

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 PA | AGE | |
|---|--------------------------------------|-----------------------|
| 1. Full Name of Committee (Name of Candidate, if Candidate is reporting) | 2. OCF Identification Number | |
| Mendelson for Chairman 2022 | PCCCCC227200 | |
| Address | 3. Is this report an Amendment? (Yes | or No) |
| 1239 E Street, SE | TYes No | |
| City, State and Zip Code | · | |
| Washington, DC 20003 | | |
| 4. TYPE OF REPORT: July 31st Report | | |
| This REPORT contains activity for: Primary Election | | |
| SUMMARY | COLUMN A | COLUMN B |
| 5. Covering Period 2/1/2021 through 7/31/2021 | THIS PERIOD | CUMULATIVE TO-DATE |
| ((c) Cash an Hand (January 21 Mars End Dan art Only) | | £ 0.00 |
| 6. (a) Cash on Hand (January 31 Year End Report Only) | | \$ 0.00 |
| (b) Cash on Hand at Beginning of Reporting Period | \$ 0.00 | |
| (c) Total Receipts [from Line (16)] | \$ 101,276.06 | \$ 101,276.06 |
| (d) Subtotal [add Lines 6(b) and 6(c) for Column A] | \$ 101,276.06 | |
| | | |
| 7. Total Expenditures (from Line 22) | \$ 8,621.30 | \$ 8,621.30 |
| 8. Cash on Hand at Close of Reporting Period [subtract Line 7 | \$ 92,654.76 | |
| from Line 6(d)] | | |
| 9. Debts and Obligations Owed BY the Committee or the Candidate (itemize all on Schedule D) | \$ 0.00 | \$ 0.00 |
| (itemize all on Schedule D) | | |
| 10. (a) Loans Owed By the Committee to the Candidate | \$ 0.00 | \$ 0.00 |
| (itemize all on Schedule E) | | 9 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

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. Ben Young

TYPE OR PRINT FULL NAME OF TREASURER

ELECTRONICALLY CERTIFIED

SIGNATURE OF TREASURER

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

08/02/2021

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.

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) | REPORT C | OVERING THE PERIC |)D | | |
|--|----------|----------------------------|---|------------|----------------|
| Mendelson for Chairman 2022 | FROM: 2/ | /1/2021 то | D: 7/31 | /2021 | |
| I. RECEIPTS | | COLUMN A AL 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) | \$ | 93,776.06 | \$ | 93,776.06 | 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) | \$ | 6,000.00 | \$ | 6,000.00 | 11(c) |
| (d) The Candidate (Schedule A-3) | \$ | 1,500.00 | \$ | 1,500.00 | 11(d) |
| (e) Transfers From Authorized Committees of the Candidate identified in this Report (Schedule A-4) (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(e) 11(f) |
| (g) Total Contributions (Other than Loans) [add lines 11(a), (b), (c), (d), (e) and (f)] | \$ | 101,276.06 | \$ | 101,276.06 | 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] | \$ | 101,276.06 | \$ | 101,276.06 | 16 |
| II. EXPENDITURES | | | | | |
| 17. OPERATING EXPENDITURES (Schedule B) | \$ | 8,621.30 | \$ | 8,621.30 | 17 |
| 18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES (Schedule B-1) | \$ | 0.00 | \$ | 0.00 | 18 |
| 19. LOAN REPAYMENTS: | | | | | |
| (a) Of Loans owed By the Committee to the Candidate (Schedule E) | \$ | 0.00 | \$ | 0.00 | 19(a) |
| (b) Of Loans from other source made to the Committee (Schedule E-1) | \$ | 0.00 | \$ | 0.00 | 19(b) |
| (c) Total Loan Repayments [add Lines 19(a) and 19(b)] | \$ | 0.00 | \$ | 0.00 | 19(c) |
| 20. REFUNDS OF CONTRIBUTIONS TO: | | | | | |
| (a) Individuals/Organizations Other Than Political Committees (Schedule B-2) | \$ | 0.00 | \$ | 0.00 | 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)] 21. OTHER EXPENDITURES | \$ | 0.00 | \$ | 0.00 | 20(d) |
| (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)] | \$ | 8,621.30 | \$ | 8,621.30 | 22 |
| III. CASH SUMMARY | | | | | |
| 23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD | \$ | | | 0.00 | 0 |
| 24. TOTAL RECEIPTS THIS PERIOD (from Line 16) | \$ | | | 101,276.06 | 6 |
| 25. SUBTOTAL (add Lines 23 and 24) | \$ | | | 101,276.06 | 6 |
| 26. TOTAL EXPENDITURES THIS PERIOD (from Line 22) | \$ | | | 8,621.30 | 0 |
| 27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25) | \$ | | | 92,654.76 | 6 |

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for Line Number 11a

| Full Name of Committee (Name of Candidate, if Can Mendelson for Chairman 2022 | ididate is reporting) | | |
|--|---|--|---|
| Full Name, Mailing Address and Zip Code Benjamin O Young 2900 Mckinley St NW, Washington, DC 20015 Contributor Type Individual | Contribution Type Cash Money Order Cashier Check Credit Card Other (Specify) In Kind (Specify) Occupation Public Affairs Name and Address of Employer Georgetown Public Affairs LLC 1220 19th St NW Ste 520, Washington, DC 20036 | Date (month, day, year) 05/14/2021 | Amount of Each Receipt This Period \$ 1,500.00 |
| | Aggregate Year-To-date | | \$ 1,500.00 |
| Full Name, Mailing Address and Zip Code David A Catania 2122 Newport Pl NW, Washington, DC 20037 Contributor Type Individual | Contribution Type Cash Money Order Cashier Check Credit Card Other (Specify) In Kind (Specify) Occupation Public Affairs Name and Address of Employer Georgetown Public Affairs LLC 12320 19th Sch NW, Sch 520, Werkington, DC 2002 (| Date (month, day, year) 05/14/2021 | Amount of Each Receipt This Period \$ 1,500.00 |
| | 1220 19th St NW Ste 520, Washington, DC 20036 Aggregate Year-To-date | | <u> </u> |
| Full Name, Mailing Address and Zip Code Janene Jackson 2114 Rand Pl NE, Washington, DC 20002 Contributor Type | Contribution Type Cash Money Order Check Cashier Check Credit Card Other (Specify) In Kind (Specify) Occupation Attorney | Date (month, day, year) 05/15/2021 | Amount of Each Receipt This Period \$ 1,500.00 |
| Individual | Name and Address of Employer Holland & Knight LLP 800 17th St NW, Washington, DC 20006 | | |
| | Aggregate Year-To-date | | \$ 1,500.00 |
| Full Name, Mailing Address and Zip Code Adrian T Jordan 3616 Jamison St NE, Washington, DC 20018 Contributor Type Individual | Contribution Type Cash Money Order Check Cashier Check Credit Card Other (Specify) In Kind (Specify) Occupation Government Affairs | Date (month, day, year) 05/23/2021 | Amount of Each Receipt This Period \$ 1,500.00 |
| Individual | Name and Address of Employer Anthem, Inc. 1001 Pennsylvania Ave NW, Washington, DC 20004 | | |
| | Aggregate Year-To-date | | \$ 1,500.00 |
| Full Name, Mailing Address and Zip Code Lloyd N Moore 3060 Blaine St, Coconut Grove, FL 33133 | Contribution Type Cash Money Order Check Cashier Check Credit Card Other (Specify) In Kind (Specify) | Date (month, day, year) 05/23/2021 | Amount of Each Receipt This Period \$ 1,500.00 |
| Contributor Type Individual | Occupation President Name and Address of Employer Moore Group of Companies Inc. | - | |
| | Aggregate Year-To-date | | <u> </u> |

OCF FORM 16

SCHEDULE A ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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for Line Number 11a

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| | | 1 | i |
|---|---|--|--|
| 6. Full Name, Mailing Address and Zip Code | Contribution Type | Date (month, | Amount of Each |
| Moore Group of Companies Inc | Cash Money Order Check | day, year) | Receipt This Period |
| 1776 I St NW, Washington, DC 20006 | Cashier Check Credit Card | 05/23/2021 | \$ 1,500.00 |
| | $\Box \text{ Other (Specify)}$ | | |
| | In Kind (Specify) | 4 | |
| Contributor Type Business | Occupation | - | |
| | Name and Address of Employer | | |
| Business Type | | | |
| Corporation | | | |
| | Aggregate Year-To-date | | \$ 1,500.00 |
| 7. Full Name, Mailing Address and Zip Code | Contribution Type | Date (month, | Amount of Each |
| Cynthia Cramer Osaghae | \Box Cash \Box Money Order \blacksquare Check | day, year) | Receipt This Period |
| 4945 Klingle St NW, Washington, DC 20016 | Cashier Check Credit Card | 05/24/2021 | \$ 1,000.00 |
| | □ Other (Specify) | 03/24/2021 | \$ 1,000.00 |
| | □ In Kind (Specify) | | |
| Contributor Type | Occupation Cardiovascular/Metabolic Business Special | is and the second s | |
| Individual | Name and Address of Employer | | |
| | Boehringer Ingelheim | | |
| | 1120 G St NW, Washington, DC 20005 | | |
| | Aggregate Year-To-date | | \$ 1,000.00 |
| 8. Full Name, Mailing Address and Zip Code | Contribution Type | Date (month, | Amount of Each |
| The Kerry S Pearson LLC | □ Cash □ Money Order ☑ Check | day, year) | Receipt This Period |
| 700 New Hampshire Ave NW, Washington, DC | Cashier Check Credit Card | 05/24/2021 | \$ 1,500.00 |
| 20037 | □ Other (Specify) | 03/24/2021 | \$ 1,500.00 |
| | □ In Kind (Specify) | | |
| Contributor Type | Occupation | | |
| Business | Name and Address of Employer | | |
| Business Type | | | |
| | | | |
| Limited Liability Company | | | |
| Limited Liability Company | Aggregate Year-To-date | | \$ 1,500.00 |
| | Aggregate Year-To-date Contribution Type | Date (month, | \$ 1,500.00 Amount of Each |
| | | Date (month, day, year) | Amount of Each |
| 9. Full Name, Mailing Address and Zip Code | Contribution Type | day, year) | Amount of Each Receipt This Period |
| Full Name, Mailing Address and Zip Code Gabrielle S Alfonso | Contribution Type | | \$ 1,500.00 Amount of Each Receipt This Period \$ 1,500.00 |
| Full Name, Mailing Address and Zip Code Gabrielle S Alfonso | Contribution Type Cash Money Order Check Cashier Check Credit Card | day, year) | Amount of Each Receipt This Period |
| 9. Full Name, Mailing Address and Zip Code Gabrielle S Alfonso 1809 Parkside Dr NW, Washington, DC 20012 Contributor Type | Contribution Type Cash Money Order Cashier Check Credit Card Other (Specify) | day, year) | Amount of Each Receipt This Period |
| 9. Full Name, Mailing Address and Zip Code Gabrielle S Alfonso 1809 Parkside Dr NW, Washington, DC 20012 | Contribution Type Cash Money Order Check Cashier Check Credit Card Other (Specify) In Kind (Specify) | day, year) | Amount of Each Receipt This Period |
| 9. Full Name, Mailing Address and Zip Code Gabrielle S Alfonso 1809 Parkside Dr NW, Washington, DC 20012 Contributor Type | Contribution Type Cash Money Order Cashier Check Credit Card Other (Specify) In Kind (Specify) Occupation Business Development Manager Name and Address of Employer Dynamic Concepts | day, year) | Amount of Each Receipt This Period |
| 9. Full Name, Mailing Address and Zip Code Gabrielle S Alfonso 1809 Parkside Dr NW, Washington, DC 20012 Contributor Type | Contribution Type Cash Money Order Cashier Check Credit Card Other (Specify) In Kind (Specify) In Kind (Specify) Occupation Business Development Manager Name and Address of Employer | day, year) | Amount of Each Receipt This Period |
| 9. Full Name, Mailing Address and Zip Code Gabrielle S Alfonso 1809 Parkside Dr NW, Washington, DC 20012 Contributor Type | Contribution Type Cash Money Order Cashier Check Credit Card Other (Specify) In Kind (Specify) Occupation Business Development Manager Name and Address of Employer Dynamic Concepts | day, year) | Amount of Each Receipt This Period |
| 9. Full Name, Mailing Address and Zip Code Gabrielle S Alfonso 1809 Parkside Dr NW, Washington, DC 20012 Contributor Type Individual | Contribution Type Cash Money Order Cashier Check Credit Card Other (Specify) In Kind (Specify) Occupation Business Development Manager Name and Address of Employer Dynamic Concepts 1730 17th St NE, Washington, DC 20002 | day, year) | Amount of Each Receipt This Period \$ 1,500.00 |
| 9. Full Name, Mailing Address and Zip Code Gabrielle S Alfonso 1809 Parkside Dr NW, Washington, DC 20012 Contributor Type Individual | Contribution Type Cash Money Order Cashier Check Credit Card Other (Specify) In Kind (Specify) Occupation Business Development Manager Name and Address of Employer Dynamic Concepts 1730 17th St NE, Washington, DC 20002 Aggregate Year-To-date | day, year) 05/25/2021 | Amount of Each Receipt This Period \$ 1,500.00 \$ 1,500.00 Amount of Each |
| 9. Full Name, Mailing Address and Zip Code Gabrielle S Alfonso 1809 Parkside Dr NW, Washington, DC 20012 Contributor Type Individual 10. Full Name, Mailing Address and Zip Code | Contribution Type Cash Money Order Check Cashier Check Credit Card Other (Specify) In Kind (Specify) Occupation Business Development Manager Name and Address of Employer Dynamic Concepts 1730 17th St NE, Washington, DC 20002 Aggregate Year-To-date Contribution Type Contribution Type | day, year) 05/25/2021 Date (month, day, year) | Amount of Each Receipt This Period \$ 1,500.00 \$ 1,500.00 Amount of Each Receipt This Period |
| 9. Full Name, Mailing Address and Zip Code Gabrielle S Alfonso 1809 Parkside Dr NW, Washington, DC 20012 Contributor Type Individual 10. Full Name, Mailing Address and Zip Code Paypal | Contribution Type Cash Money Order Check Cashier Check Credit Card Other (Specify) In Kind (Specify) In Kind (Specify) Occupation Business Development Manager Name and Address of Employer Dynamic Concepts 1730 17th St NE, Washington, DC 20002 Aggregate Year-To-date Contribution Type Cash Money Order Check | day, year) 05/25/2021 Date (month, | Amount of Each Receipt This Period \$ 1,500.00 \$ 1,500.00 Amount of Each |
| 9. Full Name, Mailing Address and Zip Code Gabrielle S Alfonso 1809 Parkside Dr NW, Washington, DC 20012 Contributor Type Individual 10. Full Name, Mailing Address and Zip Code Paypal | Contribution Type Cash Money Order Check Cashier Check Credit Card Other (Specify) In Kind (Specify) In Kind (Specify) Occupation Business Development Manager Name and Address of Employer Dynamic Concepts 1730 17th St NE, Washington, DC 20002 Aggregate Year-To-date Contribution Type Cash Money Order Check Cashier Check Credit Card | day, year) 05/25/2021 Date (month, day, year) | Amount of Each Receipt This Period \$ 1,500.00 \$ 1,500.00 Amount of Each Receipt This Period |
| 9. Full Name, Mailing Address and Zip Code Gabrielle S Alfonso 1809 Parkside Dr NW, Washington, DC 20012 Contributor Type Individual 10. Full Name, Mailing Address and Zip Code Paypal | Contribution Type Cash Money Order Check Cashier Check Credit Card Other (Specify) In Kind (Specify) In Kind (Specify) Occupation Business Development Manager Name and Address of Employer Dynamic Concepts 1730 17th St NE, Washington, DC 20002 Aggregate Year-To-date Contribution Type Cash Money Order Cashier Check Credit Card Ø Other (Specify) Direct deposit | day, year) 05/25/2021 Date (month, day, year) | Amount of Each Receipt This Period \$ 1,500.00 \$ 1,500.00 Amount of Each Receipt This Period |
| 9. Full Name, Mailing Address and Zip Code Gabrielle S Alfonso 1809 Parkside Dr NW, Washington, DC 20012 Contributor Type Individual 10. Full Name, Mailing Address and Zip Code Paypal 2211 N 1st St, San Jose, CA 95131 | Contribution Type □ Cash Money Order ☑ Check □ Cashier Check □ Credit Card □ Other (Specify) □ In Kind (Specify) □ In Kind (Specify) Occupation Business Development Manager Name and Address of Employer Dynamic Concepts 1730 17th St NE, Washington, DC 20002 Aggregate Year-To-date Contribution Type □ Cash □ Money Order □ Cash □ Money Order □ Cashier Check □ Credit Card ☑ Other (Specify) Direct deposit □ In Kind (Specify) □ Direct deposit □ In Kind (Specify) □ Money Order | day, year) 05/25/2021 Date (month, day, year) | Amount of Each Receipt This Period \$ 1,500.00 \$ 1,500.00 Amount of Each Receipt This Period |
| 9. Full Name, Mailing Address and Zip Code Gabrielle S Alfonso 1809 Parkside Dr NW, Washington, DC 20012 Contributor Type Individual 10. Full Name, Mailing Address and Zip Code Paypal 2211 N 1st St, San Jose, CA 95131 Contributor Type Business | Contribution Type Cash Money Order Check Cashier Check Credit Card Other (Specify) In Kind (Specify) Occupation Business Development Manager Name and Address of Employer Dynamic Concepts 1730 17th St NE, Washington, DC 20002 Aggregate Year-To-date Contribution Type Cash Money Order Cash Money Order Cashier Check Credit Card Ø Other (Specify) Direct deposit In Kind (Specify) Direct deposit | day, year) 05/25/2021 Date (month, day, year) | Amount of Each Receipt This Period \$ 1,500.00 \$ 1,500.00 Amount of Each Receipt This Period |
| 9. Full Name, Mailing Address and Zip Code Gabrielle S Alfonso 1809 Parkside Dr NW, Washington, DC 20012 Contributor Type Individual 10. Full Name, Mailing Address and Zip Code Paypal 2211 N 1st St, San Jose, CA 95131 Contributor Type | Contribution Type □ Cash Money Order ☑ Check □ Cashier Check □ Credit Card □ Other (Specify) □ In Kind (Specify) □ In Kind (Specify) Occupation Business Development Manager Name and Address of Employer Dynamic Concepts 1730 17th St NE, Washington, DC 20002 Aggregate Year-To-date Contribution Type □ Cash □ Money Order □ Cash □ Money Order □ Cashier Check □ Credit Card ☑ Other (Specify) Direct deposit □ In Kind (Specify) □ Direct deposit □ In Kind (Specify) □ Money Order | day, year) 05/25/2021 Date (month, day, year) | Amount of Each Receipt This Period \$ 1,500.00 \$ 1,500.00 Amount of Each Receipt This Period |

SCHEDULE A ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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for Line Number 11a

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| Mendelson for Chairman 2022 | | | |
|---|--|--|---|
| Full Name, Mailing Address and Zip Code Paypal 2211 N 1st St, San Jose, CA 95131 | Contribution Type Cash Money Order Cashier Check Credit Card O Other (Specify) Direct Deposit In Kind (Specify) | Date (month, day, year) 06/18/2021 | Amount of Each Receipt This Period \$ 0.02 |
| Contributor Type Business Business Type Corporation | Occupation Name and Address of Employer | | |
| | Aggregate Year-To-date | | \$ 0.06 |
| 12. Full Name, Mailing Address and Zip Code Helen C Epps 3888 Porter St NW Apt B344, Washington, DC 20016 Contributor Type Individual | Contribution Type Cash Money Order Image: Check Cashier Check Credit Card Other (Specify) Image: Check In Kind (Specify) Occupation Retired Name and Address of Employer N/A | Date (month, day, year) 07/12/2021 | Amount of Each Receipt This Period \$ 1,000.00 |
| | Aggregate Year-To-date | | \$ 1,000.00 |
| 13. Full Name, Mailing Address and Zip Code Peter M Gillon 3020 Chain Bridge Rd NW, Washington, DC 20016 | Contribution Type Cash Money Order Cashier Check Credit Card Other (Specify) | Date (month, day, year) 07/12/2021 | Amount of Each Receipt This Period \$ 500.00 |
| Contributor Type Individual | In Kind (Specify) Occupation Attorney Name and Address of Employer Pillsbury Law Firm 1200 17th St NW, Washington, DC 20036 | | |
| | Aggregate Year-To-date | | \$ 500.00 |
| 14. Full Name, Mailing Address and Zip Code Thomas E Hampton5207 2nd St NW, Washington, DC 20011 | Contribution Type Cash Money Order Check Cashier Check Credit Card Other (Specify) In Kind (Specify) | Date (month, day, year) 07/12/2021 | Amount of Each Receipt This Period \$ 100.00 |
| Contributor Type Individual | Occupation Senior Advisor Name and Address of Employer Denton's 1900 K St NW, Washington, DC 20006 | | |
| | Aggregate Year-To-date | | \$ 100.00 |
| 15. Full Name, Mailing Address and Zip Code Roy Kauffman 2300 N St NW Ste 300-RL, Washington, DC 20037 | Contribution Type □ Cash □ Money Order ☑ Check □ Cashier Check □ Credit Card □ Other (Specify) □ In Kind (Specify) | Date (month, day, year) 07/12/2021 | Amount of Each Receipt This Period \$ 100.00 |
| Contributor Type Individual | OccupationName and Address of EmployerJackson & Campbell, P.C.2300 N St NW Ste 300-RL, Washington, DC 20037 | | |
| | Aggregate Year-To-date | | \$ 100.00 |

SCHEDULE A ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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for Line Number 11a

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

| Full Name, Mailing Address and Zip Code Jacqueline P O'Neil | Contribution Type □ Cash □ Money Order ☑ Check | Date (month, day, year) | Amount of Each Receipt This Period |
|---|---|----------------------------|--|
| 2814 34th St NW, Washington, DC 20008 | □ Cashier Check □ Credit Card □ Other (Specify) □ In Kind (Specify) | 07/12/2021 | \$ 50.00 |
| Contributor Type | Occupation Retired | | |
| Individual | Name and Address of Employer N/A | | |
| | Aggregate Year-To-date | | \$ 50.00 |
| 17. Full Name, Mailing Address and Zip Code Lawrence Berman | Contribution Type | Date (month, day, year) | Amount of Each Receipt This Period |
| 1545 18th St NW Unit 315, Washington, DC | Cashier Check Credit Card | 07/13/2021 | \$ 25.00 |
| 20036 | □ Other (Specify) □ In Kind (Specify) | 011202021 | ¢ 20000 |
| Contributor Type | Occupation Retired | | |
| Individual | Name and Address of Employer | | |
| | N/A | | |
| | Aggregate Year-To-date | | \$ 25.00 |
| Full Name, Mailing Address and Zip Code Jimma D Tufa | Contribution Type | Date (month, | Amount of Each |
| 5704 36th Ave, Hyattsville, MD 20782 | □ Cash □ Money Order ☑ Check □ Cashier Check □ Credit Card | day, year) | Receipt This Period |
| , , , | □ Other (Specify) | 07/13/2021 | \$ 100.00 |
| Contributor Type | In Kind (Specify) Occupation | | |
| Individual | Name and Address of Employer | | |
| | D.C. Government | | |
| | 64 New York Ave NE, Washington, DC 20002 Aggregate Year-To-date | | <u> </u> |
| | | | 3 100.00 |
| 19. Full Name, Mailing Address and Zip Code | Contribution Type | Date (month, | Amount of Each |
| Nancy C Gould | Contribution Type Cash Money Order Check | Date (month, day, year) | |
| Full Name, Mailing Address and Zip Code Nancy C Gould 3643 Upton St NW, Washington, DC 20008 | Contribution Type Cash Money Order Check Cashier Check Credit Card | | Amount of Each |
| Nancy C Gould | Contribution Type Cash Money Order Check | day, year) | Amount of Each Receipt This Period |
| Nancy C Gould 3643 Upton St NW, Washington, DC 20008 Contributor Type | Contribution Type Cash Money Order Cashier Check Credit Card Other (Specify) | day, year) | Amount of Each Receipt This Period |
| Nancy C Gould 3643 Upton St NW, Washington, DC 20008 | Contribution Type Cash Money Order Cashier Check Credit Card Other (Specify) In Kind (Specify) | day, year) | Amount of Each Receipt This Period |
| Nancy C Gould 3643 Upton St NW, Washington, DC 20008 Contributor Type | Contribution Type Cash Money Order Cashier Check Credit Card Other (Specify) In Kind (Specify) Occupation Retired Name and Address of Employer | day, year) | Amount of Each Receipt This Period \$ 25.00 |
| Nancy C Gould 3643 Upton St NW, Washington, DC 20008 Contributor Type Individual 20. Full Name, Mailing Address and Zip Code | Contribution Type Cash Money Order Cashier Check Credit Card Other (Specify) In Kind (Specify) Occupation Retired Name and Address of Employer N/A Aggregate Year-To-date Contribution Type Contribution Type | day, year) 07/14/2021 | Amount of Each Receipt This Period \$ 25.00 \$ 25.00 Amount of Each |
| Nancy C Gould 3643 Upton St NW, Washington, DC 20008 Contributor Type Individual 20. Full Name, Mailing Address and Zip Code Howard Johnson | Contribution Type Cash Money Order Check Cashier Check Credit Card Other (Specify) In Kind (Specify) In Kind (Specify) Occupation Retired Name and Address of Employer N/A Aggregate Year-To-date Contribution Type Cash Money Order Image: Check | day, year) 07/14/2021 | Amount of Each Receipt This Period \$ 25.00 \$ 25.00 Amount of Each Receipt This Period |
| Nancy C Gould 3643 Upton St NW, Washington, DC 20008 Contributor Type Individual 20. Full Name, Mailing Address and Zip Code | Contribution Type Cash Money Order Check Cashier Check Credit Card Other (Specify) In Kind (Specify) In Kind (Specify) Occupation Retired Name and Address of Employer N/A Aggregate Year-To-date Cashier Check Check Cash Money Order Cash Check Cashier Check Credit Card Other (Specify) Other (Specify) | day, year) 07/14/2021 | Amount of Each Receipt This Period \$ 25.00 \$ 25.00 Amount of Each |
| Nancy C Gould 3643 Upton St NW, Washington, DC 20008 Contributor Type Individual 20. Full Name, Mailing Address and Zip Code Howard Johnson 614 4th Pl SW, Washington, DC 20024 Contributor Type | Contribution Type Cash Money Order Check Cashier Check Credit Card Check Other (Specify) In Kind (Specify) In Kind (Specify) Occupation Retired Name and Address of Employer N/A Aggregate Year-To-date Contribution Type Cash Money Order Check Cash Money Order Check Cashier Check Credit Card | day, year) 07/14/2021 | Amount of Each Receipt This Period \$ 25.00 \$ 25.00 Amount of Each Receipt This Period |
| Nancy C Gould 3643 Upton St NW, Washington, DC 20008 Contributor Type Individual 20. Full Name, Mailing Address and Zip Code Howard Johnson 614 4th Pl SW, Washington, DC 20024 | Contribution Type Cash Money Order Check Cashier Check Credit Card Other (Specify) In Kind (Specify) In Kind (Specify) Occupation Retired Name and Address of Employer N/A Aggregate Year-To-date Cashier Check Credit Card Cashier Check Credit Card Other (Specify) In Kind (Specify) In Kind (Specify) In Kind (Specify) In Kind (Specify) In Kind (Specify) | day, year) 07/14/2021 | Amount of Each Receipt This Period \$ 25.00 \$ 25.00 Amount of Each Receipt This Period |

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contributions, or for commercial purposes.

| 21. Full Name, Mailing Address and Zip Code | Contribution Type | Date (month, | Amount of Each |
|--|--|----------------------------|---------------------------------------|
| Julian Fairman Macdonald | Cash Money Order Check | day, year) | Receipt This Period |
| 2937 Macomb St NW, Washington, DC 20008 | Cashier Check Credit Card | 07/14/2021 | \$ 50.00 |
| | □ Other (Specify) | | + |
| | In Kind (Specify) | _ | |
| Contributor Type Individual | Occupation Retired | | |
| | Name and Address of Employer N/A | | |
| | Aggregate Year-To-date | | \$ 50.00 |
| 22. Full Name, Mailing Address and Zip Code | Contribution Type | Date (month, | Amount of Each |
| Kerry S Pearson | \Box Cash \Box Money Order \blacksquare Check | day, year) | Receipt This Period |
| 750 3rd St NW Apt 404, Washington, DC 20001 | □ Cashier Check □ Credit Card | | _ |
| 750 of a Serier Aperion, Washington, DC 20001 | \Box Other (Specify) | 07/14/2021 | \$ 1,500.00 |
| | □ In Kind (Specify) | | |
| Contributor Type Individual | Occupation President | | |
| individual | Name and Address of Employer The Kerry S. Pearson LLC | | |
| | 700 New Hampshire Ave NW Ste 115, Washington, | | |
| | DC 20037 Aggregate Year-To-date | | <u> </u> \$ 1,500.00 |
| 22 Full Name Mailing Address and Zin Cada | | | |
| 23. Full Name, Mailing Address and Zip Code Ram Uppuluri | Contribution Type | Date (month, | Amount of Each |
| | \Box Cashier Check \Box Credit Card | day, year) | Receipt This Period |
| 1901 C St SE Apt 344, Washington, DC 20003 | □ Other (Specify) | 07/15/2021 | \$ 100.00 |
| | $\Box \text{ In Kind (Specify)}$ | | |
| Contributor Type | Occupation Committee Director | _ | |
| Individual | Name and Address of Employer | | |
| | Council of the District of Columbia | | |
| | 1350 Pennsylvania Ave NW, Washington, DC 20004 | | |
| | Aggregate Year-To-date | | \$ 100.00 |
| 24. Full Name, Mailing Address and Zip Code | Contribution Type | Date (month, | Amount of Each |
| Kenneth Brewer | \Box Cash \Box Money Order \Box Check | day, year) | Receipt This Period |
| 2838 Fort Baker Dr SE, Washington, DC 20020 | Cashier Check I Credit Card | | - |
| | □ Other (Specify) | 07/15/2021 | \$ 250.00 |
| | □ In Kind (Specify) | _ | |
| Contributor Type | Occupation CEO | | |
| Individual | Name and Address of Employer | | |
| | HSCDC | | |
| | 916 Pennsylvania Ave SE, Washington, DC 20003 | | |
| | Aggregate Year-To-date | | \$ 250.00 |
| Full Name, Mailing Address and Zip Code Michael Coscia | Contribution Type | Date (month, day, year) | Amount of Each Receipt This Period |
| 304 14th St SE, Washington, DC 20003 | □ Cashier Check ☑ Credit Card | | - |
| ev. The story washington, DC 20000 | \Box Other (Specify) | 07/15/2021 | \$ 500.00 |
| | $\Box \text{ In Kind (Specify)}$ | | |
| Contributor Type | Occupation Sales | | |
| Individual | Name and Address of Employer | - | |
| | Self Employed | | |

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| | Aggregate Year-To-date | | \$ 500.00 |
|--|--|--|---|
| 26. Full Name, Mailing Address and Zip Code Julio Haddock 509 H St SW, Washington, DC 20024 Contributor Type Individual | Contribution Type Cash Money Order Check Cashier Check Credit Card Other (Specify) In Kind (Specify) In Kind (Specify) Occupation Retired Name and Address of Employer N/A | Date (month, day, year) 07/15/2021 | Amount of Each Receipt This Period \$ 400.00 |
| | Aggregate Year-To-date | | \$ 400.00 |
| 27. Full Name, Mailing Address and Zip Code Jacques A Rondeau 2055 Park Rd NW, Washington, DC 20010 Contributor Type Individual | Contribution Type □ Cash □ Money Order ☑ Check □ Cashier Check □ Credit Card □ Other (Specify) □ In Kind (Specify) □ In Kind (Specify) □ Name and Address of Employer Rosemount Center | Date (month, day, year) 07/15/2021 | Amount of Each Receipt This Period \$ 250.00 |
| | 2000 Rosemont Ave NW, Washington, DC 20010 Aggregate Year-To-date | | \$ 250.00 |
| 28. Full Name, Mailing Address and Zip Code Chase Wheeler Rynd 1125 11th St NW Apt 901, Washington, DC 20001 Contributor Type Individual | Contribution Type Cash Money Order Check Cashier Check Credit Card Other (Specify) In Kind (Specify) In Kind (Specify) Occupation Retired Name and Address of Employer N/A | Date (month, day, year) 07/15/2021 | Amount of Each Receipt This Period \$ 100.00 |
| | Aggregate Year-To-date | | \$ 100.00 |
| 29. Full Name, Mailing Address and Zip Code David Marlin 2101 Connecticut Ave NW, Washington, DC 20008 Contributor Type Individual | Aggregate Teal=To-date Contribution Type Cash Money Order Cashier Check Credit Card Other (Specify) In Kind (Specify) Occupation Name and Address of Employer | Date (month, day, year) 07/16/2021 | Amount of Each Receipt This Period \$ 51.00 |
| | Aggregate Year-To-date | | \$ 51.00 |
| 30. Full Name, Mailing Address and Zip Code James Dyke 2125 Cabots Point Ln, Reston, VA 20191 Contributor Type | Contribution Type Cash Money Order Cashier Check Credit Card Other (Specify) In Kind (Specify) Occupation Senior Advisor | Date (month, day, year) 07/16/2021 | Amount of Each Receipt This Period \$ 250.00 |
| Individual | Name and Address of Employer McGuire Woods Consulting 1750 Tysons Blvd Ste 1800, Tysons, VA 22102 | | |

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| | Aggregate Year-To-date | | \$ 250.00 |
|--|---|--|---|
| 31. Full Name, Mailing Address and Zip Code Jenny Bilfield-Friedman 3131 Connecticut Ave NW Apt 2105, Washington, DC 20008 Contributor Type Individual | Contribution Type Cash Money Order Check Cashier Check Credit Card Other (Specify) In Kind (Specify) In Kind (Specify) Vecupation Executive Director Name and Address of Employer | Date (month, day, year) 07/17/2021 | Amount of Each Receipt This Period \$ 100.00 |
| | Washington Performing Arts 1400 K St NW Ste 500, Washington, DC 20005 | | |
| | Aggregate Year-To-date | | \$ 100.00 |
| 32. Full Name, Mailing Address and Zip Code Patricia Elwood 2740 34th St NW, Washington, DC 20008 | Contribution Type □ Cash □ Money Order ☑ Check □ Cashier Check □ Credit Card □ Other (Specify) □ In Kind (Specify) | Date (month, day, year) 07/17/2021 | Amount of Each Receipt This Period \$ 100.00 |
| Contributor Type Individual | Occupation Retired Name and Address of Employer N/A | | |
| | Aggregate Year-To-date | | \$ 100.00 |
| Full Name, Mailing Address and Zip Code Rebecca R Medrano 3435 Oakwood Ter NW, Washington, DC 20010 | Contribution Type Cash Money Order Check Cashier Check Credit Card Other (Specify) In Kind (Specify) | Date (month, day, year) 07/17/2021 | Amount of Each Receipt This Period \$ 250.00 |
| Contributor Type Individual | Occupation Executive Director Name and Address of Employer GALA Hispanic Theatre 3333 14th St NW, Washington, DC 20010 | | |
| | Aggregate Year-To-date | | \$ 250.00 |
| 34. Full Name, Mailing Address and Zip Code Charels J Robertson III 1516 T St NW, Washington, DC 20009 | Contribution Type Cash Money Order Image: Check Cashier Check Credit Card Other (Specify) In Kind (Specify) | Date (month, day, year) 07/17/2021 | Amount of Each Receipt This Period \$ 100.00 |
| Contributor Type Individual | Occupation Retired Name and Address of Employer N/A | _ | |
| | Aggregate Year-To-date | | \$ 100.00 |
| Full Name, Mailing Address and Zip Code Corey Griffin 1515 Lawrence St NE, Washington, DC 20017 | Contribution Type Cash Money Order Check Cashier Check Credit Card Other (Specify) In Kind (Specify) | Date (month, day, year) 07/19/2021 | Amount of Each Receipt This Period \$ 1,500.00 |
| Contributor Type Individual | Occupation Consulting Name and Address of Employer Global Government and Industry Partners 1515 Lawrence St NE, Washington, DC 20017 | | |

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contributions, or for commercial purposes.

| | Aggregate Year-To-date | | \$ 1,500.00 |
|---|---|--|---|
| 36. Full Name, Mailing Address and Zip Code Denise Shelton 400 Massachusetts Ave NW Apt 1110, Washington, DC 20001 Contributor Type | Contribution Type Cash Money Order Check Cashier Check Credit Card Other (Specify) In Kind (Specify) Occupation CEO | Date (month, day, year) 07/20/2021 | Amount of Each Receipt This Period \$ 1,000.00 |
| Individual | Name and Address of Employer Community Bridge Inc. 611 DIVISION AVE NE, Washington, DC 20019 | | |
| | Aggregate Year-To-date | | \$ 1,000.00 |
| 37. Full Name, Mailing Address and Zip Code Maia Hunt Estes 40 New York Ave NW, Washington, DC 20001 | Contribution Type Cash Money Order Check Cashier Check Credit Card Other (Specify) In Kind (Specify) | Date (month, day, year) 07/20/2021 | Amount of Each Receipt This Period \$ 500.00 |
| Contributor Type Individual | OccupationGovernment RelationsName and Address of EmployerInvarient901 7th St NW, Washington, DC 20001 | _ | |
| | Aggregate Year-To-date | | \$ 500.00 |
| 38. Full Name, Mailing Address and Zip Code John W Allem 3900 Cathedral Ave NW Apt 303A, Washington, DC 20016 | Contribution Type Cash Money Order Check Cashier Check Credit Card Other (Specify) In Kind (Specify) | Date (month, day, year) 07/20/2021 | Amount of Each Receipt This Period \$ 200.00 |
| Contributor Type Individual | Occupation Founder Name and Address of Employer Acquila Recovery 5101 Wisconsin Ave NW Ste 325, Washington, DC 20016 | | |
| | Aggregate Year-To-date | • | \$ 200.00 |
| 39. Full Name, Mailing Address and Zip Code Melissa Rhea 11582 Cedar Chase Rd, Herndon, VA 20170 | Contribution Type Cash Money Order Image: Check Cashier Check Credit Card Other (Specify) In Kind (Specify) | Date (month, day, year) 07/20/2021 | Amount of Each Receipt This Perior \$ 500.00 |
| Contributor Type Individual | Occupation Attorney Name and Address of Employer Jack H. Olendar & Associates 888 17th St NW Fl 4, Washington, DC 20006 | | |
| | Aggregate Year-To-date | • | \$ 500.00 |

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\$ 1,000.00

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ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting

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Full Name of Committee (Name of Candidate, if Candidate is reporting) Mendelson for Chairman 2022 40. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each **Marline Berlin** Check Cash □ Money Order day, year) Receipt This Period Cashier Check Credit Card 4526 30th St NW, Washington, DC 20008 07/21/2021 \$ 200.00 □ Other (Specify) □ In Kind (Specify) Occupation Retired **Contributor Type** Individual Name and Address of Employer N/A \$ 200.00 Aggregate Year-To-date 41. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each Roger K Clark Cash Check □ Money Order day, year) Receipt This Period Cashier Check Credit Card 1415 Montague St NW, Washington, DC 20011 07/21/2021 \$ 500.00 □ Other (Specify) □ In Kind (Specify) **Contributor Type** Occupation Attorney Individual Name and Address of Employer **Squire Patton Boggs** 2550 M St NW, Washington, DC 20037 \$ 500.00 Aggregate Year-To-date 42. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each Willem L Polak Cash Check □ Money Order Receipt This Period day, year) Cashier Check Credit Card 6001 Princeton Ave, Glen Echo, MD 20812 07/21/2021 \$ 500.00 □ Other (Specify) □ In Kind (Specify) Occupation Owner **Contributor Type** Individual Name and Address of Employer Potomac Riverboat Company 950 Wharf St SW, Washington, DC 20024 \$ 500.00 Aggregate Year-To-date 43. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each The Bernstein Companies Cash □ Money Order Check Receipt This Period day, year) Cashier Check Credit Card 3299 K St NW Ste 700, Washington, DC 20007 07/21/2021 \$ 1,500.00 Conter (Specify) □ In Kind (Specify) **Contributor Type** Occupation Business Name and Address of Employer **Business Type** Corporation \$ 1.500.00 Aggregate Year-To-date 44. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each Cash Perry, White, Ross, & Jacobson, LLC C Money Order Check Receipt This Period day, year) Cashier Check Credit Card 54 State Cir, Annapolis, MD 21401 07/21/2021 \$ 1,000.00 □ Other (Specify) □ In Kind (Specify) **Contributor Type** Occupation Business Name and Address of Employer **Business Type** Limited Liability Company

Aggregate Year-To-date

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| Mendelson for Chairman 2022 | | | 1 |
|---|--|--|---|
| 45. Full Name, Mailing Address and Zip Code Caragh Fay Owens 777 6th St NW, Washington, DC 20001 | Contribution Type Cash Money Order Cashier Check Credit Card Other (Specify) In Kind (Specify) | Date (month, day, year) 07/21/2021 | Amount of Each Receipt This Period \$ 1,500.00 |
| Contributor Type Individual | OccupationAttorneyName and Address of EmployerFay Law Group P.A.777 6th St NW, Washington, DC 20001 | | |
| | Aggregate Year-To-date | | \$ 1,500.00 |
| 46. Full Name, Mailing Address and Zip Code The Law Office of Jeffery J. Downey 8270 Greensboro Dr Ste 810, McLean, VA 22102 Contributor Type Business Business Type | Contribution Type Cash Money Order Check Cashier Check Credit Card Other (Specify) In Kind (Specify) In Kind (Specify) Occupation Name and Address of Employer | Date (month, day, year) 07/21/2021 | Amount of Each Receipt This Period \$ 200.00 |
| Corporation | Aggregate Year-To-date | | \$ 200.00 |
| | | | • • • • • • |
| 47. Full Name, Mailing Address and Zip Code Jose Ortiz 3389 Stephenson Pl NW, Washington, DC 20015 | Contribution Type Cash Money Order Check Cashier Check Image: Credit Card Other (Specify) In Kind (Specify) In Kind (Specify) | Date (month, day, year) 07/22/2021 | Amount of Each Receipt This Period \$ 100.00 |
| Contributor Type Individual | Occupation Owner Name and Address of Employer Allstate Floors 8220 Patuxent Range Rd Ste D, Jessup, MD 20794 | | |
| | Aggregate Year-To-date | | \$ 100.00 |
| 48. Full Name, Mailing Address and Zip Code Richard T Busch 1520 Caroline St NW, Washington, DC 20009 | Contribution Type □ Cash □ Money Order ☑ Check □ Cashier Check □ Credit Card □ Other (Specify) □ In Kind (Specify) | Date (month, day, year) 07/22/2021 | Amount of Each Receipt This Period \$ 200.00 |
| Contributor Type Individual | Occupation Retired Name and Address of Employer N/A | | |
| | Aggregate Year-To-date | I | \$ 200.00 |
| 49. Full Name, Mailing Address and Zip Code Lois S Fried 7514 Glenbrook Rd, Bethesda, MD 20814 Contributor Type Individual | Contribution Type Cash Money Order Check Cashier Check Credit Card Other (Specify) In Kind (Specify) In Kind (Specify) Vecupation | Date (month, day, year) 07/22/2021 | Amount of Each Receipt This Period \$ 1,200.00 |
| indi vidual | Name and Address of Employer Urban Atlantic 7735 Old Georgetown Rd, Bethesda, MD 20814 | | |
| | Aggregate Year-To-date | | \$ 1,200.00 |

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| Mendelson for Chairman 2022 | | | |
|--|--|--|---|
| 50. Full Name, Mailing Address and Zip Code Kimberly Black King 14003 Jones Bridge Rd, Upper Marlboro, MD 20774 Contributor Type Individual | Contribution Type □ Cash □ Money Order ☑ Check □ Cashier Check □ Credit Card □ □ Other (Specify) □ □ □ In Kind (Specify) ■ ■ Occupation Senior VP Real Estate Development Name and Address of Employer Volunteers of America | Date (month, day, year) 07/22/2021 | Amount of Each Receipt This Period \$ 100.00 |
| | 1660 Duke St, Alexandria, VA 22314 | | |
| | Aggregate Year-To-date | | \$ 100.00 |
| 51. Full Name, Mailing Address and Zip Code Law Offices of W. Scott Sonntag, PA 10211 Wincopin Cir Ste 620, Columbia, MD 21044 | Contribution Type Cash Money Order Check Cashier Check Credit Card Other (Specify) In Kind (Specify) | Date (month, day, year) 07/22/2021 | Amount of Each Receipt This Period \$ 500.00 |
| Contributor Type | Occupation | | |
| Business Business Type Corporation | Name and Address of Employer | | |
| Corporation | Aggregate Year-To-date | | \$ 1,000.00 |
| 52. Full Name, Mailing Address and Zip Code Law Offices of W. Scott Sonntag, PA 10211 Wincopin Cir Ste 620, Columbia, MD 21044 | Contribution Type Cash Money Order Check Cashier Check Credit Card Other (Specify) Check | Date (month, day, year) 07/22/2021 | Amount of Each Receipt This Period \$ 500.00 |
| Contributor Type | In Kind (Specify) Occupation | _ | |
| Business | Name and Address of Employer | - | |
| Business Type Corporation | | | |
| | Aggregate Year-To-date | | \$ 1,000.00 |
| 53. Full Name, Mailing Address and Zip Code Robert Miller 3305 35th St NW, Washington, DC 20016 | Contribution Type Cash Money Order Check Cashier Check Credit Card Other (Specify) In Kind (Specify) | Date (month, day, year) 07/22/2021 | Amount of Each Receipt This Period \$ 150.00 |
| Contributor Type | Occupation Self-Employed | - | |
| Individual | Name and Address of Employer N/A | | |
| | Aggregate Year-To-date | | \$ 150.00 |
| 54. Full Name, Mailing Address and Zip Code LeJaun Strickland 1705 Lawrence St NE, Washington, DC 20018 | Contribution Type Cash Money Order Check Cashier Check Credit Card Other (Specify) In Kind (Specify) | Date (month, day, year) 07/23/2021 | Amount of Each Receipt This Period \$ 1,000.00 |
| Contributor Type Individual | Occupation Consultant Name and Address of Employer Self Employed | - | |
| | Aggregate Year-To-date | | \$ 1,000.00 |

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| Mendelson for Chairman 2022 | | | - |
|--|--|--|---|
| 55. Full Name, Mailing Address and Zip Code Max Brown 455 I St NW Apt 1104, Washington, DC 20001 Contributor Type | Contribution Type Cash Money Order Check Cashier Check Credit Card Other (Specify) In Kind (Specify) Occupation Attorney | Date (month, day, year) 07/23/2021 | Amount of Each Receipt This Period \$ 1,000.00 |
| Individual | Name and Address of Employer Group360 509 7th St NW, Washington, DC 20004 | | |
| | Aggregate Year-To-date | | \$ 1,000.00 |
| 56. Full Name, Mailing Address and Zip Code David Warr 5175 Macomb St NW, Washington, DC 20016 Contributor Type Individual | Contribution Type Cash Money Order Cashier Check Credit Card Other (Specify) In Kind (Specify) In Kind (Specify) Occupation N/A Name and Address of Employer Retired | Date (month, day, year) 07/23/2021 | Amount of Each Receipt This Period \$ 100.00 |
| | Aggregate Year-To-date | | \$ 100.00 |
| 57. Full Name, Mailing Address and Zip Code Seth Miller Gabriel 6225 29th St NW, Washington, DC 20015 | Contribution Type Cash Money Order Check Cashier Check Credit Card Check Other (Specify) In Kind (Specify) | Date (month, day, year) 07/23/2021 | Amount of Each Receipt This Period \$ 100.00 |
| Contributor Type Individual | OccupationDirectorName and Address of EmployerBDO799 9th St NW, Washington, DC 20001 | | |
| | Aggregate Year-To-date | · | \$ 100.00 |
| 58. Full Name, Mailing Address and Zip Code Yvette Alexander 3442 Highwood Dr SE, Washington, DC 20020 | Contribution Type Cash Money Order Check Cashier Check Credit Card Other (Specify) In Kind (Specify) In Kind (Specify) | Date (month, day, year) 07/23/2021 | Amount of Each Receipt This Period \$ 1,000.00 |
| Contributor Type Individual | OccupationConsultantName and Address of EmployerYvette Alexander and Associates3442 Highwood Dr SE, Washington, DC 20020 | | |
| | Aggregate Year-To-date | | \$ 1,000.00 |
| 59. Full Name, Mailing Address and Zip Code Heather Ness 2465 N Wakefield Ct, Arlington, VA 22207 | Contribution Type Cash Money Order Check Cashier Check Credit Card Other (Specify) In Kind (Specify) | Date (month, day, year) 07/23/2021 | Amount of Each Receipt This Period \$ 500.00 |
| Contributor Type Individual | Occupation Principal Name and Address of Employer Robert Bobb Group 1666 K St NW, Washington, DC 20006 | | |
| | Aggregate Year-To-date | | \$ 500.00 |

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| Mendelson for Chairman 2022 | | | · · · |
|--|--|--|---|
| 60. Full Name, Mailing Address and Zip Code Heather Podesta 2107 Wyoming Ave NW, Washington, DC 20008 | Contribution Type Cash Money Order Check Cashier Check Credit Card Other (Specify) | Date (month, day, year) 07/23/2021 | Amount of Each Receipt This Period \$ 1,000.00 |
| | $\Box \text{ In Kind (Specify)}$ | | |
| Contributor Type | Occupation Government Relations | | |
| Individual | Name and Address of Employer | | |
| | Invarient LLC | | |
| | 901 7th St NW, Washington, DC 20001 Aggregate Year-To-date | | \$ 1,000.00 |
| | | | |
| 61. Full Name, Mailing Address and Zip Code Annie Whatley | Contribution Type | Date (month, | Amount of Each Receipt This Period |
| 1315 Fern St NW, Washington, DC 20012 | \Box Cashier Check \blacksquare Credit Card | day, year) | |
| 1010 1 011 011 () (usungoon, 2 0 20012 | □ Other (Specify) | 07/23/2021 | \$ 250.00 |
| | □ In Kind (Specify) | | |
| Contributor Type | Occupation Asst. VP External Relations | | |
| Individual | Name and Address of Employer | | |
| | University of the District of Columbia | | |
| | 4200 Connecticut Ave NW, Washington, DC 20008 Aggregate Year-To-date | I | \$ 250.00 |
| | | | |
| 62. Full Name, Mailing Address and Zip Code Michael Akin | Contribution Type | Date (month, | Amount of Each Receipt This Period |
| 5424 Nebraska Ave NW, Washington, DC 20015 | \Box Cashier Check \blacksquare Credit Card | day, year) | - |
| 5424 Rebraska Recenter, Washington, DC 20015 | □ Other (Specify) | 07/23/2021 | \$ 500.00 |
| | □ In Kind (Specify) | | |
| Contributor Type | Occupation Consultant | | |
| Individual | Name and Address of Employer | | |
| | Reingold LINK | | |
| | 2901 14th St NW, Washington, DC 20009 | | |
| | Aggregate Year-To-date | | \$ 500.00 |
| 63. Full Name, Mailing Address and Zip Code | Contribution Type | Date (month, | Amount of Each |
| William Adams | Cash Money Order Check | day, year) | Receipt This Period |
| 2310 14th St N Apt 406, Arlington, VA 22201 | Cashier Check Credit Card | 07/23/2021 | \$ 100.00 |
| | \Box In Kind (Specify) | | |
| Contributor Type | Occupation Consulting | | |
| Individual | Name and Address of Employer | | |
| | Amazon | | |
| | 1800 South Bell Street, Arlington, VA 22201 | | |
| | Aggregate Year-To-date | | \$ 100.00 |
| 64. Full Name, Mailing Address and Zip Code | Contribution Type | Date (month, | Amount of Each |
| Victoria Davis | □ Cash □ Money Order ☑ Check | day, year) | Receipt This Period |
| 7516 Radnor Rd, Bethesda, MD 20817 | Cashier Check Credit Card | 07/23/2021 | \$ 1,250.00 |
| | □ Other (Specify) □ In Kind (Specify) | | |
| Contributor Type | Occupation Managing Partner | | |
| Individual | Name and Address of Employer | | |
| | Urban Atlantic | | |
| | 7735 Old Georgetown Rd, Bethesda, MD 20814 | | |
| | Aggregate Year-To-date | | \$ 1,250.00 |

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SCHEDULE A

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\$ 1,500.00

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting

contributions, or for commercial purposes.

Full Name of Committee (Name of Candidate, if Candidate is reporting) Mendelson for Chairman 2022 65. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each Albers & Company Check Receipt This Period Cash □ Money Order day, year) Cashier Check Credit Card 1655 Fort Myer Dr Ste 700, Arlington, VA 07/23/2021 \$ 1,000.00 □ Other (Specify) 22209 □ In Kind (Specify) Occupation **Contributor Type Business** Name and Address of Employer **Business Type** Corporation \$ 1.000.00 Aggregate Year-To-date 66. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each Sateside Associates, Inc. Check Receipt This Period Cash D Money Order day, year) Cashier Check Credit Card 1101 Wilson Blvd Fl 16, Arlington, VA 22209 07/23/2021 \$ 500.00 □ Other (Specify) □ In Kind (Specify) **Contributor Type** Occupation **Business** Name and Address of Employer **Business Type** Corporation Aggregate Year-To-date \$ 500.00 67. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each Julia Mitchell Newlands Cash Check □ Money Order Receipt This Period day, year) Cashier Check Credit Card 5606 Nebraska Ave NW, Washington, DC 20015 07/23/2021 \$ 500.00 □ Other (Specify) □ In Kind (Specify) Occupation Attorney **Contributor Type** Individual Name and Address of Employer Stein, Mitchell, Beato, & Missner LLP 901 15th St NW Ste 700, Washington, DC 20005 Aggregate Year-To-date \$ 500.00 68. Full Name, Mailing Address and Zip Code **Contribution Type** Amount of Each Date (month, **Chasen Boscolo Injury Lawyers** Cash □ Money Order Check day, year) Receipt This Period Cashier Check Credit Card 7852 Walker Dr Ste 300, Greenbelt, MD 20770 07/23/2021 \$ 1,500.00 □ Other (Specify) □ In Kind (Specify) **Contributor Type** Occupation **Business** Name and Address of Employer **Business Type** Corporation Aggregate Year-To-date \$ 1.500.00 69. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each The Cochran Firm D.C. Cash □ Money Order Check Receipt This Period day, year) Cashier Check Credit Card 1666 K St NW Ste 1150, Washington, DC 20006 07/23/2021 \$ 1,500.00 Other (Specify) □ In Kind (Specify) **Contributor Type** Occupation Business Name and Address of Employer **Business Type** Corporation

Aggregate Year-To-date

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contributions, or for commercial purposes.

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

Mendelson for Chairman 2022 70. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each Greenberg & Bederman LLC Check Cash □ Money Order day, year) Receipt This Period Cashier Check Credit Card 1111 Bonifant St, Silver Spring, MD 20910 07/23/2021 \$ 500.00 □ Other (Specify) □ In Kind (Specify) Occupation **Contributor Type Business** Name and Address of Employer **Business Type** Limited Liability Company \$ 500.00 Aggregate Year-To-date 71. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each Check Law Offices of Gregory S. Smith Cash D Money Order Receipt This Period day, year) Cashier Check Credit Card 913 E Capitol St SE, Washington, DC 20003 07/23/2021 \$ 100.00 □ Other (Specify) □ In Kind (Specify) **Contributor Type** Occupation **Business** Name and Address of Employer **Business Type** Corporation Aggregate Year-To-date \$ 100.00 72. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each Wingfield, Ginsburg, & LIPP P.C. Cash Check □ Money Order Receipt This Period day, year) Cashier Check Credit Card 700 5th St NW Ste 300, Washington, DC 20001 07/23/2021 \$ 500.00 □ Other (Specify) □ In Kind (Specify) **Contributor Type** Occupation **Business** Name and Address of Employer **Business Type** Corporation Aggregate Year-To-date \$ 500.00 73. Full Name, Mailing Address and Zip Code **Contribution Type** Amount of Each Date (month, **Miriam O Moore** Cash □ Money Order Check day, year) Receipt This Period Cashier Check Credit Card 3060 Blaine St, Coconut Grove, FL 33133 07/23/2021 \$ 1,500.00 □ Other (Specify) □ In Kind (Specify) President Occupation **Contributor Type** Individual Name and Address of Employer **Miriam Moore Design Group LLC** 3060 Blaine St, Coconut Grove, FL 33133 Aggregate Year-To-date \$ 1.500.00 74. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each Miriam Moore Design Studio LLC Cash □ Money Order Check Receipt This Period day, year) Cashier Check Credit Card 3060 Blaine St, Coconut Grove, FL 33133 07/23/2021 \$ 1,500.00 Other (Specify) □ In Kind (Specify) **Contributor Type** Occupation Business Name and Address of Employer **Business Type** Limited Liability Company Aggregate Year-To-date \$ 1,500.00

SCHEDULE A Page 16 of 29 ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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contributions, or for commercial purposes.

Full Name of Committee (Name of Candidate, if Candidate is reporting) Mendelson for Chairman 2022 75. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each Kenlee Ray Cash □ Money Order Check Receipt This Period day, year) Cashier Check Credit Card 1930 15th St NW, Washington, DC 20009 07/24/2021 \$ 250.00 □ Other (Specify) □ In Kind (Specify) **Contributor Type** Occupation Individual Name and Address of Employer Aggregate Year-To-date \$ 250.00 76. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each Mary Ann Nordheimer Check Cash □ Money Order day, year) Receipt This Period Cashier Check Credit Card 5400 Bradley Blvd, Bethesda, MD 20814 07/24/2021 \$ 1,250.00 □ Other (Specify) □ In Kind (Specify) **Contributor Type** Occupation Senior Advisor Individual Name and Address of Employer **Urban Atlantic** 7735 Old Georgetown Rd, Bethesda, MD 20814 \$ 1.250.00 Aggregate Year-To-date 77. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each **Donald Burgess Blanchon** Cash Check □ Money Order Receipt This Period day, year) Cashier Check Credit Card 3116 Woodley Rd NW, Washington, DC 20008 07/24/2021 \$ 500.00 □ Other (Specify) □ In Kind (Specify) Occupation **Executive Director Contributor Type** Individual Name and Address of Employer Whitman-Walker Health 1525 14th St NW, Washington, DC 20005 \$ 500.00 Aggregate Year-To-date 78. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each **Charles L Elkins** Cash □ Money Order Check Receipt This Period day, year) Cashier Check Credit Card 4505 Lowell St NW, Washington, DC 20016 07/24/2021 \$ 100.00 □ Other (Specify) □ In Kind (Specify) **Contributor Type** Occupation Retired Individual Name and Address of Employer N/A \$ 100.00 Aggregate Year-To-date 79. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each Sara Gibson Cash □ Money Order Check Receipt This Period day, year) Cashier Check Credit Card 1791 Lanier Pl NW Apt 42, Washington, DC 07/25/2021 \$ 100.00 □ Other (Specify) 20009 □ In Kind (Specify) **Contributor Type** Occupation CEO Individual Name and Address of Employer **20 Degrees** 531 Randolph St NW, Washington, DC 20011 Aggregate Year-To-date \$ 100.00

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting

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| Mendelson for Chairman 2022 | | | |
|--|---|--|---|
| Mendelson for Chairman 2022 80. Full Name, Mailing Address and Zip Code Federick Klein 3131 Connecticut Ave NW Apt 2403, Washington, DC 20008 Contributor Type Individual 81. Full Name, Mailing Address and Zip Code Linda Wharton Boyd 7215 16th St NW, Washington, DC 20012 | Contribution Type Cash Money Order Check Cashier Check Credit Card Other (Specify) In Kind (Specify) In Kind (Specify) Name and Address of Employer DLA Piper 500 8th St NW, Washington, DC 20004 Aggregate Year-To-date Contribution Type Cash Money Order Check Occupation Credit Card Check Other (Specify) Other (Specify) State S | Date (month, day, year) 07/25/2021 | Amount of Each Receipt This Period \$ 500.00 \$ 500.00 Amount of Each Receipt This Period \$ 200.00 |
| Contributor Type Individual | Image: Second | | |
| | Aggregate Year-To-date | | \$ 200.00 |
| 82. Full Name, Mailing Address and Zip Code Rashad Young 6326 16th St NW, Washington, DC 20011 Contributor Type | Contribution Type Cash Money Order Cashier Check Credit Card Other (Specify) In Kind (Specify) Occupation Administrator | Date (month, day, year) 07/25/2021 | Amount of Each Receipt This Perioc \$ 750.00 |
| Individual | Name and Address of Employer Howard University 2400 6th St NW, Washington, DC 20059 Aggregate Year-To-date | | \$ 750.00 |
| 22 Full Name Mailing Address and Zin Code | | Data (manth | |
| 83. Full Name, Mailing Address and Zip Code Stacey Burnette 1312 Rittenhouse St NW, Washington, DC 20011 | Contribution Type Cash Money Order Check Cashier Check Credit Card Other (Specify) In Kind (Specify) | Date (month, day, year) 07/25/2021 | Amount of Each Receipt This Period \$ 400.00 |
| Contributor Type Individual | Occupation Attorney Name and Address of Employer Comcast 900 Michigan Ave NE, Washington, DC 20017 | | |
| | Aggregate Year-To-date | | \$ 400.00 |
| 84. Full Name, Mailing Address and Zip Code Michael J Behm 3207 Van Hazen St NW, Washington, DC 20015 | Contribution Type Cash Money Order Check Cashier Check Credit Card Other (Specify) In Kind (Specify) | Date (month, day, year) 07/25/2021 | Amount of Each Receipt This Period \$ 250.00 |
| Contributor Type Individual | Occupation Government Affairs Name and Address of Employer Stateside Associates 1101 Wilson Blvd Fl 16, Arlington, VA 22209 Accessed Accessed | | A 450 00 |
| | Aggregate Year-To-date | | \$ 250.00 |

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SCHEDULE A

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting

contributions, or for commercial purposes.

| 85. Full Name, Mailing Address and Zip Code Hashim M Hasson | Contribution Type □ Cash □ Money Order ☑ Check | Date (month, | Amount of Each |
|--|--|--------------------------|--|
| 4937 Western Ave NW, Washington, DC 20016 | Cashier Check Credit Card | day, year) 07/25/2021 | Receipt This Period \$ 1,000.00 |
| | $\Box \text{ Other (Specify)}$ | 07/25/2021 | \$ 1,000.00 |
| Contributor Type | In Kind (Specify) Occupation Owner | | |
| Individual | Name and Address of Employer | | |
| | INLE Development LLC | | |
| | 4937 Western Ave NW, Washington, DC 20016 | | ¢ 1 000 00 |
| | Aggregate Year-To-date | 1 | \$ 1,000.00 |
| 86. Full Name, Mailing Address and Zip Code Henok Tesfaye | Contribution Type | Date (month, | Amount of Each Receipt This Period |
| 1208 9th St NW, Washington, DC 20001 | □ Cashier Check ☑ Credit Card | day, year) | • |
| | □ Other (Specify) | 07/26/2021 | \$ 1,000.00 |
| | □ In Kind (Specify) | | |
| Contributor Type Individual | Occupation CEO | | |
| | Name and Address of Employer U Street Parking | | |
| | 1208 9th St NW, Washington, DC 20001 | | |
| | Aggregate Year-To-date | • | \$ 1,000.00 |
| 87. Full Name, Mailing Address and Zip Code | Contribution Type | Date (month, | Amount of Each |
| James Steffes | Cash Money Order Check | day, year) | Receipt This Period |
| 6014 Running Creek Ct, Kingwood, TX 77345 | □ Cashier Check ☑ Credit Card □ Other (Specify) | 07/26/2021 | \$ 1,000.00 |
| | □ In Kind (Specify) | | |
| Contributor Type | Occupation Government and Regulatory Affairs | | |
| Individual | Name and Address of Employer | | |
| | Washington Gas | | |
| | 1000 Maine Ave SW, Washington, DC 20024 Aggregate Year-To-date | | <u> </u> \$ 1,000.00 |
| 88. Full Name, Mailing Address and Zip Code | Contribution Type | Date (month, | Amount of Each |
| Brandon Todd | Contribution Type | day, year) | Receipt This Period |
| 423 Buchanan St NW, Washington, DC 20011 | Cashier Check I Credit Card | 07/26/2021 | \$ 650.00 |
| | $\Box \text{ Other (Specify)}$ | 0//20/2021 | \$ 020100 |
| Contributor Type | In Kind (Specify) Occupation Director of Policy | | |
| Individual | Name and Address of Employer | | |
| | Washington Gas | | |
| | 1000 Maine Ave SW, Washington, DC 20024 | | |
| | Aggregate Year-To-date | | \$ 650.00 |
| 89. Full Name, Mailing Address and Zip Code | Contribution Type | Date (month, | Amount of Each |
| James Hawkins | □ Cash □ Money Order □ Check □ Cashier Check ☑ Credit Card | day, year) | Receipt This Period |
| 4928 30th St NW, Washington, DC 20008 | □ Clasher Check □ Credit Card | 07/26/2021 | \$ 1,000.00 |
| | In Kind (Specify) | | |
| Contributor Type Individual | Occupation Attorney | | |
| manyiaan | Name and Address of Employer | | |
| | Nelson Mullins 101 Constitution Ave NW, Washington, DC 20001 | | |
| | Aggregate Year-To-date | 1 | <u> </u> |

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contributions, or for commercial purposes.

| 90. Full Name, Mailing Address and Zip Code | Contribution Type | Data (month | Amount of Each |
|--|---|----------------------------|--|
| Lori Lee | Contribution Type □ Cash □ Money Order □ Check | Date (month, day, year) | Receipt This Period |
| 7816 16th St NW, Washington, DC 20012 | \square Cashier Check \square Credit Card | | |
| 7010 10th St 1(1), Washington, DC 20012 | □ Other (Specify) | 07/26/2021 | \$ 250.00 |
| | □ In Kind (Specify) | | |
| Contributor Type | Occupation Manager | | |
| Individual | Name and Address of Employer | | |
| | PJM Interconnection | | |
| | 2750 Monroe Blvd, Audubon, PA 19403 | | |
| - | Aggregate Year-To-date | | \$ 250.00 |
| 01. Full Name, Mailing Address and Zip Code | Contribution Type | Date (month, | Amount of Each |
| Andrew Jacobson | \Box Cash \Box Money Order \Box Check | day, year) | Receipt This Period |
| 728 Kennedy St NE, Washington, DC 20011 | Cashier Check Z Credit Card | | - |
| 20 meniedy 50 m2, 11 domington, 20 20011 | □ Other (Specify) | 07/26/2021 | \$ 50.00 |
| | □ In Kind (Specify) | | |
| Contributor Type | Occupation Art Advisor | | |
| Individual | Name and Address of Employer | | |
| | Self Employed | | |
| | 728 Kennedy St NE, Washington, DC 20011 | | |
| | Aggregate Year-To-date | | \$ 50.00 |
| 92. Full Name, Mailing Address and Zip Code | Contribution Type | Date (month, | Amount of Each |
| Michael O'Bannon | Cash Money Order Check | day, year) | Receipt This Period |
| 1616 H St NW Fl 5, Washington, DC 20006 | Cashier Check Credit Card | 07/26/2021 | \$ 50.00 |
| | Conter (Specify) | | |
| | In Kind (Specify) | | |
| Contributor Type Individual | Occupation President | | |
| maividaa | Name and Address of Employer | | |
| | EOP | | |
| | | | |
| | 1616 H St NW Fl 5, Washington, DC 20006 | | |
| | Aggregate Year-To-date | | \$ 50.00 |
| 93. Full Name, Mailing Address and Zip Code | | Date (month, | Amount of Each |
| Full Name, Mailing Address and Zip Code Sean Jamieson | Aggregate Year-To-date Contribution Type Cash Money Order Check | Date (month, day, year) | \$ 50.00 Amount of Each Receipt This Period |
| - | Aggregate Year-To-date Contribution Type Cash Money Order Cashier Check Credit Card | day, year) | Amount of Each Receipt This Period |
| Sean Jamieson | Aggregate Year-To-date Contribution Type Cash Money Order Cashier Check Credit Card Other (Specify) | | Amount of Each |
| Sean Jamieson 4840 Austin St, Houston, TX 77004 | Aggregate Year-To-date Contribution Type Cash Money Order Cashier Check Credit Card Other (Specify) In Kind (Specify) | day, year) | Amount of Each Receipt This Period |
| Sean Jamieson 4840 Austin St, Houston, TX 77004 Contributor Type | Aggregate Year-To-date Contribution Type Cash Money Order Cashier Check Credit Card Other (Specify) In Kind (Specify) Occupation Attorney | day, year) | Amount of Each Receipt This Period |
| Sean Jamieson 4840 Austin St, Houston, TX 77004 | Aggregate Year-To-date Contribution Type Cash Money Order Cashier Check Credit Card Other (Specify) In Kind (Specify) Occupation Attorney Name and Address of Employer | day, year) | Amount of Each Receipt This Period |
| Sean Jamieson 4840 Austin St, Houston, TX 77004 Contributor Type | Aggregate Year-To-date Contribution Type Cash Money Order Cashier Check Credit Card Other (Specify) In Kind (Specify) Occupation Attorney Name and Address of Employer Spire Inc. | day, year) | Amount of Each Receipt This Period |
| Sean Jamieson 4840 Austin St, Houston, TX 77004 Contributor Type | Aggregate Year-To-date Contribution Type Cash Money Order Cashier Check Credit Card Other (Specify) In Kind (Specify) Name and Address of Employer Spire Inc. 3773 Richmond Ave, Houston, TX 77046 | day, year) | Amount of Each Receipt This Period \$ 150.00 |
| Sean Jamieson 4840 Austin St, Houston, TX 77004 Contributor Type Individual | Aggregate Year-To-date Contribution Type Cash Money Order Cashier Check Credit Card Other (Specify) In Kind (Specify) Name and Address of Employer Spire Inc. 3773 Richmond Ave, Houston, TX 77046 Aggregate Year-To-date | day, year) 07/26/2021 | Amount of Each Receipt This Period \$ 150.00 |
| Sean Jamieson 4840 Austin St, Houston, TX 77004 Contributor Type Individual 94. Full Name, Mailing Address and Zip Code | Aggregate Year-To-date Contribution Type Cash Money Order Cashier Check Credit Card Other (Specify) In Kind (Specify) Name and Address of Employer Spire Inc. 3773 Richmond Ave, Houston, TX 77046 Aggregate Year-To-date Contribution Type | day, year) 07/26/2021 | Amount of Each Receipt This Period \$ 150.00 \$ 150.00 Amount of Each |
| Sean Jamieson 4840 Austin St, Houston, TX 77004 Contributor Type Individual 94. Full Name, Mailing Address and Zip Code Loretta Nuemann | Aggregate Year-To-date Contribution Type Cash Money Order Cashier Check Credit Card Other (Specify) In Kind (Specify) Occupation Attorney Name and Address of Employer Spire Inc. 3773 Richmond Ave, Houston, TX 77046 Aggregate Year-To-date Contribution Type Cash Money Order Check | day, year) 07/26/2021 | Amount of Each Receipt This Period \$ 150.00 \$ 150.00 Amount of Each |
| Sean Jamieson 4840 Austin St, Houston, TX 77004 Contributor Type Individual 94. Full Name, Mailing Address and Zip Code Loretta Nuemann 7124 Piney Branch Rd NW, Washington, DC | Aggregate Year-To-date Contribution Type Cash Money Order Cashier Check Credit Card Other (Specify) In Kind (Specify) Occupation Attorney Name and Address of Employer Spire Inc. 3773 Richmond Ave, Houston, TX 77046 Aggregate Year-To-date Contribution Type Cash Money Order Cash Money Order Cash Credit Card | day, year) 07/26/2021 | Amount of Each Receipt This Period \$ 150.00 \$ 150.00 \$ 150.00 Amount of Each |
| Sean Jamieson 4840 Austin St, Houston, TX 77004 Contributor Type Individual 94. Full Name, Mailing Address and Zip Code Loretta Nuemann | Aggregate Year-To-date Contribution Type Cash Money Order Cashier Check Credit Card Other (Specify) In Kind (Specify) Occupation Attorney Name and Address of Employer Spire Inc. 3773 Richmond Ave, Houston, TX 77046 Aggregate Year-To-date Contribution Type Cashier Check Credit Card Other (Specify) | day, year) 07/26/2021 | Amount of Each Receipt This Period \$ 150.00 \$ 150.00 Amount of Each Receipt This Period |
| Sean Jamieson 4840 Austin St, Houston, TX 77004 Contributor Type Individual 94. Full Name, Mailing Address and Zip Code Loretta Nuemann 7124 Piney Branch Rd NW, Washington, DC 20012 | Aggregate Year-To-date Contribution Type Cash Money Order Cashier Check Credit Card Other (Specify) In Kind (Specify) Name and Address of Employer Spire Inc. 3773 Richmond Ave, Houston, TX 77046 Aggregate Year-To-date Contribution Type Cash Money Order Cash Money Order In Kind (Specify) In Kind (Specify) | day, year) 07/26/2021 | Amount of Each Receipt This Period \$ 150.00 \$ 150.00 Amount of Each Receipt This Period |
| Sean Jamieson 4840 Austin St, Houston, TX 77004 Contributor Type Individual 94. Full Name, Mailing Address and Zip Code Loretta Nuemann 7124 Piney Branch Rd NW, Washington, DC | Aggregate Year-To-date Contribution Type Cash Money Order Cashier Check Credit Card Other (Specify) In Kind (Specify) In Kind (Specify) Occupation Attorney Name and Address of Employer Spire Inc. 3773 Richmond Ave, Houston, TX 77046 Aggregate Year-To-date Contribution Type Cash Money Order Cash Credit Card Other (Specify) In Kind (Specify) In Kind (Specify) In Kind (Specify) | day, year) 07/26/2021 | Amount of Each Receipt This Period \$ 150.00 \$ 150.00 Amount of Each Receipt This Period |
| Sean Jamieson 4840 Austin St, Houston, TX 77004 Contributor Type Individual 94. Full Name, Mailing Address and Zip Code Loretta Nuemann 7124 Piney Branch Rd NW, Washington, DC 20012 Contributor Type | Aggregate Year-To-date Contribution Type Cash Money Order Cashier Check Credit Card Other (Specify) In Kind (Specify) Occupation Attorney Name and Address of Employer Spire Inc. 3773 Richmond Ave, Houston, TX 77046 Aggregate Year-To-date Contribution Type Cashier Check Credit Card Other (Specify) In Kind (Specify) Data Money Order Contribution Type Cash Money Order Check Other (Specify) In Kind (Specify) In Kind (Specify) Occupation Retired Name and Address of Employer | day, year) 07/26/2021 | Amount of Each Receipt This Period \$ 150.00 \$ 150.00 Amount of Each Receipt This Period |
| Sean Jamieson 4840 Austin St, Houston, TX 77004 Contributor Type Individual 94. Full Name, Mailing Address and Zip Code Loretta Nuemann 7124 Piney Branch Rd NW, Washington, DC 20012 Contributor Type | Aggregate Year-To-date Contribution Type Cash Money Order Cashier Check Credit Card Other (Specify) In Kind (Specify) In Kind (Specify) Occupation Attorney Name and Address of Employer Spire Inc. 3773 Richmond Ave, Houston, TX 77046 Aggregate Year-To-date Contribution Type Cash Money Order Cash Credit Card Other (Specify) In Kind (Specify) In Kind (Specify) In Kind (Specify) | day, year) 07/26/2021 | Amount of Each Receipt This Period \$ 150.00 \$ 150.00 Amount of Each Receipt This Period |

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| 95. Full Name, Mailing Address and Zip Code | Contribution Type | Date (month, | Amount of Each |
|---|---|--------------|---------------------|
| Nathan Bishop | Cash Money Order Check | day, year) | Receipt This Period |
| 5713 6th St NW, Washington, DC 20011 | Cashier Check I Credit Card | 07/26/2021 | \$ 1,500.00 |
| | Other (Specify) | | ·)- · · · · · |
| | □ In Kind (Specify) | | |
| Contributor Type Individual | Occupation | | |
| | Name and Address of Employer | | |
| | Self Employed 5713 6th St NW, Washington, DC 20011 | | |
| | Aggregate Year-To-date | | <u> </u> |
| 96. Full Name, Mailing Address and Zip Code | Contribution Type | Date (month, | Amount of Each |
| Myntoleah Monash | □ Cash □ Money Order □ Check | day, year) | Receipt This Period |
| 4520 River Rd NW, Washington, DC 20016 | Cashier Check I Credit Card | 07/26/2021 | \$ 500.00 |
| | □ Other (Specify) □ In Kind (Specify) | 07/20/2021 | \$ 500.00 |
| Contributor Type | Occupation Consultant | | |
| Individual | Name and Address of Employer | | |
| | Monash Advisory Group LLC | | |
| | 80 M St SE, Washington, DC 20003 | | |
| | Aggregate Year-To-date | | \$ 500.00 |
| 97. Full Name, Mailing Address and Zip Code | Contribution Type | Date (month, | Amount of Each |
| Vinoda Basnayake | Cash Money Order Check | day, year) | Receipt This Period |
| 1307 14th St N, Arlington, VA 22209 | Cashier Check Credit Card | 07/26/2021 | \$ 1,500.00 |
| | \Box In Kind (Specify) | | |
| Contributor Type | Occupation Attorney | | |
| Individual | Name and Address of Employer | | |
| | Nelson Mullins | | |
| | 101 Constitution Ave NW, Washington, DC 20001 | | |
| | Aggregate Year-To-date | | \$ 1,500.00 |
| 98. Full Name, Mailing Address and Zip Code | Contribution Type | Date (month, | Amount of Each |
| Robert Goodrich | Cash Money Order Check | day, year) | Receipt This Period |
| 4800 17th St NW, Washington, DC 20011 | Cashier Check Credit Card | 07/26/2021 | \$ 25.00 |
| | \Box In Kind (Specify) | | |
| Contributor Type | Occupation Business | | |
| Individual | Name and Address of Employer | | |
| | Self Employed | | |
| | 4800 17th St NW, Washington, DC 20011 | | |
| | Aggregate Year-To-date | · | \$ 25.00 |
| 99. Full Name, Mailing Address and Zip Code | Contribution Type | Date (month, | Amount of Each |
| Kevin Wrege | Cash Money Order Check | day, year) | Receipt This Period |
| 4841 W St NW, Washington, DC 20007 | Cashier Check Credit Card | 07/26/2021 | \$ 500.00 |
| | □ Other (Specify) □ In Kind (Specify) | | |
| Contributor Type | Occupation Consultant | — | |
| Individual | Name and Address of Employer | | |
| | Pulse Issues and Advocacy LLC | | |
| | 4841 W St NW, Washington, DC 20007 | | |
| | Aggregate Year-To-date | | \$ 500.00 |

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting

contributions, or for commercial purposes.

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

| Full Name, Mailing Address and Zip Code Brett Greene 1330 Coronium St NW Washington, DC 20012 | Contribution Type Cash Money Order Check Cashier Check Credit Card | Date (month, day, year) | Amount of Each Receipt This Period |
|--|--|--|---|
| 1330 Geranium St NW, Washington, DC 20012 | Other (Specify) In Kind (Specify) | 07/26/2021 | \$ 1,500.00 |
| Contributor Type Individual | OccupationPresidentName and Address of EmployerAmerican Management Corporation1445 Pennsylvania Ave NW Ste 400, Washington,DC 20004 | | |
| | Aggregate Year-To-date | | \$ 1,500.00 |
| 101. Full Name, Mailing Address and Zip Code Montez J Anderson 608 G St SW, Washington, DC 20024 | Contribution Type Cash Money Order Check Cashier Check Credit Card Other (Specify) In Kind (Specify) | Date (month, day, year) 07/26/2021 | Amount of Each Receipt This Period \$ 1,000.00 |
| Contributor Type Individual | OccupationPresidentName and Address of EmployerConstella Solutions137 National Plz, Oxon Hill, MD 20745 | | |
| | Aggregate Year-To-date | | \$ 1,000.00 |
| 102. Full Name, Mailing Address and Zip Code Leila M Jackson Batties 1452 Primrose Rd NW, Washington, DC 20012 | Contribution Type Cash Money Order Check Cashier Check Credit Card Other (Specify) In Kind (Specify) | Date (month, day, year) 07/26/2021 | Amount of Each Receipt This Period \$ 250.00 |
| Contributor Type Individual | OccupationAttorneyName and Address of EmployerHolland & Knight800 17th St NW, Washington, DC 20006 | | |
| | Aggregate Year-To-date | | \$ 250.00 |
| 103. Full Name, Mailing Address and Zip Code Allen E Harwood 608 Melrose st, Alexandria, VA 22302 | Contribution Type □ Cash □ Money Order ☑ Check □ Cashier Check □ Credit Card □ Other (Specify) □ In Kind (Specify) | Date (month, day, year) 07/26/2021 | Amount of Each Receipt This Period \$ 200.00 |
| Contributor Type Individual | OccupationUrban PlanningName and Address of EmployerAECOMM2000 K St NW, Washington, DC 20006 | | |
| | Aggregate Year-To-date | | \$ 200.00 |
| 104. Full Name, Mailing Address and Zip Code Marlene Moss 1637 Montague St NW, Washington, DC 20011 | Contribution Type □ Cash □ Money Order ☑ Check □ Cashier Check □ Credit Card □ Other (Specify) □ In Kind (Specify) | Date (month, day, year) 07/26/2021 | Amount of Each Receipt This Period \$ 400.00 |
| Contributor Type Individual | Occupation Self-Employed Name and Address of Employer N/A | | |

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ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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| | Aggregate Year-To-date | | \$ 400.00 |
|---|---|--|---|
| 105. Full Name, Mailing Address and Zip Code Carolyn B Rudd 1814 Tamarack St NW, Washington, DC 20012 Contributor Type Individual | Contribution Type □ Cash □ Money Order ☑ Check □ Cashier Check □ Credit Card □ Other (Specify) □ In Kind (Specify) □ In Kind (Specify) Occupation President Name and Address of Employer CRP Inc. 4301 Connecticut Ave NW Ste 134, Washington, DC | Date (month, day, year) 07/26/2021 | Amount of Each Receipt This Period \$ 1,000.00 |
| | 20008 | | |
| | Aggregate Year-To-date | | \$ 1,000.00 |
| 106. Full Name, Mailing Address and Zip Code Warner H Session 1811 12th St NW, Washington, DC 20009 | Contribution Type Cash Money Order Check Cashier Check Credit Card Other (Specify) In Kind (Specify) | Date (month, day, year) 07/26/2021 | Amount of Each Receipt This Period \$ 250.00 |
| Contributor Type Individual | Occupation Owner Name and Address of Employer Session Law Firm 1200 New Hampshire Ave NW Ste 600, Washington, DC 20036 | | |
| | Aggregate Year-To-date | | \$ 250.00 |
| 107. Full Name, Mailing Address and Zip Code Frank Smith Jr. 4300 Argyle Ter NW, Washington, DC 20011 | Contribution Type □ Cash □ Money Order ☑ Check □ Cashier Check □ Credit Card □ Other (Specify) □ In Kind (Specify) | Date (month, day, year) 07/26/2021 | Amount of Each Receipt This Period \$ 200.00 |
| Contributor Type Individual | OccupationDirectorName and Address of EmployerAfrican American Civil War Museum1925 Vermont Ave NW, Washington, DC 20001 | _ | |
| | Aggregate Year-To-date | | \$ 200.00 |
| | | | |
| 108. Full Name, Mailing Address and Zip Code William E Sudow 1123 Crest Ln, McLean, VA 22101 | Contribution Type □ Cash □ Money Order ☑ Check □ Cashier Check □ Credit Card □ Other (Specify) □ In Kind (Specify) | Date (month, day, year) 07/26/2021 | Amount of Each Receipt This Period \$ 1,500.00 |
| | □ Cash □ Money Order ☑ Check □ Cashier Check □ Credit Card □ Other (Specify) | day, year) | Receipt This Period |

Amount of Each

Receipt This Period

\$ 500.00

Amount of Each

Receipt This Period

\$ 500.00

Amount of Each

Receipt This Period

\$ 1,000.00

\$ 500.00

\$ 500.00

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting

contributions, or for commercial purposes. Full Name of Committee (Name of Candidate, if Candidate is reporting) Mendelson for Chairman 2022 109. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, **David W Wilmot** Check Cash □ Money Order day, year) Cashier Check Credit Card 1653 Kalmia Rd NW, Washington, DC 20012 07/26/2021 □ Other (Specify) □ In Kind (Specify) Occupation Principal **Contributor Type** Individual Name and Address of Employer Wilmot Law Firm 1455 Pennsylvania Ave NW, Washington, DC 20004 Aggregate Year-To-date 110. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, **Black Swan Consulting LLC** Cash D Money Order Check day, year) Cashier Check Credit Card 4529 MacArthur Blvd NW, Washington, DC 07/26/2021 □ Other (Specify) 20007 □ In Kind (Specify) **Contributor Type** Occupation **Business** Name and Address of Employer **Business Type** Limited Liability Company Aggregate Year-To-date 111. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, **ICT Mondial Inc.** Cash Check □ Money Order day, year) Cashier Check Credit Card 6412 Brandon Ave Ste 320, Springfield, VA 07/26/2021 □ Other (Specify) 22150 □ In Kind (Specify)

Contributor Type Occupation **Business** Name and Address of Employer **Business Type** Corporation Aggregate Year-To-date \$ 1,000.00 112. Full Name, Mailing Address and Zip Code **Contribution Type** Amount of Each Date (month, David W Wilmot & Associates Inc. Cash □ Money Order Check day, year) Receipt This Period Cashier Check Credit Card 1653 Kalmia Rd NW, Washington, DC 20012 07/26/2021 \$ 500.00 □ Other (Specify) □ In Kind (Specify) **Contributor Type** Occupation **Business** Name and Address of Employer **Business Type** Corporation Aggregate Year-To-date \$ 500.00 113. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each Wilmot Law Firm PC Cash □ Money Order Check Receipt This Period day, year) Cashier Check Credit Card 1455 Pennsylvania Ave NW Ste 400, 07/26/2021 \$ 500.00 Other (Specify) Washington, DC 20004 □ In Kind (Specify) **Contributor Type** Occupation Business Name and Address of Employer **Business Type** Corporation Aggregate Year-To-date \$ 500.00

SCHEDULE A Page 24 of 29 ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

\$ 500.00

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contributions, or for commercial purposes.

Full Name of Committee (Name of Candidate, if Candidate is reporting) Mendelson for Chairman 2022 114. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each Michael W King Check Cash □ Money Order Receipt This Period day, year) Cashier Check Credit Card 4460 Saint Andrews Blvd, Irving, TX 75038 07/26/2021 \$ 1,500.00 □ Other (Specify) □ In Kind (Specify) Occupation CEO **Contributor Type** Individual Name and Address of Employer Volunteers of America 1660 Duke St, Alexandria, VA 22314 \$ 1.500.00 Aggregate Year-To-date 115. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each Check Jack H Olender Cash D Money Order Receipt This Period day, year) Cashier Check Credit Card 2500 Virginia Ave NW, Washington, DC 20037 07/26/2021 \$ 1,500.00 □ Other (Specify) □ In Kind (Specify) **Contributor Type** Occupation Attorney Individual Name and Address of Employer Jack H. Olender & Associates PC 888 17th St NW Fl 4, Washington, DC 20006 Aggregate Year-To-date \$ 1,500.00 116. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each The Law Offices of Steven H. Kaminski Cash Check □ Money Order Receipt This Period day, year) Cashier Check Credit Card 1825 K St NW Ste 1150, Washington, DC 20006 07/26/2021 \$ 500.00 □ Other (Specify) □ In Kind (Specify) **Contributor Type** Occupation **Business** Name and Address of Employer **Business Type** Corporation Aggregate Year-To-date \$ 500.00 117. Full Name, Mailing Address and Zip Code **Contribution Type** Amount of Each Date (month, John J Sellinger Attorney at Law Cash □ Money Order Check day, year) Receipt This Period Cashier Check Credit Card 1111 Bonifant St, Silver Spring, MD 20910 07/26/2021 \$ 250.00 □ Other (Specify) □ In Kind (Specify) **Contributor Type** Occupation **Business** Name and Address of Employer **Business Type** Corporation Aggregate Year-To-date \$ 250.00 118. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each Stravitz Law Firm, P.C. Cash □ Money Order Check Receipt This Period day, year) Cashier Check Credit Card 4601 Presidents Dr Ste 120, Lanham, MD 20706 07/26/2021 \$ 500.00 Other (Specify) □ In Kind (Specify) **Contributor Type** Occupation Business Name and Address of Employer **Business Type** Corporation

Aggregate Year-To-date

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SCHEDULE A Page 25 of 29 ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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contributions, or for commercial purposes.

Full Name of Committee (Name of Candidate, if Candidate is reporting) Mendelson for Chairman 2022 119. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each Check Laura Corkey Cash □ Money Order Receipt This Period day, year) Cashier Check Credit Card 1658 Waters Edge Ln, Reston, VA 20190 07/26/2021 \$ 300.00 □ Other (Specify) □ In Kind (Specify) Occupation Retired **Contributor Type** Individual Name and Address of Employer N/A \$ 300.00 Aggregate Year-To-date 120. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each Check Gary Harvey Cash □ Money Order day, year) Receipt This Period Cashier Check Credit Card 9524 Rockport Rd, Vienna, VA 22180 07/26/2021 \$ 300.00 □ Other (Specify) □ In Kind (Specify) **Contributor Type** Occupation Individual Name and Address of Employer Aggregate Year-To-date \$ 300.00 121. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each **Pia Moore** Cash □ Money Order Check Receipt This Period day, year) Credit Card Cashier Check 12603 Woodmore North Blvd, Bowie, MD 20720 07/27/2021 \$ 250.00 □ Other (Specify) □ In Kind (Specify) Self-Employed **Contributor Type** Occupation Individual Name and Address of Employer N/A Aggregate Year-To-date \$ 250.00 122. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each **Daniel C Scialpi** Cash □ Money Order Check day, year) Receipt This Period Cashier Check Credit Card 2218 N Quincy St, Arlington, VA 22207 07/28/2021 \$ 100.00 Other (Specify) □ In Kind (Specify) **Contributor Type** Occupation Attorney Individual Name and Address of Employer **Patrick Malone & Associates** 1310 L St NW Ste 800, Washington, DC 20005 Aggregate Year-To-date \$ 100.00 123. Full Name, Mailing Address and Zip Code **Contribution Type** Amount of Each Date (month, **Daniel Singer** Cash □ Money Order Check day, year) Receipt This Period Cashier Check Credit Card 4716 Alton Pl NW, Washington, DC 20016 07/28/2021 \$ 100.00 □ Other (Specify) □ In Kind (Specify) **Contributor Type** Occupation Attorney Individual Name and Address of Employer **Patrick Malone & Associates** 1310 L St NW Ste 800, Washington, DC 20005 \$ 100.00 Aggregate Year-To-date

\$ 1,500.00

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting

contributions, or for commercial purposes.

Full Name of Committee (Name of Candidate, if Candidate is reporting) Mendelson for Chairman 2022 124. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each **Keith Winston Watters** Check Cash □ Money Order day, year) Receipt This Period Cashier Check Credit Card 1667 K St NW, Washington, DC 20006 07/28/2021 \$ 300.00 □ Other (Specify) □ In Kind (Specify) Occupation Attorney **Contributor Type** Individual Name and Address of Employer Keith Watters & Associates 1667 K St NW, Washington, DC 20006 \$ 300.00 Aggregate Year-To-date 125. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each Check Greenberg & Bederman LLC Cash D Money Order Receipt This Period day, year) Cashier Check Credit Card 1111 Bonifant St, Silver Spring, MD 20910 07/28/2021 \$ 600.00 □ Other (Specify) □ In Kind (Specify) **Contributor Type** Occupation **Business** Name and Address of Employer **Business Type** Limited Liability Company Aggregate Year-To-date \$ 1,100.00 126. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each Law Offices of Annie P. Kaplan Cash Check □ Money Order Receipt This Period day, year) Cashier Check Credit Card 1740 N St NW Ste 1, Washington, DC 20036 07/28/2021 \$ 500.00 □ Other (Specify) □ In Kind (Specify) **Contributor Type** Occupation **Business** Name and Address of Employer **Business Type** Corporation Aggregate Year-To-date \$ 500.00 127. Full Name, Mailing Address and Zip Code **Contribution Type** Amount of Each Date (month, **Burke Stein Rosenberg PLLC** Cash □ Money Order Check Receipt This Period day, year) Cashier Check Credit Card 1100 Connecticut Ave NW Ste 730, 07/29/2021 \$ 100.00 □ Other (Specify) Washington, DC 20036 □ In Kind (Specify) **Contributor Type** Occupation Business Name and Address of Employer **Business Type** Limited Liability Company Aggregate Year-To-date \$ 100.00 128. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each Chainkin, Shermin, Cammarata, & Siegel Cash □ Money Order Check Receipt This Period day, year) Cashier Check P2S2 17th St NW, Washington, DC 20036 Credit Card 07/29/2021 \$ 1,500.00 Other (Specify) □ In Kind (Specify) **Contributor Type** Occupation Business Name and Address of Employer **Business Type** Corporation

Aggregate Year-To-date

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SCHEDULE A

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ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting

contributions, or for commercial purposes.

Full Name of Committee (Name of Candidate, if Candidate is reporting) Mendelson for Chairman 2022 129. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each Kenneth M. Trombly, P.C. Check Cash □ Money Order Receipt This Period day, year) Cashier Check Credit Card 1825 K St NW Ste 1150, Washington, DC 20006 07/29/2021 \$ 1,000.00 □ Other (Specify) □ In Kind (Specify) **Contributor Type** Occupation **Business** Name and Address of Employer **Business Type** Corporation \$ 1.000.00 Aggregate Year-To-date 130. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each Check Kathryn Young Cash D Money Order Receipt This Period day, year) Cashier Check Credit Card 2900 Mckinley St NW, Washington, DC 20015 07/30/2021 \$ 1,500.00 □ Other (Specify) □ In Kind (Specify) **Contributor Type** Occupation Senior Program Officer - Global Policy & A Individual Name and Address of Employer **Bill & Melinda Gates Foundation** 1300 I St NW, Washington, DC 20005 Aggregate Year-To-date \$ 1,500.00 131. Full Name, Mailing Address and Zip Code **Contribution** Type Date (month, Amount of Each David Julyan Cash Check □ Money Order Receipt This Period day, year) Cashier Check Credit Card 10612 Allenwood Ln, Great Falls, VA 22066 07/30/2021 \$ 1,000.00 □ Other (Specify) □ In Kind (Specify) Occupation Owner **Contributor Type** Individual Name and Address of Employer Julyan & Julyan 10612 Allenwood Ln, Great Falls, VA 22066 Aggregate Year-To-date \$ 1,000.00 132. Full Name, Mailing Address and Zip Code **Contribution Type** Amount of Each Date (month, James W Taglieri Cash Check □ Money Order Receipt This Period day, year) Cashier Check Credit Card 4540 45th St NW, Washington, DC 20016 07/30/2021 \$ 1,500.00 □ Other (Specify) □ In Kind (Specify) Attorney **Contributor Type** Occupation Individual Name and Address of Employer Cadeaux, Taglieri, & Notarius P.C. 1100 Connecticut Ave NW Ste 800, Washington, DC 20036 \$ 1.500.00 Aggregate Year-To-date 133. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each Cadeaux, Taglieri, & Notarius P.C. Check Cash □ Money Order Receipt This Period day, year) Cashier Check Credit Card 1100 Connecticut Ave NW Ste 730, 07/30/2021 \$ 1,500.00 Conter (Specify) Washington, DC 20036 □ In Kind (Specify) **Contributor Type** Occupation Business Name and Address of Employer **Business Type** Corporation

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ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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| | Aggregate Year-To-date | | \$ 1,500.00 |
|--|--|--|---|
| 134. Full Name, Mailing Address and Zip Code Paulson & Nace PLLC 1025 Thomas Jefferson St NW Ste 810, Washington, DC 20007 Contributor Type Business | Contribution Type Cash Money Order Check Cashier Check Credit Card Other (Specify) In Kind (Specify) In Kind (Specify) Vecupation Name and Address of Employer | Date (month, day, year) 07/30/2021 | Amount of Each Receipt This Period \$ 1,500.00 |
| Business Type | | | |
| Limited Liability Company | Aggregate Year-To-date | | \$ 1,500.00 |
| 135. Full Name, Mailing Address and Zip Code Regan Zambri Long PLLC 1919 M St NW Ste 350, Washington, DC 20036 | Contribution Type Cash Money Order Cashier Check Credit Card Other (Specify) In Kind (Specify) | Date (month, day, year) 07/30/2021 | Amount of Each Receipt This Period \$ 1,500.00 |
| Contributor Type Business Business Type Limited Liability Company | Occupation Name and Address of Employer | | |
| | Aggregate Year-To-date | • | \$ 1,500.00 |
| 136. Full Name, Mailing Address and Zip Code Catherine Emmerson 3618 Prospect St NW, Washington, DC 20007 | Contribution Type Cash Money Order Check Cashier Check Credit Card Check Other (Specify) In Kind (Specify) Check | Date (month, day, year) 07/31/2021 | Amount of Each Receipt This Period \$ 1,500.00 |
| Contributor Type Individual | OccupationConsultantName and Address of EmployerCGA Strategies3618 Prospect St NW, Washington, DC 20007 | _ | |
| | Aggregate Year-To-date | | \$ 1,500.00 |
| 137. Full Name, Mailing Address and Zip Code CGA Strategies 3618 Prospect St NW, Washington, DC 20007 | Contribution Type Cash Money Order Check Cashier Check Credit Card Other (Specify) In Kind (Specify) | Date (month, day, year) 07/31/2021 | Amount of Each Receipt This Period \$ 1,500.00 |
| Contributor Type Business Business Type | Occupation Name and Address of Employer | | |
| Corporation | Aggregate Year-To-date | | \$ 1,500.00 |
| 138. Full Name, Mailing Address and Zip Code Paul Tetreault 1313 Riggs St NW, Washington, DC 20009 | Contribution Type Cash Money Order Check Cashier Check Credit Card Check Other (Specify) In Kind (Specify) | Date (month, day, year) 07/31/2021 | Amount of Each Receipt This Period \$ 1,500.00 |
| Contributor Type Individual | Occupation Director Name and Address of Employer Ford's Theatre 511 10th St NW, Washington, DC 20004 | | |

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ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting

contributions, or for commercial purposes.

| | Aggregate Year-To-date | | \$ 1,500.00 |
|--|---|--|---|
| 139. Full Name, Mailing Address and Zip Code Brendan Williams-Kief 2818 Rittenhouse St NW, Washington, DC 20015 | Contribution Type Cash Money Order Check Cashier Check Credit Card Other (Specify) In Kind (Specify) | Date (month, day, year) 07/31/2021 | Amount of Each Receipt This Period \$ 1,500.00 |
| Contributor Type Individual | Occupation Vice-President Name and Address of Employer Georgetown Public Affairs LLC 1220 19th St NW Ste 520, Washington, DC 20036 Aggregate Year-To-date | - | \$ 1,500.00 |
| 140. Full Name, Mailing Address and Zip Code Dallum Harper II 9404 Lakeside Dr, Vienna, VA 22182 Contributor Type | Contribution Type Cash Money Order Cashier Check Credit Card Other (Specify) In Kind (Specify) Occupation Public Affairs | Date (month, day, year) 07/31/2021 | Amount of Each Receipt This Period \$ 250.00 |
| Individual | Name and Address of Employer Carmen Group 901 F St NW Ste 600, Washington, DC 20004 Aggregate Year-To-date | - | \$ 250.00 |

| OCF FORM 16 ITEMIZED RECEIPTS FROM COMMITTEE | SCHEDULE A-2 SCHEDULE A-2 | Page 1 of 1 f S AUTHORIZED BY THE SAME |
|---|---|---|
| Any information copied from such Reports or Statem contributions, or for commercial purposes. | nents may not be sold or used by any person | for the purpose of soliciting |
| Full Name of Committee (Name of Candidate, if Candi Mendelson for Chairman 2022 | date is reporting) | |
| Full Name, Mailing Address and Zip Code Washington Gas Light Company PAC 1000 Maine Ave SW Ste 600, Washington, DC 20024 | Contribution Type Cash Money Order Image: Charles of the control of the cont | Date (month, day, year) 07/21/2021 |
| Contributor Type Corporate Sponsored PAC | | |
| | Aggregate Year-To-date | |
| Full Name, Mailing Address and Zip Code Food Service PAC 1625 K St NW Ste 210, Washington, DC 20006 | Contribution Type □ Cash □ Money Order ☑ Chu □ Cashier Check □ Credit Card □ Other (Specify) □ In Kind (Specify) | eck Date (month, day, year) 07/22/2021 |
| Contributor Type Corporate Sponsored PAC | | |
| | Aggregate Year-To-date | |
| Full Name, Mailing Address and Zip Code Nelson Mullins Riley & Scarborough PAC PO Box 11070, Columbia, SC 29211 Contributor Type | Contribution Type Cash Money Order Image: Charles of the control of the cont | Date (month, day, year) 07/26/2021 |
| Corporate Sponsored PAC | | |
| | Aggregate Year-To-date | |
| 4. Full Name, Mailing Address and Zip Code D.C. Legal 1919 M St NW Ste 350, Washington, DC 20036 Contributor Type Corporate Sponsored PAC | Contribution Type Cash Money Order Cashier Check Credit Card Other (Specify) In Kind (Specify) | eck Date (month, day, year) 07/30/2021 |
| | Aggregate Year-To-date | |
| | | |

AME CANDIDATE

Amount of Each

Receipt This Period \$ 1,500.00

\$ 1,500.00

\$ 1,500.00

\$ 1,500.00

\$ 1,500.00

Amount of Each

Receipt This Period

\$ 1,500.00

Amount of Each

Receipt This Period

\$ 1,500.00

Amount of Each

Receipt This Period

\$ 1,500.00

\$ 6,000.00

SCHEDULE A-3 ITEMIZED RECEIPTS FROM A CANDIDATE

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|---|------------------------|--|-------------|
| | | | |
| | Aggregate Year-To-date | | \$ 1,500.00 |
| | | | |
| | | | |

SCHEDULE B ITEMIZED OPERATING EXPENDITURES

| ULL Name of Committee (Name of Candida Iendelson for Chairman 2022 Full Name, Mailing Address and Zip Code Act Blue LLC PO Box 441146, Sommerville, MA 02144 | | | |
|---|---|--------------------|-------------------------|
| Full Name, Mailing Address and Zip Code Act Blue LLC PO Box 441146, Sommerville, MA | | | |
| Act Blue LLC PO Box 441146, Sommerville, MA | | | |
| PO Box 441146, Sommerville, MA | Purpose of Expenditure Bank Fees | Date | Amount of Each |
| | Bank rees | (month, day, year) | Expenditure This Period |
| | | year) | |
| 02177 | | 05/16/2021 | \$ 59.25 |
| Occupation | Name and Address of Employer | | |
| . Full Name, Mailing Address and Zip Code | Purpose of Expenditure | Date | Amount of Each |
| Deluxe Checks | Bank Fees | (month, day, | Expenditure This Period |
| 3680 Victoria Street North, Shoreview, | | year) | |
| MN 55126 | | 05/18/2021 | \$ 38.99 |
| Occupation | Name and Address of Employer | | |
| . Full Name, Mailing Address and Zip Code | Purpose of Expenditure | Date | Amount of Each |
| Industrial Bank | Bank Fees | (month, day, | Expenditure This Period |
| 4812 Georgia Avenue NW, | | year) | |
| Washington, DC 20011 | | 0.0/10/2021 | C 0 00 |
| 0 | | 06/10/2021 | \$ 8.00 |
| Occupation | Name and Address of Employer | | |
| Full Name, Mailing Address and Zip Code | Purpose of Expenditure | Date | Amount of Each |
| Paypal | Bank Fees | (month, day, | Expenditure This Period |
| 2211 North First Street, San Jose, CA 95131 | | year) | |
| 95151 | | 06/18/2021 | \$ 0.06 |
| Occupation | Name and Address of Employer | | |
| . Full Name, Mailing Address and Zip Code | Purpose of Expenditure | Date | Amount of Each |
| Phil Mendelson | Computer and Web Expenses | (month, day, | Expenditure This Period |
| 1239 E St SE, Washington, DC 20003 | | year) | |
| | | 06/18/2021 | \$ 3,000.00 |
| Occupation | Name and Address of Employer | | |
| Chairman | Council of the District of Columbia | | |
| | 1350 Pennsylvania Ave NW, Washington, DC 20004 | | |
| . Full Name, Mailing Address and Zip Code | Purpose of Expenditure | Date | Amount of Each |
| Industrial Bank | Bank Fees | (month, day, | Expenditure This Period |
| 4812 Georgia Avenue NW, | | year) | |
| Washington, DC 20011 | | 06/25/2021 | \$ 2.00 |
| Occupation | Name and Address of Employer | | • |
| | The second se | | |
| . Full Name, Mailing Address and Zip Code | Purpose of Expenditure | Date | Amount of Each |
| The Balduzzi Group, Inc. | Consultant | (month, day, | Expenditure This Period |
| 154 Cobblestone Court Drive #113, | | year) | |
| Victor, NY 14564 | | 07/05/2021 | \$ 4,650.00 |
| Occupation | Name and Address of Employer | 07/03/2021 | \$ 4,050.00 |

| 8. Full Name, Mailing Address and Zip Code | Purpose of Expenditure | Date | Amount of Each |
|---|------------------------------|-----------------------|-------------------------|
| Nationbuilder | Bank Fees | (month, day, | Expenditure This Period |
| 520 S Grand Ave 2nd Floor, Los | | year) | |
| Angeles, CA 90071 | | 07/17/2021 | \$ 14.25 |
| Occupation | Name and Address of Employer | | |
| 9. Full Name, Mailing Address and Zip Code | Purpose of Expenditure | Date | Amount of Each |
| Nationbuilder 520 S Grand Ave 2nd Floor, Los Angeles CA 90071 | Bank Fees | (month, day, year) | Expenditure This Period |
| Angeles, CA 90071 Occupation | Name and Address of Employer | 07/18/2021 | \$ 19.80 |
| | | | |
| 10. Full Name, Mailing Address and Zip Code | Purpose of Expenditure | Date | Amount of Each |
| Act Blue LLC | Bank Fees | (month, day, | Expenditure This Period |
| PO Box 441146, Sommerville, MA 02144 | | year) | |
| | | 07/18/2021 | \$ 2.02 |
| Occupation | Name and Address of Employer | | |
| 11. Full Name, Mailing Address and Zip Code | Purpose of Expenditure | Date | Amount of Each |
| Nationbuilder 520 S Grand Ave 2nd Floor, Los | Bank Fees | (month, day, year) | Expenditure This Period |
| Angeles, CA 90071 | | 07/19/2021 | \$ 58.80 |
| Occupation | Name and Address of Employer | | |
| 12. Full Name, Mailing Address and Zip Code | Purpose of Expenditure | Date | Amount of Each |
| Nationbuilder | Bank Fees | (month, day, | Expenditure This Period |
| 520 S Grand Ave 2nd Floor, Los Angeles, CA 90071 | | year) | |
| _ | Name and Address of Employer | 07/20/2021 | \$ 59.10 |
| Occupation | Name and Address of Employer | | |
| 13. Full Name, Mailing Address and Zip Code | Purpose of Expenditure | Date | Amount of Each |
| Nationbuilder | Bank Fees | (month, day, | Expenditure This Period |
| 520 S Grand Ave 2nd Floor, Los Angeles, CA 90071 | | year) | |
| - | | 07/24/2021 | \$ 4.20 |
| Occupation | Name and Address of Employer | | |
| 14. Full Name, Mailing Address and Zip Code | Purpose of Expenditure | Date | Amount of Each |
| Nationbuilder 520 S Grand Ave 2nd Floor, Los | Bank Fees | (month, day, year) | Expenditure This Period |
| Angeles, CA 90071 | | 07/25/2021 | \$ 215.25 |
| Occupation | Name and Address of Employer | | |
| 15. Full Name, Mailing Address and Zip Code | Purpose of Expenditure | Date | Amount of Each |
| Industrial Bank 4812 Georgia Avenue NW, Washington, DC 20011 | Bank Fees | (month, day, year) | Expenditure This Period |
| Occupation | Name and Address of Free 1 | 07/26/2021 | \$ 2.00 |
| Lagungtion | Name and Address of Employer | | 1 |

| 16. Full Name, Mailing Address and Zip Code | Purpose of Expenditure | Date | Amount of Each |
|--|-------------------------------------|-----------------------|---|
| Nationbuilder | Bank Fees | (month, day, | Expenditure This Period |
| 520 S Grand Ave 2nd Floor, Los | | year) | |
| Angeles, CA 90071 | | 07/26/2021 | \$ 477.53 |
| Occupation | Name and Address of Employer | | |
| | | | |
| | | | |
| 17. Full Name, Mailing Address and Zip Code | Purpose of Expenditure | Date | Amount of Each |
| 17. Full Name, Mailing Address and Zip Code Nationbuilder | Purpose of Expenditure Bank Fees | Date (month, day, | Amount of Each Expenditure This Period |
| | · · | | |
| Nationbuilder | · · | (month, day, | |
| Nationbuilder 520 S Grand Ave 2nd Floor, Los | · · | (month, day, year) | Expenditure This Period |
| Nationbuilder 520 S Grand Ave 2nd Floor, Los Angeles, CA 90071 | Bank Fees | (month, day, year) | Expenditure This Period |