

Marcus Goodwin For DC 2020

116. Full Name, Mailing Address and Zip Code Kyle Williams 5521 New Hampshire Ave NE, 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) 10/19/2020	Amount of Each Receipt This Period \$ 200.00
Contributor Type Individual	Occupation Government Relations Name and Address of Employer OppLoans 130 E Randolph St Fl 33, Chicago, IL 60601		
Aggregate Year-To-date		\$ 200.00	
117. Full Name, Mailing Address and Zip Code Seamus McCullough 2830 Chesterfield Pl NW, Washington, DC 20008	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) 10/19/2020	Amount of Each Receipt This Period \$ 1,000.00
Contributor Type Individual	Occupation President Name and Address of Employer McCullough Construction LLC 5513 Connecticut Ave NW Ste 200, Washington, DC 20015		
Aggregate Year-To-date		\$ 1,000.00	
118. Full Name, Mailing Address and Zip Code William Wagner 172 William Feather Dr, Voorhees, NJ 08043	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) 10/20/2020	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Not Employed Name and Address of Employer Not Employed 172 William Feather Drive, Voorhees, NJ 08043		
Aggregate Year-To-date		\$ 150.00	
119. Full Name, Mailing Address and Zip Code Fatoumata Goodwin 1225 Kenyon St NW, Washington, DC 20010	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) 10/20/2020	Amount of Each Receipt This Period \$ 10.00
Contributor Type Individual	Occupation Teacher Name and Address of Employer DC Public Schools 1225 Kenyon Street NW, Washington, DC 20010		
Aggregate Year-To-date		\$ 200.00	
120. Full Name, Mailing Address and Zip Code Leslie George 5301 Westbard Cir Apt 229, Bethesda, MD 20816	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) 10/20/2020	Amount of Each Receipt This Period \$ 20.00
Contributor Type Individual	Occupation teacher Name and Address of Employer St Albans School 3101 Wisconsin Ave NW, Washington, DC 20016		

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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

Marcus Goodwin For DC 2020

		Aggregate Year-To-date		\$ 20.00
121. Full Name, Mailing Address and Zip Code Leslie Silkworth 1202 Roundhouse Ln, Alexandria, VA 22314	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) 10/20/2020	Amount of Each Receipt This Period \$ 10.00	
Contributor Type Individual	Occupation Not Employed Name and Address of Employer Not Employed 1202 Roundhouse Lane, Alexandria, VA 22314			
		Aggregate Year-To-date		\$ 20.00
122. Full Name, Mailing Address and Zip Code Michael Musante 808 Constitution Ave NE, Washington, DC 20002	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) 10/20/2020	Amount of Each Receipt This Period \$ 500.00	
Contributor Type Individual	Occupation Lobbyist Name and Address of Employer Musante Strategies 808 Constitution Ave NE, Washington, DC 20002			
		Aggregate Year-To-date		\$ 500.00
123. Full Name, Mailing Address and Zip Code David Haresign 4605 46th St NW, Washington, DC 20016	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) 10/20/2020	Amount of Each Receipt This Period \$ 100.00	
Contributor Type Individual	Occupation Architect Name and Address of Employer Bonstra Haresign ARCHITECTS 1728 14th St NW Ste 300, Washington, DC 20009			
		Aggregate Year-To-date		\$ 100.00
124. Full Name, Mailing Address and Zip Code Marion Kyhos PO Box 3184, Easton, MD 21601	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) 10/20/2020	Amount of Each Receipt This Period \$ 100.00	
Contributor Type Individual	Occupation clinical social worker Name and Address of Employer Eastern Shore Psychological Services 29520 Canvasback Dr, Easton, MD 21601			
		Aggregate Year-To-date		\$ 100.00
125. Full Name, Mailing Address and Zip Code Greg Werly 1706 4th St NW, Washington, DC 20001	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) 10/20/2020	Amount of Each Receipt This Period \$ 100.00	
Contributor Type Individual	Occupation Client Manager Name and Address of Employer JPMorgan Chase 1706 4th St NW, Washington, DC 20001			

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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

Marcus Goodwin For DC 2020

		Aggregate Year-To-date		\$ 100.00
126. Full Name, Mailing Address and Zip Code Janice Davis 1420 Primrose Rd 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 checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 10/21/2020	Amount of Each Receipt This Period \$ 50.00	
Contributor Type Individual	Occupation Financial and Benefit Name and Address of Employer Davis Planning Assoc 7059 Blair Rd NW Ste 204, Washington, DC 20012			
		Aggregate Year-To-date		\$ 150.00
127. Full Name, Mailing Address and Zip Code Sasha-Gaye Angus 1269 DELAFIELD PL NE, Washington, DC 20017	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) 10/21/2020	Amount of Each Receipt This Period \$ 25.00	
Contributor Type Individual	Occupation Sr. Vice President Name and Address of Employer McCormack Baron 720 Olive Street, Saint Louis, MO 63101			
		Aggregate Year-To-date		\$ 100.00
128. Full Name, Mailing Address and Zip Code Toby Millman 6 W Lake St, Skaneateles, NY 13152	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) 10/21/2020	Amount of Each Receipt This Period \$ 500.00	
Contributor Type Individual	Occupation Real Estate Name and Address of Employer Brookfield Properties 1300 4th St SE, Washington, DC 20003			
		Aggregate Year-To-date		\$ 500.00
129. Full Name, Mailing Address and Zip Code Daren Thomas 2118 18th St NW, 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) 10/21/2020	Amount of Each Receipt This Period \$ 25.00	
Contributor Type Individual	Occupation Consultant Name and Address of Employer Seld 1457 A St NE, Washington, DC 20002			
		Aggregate Year-To-date		\$ 25.00
130. Full Name, Mailing Address and Zip Code Robert Muse 3463 Macomb st NW, Washington, DC 20016	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) 10/21/2020	Amount of Each Receipt This Period \$ 100.00	
Contributor Type Individual	Occupation Lawyer Name and Address of Employer Levy Firestone 3463 Macomb st nw, Washington, DC 20016			

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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

Marcus Goodwin For DC 2020

		Aggregate Year-To-date		\$ 100.00
131. Full Name, Mailing Address and Zip Code Hal Jones 3725 Upton St NW, Washington, DC 20016	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) 10/21/2020	Amount of Each Receipt This Period \$ 100.00	
Contributor Type Individual	Occupation Not Employed Name and Address of Employer Not Employed 3725 Upton Street NW, Washington, DC 20016			
		Aggregate Year-To-date		\$ 700.00
132. Full Name, Mailing Address and Zip Code Jean Margaret Card 50 Riverside Dr, New York, NY 10024	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) 10/21/2020	Amount of Each Receipt This Period \$ 100.00	
Contributor Type Individual	Occupation SVP Public Affaris Name and Address of Employer ViacomCBS 1515 Broadway, New York, NY 10036			
		Aggregate Year-To-date		\$ 100.00
133. Full Name, Mailing Address and Zip Code Jonathan Cooper 2034 Hillyer Pl NW, 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) 10/21/2020	Amount of Each Receipt This Period \$ 1,000.00	
Contributor Type Individual	Occupation Attorney Name and Address of Employer Quinn Emanuel 1300 I St NW, Washington, DC 20005			
		Aggregate Year-To-date		\$ 1,000.00
134. Full Name, Mailing Address and Zip Code Curtis Large 3509 Macomb St NW, Washington, DC 20016	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) 10/21/2020	Amount of Each Receipt This Period \$ 250.00	
Contributor Type Individual	Occupation Not Employed Name and Address of Employer Not Employed 3509 Macomb St NW, Washington, DC 20016			
		Aggregate Year-To-date		\$ 250.00
135. Full Name, Mailing Address and Zip Code edward levin 3229 Ellicott St NW, washington, DC 20008	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) 10/21/2020	Amount of Each Receipt This Period \$ 50.00	
Contributor Type Individual	Occupation Not Employed Name and Address of Employer Not Employed 3229 Ellicott St NW, washington, DC 20008			

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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

Marcus Goodwin For DC 2020

		Aggregate Year-To-date		\$ 50.00
136. Full Name, Mailing Address and Zip Code Mark Murphy 1414 21st St NW, Washington, DC 20036	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) 10/21/2020	Amount of Each Receipt This Period \$ 250.00	
Contributor Type Individual	Occupation Attorney Name and Address of Employer Steptoe & Johnson LLP 1330 Connecticut Ave NW, Washington, DC 20036			
		Aggregate Year-To-date		\$ 250.00
137. Full Name, Mailing Address and Zip Code George Chopivsky 1919 23rd St NW, Washington, DC 20008	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) 10/22/2020	Amount of Each Receipt This Period \$ 1,000.00	
Contributor Type Individual	Occupation Real Estate Name and Address of Employer Fortis 1919 23rd St NW, Washington, DC 20008			
		Aggregate Year-To-date		\$ 1,000.00
138. Full Name, Mailing Address and Zip Code Thomas Gnecco 2705 Poplar 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) 10/22/2020	Amount of Each Receipt This Period \$ 250.00	
Contributor Type Individual	Occupation Engineer Name and Address of Employer DAVIS Construction 12530 Parklawn Dr, Rockville, MD 20852			
		Aggregate Year-To-date		\$ 250.00
139. Full Name, Mailing Address and Zip Code Andrew Kline 1225 19th St NW, Washington, DC 20036	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) 10/22/2020	Amount of Each Receipt This Period \$ 500.00	
Contributor Type Individual	Occupation attorney Name and Address of Employer Veritas 1225 19th St NW Ste 320, Washington, DC 20036			
		Aggregate Year-To-date		\$ 500.00
140. Full Name, Mailing Address and Zip Code Thomas Antisdell 3314 Ordway St NW, Washington, DC 20008	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) 10/22/2020	Amount of Each Receipt This Period \$ 100.00	
Contributor Type Individual	Occupation Managing Director Name and Address of Employer AlixPartners 2099 Pennsylvania Ave NW, Washington, DC 20006			

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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

Marcus Goodwin For DC 2020

		Aggregate Year-To-date		\$ 100.00
141. Full Name, Mailing Address and Zip Code Cedric Thompson 1520 A St SE Apt 2, Washington, DC 20003	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) 10/22/2020	Amount of Each Receipt This Period \$ 100.00	
Contributor Type Individual	Occupation Administrator Name and Address of Employer Self 1520 A St SE, Washington, DC 20003			
		Aggregate Year-To-date		\$ 100.00
142. Full Name, Mailing Address and Zip Code Kathy Morgan 534 6th St SE, Washington, DC 20003	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) 10/22/2020	Amount of Each Receipt This Period \$ 10.00	
Contributor Type Individual	Occupation administrator Name and Address of Employer US Dept of Education 400 Maryland Ave SW, Washington, DC 20202			
		Aggregate Year-To-date		\$ 10.00
143. Full Name, Mailing Address and Zip Code Kyle Davis 1721 21st St NW Apt 202, 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) 10/22/2020	Amount of Each Receipt This Period \$ 50.00	
Contributor Type Individual	Occupation Executive Name and Address of Employer Athenium Analytics 616 H St NW Ste 400, Washington, DC 20001			
		Aggregate Year-To-date		\$ 50.00
144. Full Name, Mailing Address and Zip Code Jean-Claude Fresnel jr 700 12th St NW Ste 700, Washington, DC 20005	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) 10/22/2020	Amount of Each Receipt This Period \$ 500.00	
Contributor Type Individual	Occupation Consultant Name and Address of Employer Lenserf 700 12th St NW Ste 700, Washington, DC 20005			
		Aggregate Year-To-date		\$ 500.00
145. Full Name, Mailing Address and Zip Code Ryan Smith 4800 Montgomery Ln Ste 700, Bethesda, MD 20814	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) 10/22/2020	Amount of Each Receipt This Period \$ 20.00	
Contributor Type Individual	Occupation Investment Advisor Name and Address of Employer Feldman Ruel Urban Property Advisors 4800 Montgomery Ln Ste 700, Bethesda, MD 20814			

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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

Marcus Goodwin For DC 2020

		Aggregate Year-To-date		\$ 20.00
146. Full Name, Mailing Address and Zip Code MaryAnn Miller 3001 Veazey Ter NW, WASHINGTON, DC 20008	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) 10/22/2020	Amount of Each Receipt This Period \$ 25.00	
Contributor Type Individual	Occupation Not Employed Name and Address of Employer Not Employed 3001 Veazey Terr NW, Washington, DC 20008			
		Aggregate Year-To-date		\$ 76.00
147. Full Name, Mailing Address and Zip Code Khalid Usmani 8013 Cypress Grove Ln, Cabin John, MD 20818	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) 10/22/2020	Amount of Each Receipt This Period \$ 10.00	
Contributor Type Individual	Occupation Finance Name and Address of Employer GuideVine Technologies Inc. 157 Columbus Ave # 541, New York, NY 10023			
		Aggregate Year-To-date		\$ 10.00
148. Full Name, Mailing Address and Zip Code HOWARD GASAWAY 2806 32nd St 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) 10/22/2020	Amount of Each Receipt This Period \$ 25.00	
Contributor Type Individual	Occupation Not Employed Name and Address of Employer Not Employed 2806 32nd St SE, Washington, DC 20020			
		Aggregate Year-To-date		\$ 156.00
149. Full Name, Mailing Address and Zip Code Edward Lozansky 1800 Connecticut Ave NW, 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) 10/22/2020	Amount of Each Receipt This Period \$ 10.00	
Contributor Type Individual	Occupation Not Employed Name and Address of Employer Not Employed 1800 Connecticut Ave NW, Washington, DC 20009			
		Aggregate Year-To-date		\$ 10.00
150. Full Name, Mailing Address and Zip Code Marjorie DePuy 4455 Connecticut Ave NW Apt 215, Washington, DC 20008	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) 10/22/2020	Amount of Each Receipt This Period \$ 25.00	
Contributor Type Individual	Occupation Program Manager Name and Address of Employer FMI 2345 Crystal Drive, Arlington, VA 22202			

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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

Marcus Goodwin For DC 2020

		Aggregate Year-To-date		\$ 396.00
151. Full Name, Mailing Address and Zip Code Carol Wheeler 1506 Dumbarton Rock Ct 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) 10/22/2020	Amount of Each Receipt This Period \$ 25.00	
Contributor Type Individual	Occupation Not employed Name and Address of Employer Not employed 1506 Dumbarton Rock Court NW, Washington, DC 20007			
		Aggregate Year-To-date		\$ 125.00
152. Full Name, Mailing Address and Zip Code Andrea Syphax 215 13th St SE, Washington, DC 20003	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) 10/22/2020	Amount of Each Receipt This Period \$ 50.00	
Contributor Type Individual	Occupation President Name and Address of Employer Renaissance Medical Group Inc. 215 13th St SE, Washington, DC 20003			
		Aggregate Year-To-date		\$ 50.00
153. Full Name, Mailing Address and Zip Code Charlene Jarvis 1789 Sycamore St 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 checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 10/22/2020	Amount of Each Receipt This Period \$ 50.00	
Contributor Type Individual	Occupation Not Employed Name and Address of Employer Not Employed 1789 Sycamore St NW, Washington, DC 20012			
		Aggregate Year-To-date		\$ 150.00
154. Full Name, Mailing Address and Zip Code Nancy Fox 1018 D St NE, Washington, DC 20002	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) 10/22/2020	Amount of Each Receipt This Period \$ 50.00	
Contributor Type Individual	Occupation policy analyst Name and Address of Employer DC Government 1101 4th St SW, Washington, DC 20024			
		Aggregate Year-To-date		\$ 50.00

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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

Marcus Goodwin For DC 2020

155. Full Name, Mailing Address and Zip Code yvonne howerton 3212 Theodore R Hagans Dr NE, washington, DC 20018	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) 10/22/2020	Amount of Each Receipt This Period \$ 10.00
Contributor Type Individual	Occupation Contract Manager Name and Address of Employer USDA 1400 Independence Ave SW, Washington, DC 20250		
Aggregate Year-To-date			\$ 20.00
156. Full Name, Mailing Address and Zip Code Susan Kay 17 Gardenia Dr, Oxford, OH 45056	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) 10/23/2020	Amount of Each Receipt This Period \$ 10.00
Contributor Type Individual	Occupation Not Employed Name and Address of Employer Not Employed 17 Gardenia Drive, Oxford, OH 45056		
Aggregate Year-To-date			\$ 30.00
157. Full Name, Mailing Address and Zip Code Betty Tara Cooksey 5310 42nd St NW, Washington, DC 20015	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) 10/23/2020	Amount of Each Receipt This Period \$ 10.00
Contributor Type Individual	Occupation Not Employed Name and Address of Employer Not Employed 5310 42nd St NW, Washington, DC 20015		
Aggregate Year-To-date			\$ 75.00
158. Full Name, Mailing Address and Zip Code Michelle James 3029 Clinton St NE, Washington, DC 20018	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) 10/23/2020	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Not Employed Name and Address of Employer Not Employed 3029 Clinton St NE, Washington, DC 20018		
Aggregate Year-To-date			\$ 100.00
159. Full Name, Mailing Address and Zip Code Elizabeth Agle 1114 E Capitol St NE, Washington, DC 20002	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) 10/23/2020	Amount of Each Receipt This Period \$ 25.00
Contributor Type Individual	Occupation Not Employed Name and Address of Employer Not Employed 1114 E Capitol St NE, Washington, DC 20002		
Aggregate Year-To-date			\$ 25.00

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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

Marcus Goodwin For DC 2020

160. Full Name, Mailing Address and Zip Code Derek Smock 24 Cricket Ave Apt 603, Ardmore, PA 19003	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) 10/23/2020	Amount of Each Receipt This Period \$ 125.00
Contributor Type Individual	Occupation Consultant Name and Address of Employer MF Strategies 2601 N Front St, Harrisburg, PA 17110		
Aggregate Year-To-date		\$ 125.00	
161. Full Name, Mailing Address and Zip Code Elke Hodson Marten 1532 Monroe St NW, Washington, DC 20010	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) 10/23/2020	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation analyst Name and Address of Employer OMB 1532 Monroe St NW, Washington, DC 20010		
Aggregate Year-To-date		\$ 100.00	
162. Full Name, Mailing Address and Zip Code brian carkhuff 1376 Kirby rd, MCLEAN, VA 22101	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) 10/23/2020	Amount of Each Receipt This Period \$ 500.00
Contributor Type Individual	Occupation Sales Name and Address of Employer T-Mobile 1401 New York Ave NE Apt 420, Washington, DC 20002		
Aggregate Year-To-date		\$ 500.00	
163. Full Name, Mailing Address and Zip Code Gavin Coleman 205 3rd St NE, Washington, DC 20002	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) 10/23/2020	Amount of Each Receipt This Period \$ 250.00
Contributor Type Individual	Occupation Restaurant Owner Name and Address of Employer The Dubliner Restaurant & Pub 520 N Capitol St NW, Washington, DC 20001		
Aggregate Year-To-date		\$ 250.00	
164. Full Name, Mailing Address and Zip Code Mehdi Pirzadeh 4809 Woodway Ln NW, Washington, DC 20016	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) 10/23/2020	Amount of Each Receipt This Period \$ 250.00
Contributor Type Individual	Occupation Mortgage Banker Name and Address of Employer EagleBank 6010 Executive Blvd Ste 300, Rockville, MD 20852		

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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

Marcus Goodwin For DC 2020

		Aggregate Year-To-date		\$ 250.00
165. Full Name, Mailing Address and Zip Code barbara manard 2801 New Mexico Ave NW Apt 920, 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) 10/23/2020	Amount of Each Receipt This Period \$ 10.00	
Contributor Type Individual	Occupation Not Employed Name and Address of Employer Not Employed 2801 New Mexico Avenue Northwest apt 920, Washington, DC 20007			
		Aggregate Year-To-date		\$ 105.00
166. Full Name, Mailing Address and Zip Code Jeanette Fenty 1905 Kenyon St NW, Washington, DC 20010	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) 10/23/2020	Amount of Each Receipt This Period \$ 100.00	
Contributor Type Individual	Occupation Not Employed Name and Address of Employer Not Employed 1905 Kenyon St NW, Washington, DC 20010			
		Aggregate Year-To-date		\$ 500.00
167. Full Name, Mailing Address and Zip Code John Buchanan 3307 Newark St NW, Washington, DC 20008	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) 10/23/2020	Amount of Each Receipt This Period \$ 100.00	
Contributor Type Individual	Occupation Lawyer Name and Address of Employer Covington & Burling LLP 3307 Newark St NW, Washington, DC 20008			
		Aggregate Year-To-date		\$ 600.00
168. Full Name, Mailing Address and Zip Code Thomas L Birch 1240 29th 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) 10/23/2020	Amount of Each Receipt This Period \$ 50.00	
Contributor Type Individual	Occupation Not Employed Name and Address of Employer Not Employed 1240 29th Street NW, Washington, DC 20007			
		Aggregate Year-To-date		\$ 200.00

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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

Marcus Goodwin For DC 2020

169. Full Name, Mailing Address and Zip Code marybeth swad 2113 Dunmore Ln 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) 10/23/2020	Amount of Each Receipt This Period \$ 25.00
Contributor Type Individual	Occupation Not Employed Name and Address of Employer Not Employed 2113 Dunmore Ln NW, Washington, DC 20007		
Aggregate Year-To-date			\$ 175.00
170. Full Name, Mailing Address and Zip Code Frederick chockley 5121 Tilden St NW, Washington, DC 20016	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) 10/23/2020	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Not Employed Name and Address of Employer Not Employed 5121 Tilden St NW, Washington, DC 20016		
Aggregate Year-To-date			\$ 550.00
171. Full Name, Mailing Address and Zip Code LJeannette Mobley 3725 17th St NE, Washington, DC 20018	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) 10/23/2020	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Not Employed Name and Address of Employer Not Employed 3725 17th St NE, Washington, DC 20018		
Aggregate Year-To-date			\$ 100.00
172. Full Name, Mailing Address and Zip Code Elisabeth Pendleton 3410 Lowell St NW, Washington, DC 20016-5023	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) 10/23/2020	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Not Employed Name and Address of Employer Not Employed 3410 Lowell St NW, Washington, DC 20016-5023		
Aggregate Year-To-date			\$ 125.00
173. Full Name, Mailing Address and Zip Code Stacie Banks 4465 Sedgwick st NW, Washington, DC 20016	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) 10/23/2020	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Florist Name and Address of Employer Lee's Flowers 1026 U St NW, Washington, DC 20001		
Aggregate Year-To-date			\$ 50.00

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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

Marcus Goodwin For DC 2020

174. Full Name, Mailing Address and Zip Code Michael Abrams 2901 Albemarle St NW, Washington, DC 20008	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) 10/23/2020	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Real estate Name and Address of Employer Foulger Pratt 12435 Park Potomac Avenue Suite 200, Potomac, MD 20854		
Aggregate Year-To-date		\$ 350.00	
175. Full Name, Mailing Address and Zip Code Mae Best 1702 Peach Blossom Ct, Mitchellville, MD 20721	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) 10/23/2020	Amount of Each Receipt This Period \$ 25.00
Contributor Type Individual	Occupation Executive Director Name and Address of Employer ERFSC 3917 Minnesota Ave NE, Washington, DC 20019		
Aggregate Year-To-date		\$ 25.00	
176. Full Name, Mailing Address and Zip Code Judith Hubbard 2938 Newark St NW, Washington, DC 20008	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) 10/23/2020	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Not Employed Name and Address of Employer Not Employed 2938 Newark St NW, Washington, DC 20008		
Aggregate Year-To-date		\$ 50.00	
177. Full Name, Mailing Address and Zip Code Laura Elsey 200 W Washington Sq Apt 3808, Philadelphia, PA 19106	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) 10/23/2020	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Not Employed Name and Address of Employer Not Employed 200 W Washington Sq Apt 3808, Philadelphia, PA 19106		
Aggregate Year-To-date		\$ 150.00	

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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

Marcus Goodwin For DC 2020

178. Full Name, Mailing Address and Zip Code Debora Jones 5951 huntingtown rd, Huntingtown, MD 20639	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) 10/23/2020	Amount of Each Receipt This Period \$ 10.00
Contributor Type Individual	Occupation Not Employed Name and Address of Employer Not Employed 5951 huntingtown rd, Huntingtown, MD 20639		
Aggregate Year-To-date			\$ 30.00
179. Full Name, Mailing Address and Zip Code Marjorie DePuy 4455 Connecticut Ave NW Apt 215, Washington, DC 20008	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) 10/24/2020	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Program Manager Name and Address of Employer FMI 2345 Crystal Drive, Arlington, VA 22202		
Aggregate Year-To-date			\$ 446.00
180. Full Name, Mailing Address and Zip Code Bob Carter 913 R St NW, Washington, DC 20001	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) 10/24/2020	Amount of Each Receipt This Period \$ 25.00
Contributor Type Individual	Occupation Not Employed Name and Address of Employer Not Employed 913 R St NW, Washington, DC 20001		
Aggregate Year-To-date			\$ 25.00
181. Full Name, Mailing Address and Zip Code Jennifer Landry-Jackson 7325 12th St 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 checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 10/24/2020	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Senior Manager State International and Bo Name and Address of Employer National Association of Broadcasters 1 M St SE, Washington, DC 20003		
Aggregate Year-To-date			\$ 100.00
182. Full Name, Mailing Address and Zip Code pedro talavera 911 v st nw, washington, DC 20001	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) 10/24/2020	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Not Employed Name and Address of Employer Not Employed 911 v st nw, Washington, DC 20001		
Aggregate Year-To-date			\$ 531.00

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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

Marcus Goodwin For DC 2020

183. Full Name, Mailing Address and Zip Code Sean Nadel 1123 Constitution Ave NE Apt A, Washington, DC 20002	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) 10/24/2020	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Lawyer Name and Address of Employer Kellogg Hansen Todd Figel and Frederick PLLC 1123 Constitution Ave NE Apt A, Washington, DC 20002		
Aggregate Year-To-date		\$ 400.00	
184. Full Name, Mailing Address and Zip Code Kush Das 39 V St NE, Washington, DC 20002	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) 10/24/2020	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Private Equity Managing Partner Name and Address of Employer Circa Health Capital Partners 39 V St NE, Washington, DC 20002		
Aggregate Year-To-date		\$ 100.00	
185. Full Name, Mailing Address and Zip Code Tyler Merkeley 1252 Half St SW, Washington, DC 20024	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) 10/24/2020	Amount of Each Receipt This Period \$ 250.00
Contributor Type Individual	Occupation Scientist Name and Address of Employer HHS 300 Independence Ave SE, Washington, DC 20003		
Aggregate Year-To-date		\$ 250.00	
186. Full Name, Mailing Address and Zip Code Willy Walker 4701 S Dasa Dr, Cherry Hills Village, CO 80111	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) 10/24/2020	Amount of Each Receipt This Period \$ 500.00
Contributor Type Individual	Occupation Banker Name and Address of Employer Walker & Dunlop 7501 Wisconsin Ave, Bethesda, MD 20814		
Aggregate Year-To-date		\$ 500.00	
187. Full Name, Mailing Address and Zip Code Mark Kulkowitz 114 Pearl Ave, Cape May, NJ 08204	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) 10/24/2020	Amount of Each Receipt This Period \$ 25.00
Contributor Type Individual	Occupation Mad Batter Name and Address of Employer 19 Jackson 2 Hannah Dr, Cape May, NJ 08204		

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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

Marcus Goodwin For DC 2020

		Aggregate Year-To-date		\$ 25.00
188. Full Name, Mailing Address and Zip Code Walter Faggett 15121 Glade Dr # 132E, Silver Spring, MD 20906	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) 10/24/2020	Amount of Each Receipt This Period \$ 250.00	
Contributor Type Individual	Occupation Medical Director Name and Address of Employer Emerson Clinical Research Inst/Clinic 508 Kennedy st NW, Washington, DC 20011			
		Aggregate Year-To-date		\$ 250.00
189. Full Name, Mailing Address and Zip Code Terrance Rogers 780 Boylston St Apt 23F, Boston, MA 02199	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) 10/24/2020	Amount of Each Receipt This Period \$ 100.00	
Contributor Type Individual	Occupation Chief of Staff Name and Address of Employer Drift 222 Berkeley St, Boston, MA 02116			
		Aggregate Year-To-date		\$ 100.00
190. Full Name, Mailing Address and Zip Code Joan Danzansky 3609 Edmunds 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) 10/25/2020	Amount of Each Receipt This Period \$ 20.00	
Contributor Type Individual	Occupation Not Employed Name and Address of Employer Not Employed 3609 Edmunds St NW, Washington, DC 20007			
		Aggregate Year-To-date		\$ 70.00
191. Full Name, Mailing Address and Zip Code Alice Love 403 9th St NE, Washington, DC 20002-6117	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) 10/25/2020	Amount of Each Receipt This Period \$ 10.00	
Contributor Type Individual	Occupation Not Employed Name and Address of Employer Not Employed 403 9th Street NE, Washington, DC 20002-6117			
		Aggregate Year-To-date		\$ 50.00
192. Full Name, Mailing Address and Zip Code Rotimi Oyewole 339 Greene Ave, BROOKLYN, NY 11238	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) 10/25/2020	Amount of Each Receipt This Period \$ 20.00	
Contributor Type Individual	Occupation Senior Product Manager Name and Address of Employer ActBlue 339 Greene Ave Apt 3B, Brooklyn, NY 11238			

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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

Marcus Goodwin For DC 2020

		Aggregate Year-To-date		\$ 20.00
193. Full Name, Mailing Address and Zip Code Cary Fuller 2923 Bellevue Ter NW, Washington, DC 20016	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) 10/25/2020	Amount of Each Receipt This Period \$ 50.00	
Contributor Type Individual	Occupation Not Employed Name and Address of Employer Not Employed 2923 Bellevue Terrace Northwest, Washington, DC 20016			
		Aggregate Year-To-date		\$ 150.00
194. Full Name, Mailing Address and Zip Code MaryAnn Miller 3001 Veazey Ter NW, WASHINGTON, DC 20008	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) 10/25/2020	Amount of Each Receipt This Period \$ 25.00	
Contributor Type Individual	Occupation Not Employed Name and Address of Employer Not Employed 3001 Veazey Terr NW, Washington, DC 20008			
		Aggregate Year-To-date		\$ 101.00
195. Full Name, Mailing Address and Zip Code Elizabeth Keeton 5303 13th St NW, 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) 10/25/2020	Amount of Each Receipt This Period \$ 31.00	
Contributor Type Individual	Occupation Special Assistant Name and Address of Employer DC Government 5303 13th Street NW, Washington, DC 20011			
		Aggregate Year-To-date		\$ 56.00
196. Full Name, Mailing Address and Zip Code Cindy and Sean Sherman 3326 Stuyvesant Pl NW, Washington, DC 20015	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) 10/25/2020	Amount of Each Receipt This Period \$ 50.00	
Contributor Type Individual	Occupation SLP Name and Address of Employer self 3326 Stuyvesant Pl NW, Washington, DC 20015			
		Aggregate Year-To-date		\$ 50.00

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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

Marcus Goodwin For DC 2020

197. Full Name, Mailing Address and Zip Code David Toney 1410 Irving St NE, Washington, DC 20017	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) 10/25/2020	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Real estate developer Name and Address of Employer Akridge 601 13th St NW, Washington, DC 20005		
Aggregate Year-To-date			\$ 350.00
198. Full Name, Mailing Address and Zip Code Lauren Marcus 2 M St NE Apt 915, Washington, DC 20002	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) 10/25/2020	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Lawyer Name and Address of Employer Tiber Hudson llc 1900 M St NW, Washington, DC 20036		
Aggregate Year-To-date			\$ 100.00
199. Full Name, Mailing Address and Zip Code Alexander Kapur 936 N San Vicente Blvd Apt 15, West Hollywood, CA 90069	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) 10/25/2020	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation tech Name and Address of Employer Reveleer 425 W Broadway, Glendale, CA 91204		
Aggregate Year-To-date			\$ 100.00
200. Full Name, Mailing Address and Zip Code Eric Magwood 217 P St NW, Washington, DC 20001	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) 10/25/2020	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Self employed Name and Address of Employer Self 217 P St NW, Washington, DC 20001		
Aggregate Year-To-date			\$ 600.00
201. Full Name, Mailing Address and Zip Code Michael Tongour 4937 Tilden St NW, Washington, DC 20016	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) 10/25/2020	Amount of Each Receipt This Period \$ 250.00
Contributor Type Individual	Occupation Attorney Name and Address of Employer TCH Group 601 13th St NW, Washington, DC 20005		
Aggregate Year-To-date			\$ 250.00

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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

Marcus Goodwin For DC 2020

202. Full Name, Mailing Address and Zip Code Christine Williams 4409 Sutherland Cir, Upper Marlboro, MD 20772	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) 10/25/2020	Amount of Each Receipt This Period \$ 10.00
Contributor Type Individual	Occupation Psychotherapist Name and Address of Employer Self 4409 Sutherland Cir, Upper Marlboro, MD 20772		
Aggregate Year-To-date			\$ 10.00
203. Full Name, Mailing Address and Zip Code Greg rooney 6136 32nd St NW, Washington, DC 20015	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) 10/25/2020	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Real estate Name and Address of Employer The Bernstein companies 6136 32nd St NW, Washington, DC 20015		
Aggregate Year-To-date			\$ 50.00
204. Full Name, Mailing Address and Zip Code Enid Doggett 2924 10th st NE, Washington, DC 20017	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) 10/25/2020	Amount of Each Receipt This Period \$ 25.00
Contributor Type Individual	Occupation Public Relations Name and Address of Employer INSPR Media 2924 10th Street NE, Washington, DC 20017		
Aggregate Year-To-date			\$ 160.00
205. Full Name, Mailing Address and Zip Code Janice Davis 1420 Primrose Rd 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 checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 10/25/2020	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Benefits Consultant Name and Address of Employer Davis Planning 7059 Blair Rd NW Ste 204, Washington, DC 20012		
Aggregate Year-To-date			\$ 100.00
206. Full Name, Mailing Address and Zip Code Barbara Gottschalk 2101 Connecticut Ave NW, Washington, DC 20008	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) 10/25/2020	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Not Employed Name and Address of Employer Not Employed 2101 Connecticut Ave NW, Washington, DC 20008		
Aggregate Year-To-date			\$ 125.00

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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

Marcus Goodwin For DC 2020

207. Full Name, Mailing Address and Zip Code Stephen Gardner 4545 W St NW, Washington, DC 20007-1513	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) 10/25/2020	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Attorney Name and Address of Employer Kalbian Hagerty LLP 888 17th St NW, Washington, DC 20006		
Aggregate Year-To-date		\$ 100.00	
208. Full Name, Mailing Address and Zip Code Susan Perry 141 12th St NE Apt 17, Washington, DC 20002	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) 10/25/2020	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Not Employed Name and Address of Employer Not Employed 141 12th St NE Apt 17, Washington, DC 20002		
Aggregate Year-To-date		\$ 50.00	
209. Full Name, Mailing Address and Zip Code Martha Luttrell 1443 Crystal Lake Rd, Aspen, CO 81611	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) 10/25/2020	Amount of Each Receipt This Period \$ 5.00
Contributor Type Individual	Occupation Not Employed Name and Address of Employer Not Employed 1443 Crystal Lake Rd, Aspen, CO 81611		
Aggregate Year-To-date		\$ 5.00	
210. Full Name, Mailing Address and Zip Code Mitchell Gail 4407 35TH ST NW, WASHINGTON, DC 20008-4203	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) 10/25/2020	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Statistician Name and Address of Employer US Gov 4407 35TH ST NW, WASHINGTON, DC 20008		
Aggregate Year-To-date		\$ 50.00	
211. Full Name, Mailing Address and Zip Code John Kane 79 Potomac Ave SE Apt 701, Washington, DC 20003	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) 10/25/2020	Amount of Each Receipt This Period \$ 500.00
Contributor Type Individual	Occupation Managing Partner Name and Address of Employer Aton Strategies LLC 201 Defense Hwy Ste 260, Annapolis, MD 21401		
Aggregate Year-To-date		\$ 500.00	

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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

Marcus Goodwin For DC 2020

212. Full Name, Mailing Address and Zip Code David Wilmot 1653 Kalmia Rd 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 checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 10/25/2020	Amount of Each Receipt This Period \$ 500.00
Contributor Type Individual	Occupation Attorney Name and Address of Employer Wilmot Law Firm LLP 1455 Pennsylvania Ave NW Ste 400, Washington, DC 20004		
Aggregate Year-To-date			\$ 500.00
213. Full Name, Mailing Address and Zip Code JV LaBeaume 1832 Park Rd NW, Washington, DC 20010	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) 10/25/2020	Amount of Each Receipt This Period \$ 20.00
Contributor Type Individual	Occupation Not Employed Name and Address of Employer Not Employed 1832 Park Rd NW, Washington, DC 20010		
Aggregate Year-To-date			\$ 20.00
214. Full Name, Mailing Address and Zip Code William Bonstra 1519 Vermont Ave NW, Washington, DC 20005	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) 10/25/2020	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Architect Name and Address of Employer Bonstra Haresign Architects 1728 14th Street NW, Washington, DC 20009		
Aggregate Year-To-date			\$ 350.00
215. Full Name, Mailing Address and Zip Code John Leaman 404 High St, East Pennsboro, PA 17025	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) 10/25/2020	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Computer Operator Name and Address of Employer American Personnel Managers & Consultants Incorporated 3607 Rosemont Ave Ste 101, Camp Hill, PA 17011		
Aggregate Year-To-date			\$ 50.00
216. Full Name, Mailing Address and Zip Code Alfred Gilbert 285 Humboldt Rd, Brisbane, CA 94005	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) 10/25/2020	Amount of Each Receipt This Period \$ 25.00
Contributor Type Individual	Occupation Not Employed Name and Address of Employer Not Employed 285 Humboldt Rd, Brisbane, CA 94005		

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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

Marcus Goodwin For DC 2020

		Aggregate Year-To-date		\$ 570.00
217. Full Name, Mailing Address and Zip Code Robert Boyett 57 Mount Tom Rd, Salisbury, CT 06068	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) 10/25/2020	Amount of Each Receipt This Period \$ 100.00	
Contributor Type Individual	Occupation Entertainment producer Name and Address of Employer RBT THEATRICALS 57 Mount Tom Rd, Salisbury, CT 06068			
		Aggregate Year-To-date		\$ 100.00
218. Full Name, Mailing Address and Zip Code Patrick Scoriah 3337 Tennyson St NW, Washington, DC 20015	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) 10/25/2020	Amount of Each Receipt This Period \$ 10.00	
Contributor Type Individual	Occupation Data Name and Address of Employer ONE Street 1725 I St NW, Washington, DC 20006			
		Aggregate Year-To-date		\$ 10.00
219. Full Name, Mailing Address and Zip Code David Roche 1735 W 70th St, Los Angeles, CA 90047	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) 10/25/2020	Amount of Each Receipt This Period \$ 20.00	
Contributor Type Individual	Occupation Engineer Name and Address of Employer CourtCall 6383 Arizona Cir, Los Angeles, CA 90045			
		Aggregate Year-To-date		\$ 37.00
220. Full Name, Mailing Address and Zip Code Michael Dickens 3625 Ordway St NW, Washington, DC 20016	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) 10/25/2020	Amount of Each Receipt This Period \$ 500.00	
Contributor Type Individual	Occupation Hotel Executive Name and Address of Employer Hospitality Partners LLC 3 Bethesda Metro Ctr Ste M025, Bethesda, MD 20814			
		Aggregate Year-To-date		\$ 500.00

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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

Marcus Goodwin For DC 2020

221. Full Name, Mailing Address and Zip Code Kathy Wang 125 NE 32nd St, Miami, FL 33137	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) 10/25/2020	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Director of Product Name and Address of Employer Magic Leap 7500 W Sunrise Blvd, Plantation, FL 33313		
Aggregate Year-To-date		\$ 100.00	
222. Full Name, Mailing Address and Zip Code elizabeth miller 3021 Q 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) 10/25/2020	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Not Employed Name and Address of Employer Not Employed 3021 Q ST NW, washington, DC 20007		
Aggregate Year-To-date		\$ 100.00	
223. Full Name, Mailing Address and Zip Code Lydia Marshall 2323 Porter St NW, Washington, DC 20008	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) 10/25/2020	Amount of Each Receipt This Period \$ 25.00
Contributor Type Individual	Occupation Principal Name and Address of Employer LM Marshall LLC 2323 Porter Street NW, Washington, DC 20008		
Aggregate Year-To-date		\$ 275.00	
224. Full Name, Mailing Address and Zip Code Patrick Kean 2336 Nebraska Ave NW, Washington, DC 20016	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) 10/25/2020	Amount of Each Receipt This Period \$ 500.00
Contributor Type Individual	Occupation Consultant Name and Address of Employer Self 2336 Nebraska Ave NW, Washington, DC 20016		
Aggregate Year-To-date		\$ 500.00	
225. Full Name, Mailing Address and Zip Code Josie Jordan 4302 River Rd NW, Washington, DC 20016	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) 10/25/2020	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Not Employed Name and Address of Employer Not Employed 4302 River Road NW, Washington, DC 20016		
Aggregate Year-To-date		\$ 500.00	

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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

Marcus Goodwin For DC 2020

226. Full Name, Mailing Address and Zip Code Tamara Wilds Lawson 3210 Loud Pl SE, Washington, DC 20019	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) 10/25/2020	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation ED Collective Impact Name and Address of Employer Nationals Philanthropies 1500 S Capitol St SE, Washington, DC 20003		
Aggregate Year-To-date			\$ 50.00
227. Full Name, Mailing Address and Zip Code Stephanie Finigan 3871 Porter St NW Apt E293, Washington, DC 20016	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) 10/25/2020	Amount of Each Receipt This Period \$ 10.00
Contributor Type Individual	Occupation Consultant Name and Address of Employer Self 3871 Porter St NW Apt E293, Washington, DC 20016		
Aggregate Year-To-date			\$ 10.00
228. Full Name, Mailing Address and Zip Code Sherri Cunningham 3274 Chestnut St NW, Washington, DC 20015	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) 10/25/2020	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Communications Name and Address of Employer NoMa BID 1200 1st St NE, Washington, DC 20002		
Aggregate Year-To-date			\$ 100.00
229. Full Name, Mailing Address and Zip Code chyla evans 1500 Eaton Rd 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) 10/26/2020	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation GC Name and Address of Employer Earth worth 1500 Eaton Road SE Unit 101, Washington, DC 20020		
Aggregate Year-To-date			\$ 200.00

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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

Marcus Goodwin For DC 2020

230. Full Name, Mailing Address and Zip Code Gail Lelyveld 4201 Butterworth Pl NW Apt 432, Washington, DC 20016	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) 10/26/2020	Amount of Each Receipt This Period \$ 10.00
Contributor Type Individual	Occupation Not Employed Name and Address of Employer Not Employed 4201 Butterworth Place NW Apt 432, Washington, DC 20016		
Aggregate Year-To-date			\$ 40.00
231. Full Name, Mailing Address and Zip Code Emily Blair Stribling 523 Naskeag Rd, Brooklin, ME 04616	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) 10/26/2020	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Not Employed Name and Address of Employer Not Employed 523 Naskeag Rd, Brooklin, ME 04616		
Aggregate Year-To-date			\$ 100.00
232. Full Name, Mailing Address and Zip Code John Buchanan 3307 Newark St NW, Washington, DC 20008	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) 10/26/2020	Amount of Each Receipt This Period \$ 250.00
Contributor Type Individual	Occupation Lawyer Name and Address of Employer Covington & Burling LLP 3307 Newark St NW, Washington, DC 20008		
Aggregate Year-To-date			\$ 850.00
233. Full Name, Mailing Address and Zip Code John Fox 4504 Foxhall Cres 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) 10/26/2020	Amount of Each Receipt This Period \$ 25.00
Contributor Type Individual	Occupation Not Employed Name and Address of Employer Not Employed 4504 Foxhall Cres NW, Washington, DC 20007		
Aggregate Year-To-date			\$ 50.00
234. Full Name, Mailing Address and Zip Code Roberta Mims 1120 34th St SE, Washington, DC 20019-2913	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) 10/26/2020	Amount of Each Receipt This Period \$ 25.00
Contributor Type Individual	Occupation Not Employed Name and Address of Employer Not Employed 1120 34th St SE, Washington, DC 20019-2913		

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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

Marcus Goodwin For DC 2020

		Aggregate Year-To-date		\$ 25.00
235. Full Name, Mailing Address and Zip Code Seth Andrew 622 Maryland Ave NE, Washington, DC 20002	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) 10/26/2020	Amount of Each Receipt This Period \$ 20.00	
Contributor Type Individual	Occupation Not Employed Name and Address of Employer Not Employed 622 Maryland Ave NE, Washington, DC 20002			
		Aggregate Year-To-date		\$ 20.00
236. Full Name, Mailing Address and Zip Code Toni Baker 1765 Shepherd St NW, 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) 10/26/2020	Amount of Each Receipt This Period \$ 100.00	
Contributor Type Individual	Occupation Not Employed Name and Address of Employer Not Employed 1765 Shepherd St NW, Washington, DC 20011			
		Aggregate Year-To-date		\$ 100.00
237. Full Name, Mailing Address and Zip Code ROBERT H CRAFT 2801 NEW MEXICO AVE NW, Washington, DC 20007-3938	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) 10/26/2020	Amount of Each Receipt This Period \$ 100.00	
Contributor Type Individual	Occupation Not Employed Name and Address of Employer Not Employed 2801 NEW MEXICO AVE NW, Washington, DC 20007-3938			
		Aggregate Year-To-date		\$ 100.00
238. Full Name, Mailing Address and Zip Code rosyletta simms 9634 Oxbridge Way, Mitchellville, MD 20721	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) 10/26/2020	Amount of Each Receipt This Period \$ 10.00	
Contributor Type Individual	Occupation Not Employed Name and Address of Employer Not Employed 9634 Oxbridge Way, Mitchellville, MD 20721			
		Aggregate Year-To-date		\$ 60.00

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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

Marcus Goodwin For DC 2020

239. Full Name, Mailing Address and Zip Code Ting Ng 3300 Fessenden St NW, Washington, DC 20008	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) 10/26/2020	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Financial Analyst Name and Address of Employer Pennsylvania Multifamily Asset Managers 4350 East West Hwy Ste 310, Bethesda, MD 20814		
Aggregate Year-To-date			\$ 50.00
240. Full Name, Mailing Address and Zip Code Barry Holman 740 NE 3rd St Ste 3-332, Bend, OR 97701	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) 10/26/2020	Amount of Each Receipt This Period \$ 20.00
Contributor Type Individual	Occupation Senior Fellow Juvenile Justice Name and Address of Employer Case Commons 740 NE 3rd St Ste 3-332, Bend, OR 97701		
Aggregate Year-To-date			\$ 20.00
241. Full Name, Mailing Address and Zip Code Lolita Massey 5574 B St SE Apt 102, Washington, DC 20019	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) 10/26/2020	Amount of Each Receipt This Period \$ 20.00
Contributor Type Individual	Occupation Not Employed Name and Address of Employer Not Employed 5574 B St SE Apt 102, Washington, DC 20019		
Aggregate Year-To-date			\$ 20.00
242. Full Name, Mailing Address and Zip Code Ray Sharif 7017 Saint Annes Ave, Lanham, MD 20706	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) 10/26/2020	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Realtor Name and Address of Employer Bennett 7017 Saint Annes Ave, Lanham, MD 20706		
Aggregate Year-To-date			\$ 50.00
243. Full Name, Mailing Address and Zip Code Eva-Maria von Bronk 4613 Blagden Ave NW, 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) 10/26/2020	Amount of Each Receipt This Period \$ 10.00
Contributor Type Individual	Occupation Real Estate Broker Name and Address of Employer Eva Realty LLC 1511 17th St NW, Washington, DC 20036		
Aggregate Year-To-date			\$ 10.00

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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

Marcus Goodwin For DC 2020

244. Full Name, Mailing Address and Zip Code William Billow PO Box 242, Barboursville, VA 22923	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) 10/26/2020	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Not Employed Name and Address of Employer Not Employed PO Box 242, Barboursville, VA 22923		
Aggregate Year-To-date		\$ 100.00	
245. Full Name, Mailing Address and Zip Code Farinaz Akhavan 6004 Highland Dr, Chevy Chase, MD 20815	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) 10/26/2020	Amount of Each Receipt This Period \$ 500.00
Contributor Type Individual	Occupation Attorney Name and Address of Employer Advantia Health 1001 19th St N, Arlington, VA 22209		
Aggregate Year-To-date		\$ 500.00	
246. Full Name, Mailing Address and Zip Code Mary C Beyda 2555 Pennsylvania Ave NW Apt 306, Washington, DC 20037	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) 10/26/2020	Amount of Each Receipt This Period \$ 10.00
Contributor Type Individual	Occupation Not Employed Name and Address of Employer Not Employed 2555 Pennsylvania Ave NW Apt 306, Washington, DC 20037		
Aggregate Year-To-date		\$ 20.00	
247. Full Name, Mailing Address and Zip Code Stefan Martinovic 666 Greenwich St, New york, NY 10014	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) 10/26/2020	Amount of Each Receipt This Period \$ 10.00
Contributor Type Individual	Occupation Midwood Name and Address of Employer Real estate 25 Meadow Hill Pl, Armonk, NY 10504		
Aggregate Year-To-date		\$ 10.00	

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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

Marcus Goodwin For DC 2020

248. Full Name, Mailing Address and Zip Code Chris Beauregard 1331 Maryland Ave SW Apt 242, Washington, DC 20024	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) 10/26/2020	Amount of Each Receipt This Period \$ 20.00
Contributor Type Individual	Occupation Policy Advisor Name and Address of Employer NSpC 1331 Maryland Ave SW Apartment 242, Washington, DC 20024		
Aggregate Year-To-date		\$ 40.00	
249. Full Name, Mailing Address and Zip Code Andrew McGregor 2234 48th 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) 10/26/2020	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Not Employed Name and Address of Employer Not Employed 2234 48th St NW, Washington, DC 20007		
Aggregate Year-To-date		\$ 50.00	
250. Full Name, Mailing Address and Zip Code Jeanette Fenty 1905 Kenyon St NW, Washington, DC 20010	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) 10/26/2020	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Not Employed Name and Address of Employer Not Employed 1905 Kenyon St NW, Washington, DC 20010		
Aggregate Year-To-date		\$ 600.00	
251. Full Name, Mailing Address and Zip Code Veronica Salcido 9716 Overlea Dr, rockville, MD 20850-3741	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) 10/26/2020	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Real Estate Agent Name and Address of Employer KLNb 11111 Potomac Crest Dr, Potomac, MD 20854		
Aggregate Year-To-date		\$ 100.00	
252. Full Name, Mailing Address and Zip Code Lyle Blanchard 5609 32nd St NW, Washington, DC 20015	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) 10/26/2020	Amount of Each Receipt This Period \$ 25.00
Contributor Type Individual	Occupation Attorney Name and Address of Employer Greenstein DeLorme & Luchs 1620 L St NW Ste 900, Washington, DC 20036		

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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

Marcus Goodwin For DC 2020

		Aggregate Year-To-date		\$ 25.00
253. Full Name, Mailing Address and Zip Code Lafayette Barnes 114 Mississippi Ave SE, 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) 10/26/2020	Amount of Each Receipt This Period \$ 100.00	
Contributor Type Individual	Occupation Pres. & CEO Name and Address of Employer Zulu Global Enterprise LLC 114 Mississippi Ave SE, Washington, DC 20032			
		Aggregate Year-To-date		\$ 100.00
254. Full Name, Mailing Address and Zip Code Carol Resch 4237 Garfield 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) 10/26/2020	Amount of Each Receipt This Period \$ 50.00	
Contributor Type Individual	Occupation Attorney Name and Address of Employer Coldwell Banker 4237 Garfield St NW, Washington, DC 20007			
		Aggregate Year-To-date		\$ 50.00
255. Full Name, Mailing Address and Zip Code Marcus Keith Island 814 6th st Ne, Washington, DC 20002	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) 10/26/2020	Amount of Each Receipt This Period \$ 50.00	
Contributor Type Individual	Occupation Sign Language interpreter Name and Address of Employer Federal Government 814 6th st Ne, Washington, DC 20002			
		Aggregate Year-To-date		\$ 50.00
256. Full Name, Mailing Address and Zip Code Alliance Home Health Care & Equipment Services 5826 Eastern Ave NW Ste 400, Washington, DC 20012	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) 10/26/2020	Amount of Each Receipt This Period \$ 500.00	
Contributor Type Business	Occupation Name and Address of Employer			
Business Type Limited Liability Company				
		Aggregate Year-To-date		\$ 500.00

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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

Marcus Goodwin For DC 2020

257. Full Name, Mailing Address and Zip Code Fesha Mollalign 4009 Wintersweet Ct, Rockville, MD 20853	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) 10/26/2020	Amount of Each Receipt This Period \$ 500.00
Contributor Type Individual	Occupation Administrator Name and Address of Employer Berhan Home Healthcare Agency 7826 Eastern Ave NW Ste 400, Washington, DC 20012		
Aggregate Year-To-date			\$ 500.00
258. Full Name, Mailing Address and Zip Code Charles Tiedemann 3200 44th St NW, Washington, DC 20016	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) 10/26/2020	Amount of Each Receipt This Period \$ 10.00
Contributor Type Individual	Occupation Lawyer Name and Address of Employer Holland & Knight 3200 44th St NW, Washington, DC 20016		
Aggregate Year-To-date			\$ 10.00
259. Full Name, Mailing Address and Zip Code Ernest Igwacho 11801 Meadowland Dr, Bowie, MD 20720	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) 10/26/2020	Amount of Each Receipt This Period \$ 250.00
Contributor Type Individual	Occupation Administrator Name and Address of Employer Catholic Charities 924 G St NW, Washington, DC 20001		
Aggregate Year-To-date			\$ 250.00
TOTAL This Period (Aggregate of all Receipt pages)			\$ 42,465.00

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

Marcus Goodwin For DC 2020

1. Full Name, Mailing Address and Zip Code Jilltraci King 4707 B St SE, Washington, DC 20019	Purpose of Expenditure Salary/Stipend	Date (month, day, year) 10/12/2020	Amount of Each Expenditure This Period \$ 300.00
Occupation Self employed	Name and Address of Employer Self employed 4707 B St SE, Washington, DC 20019		
2. Full Name, Mailing Address and Zip Code Capri McKnight 113 21st St NE, Washington, DC 20002	Purpose of Expenditure Salary/Stipend	Date (month, day, year) 10/12/2020	Amount of Each Expenditure This Period \$ 300.00
Occupation Self employed	Name and Address of Employer Self employed 113 21st St NE, Washington, DC 20002		
3. Full Name, Mailing Address and Zip Code Sabrina White 4714 B St SE, Washington, DC 20019	Purpose of Expenditure Salary/Stipend	Date (month, day, year) 10/12/2020	Amount of Each Expenditure This Period \$ 300.00
Occupation Self employed	Name and Address of Employer Self employed 4714 B St SE, Washington, DC 20019		
4. Full Name, Mailing Address and Zip Code Yusuf Barzinji 2801 R St NW, Washington, DC 20007	Purpose of Expenditure Salary/Stipend	Date (month, day, year) 10/12/2020	Amount of Each Expenditure This Period \$ 200.00
Occupation Self employed	Name and Address of Employer Self employed 2801 R St NW, Washington, DC 20007		
5. Full Name, Mailing Address and Zip Code Eeba Ali 2801 R St NW, Washington, DC 20007	Purpose of Expenditure Salary/Stipend	Date (month, day, year) 10/12/2020	Amount of Each Expenditure This Period \$ 100.00
Occupation Self employed	Name and Address of Employer Self employed 2801 R St NW, Washington, DC 20007		
6. Full Name, Mailing Address and Zip Code Aisha Dahir 16222 Cutter Way, Woodbridge, VA 22191	Purpose of Expenditure Salary/Stipend	Date (month, day, year) 10/12/2020	Amount of Each Expenditure This Period \$ 100.00
Occupation Self employed	Name and Address of Employer Self employed 16222 Cutter Way, Woodbridge, VA 22191		
7. Full Name, Mailing Address and Zip Code Kaif Johnson 8501 Chervil Rd, Lanham, MD 20706	Purpose of Expenditure Salary/Stipend	Date (month, day, year) 10/12/2020	Amount of Each Expenditure This Period \$ 400.00
Occupation Self employed	Name and Address of Employer Self employed 8501 Chervil Rd, Lanham, MD 20706		

8. Full Name, Mailing Address and Zip Code Chanel Mitchell 558 Newcomb St SE Apt 4, Washington, DC 20032	Purpose of Expenditure Salary/Stipend	Date (month, day, year) 10/12/2020	Amount of Each Expenditure This Period \$ 100.00
Occupation Self employed	Name and Address of Employer Self employed 558 Newcomb St SE Apt 4, Washington, DC 20032		
9. Full Name, Mailing Address and Zip Code Barry Jarrels 1500 Massachusetts Ave NW Apt 815, Washington, DC 20005	Purpose of Expenditure Salary/Stipend	Date (month, day, year) 10/12/2020	Amount of Each Expenditure This Period \$ 500.00
Occupation Self employed	Name and Address of Employer Self employed 1500 Massachusetts Ave NW Apt 815, Washington, DC 20005		
10. Full Name, Mailing Address and Zip Code Abdirahman Abdirahman 3010 Seven Oaks Pl, Falls Church, VA 22042	Purpose of Expenditure Salary/Stipend	Date (month, day, year) 10/12/2020	Amount of Each Expenditure This Period \$ 100.00
Occupation Self employed	Name and Address of Employer Self employed 3010 Seven Oaks Pl, Falls Church, VA 22042		
11. Full Name, Mailing Address and Zip Code Travon Hawkins 136 Wilmington Pl SE, Washington, DC 20032	Purpose of Expenditure Salary/Stipend	Date (month, day, year) 10/13/2020	Amount of Each Expenditure This Period \$ 568.00
Occupation Self employed	Name and Address of Employer Self employed 136 Wilmington Pl SE, Washington, DC 20032		
12. Full Name, Mailing Address and Zip Code Vistaprint USA 95 Hayden Ave, Lexington, MA 02421	Purpose of Expenditure Printing	Date (month, day, year) 10/13/2020	Amount of Each Expenditure This Period \$ 986.91
Occupation	Name and Address of Employer		
13. Full Name, Mailing Address and Zip Code Precision Signz 6125 Valley Dr, Bettendorf, IA 52722	Purpose of Expenditure Campaign Materials	Date (month, day, year) 10/13/2020	Amount of Each Expenditure This Period \$ 74.80
Occupation	Name and Address of Employer		
14. Full Name, Mailing Address and Zip Code Zoom 55 Almaden Boulevard, 6th Floor, San Jose, CA 95113	Purpose of Expenditure Computer and Web Expenses	Date (month, day, year) 10/13/2020	Amount of Each Expenditure This Period \$ 31.78
Occupation	Name and Address of Employer		
15. Full Name, Mailing Address and Zip Code Greg Blaine 316 Yuma St SE, Washington, DC 20032	Purpose of Expenditure Salary/Stipend	Date (month, day, year) 10/13/2020	Amount of Each Expenditure This Period \$ 500.00
Occupation Self employed	Name and Address of Employer Self employed 316 Yuma St SE, Washington, DC 20032		

16. Full Name, Mailing Address and Zip Code Facebook 1 Hacker Way, Menlo Park, CA 94025	Purpose of Expenditure Computer and Web Expenses	Date (month, day, year) 10/14/2020	Amount of Each Expenditure This Period \$ 273.45
Occupation	Name and Address of Employer		
17. Full Name, Mailing Address and Zip Code Jojo Evans 4835 Cordell Ave Apt 219, Bethesda, MD 20814	Purpose of Expenditure Salary/Stipend	Date (month, day, year) 10/14/2020	Amount of Each Expenditure This Period \$ 100.00
Occupation Self employed	Name and Address of Employer Self employed 4835 Cordell Ave Apt 219, Bethesda, MD 20814		
18. Full Name, Mailing Address and Zip Code Jojo Evans 4835 Cordell Ave Apt 219, Bethesda, MD 20814	Purpose of Expenditure Salary/Stipend	Date (month, day, year) 10/14/2020	Amount of Each Expenditure This Period \$ 500.00
Occupation Self employed	Name and Address of Employer Self employed 4835 Cordell Ave Apt 219, Bethesda, MD 20814		
19. Full Name, Mailing Address and Zip Code Jevian Gudger 4100 Rhode Island Ave, Brentwood, MD 20722	Purpose of Expenditure Salary/Stipend	Date (month, day, year) 10/14/2020	Amount of Each Expenditure This Period \$ 100.00
Occupation Self employed	Name and Address of Employer Self employed 4100 Rhode Island Ave, Brentwood, MD 20722		
20. Full Name, Mailing Address and Zip Code Travon Hawkins 136 Wilmington Pl SE, Washington, DC 20032	Purpose of Expenditure Salary/Stipend	Date (month, day, year) 10/14/2020	Amount of Each Expenditure This Period \$ 200.00
Occupation Self employed	Name and Address of Employer Self employed 136 Wilmington Pl SE, Washington, DC 20032		
21. Full Name, Mailing Address and Zip Code TD Bank 1701 Route 70 East, Cherry Hill, NJ 08034	Purpose of Expenditure Bank Fees	Date (month, day, year) 10/15/2020	Amount of Each Expenditure This Period \$ 30.00
Occupation	Name and Address of Employer		
22. Full Name, Mailing Address and Zip Code John Fanning 1307 12th St NW, Washington, DC 20005	Purpose of Expenditure Salary/Stipend	Date (month, day, year) 10/15/2020	Amount of Each Expenditure This Period \$ 300.00
Occupation Self employed	Name and Address of Employer Self employed 1307 12th St NW, Washington, DC 20005		
23. Full Name, Mailing Address and Zip Code DP Strategies LLC 1342 Florida Ave NW, Washington, DC 20009	Purpose of Expenditure Salary/Stipend	Date (month, day, year) 10/15/2020	Amount of Each Expenditure This Period \$ 15,009.62
Occupation	Name and Address of Employer		

24. Full Name, Mailing Address and Zip Code Jevian Gudger 4100 Rhode Island Ave, Brentwood, MD 20722	Purpose of Expenditure Salary/Stipend	Date (month, day, year) 10/15/2020	Amount of Each Expenditure This Period \$ 190.00
Occupation Self employed	Name and Address of Employer Self employed 4100 Rhode Island Ave, Brentwood, MD 20722		
25. Full Name, Mailing Address and Zip Code Northeast Digital 643 Quincy St NE, Minneapolis, MN 55413	Purpose of Expenditure Consultant	Date (month, day, year) 10/16/2020	Amount of Each Expenditure This Period \$ 2,700.00
Occupation	Name and Address of Employer		
26. Full Name, Mailing Address and Zip Code TD Bank 1701 Route 70 East, Cherry Hill, NJ 08034	Purpose of Expenditure Bank Fees	Date (month, day, year) 10/19/2020	Amount of Each Expenditure This Period \$ 45.00
Occupation	Name and Address of Employer		
27. Full Name, Mailing Address and Zip Code Costco Wholesale 2441 Market St NE, Washington, DC 20018	Purpose of Expenditure Catering/Refreshments	Date (month, day, year) 10/19/2020	Amount of Each Expenditure This Period \$ 273.69
Occupation	Name and Address of Employer		
28. Full Name, Mailing Address and Zip Code Google 1600 Ampitheatre Pkwy, Mountain View, CA 94043	Purpose of Expenditure Computer and Web Expenses	Date (month, day, year) 10/19/2020	Amount of Each Expenditure This Period \$ 500.00
Occupation	Name and Address of Employer		
29. Full Name, Mailing Address and Zip Code Vistaprint USA 95 Hayden Ave, Lexington, MA 02421	Purpose of Expenditure Printing	Date (month, day, year) 10/19/2020	Amount of Each Expenditure This Period \$ 2,306.13
Occupation	Name and Address of Employer		
30. Full Name, Mailing Address and Zip Code DP Strategies LLC 1342 Florida Ave NW, Washington, DC 20009	Purpose of Expenditure Consultant	Date (month, day, year) 10/19/2020	Amount of Each Expenditure This Period \$ 15,886.56
Occupation	Name and Address of Employer		
31. Full Name, Mailing Address and Zip Code Staples 2950 Belcrest Center Dr, Hyattsville, MD 20782	Purpose of Expenditure Supplies	Date (month, day, year) 10/19/2020	Amount of Each Expenditure This Period \$ 5.21
Occupation	Name and Address of Employer		

32. Full Name, Mailing Address and Zip Code Travon Hawkins 136 Wilmington Pl SE, Washington, DC 20032	Purpose of Expenditure Salary/Stipend	Date (month, day, year) 10/19/2020	Amount of Each Expenditure This Period \$ 281.00
Occupation Self employed	Name and Address of Employer Self employed 136 Wilmington Pl SE, Washington, DC 20032		
33. Full Name, Mailing Address and Zip Code Travon Hawkins 136 Wilmington Pl SE, Washington, DC 20032	Purpose of Expenditure Salary/Stipend	Date (month, day, year) 10/19/2020	Amount of Each Expenditure This Period \$ 250.00
Occupation Self employed	Name and Address of Employer Self employed 136 Wilmington Pl SE, Washington, DC 20032		
34. Full Name, Mailing Address and Zip Code Kaif Johnson 8501 Chervil Rd, Lanham, MD 20706	Purpose of Expenditure Salary/Stipend	Date (month, day, year) 10/19/2020	Amount of Each Expenditure This Period \$ 175.00
Occupation Self employed	Name and Address of Employer Self employed 8501 Chervil Rd, Lanham, MD 20706		
35. Full Name, Mailing Address and Zip Code Aisha Dahir 16222 Cutter Way, Woodbridge, VA 22191	Purpose of Expenditure Salary/Stipend	Date (month, day, year) 10/19/2020	Amount of Each Expenditure This Period \$ 116.00
Occupation Self employed	Name and Address of Employer Self employed 16222 Cutter Way, Woodbridge, VA 22191		
36. Full Name, Mailing Address and Zip Code Tyjuan Brown 3904 21st ST NE, Washington, DC 20018	Purpose of Expenditure Salary/Stipend	Date (month, day, year) 10/19/2020	Amount of Each Expenditure This Period \$ 237.50
Occupation Self employed	Name and Address of Employer Self employed 3904 21st ST NE, Washington, DC 20018		
37. Full Name, Mailing Address and Zip Code Khalieq Johnson 8501 Chervil Rd, Lanham, MD 20706	Purpose of Expenditure Salary/Stipend	Date (month, day, year) 10/19/2020	Amount of Each Expenditure This Period \$ 60.00
Occupation Self employed	Name and Address of Employer Self employed 8501 Chervil Rd, Lanham, MD 20706		
38. Full Name, Mailing Address and Zip Code Jevian Gudger 4100 Rhode Island Ave, Brentwood, MD 20722	Purpose of Expenditure Salary/Stipend	Date (month, day, year) 10/19/2020	Amount of Each Expenditure This Period \$ 100.00
Occupation Self employed	Name and Address of Employer Self employed 4100 Rhode Island Ave, Brentwood, MD 20722		
39. Full Name, Mailing Address and Zip Code Tyjuan Brown 3904 21st ST NE, Washington, DC 20018	Purpose of Expenditure Salary/Stipend	Date (month, day, year) 10/19/2020	Amount of Each Expenditure This Period \$ 200.00
Occupation Self employed	Name and Address of Employer Self employed 3904 21st ST NE, Washington, DC 20018		

40. Full Name, Mailing Address and Zip Code TD Bank 1701 Route 70 East, Cherry Hill, NJ 08034	Purpose of Expenditure Bank Fees	Date (month, day, year) 10/21/2020	Amount of Each Expenditure This Period \$ 15.00
Occupation	Name and Address of Employer		
41. Full Name, Mailing Address and Zip Code CallHub.io 340 S Lemon Ave Ste 7468, Walnut, CA 91789	Purpose of Expenditure Computer and Web Expenses	Date (month, day, year) 10/21/2020	Amount of Each Expenditure This Period \$ 50.00
Occupation	Name and Address of Employer		
42. Full Name, Mailing Address and Zip Code Travon Hawkins 136 Wilmington Pl SE, Washington, DC 20032	Purpose of Expenditure Salary/Stipend	Date (month, day, year) 10/21/2020	Amount of Each Expenditure This Period \$ 240.00
Occupation Self employed	Name and Address of Employer Self employed 136 Wilmington Pl SE, Washington, DC 20032		
43. Full Name, Mailing Address and Zip Code Malcom Fox 1610 New Jersey Ave NW, Washington, DC 20001	Purpose of Expenditure Salary/Stipend	Date (month, day, year) 10/21/2020	Amount of Each Expenditure This Period \$ 4,500.00
Occupation Self employed	Name and Address of Employer Self employed 1610 New Jersey Ave NW, Washington, DC 20001		
44. Full Name, Mailing Address and Zip Code TD Bank 1701 Route 70 East, Cherry Hill, NJ 08034	Purpose of Expenditure Bank Fees	Date (month, day, year) 10/22/2020	Amount of Each Expenditure This Period \$ 15.00
Occupation	Name and Address of Employer		
45. Full Name, Mailing Address and Zip Code Sean Moore 3535 Stanton Rd SE Apt 18, Washington, DC 20020	Purpose of Expenditure Salary/Stipend	Date (month, day, year) 10/22/2020	Amount of Each Expenditure This Period \$ 100.00
Occupation Self employed	Name and Address of Employer Self employed 3535 Stanton Rd SE Apt 18, Washington, DC 20020		
46. Full Name, Mailing Address and Zip Code Andrew Shapiro 6605 31st St NW, Washington, DC 20015	Purpose of Expenditure Salary/Stipend	Date (month, day, year) 10/22/2020	Amount of Each Expenditure This Period \$ 1,000.00
Occupation Self employed	Name and Address of Employer Self employed 6605 31st St NW, Washington, DC 20015		
47. Full Name, Mailing Address and Zip Code Walmart 99 H St NW, Washington, DC 20001	Purpose of Expenditure Supplies	Date (month, day, year) 10/22/2020	Amount of Each Expenditure This Period \$ 46.33
Occupation	Name and Address of Employer		

48. Full Name, Mailing Address and Zip Code TD Bank 1701 Route 70 East, Cherry Hill, NJ 08034	Purpose of Expenditure Bank Fees	Date (month, day, year) 10/23/2020	Amount of Each Expenditure This Period \$ 15.00
Occupation	Name and Address of Employer		
49. Full Name, Mailing Address and Zip Code Google 1600 Ampitheatre Pkwy, Mountain View, CA 94043	Purpose of Expenditure Computer and Web Expenses	Date (month, day, year) 10/23/2020	Amount of Each Expenditure This Period \$ 341.89
Occupation	Name and Address of Employer		
50. Full Name, Mailing Address and Zip Code EffectTV 55 W 46th St, New York, NY 10036	Purpose of Expenditure Advertising	Date (month, day, year) 10/23/2020	Amount of Each Expenditure This Period \$ 9,994.00
Occupation	Name and Address of Employer		
51. Full Name, Mailing Address and Zip Code BaseCamp Inc 1929 18th St NW, Washington, DC 20009	Purpose of Expenditure Campaign Materials	Date (month, day, year) 10/23/2020	Amount of Each Expenditure This Period \$ 583.00
Occupation	Name and Address of Employer		
52. Full Name, Mailing Address and Zip Code Jevian Gudger 4100 Rhode Island Ave, Brentwood, MD 20722	Purpose of Expenditure Salary/Stipend	Date (month, day, year) 10/23/2020	Amount of Each Expenditure This Period \$ 260.00
Occupation Self employed	Name and Address of Employer Self employed 4100 Rhode Island Ave, Brentwood, MD 20722		
53. Full Name, Mailing Address and Zip Code Urban One 1010 Wayne Ave Fl 14, Silver Spring, MD 20910	Purpose of Expenditure Advertising	Date (month, day, year) 10/23/2020	Amount of Each Expenditure This Period \$ 4,010.00
Occupation	Name and Address of Employer		
54. Full Name, Mailing Address and Zip Code Amazon 410 Terry Ave N, Seattle, WA 98109	Purpose of Expenditure Supplies	Date (month, day, year) 10/25/2020	Amount of Each Expenditure This Period \$ 109.99
Occupation	Name and Address of Employer		
55. Full Name, Mailing Address and Zip Code Tyjuan Brown 3904 21st ST NE, Washington, DC 20018	Purpose of Expenditure Salary/Stipend	Date (month, day, year) 10/26/2020	Amount of Each Expenditure This Period \$ 135.00
Occupation Self employed	Name and Address of Employer Self employed 3904 21st ST NE, Washington, DC 20018		

56. Full Name, Mailing Address and Zip Code Tyjuan Brown 3904 21st ST NE, Washington, DC 20018	Purpose of Expenditure Salary/Stipend	Date (month, day, year) 10/26/2020	Amount of Each Expenditure This Period \$ 45.00
Occupation Self employed	Name and Address of Employer Self employed 3904 21st ST NE, Washington, DC 20018		
57. Full Name, Mailing Address and Zip Code Khalieq Johnson 8501 Chervil Rd, Lanham, MD 20706	Purpose of Expenditure Salary/Stipend	Date (month, day, year) 10/26/2020	Amount of Each Expenditure This Period \$ 345.00
Occupation Self employed	Name and Address of Employer Self employed 8501 Chervil Rd, Lanham, MD 20706		
58. Full Name, Mailing Address and Zip Code Warda Misana 12508 Cross Ridge Way, Germantown, MD 20874	Purpose of Expenditure Salary/Stipend	Date (month, day, year) 10/26/2020	Amount of Each Expenditure This Period \$ 415.00
Occupation Self employed	Name and Address of Employer Self employed 12508 Cross Ridge Way, Germantown, MD 20874		
59. Full Name, Mailing Address and Zip Code Jevian Gudger 4100 Rhode Island Ave, Brentwood, MD 20722	Purpose of Expenditure Salary/Stipend	Date (month, day, year) 10/26/2020	Amount of Each Expenditure This Period \$ 200.00
Occupation Self employed	Name and Address of Employer Self employed 4100 Rhode Island Ave, Brentwood, MD 20722		
60. Full Name, Mailing Address and Zip Code Alimamy Kallon 8118 Bird Ln, Greenbelt, MD 20770	Purpose of Expenditure Salary/Stipend	Date (month, day, year) 10/26/2020	Amount of Each Expenditure This Period \$ 90.00
Occupation Self employed	Name and Address of Employer Self employed 8118 Bird Ln, Greenbelt, MD 20770		
61. Full Name, Mailing Address and Zip Code Jevian Gudger 4100 Rhode Island Ave, Brentwood, MD 20722	Purpose of Expenditure Salary/Stipend	Date (month, day, year) 10/26/2020	Amount of Each Expenditure This Period \$ 300.00
Occupation Self employed	Name and Address of Employer Self employed 4100 Rhode Island Ave, Brentwood, MD 20722		
62. Full Name, Mailing Address and Zip Code Tyjuan Brown 3904 21st ST NE, Washington, DC 20018	Purpose of Expenditure Salary/Stipend	Date (month, day, year) 10/26/2020	Amount of Each Expenditure This Period \$ 45.00
Occupation Self employed	Name and Address of Employer Self employed 3904 21st ST NE, Washington, DC 20018		
63. Full Name, Mailing Address and Zip Code Kaif Johnson 8501 Chervil Rd, Lanham, MD 20706	Purpose of Expenditure Salary/Stipend	Date (month, day, year) 10/26/2020	Amount of Each Expenditure This Period \$ 295.00
Occupation Self employed	Name and Address of Employer Self employed 8501 Chervil Rd, Lanham, MD 20706		

64. Full Name, Mailing Address and Zip Code Hertz 99 H St NE, Washington, DC 20001	Purpose of Expenditure Travel	Date (month, day, year) 10/26/2020	Amount of Each Expenditure This Period \$ 497.00
Occupation	Name and Address of Employer		
65. Full Name, Mailing Address and Zip Code ActBlue 366 Summer Street, Somerville, MA 02145	Purpose of Expenditure Bank Fees	Date (month, day, year) 10/26/2020	Amount of Each Expenditure This Period \$ 1,184.26
Occupation	Name and Address of Employer		
TOTAL This Period (Aggregate of all expenditure pages)			\$ 69,232.12

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)

Marcus Goodwin For DC 2020

1. Full Name, Mailing Address and Zip Code Emily Blair Stribling 5 Bunker Hill rd, Salisbury, CT 06068	Purpose of Expenditure	Date (month, day, year) 10/15/2020	Amount of Each Expenditure This Period \$ 1,000.00
Contributor Type Individual			
2. Full Name, Mailing Address and Zip Code Jamil Sopher 5020 39th St NW, Washington, DC 20016	Purpose of Expenditure	Date (month, day, year) 10/26/2020	Amount of Each Expenditure This Period \$ 250.00
Contributor Type Individual			
3. Full Name, Mailing Address and Zip Code Jose Arnaldo Ortiz Gaud 3389 Stephenson Pl NW, Washington, DC 20015	Purpose of Expenditure	Date (month, day, year) 10/26/2020	Amount of Each Expenditure This Period \$ 250.00
Contributor Type Individual			
4. Full Name, Mailing Address and Zip Code Kameron Kang 3604 New Hampshire Ave NW, Washington, DC 20010	Purpose of Expenditure	Date (month, day, year) 10/26/2020	Amount of Each Expenditure This Period \$ 100.00
Contributor Type Individual			
5. Full Name, Mailing Address and Zip Code Mary Jane Checchi 3804 Klingle Pl NW, Washington, DC 20016	Purpose of Expenditure	Date (month, day, year) 10/26/2020	Amount of Each Expenditure This Period \$ 50.00
Contributor Type Individual			
TOTAL This Period (Aggregate of all expenditure pages)			\$ 1,650.00