



GOVERNMENT OF THE DISTRICT OF COLUMBIA  
OFFICE OF CAMPAIGN FINANCE  
WASHINGTON, D.C. 20009

REPORT OF RECEIPTS AND EXPENDITURES  
FOR A CONSTITUENT-SERVICE PROGRAM

SUMMARY PAGE

1. Full Name of Constituent-Service Program <b>Evans Constituent Service Fund</b>	2. OCF Identification Number <b>CSSCC2020008</b>
Address (Number and Street) <b>1350 Pennsylvania Avenue, NW, #106</b>	3. Is this report an Amendment? (Yes or No) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
City, State and Zip Code <b>Washington, DC 20004</b>	

4. TYPE OF REPORT: **April 1st Report**

CONSTITUENT-SERVICE PROGRAM SUMMARY	COLUMN A THIS PERIOD	COLUMN B CUMULATIVE YEAR- TO-DATE
5. Covering Period <b>1/2/2017</b> through <b>4/1/2017</b>		
6. (a) Cash on Hand January 1		<b>\$ 0.00</b>
(b) Cash on Hand at Beginning of Reporting Period	<b>\$ 56,201.35</b>	
(c) Total Receipts (from Line (16))	<b>\$ 25,752.53</b>	<b>\$ 25,752.53</b>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6 (c) for Column B)	<b>\$ 81,953.88</b>	
7. Total Expenditures (from Line 24)	<b>\$ 21,101.43</b>	<b>\$ 21,101.43</b>
8. Cash on Hand at Close of Reporting Period [subtract Line 7 from Line 6(d)]	<b>\$ 60,852.45</b>	
9. Debts and Obligations Owed BY the Constituent-Service Program and/or Elected Official (itemize all on Schedule D)	<b>\$ 0.00</b>	<b>\$ 0.00</b>
10. (a) Loans Owed BY the Constituent-Service Program and/or Elected Official (itemize all on Schedule E)	<b>\$ 0.00</b>	<b>\$ 0.00</b>
(b) All Other Loans (itemize all on Schedule-E1)	<b>\$ 0.00</b>	<b>\$ 0.00</b>

CERTIFICATIONS/OATHS AND AFFIRMATIONS OF FILERS OF REPORTS OF RECEIPTS AND EXPENDITURES FOR A CONSTITUENT-SERVICE PROGRAM

(1) OATH OR AFFIRMATION OF ELECTED OFFICIAL 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 CONSTITUENT-SERVICE PROGRAM ESTABLISHED BY ME IS 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 ELECTED OFFICIAL

SIGNATURE OF ELECTED OFFICIAL

DATE

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

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NOTARY PUBLIC

NOTE: SUBMISSION OF LATE, FALSE, ERRONEOUS, OR INCOMPLETE INFORMATION MAY SUBJECT THE PERSON TO THE PENALTIES OF D.C. OFFICIAL CODE § 1-1163.35.

(2) OATH OR AFFIRMATION OF PROGRAM 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.

**Schannette L Grant**

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TYPE OR PRINT FULL NAME OF TREASURER

**ELECTRONICALLY CERTIFIED**

**05/18/2017**

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SIGNATURE OF TREASURER

DATE

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

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NOTARY PUBLIC

NOTE: SUBMISSION OF LATE, FALSE, ERRONEOUS, OR INCOMPLETE INFORMATION MAY SUBJECT THE PERSON TO THE PENALTIES OF D.C. OFFICIAL CODE § 1-1163.35.

**DETAILED SUMMARY PAGE  
OF RECEIPTS AND EXPENDITURES  
FOR CONSTITUENT-SERVICE PROGRAMS**

1. Full Name of Constituent-Service Program Evans Constituent Service Fund	REPORT COVERING THE PERIOD FROM: <b>1/2/2017</b> TO: <b>4/1/2017</b>	
<b>I. RECEIPTS</b>	<b>COLUMN A THIS PERIOD</b>	<b>COLUMN B CUMULATIVE YEAR-TO-DATE</b>
<b>11. CONTRIBUTIONS (EXCLUDING LOANS) FROM:</b>		
(a) Itemized monetary contributions from other than the elected official (Schedule A)	\$ 25,600.00	\$ 25,600.00 11(a)
(b) Itemized monetary contributions from the elected official (Schedule A-1)	\$ 0.00	\$ 0.00 11(b)
(c) Contributions of personal property from other than the elected official (Schedule A-2)	\$ 0.00	\$ 0.00 11(c)
(d) Contributions of Personal Property from the elected official (Schedule A-3)	\$ 0.00	\$ 0.00 11(d)
(e) Transfers from Authorized Committees (Schedule A-4)	\$ 0.00	\$ 0.00 11(e)
(f) Itemized Monetary Contributions in excess of \$10,000.00 from source not associated with the Elected Official or CSP (Schedule A-7)	\$ 0.00	\$ 0.00 11(f)
(g) TOTAL Contributions- Excluding Loans (add lines 11(a) (b), (c), (d), (e) and (f))	\$ 25,600.00	\$ 25,600.00 11(g)
<b>12. SALES AND COLLECTIONS (Schedule C)</b>	\$ 0.00	\$ 0.00 12
<b>13. LOANS RECEIVED</b>		
(a) Made or guaranteed by the elected Official and or CSP (Schedule E)	\$ 0.00	\$ 0.00 13(a)
(b) All other Loans (Schedule E-1)	\$ 0.00	\$ 0.00 13(b)
(c) TOTAL Loans (add Lines 13(a), and 13(b))	\$ 0.00	\$ 0.00 13(c)
<b>14. OTHER RECEIPTS (DIVIDENDS, INTEREST, etc.)(Schedule A-5)</b>	\$ 0.00	\$ 0.00 14
<b>15. OFFSETS TO OPERATING EXPENDITURES (Schedule A-6)</b>	\$ 152.53	\$ 152.53 15
<b>16. TOTAL RECEIPTS</b> (add Lines 11(f), 12, 13(c), 14 and 15)	\$ 25,752.53	\$ 25,752.53 16
<b>II. EXPENDITURES</b>		
<b>17. OPERATING EXPENDITURES (Schedule B)</b>	\$ 1,177.75	\$ 1,177.75 17
<b>18. ALL OTHER EXPENDITURES (Schedule B-1)</b>	\$ 19,923.68	\$ 19,923.68 18
<b>19. LOAN REPAYMENTS:</b>		
(a) Loans made or guaranteed by the elected Official and/or Constituent Service Program (Schedule E)	\$ 0.00	\$ 0.00 19(a)
(b) All other Loans (Schedule E-1)	\$ 0.00	\$ 0.00 19(b)
(c) TOTAL Loan Repayments (add Lines 19(a) and 19(b))	\$ 0.00	\$ 0.00 19(c)
<b>20. TOTAL EXPENDITURES</b> (add Lines 17, 18, and 19(c))	\$ 21,101.43	\$ 21,101.43 20
<b>III. CASH SUMMARY</b>		
<b>21. CASH ON HAND AT BEGINNING OF REPORTING PERIOD</b>	\$	56,201.35
<b>22. TOTAL RECEIPTS THIS PERIOD</b> (from Line 16)	\$	25,752.53
<b>23. SUBTOTAL</b> (add Lines 21 and 22)	\$	81,953.88
<b>24. TOTAL EXPENDITURES THIS PERIOD</b> (from Line 20)	\$	21,101.43
<b>25. CASH ON HAND AT CLOSE OF REPORTING PERIOD</b> (subtract Line 24 from Line 23)	\$	60,852.45

## ITEMIZED MONETARY CONTRIBUTIONS FROM OTHER THAN THE ELECTED OFFICIAL

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 Constituent-Service Program

**Evans Constituent Service Fund**

1. Full Name, Mailing Address and Zip Code <b>DC First PAC</b> <b>1200 29th Street, NW, Washington, DC 20007</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>01/04/2017</b>	Amount of Each Receipt This Period <b>\$ 500.00</b>
<b>Contributor Type</b> PAC	<b>Occupation</b> Name and Address of Employer		
Aggregate Year-To-date			<b>\$ 500.00</b>
2. Full Name, Mailing Address and Zip Code <b>Dale Rasmussen</b> <b>29409 - 232nd Ave SE , Black Diamond, WA 98010</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>01/04/2017</b>	Amount of Each Receipt This Period <b>\$ 500.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> Same Name and Address of Employer <b>Self</b> <b>Washington, DC</b>		
Aggregate Year-To-date			<b>\$ 500.00</b>
3. Full Name, Mailing Address and Zip Code <b>Premier Media</b> <b>1500 Broadway, 9th Floor, New York,, NY 10036</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>01/04/2017</b>	Amount of Each Receipt This Period <b>\$ 500.00</b>
<b>Contributor Type</b> Business  <b>Business Type</b> Corporation	<b>Occupation</b> Name and Address of Employer		
Aggregate Year-To-date			<b>\$ 500.00</b>
4. Full Name, Mailing Address and Zip Code <b>Doggett Enterprises, Inc.</b> <b>1200 29th Street, NW, Washington, DC 20007</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>01/04/2017</b>	Amount of Each Receipt This Period <b>\$ 500.00</b>
<b>Contributor Type</b> Business  <b>Business Type</b> Corporation	<b>Occupation</b> Name and Address of Employer		
Aggregate Year-To-date			<b>\$ 500.00</b>
5. Full Name, Mailing Address and Zip Code <b>Landmark Parking of VA, Inc.</b> <b>33 S. Gay St., Baltimore, MD 21202</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>01/04/2017</b>	Amount of Each Receipt This Period <b>\$ 500.00</b>
<b>Contributor Type</b> Business  <b>Business Type</b> Corporation	<b>Occupation</b> Name and Address of Employer		

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Full Name of Constituent-Service Program

**Evans Constituent Service Fund**

	Aggregate Year-To-date		<b>\$ 500.00</b>
6. Full Name, Mailing Address and Zip Code <b>Atlantic</b> <b>4200 Wisconsin Avenue, NW, Suite 350,</b> <b>Washington, DC 20016</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>01/04/2017</b>	Amount of Each Receipt This Period <b>\$ 500.00</b>
<b>Contributor Type</b> Business  <b>Business Type</b> Corporation	<b>Occupation</b> Name and Address of Employer		
	Aggregate Year-To-date		<b>\$ 500.00</b>
7. Full Name, Mailing Address and Zip Code <b>Fifth Avenue Law Group, PLLC</b> <b>701 5th Avenue, Suite 2800, Seattle, WA 98104</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>01/04/2017</b>	Amount of Each Receipt This Period <b>\$ 500.00</b>
<b>Contributor Type</b> Business  <b>Business Type</b> Limited Liability Company	<b>Occupation</b> Name and Address of Employer		
	Aggregate Year-To-date		<b>\$ 500.00</b>
8. Full Name, Mailing Address and Zip Code <b>Laz Parking</b> <b>15 Lewis Street, Hartford, CT 06103</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>01/04/2017</b>	Amount of Each Receipt This Period <b>\$ 500.00</b>
<b>Contributor Type</b> Business  <b>Business Type</b> Corporation	<b>Occupation</b> Name and Address of Employer		
	Aggregate Year-To-date		<b>\$ 500.00</b>
9. Full Name, Mailing Address and Zip Code <b>PN Hoffman &amp; Associates</b> <b>680 Waters Street, SW, Washington, DC 20024</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>01/04/2017</b>	Amount of Each Receipt This Period <b>\$ 500.00</b>
<b>Contributor Type</b> Business  <b>Business Type</b> Corporation	<b>Occupation</b> Name and Address of Employer		
	Aggregate Year-To-date		<b>\$ 500.00</b>

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Full Name of Constituent-Service Program

**Evans Constituent Service Fund**

10. Full Name, Mailing Address and Zip Code <b>Covanta Energy, LLC</b> <b>445 South Street, Morristown, NJ 07960</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>01/04/2017</b>	Amount of Each Receipt This Period <b>\$ 500.00</b>
<b>Contributor Type</b> Business  <b>Business Type</b> Limited Liability Company	<b>Occupation</b> Name and Address of Employer		
Aggregate Year-To-date			<b>\$ 500.00</b>
11. Full Name, Mailing Address and Zip Code <b>Russell Lindner</b> <b>1025 Thomas Jefferson Street, NW ,</b> <b>Washington, DC 20007</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>02/02/2017</b>	Amount of Each Receipt This Period <b>\$ 500.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> Name and Address of Employer		
Aggregate Year-To-date			<b>\$ 500.00</b>
12. Full Name, Mailing Address and Zip Code <b>Kindy French</b> <b>2330 California Street, NW , Washington, DC</b> <b>20008</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>02/02/2017</b>	Amount of Each Receipt This Period <b>\$ 500.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> Name and Address of Employer		
Aggregate Year-To-date			<b>\$ 500.00</b>
13. Full Name, Mailing Address and Zip Code <b>Emmanuel Friedman</b> <b>2330 California Street, NW , Washington, DC</b> <b>20008</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>02/02/2017</b>	Amount of Each Receipt This Period <b>\$ 500.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> Name and Address of Employer		
Aggregate Year-To-date			<b>\$ 500.00</b>
14. Full Name, Mailing Address and Zip Code <b>Deborah R Salzberg</b> <b>7500 Hampden Lane, Bethesda, DC 20814</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>02/02/2017</b>	Amount of Each Receipt This Period <b>\$ 500.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> <b>President</b> Name and Address of Employer <b>Forest City</b> <b>Washington, DC</b>		

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Full Name of Constituent-Service Program

Evans Constituent Service Fund

	Aggregate Year-To-date		<b>\$ 500.00</b>
15. Full Name, Mailing Address and Zip Code <b>Richard Newman</b> <b>5635 Bent Branch Road , Bethesda, MD 20816</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>02/02/2017</b>	Amount of Each Receipt This Period <b>\$ 100.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> Name and Address of Employer		
	Aggregate Year-To-date		<b>\$ 100.00</b>
16. Full Name, Mailing Address and Zip Code <b>Alan Bubes</b> <b>1601 31st Street, NW , Washington, DC 20007</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>02/02/2017</b>	Amount of Each Receipt This Period <b>\$ 500.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> Name and Address of Employer		
	Aggregate Year-To-date		<b>\$ 500.00</b>
17. Full Name, Mailing Address and Zip Code <b>Norman Glasgow</b> <b>10513 Alloway Drive , Washington, DC 20854</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>02/02/2017</b>	Amount of Each Receipt This Period <b>\$ 500.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> <b>Attorney</b> Name and Address of Employer <b>Holland and Knight</b> <b>Washington, DC</b>		
	Aggregate Year-To-date		<b>\$ 500.00</b>
18. Full Name, Mailing Address and Zip Code <b>Bart Gordon Committee</b> <b>2442 Belmont Road, NW, Washington, DC 20001</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>02/02/2017</b>	Amount of Each Receipt This Period <b>\$ 100.00</b>
<b>Contributor Type</b> Business  <b>Business Type</b> Corporation	<b>Occupation</b> Name and Address of Employer		
	Aggregate Year-To-date		<b>\$ 100.00</b>

## ITEMIZED MONETARY CONTRIBUTIONS FROM OTHER THAN THE ELECTED OFFICIAL

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Full Name of Constituent-Service Program

**Evans Constituent Service Fund**

19. Full Name, Mailing Address and Zip Code <b>The Forge Company</b> <b>1025 Thomas Jefferson Street, NW, Suite 502E,</b> <b>Washington, DC 20007</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>02/02/2017</b>	Amount of Each Receipt This Period <b>\$ 500.00</b>
<b>Contributor Type</b> Business  <b>Business Type</b> Corporation	<b>Occupation</b> Name and Address of Employer		
Aggregate Year-To-date			<b>\$ 500.00</b>
20. Full Name, Mailing Address and Zip Code <b>Michael Sussman</b> <b>2101 N Street, NW. Ste. T-1, Washington, DC</b> <b>20037</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>02/02/2017</b>	Amount of Each Receipt This Period <b>\$ 100.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> Name and Address of Employer <b>Georgetown Flea Market</b> <b>Washington, DC</b>		
Aggregate Year-To-date			<b>\$ 100.00</b>
21. Full Name, Mailing Address and Zip Code <b>City Limits, Inc.</b> <b>1226 36th Street, NW, Washington, DC 20007</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>02/02/2017</b>	Amount of Each Receipt This Period <b>\$ 500.00</b>
<b>Contributor Type</b> Business  <b>Business Type</b> Corporation	<b>Occupation</b> Name and Address of Employer		
Aggregate Year-To-date			<b>\$ 500.00</b>
22. Full Name, Mailing Address and Zip Code <b>Walrus Corporation</b> <b>675-15th St., NW., Washington, DC 20005</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>02/02/2017</b>	Amount of Each Receipt This Period <b>\$ 500.00</b>
<b>Contributor Type</b> Business  <b>Business Type</b> Corporation	<b>Occupation</b> Name and Address of Employer		
Aggregate Year-To-date			<b>\$ 500.00</b>
23. Full Name, Mailing Address and Zip Code <b>Anthony Lanier</b> <b>3307 M Street, NW - Suite 400, Washington, DC</b> <b>20007</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>02/02/2017</b>	Amount of Each Receipt This Period <b>\$ 500.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> Name and Address of Employer		



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Full Name of Constituent-Service Program

Evans Constituent Service Fund

	Aggregate Year-To-date		<b>\$ 500.00</b>
24. Full Name, Mailing Address and Zip Code <b>Morton Fungar</b> <b>1650 Tysons Boulevard , McLean , VA 22102</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>02/02/2017</b>	Amount of Each Receipt This Period <b>\$ 500.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> Name and Address of Employer		
	Aggregate Year-To-date		<b>\$ 500.00</b>
25. Full Name, Mailing Address and Zip Code <b>Clyde's of Gallery Place</b> <b>707 7th Street, NW, Washington, DC 20001</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>02/02/2017</b>	Amount of Each Receipt This Period <b>\$ 500.00</b>
<b>Contributor Type</b> Business  <b>Business Type</b> Corporation	<b>Occupation</b> Name and Address of Employer		
	Aggregate Year-To-date		<b>\$ 500.00</b>
26. Full Name, Mailing Address and Zip Code <b>Jack Olender</b> <b>2500 Virginia Avenue, NW , Washington, DC 20037</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>02/02/2017</b>	Amount of Each Receipt This Period <b>\$ 500.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> Name and Address of Employer		
	Aggregate Year-To-date		<b>\$ 500.00</b>
27. Full Name, Mailing Address and Zip Code <b>The Hamilton</b> <b>600 14th Street, NW , Washington, DC 20005</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>02/02/2017</b>	Amount of Each Receipt This Period <b>\$ 500.00</b>
<b>Contributor Type</b> Business  <b>Business Type</b> Corporation	<b>Occupation</b> Name and Address of Employer		
	Aggregate Year-To-date		<b>\$ 500.00</b>

## ITEMIZED MONETARY CONTRIBUTIONS FROM OTHER THAN THE ELECTED OFFICIAL

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 Constituent-Service Program

**Evans Constituent Service Fund**

28. Full Name, Mailing Address and Zip Code <b>Law Office of Jack H. Olender</b> <b>888 17th Street, NW, 4th Floor, Washington, DC</b> <b>20006</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>02/02/2017</b>	Amount of Each Receipt This Period <b>\$ 500.00</b>
<b>Contributor Type</b> Business  <b>Business Type</b> Corporation	<b>Occupation</b> Name and Address of Employer		
Aggregate Year-To-date			<b>\$ 500.00</b>
29. Full Name, Mailing Address and Zip Code <b>Lila Sullivan</b> <b>4926 Rockwood Parkway, NW , Washington, DC</b> <b>20016</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>02/15/2017</b>	Amount of Each Receipt This Period <b>\$ 250.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> Name and Address of Employer		
Aggregate Year-To-date			<b>\$ 250.00</b>
30. Full Name, Mailing Address and Zip Code <b>Albert H. Smalls</b> <b>7116 Glenbrook Road, Bethesda, MD 20814</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>02/15/2017</b>	Amount of Each Receipt This Period <b>\$ 500.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> Name and Address of Employer		
Aggregate Year-To-date			<b>\$ 500.00</b>
31. Full Name, Mailing Address and Zip Code <b>James Pedas</b> <b>4018 Brandywine Street NW, Washington, DC</b> <b>20016</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>02/15/2017</b>	Amount of Each Receipt This Period <b>\$ 500.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> <b>Vice President</b> Name and Address of Employer <b>Circle Management Co</b> <b>Washington, DC</b>		
Aggregate Year-To-date			<b>\$ 500.00</b>
32. Full Name, Mailing Address and Zip Code <b>Cherrie W Doggett</b> <b>666 11th Street, NW, Ste. 300, Washington, DC</b> <b>20001</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>02/15/2017</b>	Amount of Each Receipt This Period <b>\$ 500.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> <b>Executive</b> Name and Address of Employer <b>Doggett Enterprises</b> <b>Washington, DC</b>		

## ITEMIZED MONETARY CONTRIBUTIONS FROM OTHER THAN THE ELECTED OFFICIAL

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Full Name of Constituent-Service Program

Evans Constituent Service Fund

	Aggregate Year-To-date		<b>\$ 500.00</b>
33. Full Name, Mailing Address and Zip Code <b>Giuseppe Cecchi</b> <b>1209 Aldebaran Drive , McLean, VA 22101</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>02/15/2017</b>	Amount of Each Receipt This Period <b>\$ 500.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> Name and Address of Employer <b>The IDI Group Companies</b> <b>1050 17th Street, NW , Washington, DC 20036</b>		
	Aggregate Year-To-date		<b>\$ 500.00</b>
34. Full Name, Mailing Address and Zip Code <b>Manatt, Phelps, &amp; Phillips</b> <b>11355 W. Olympic Boulevard, Los Angeles, CA 90064</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>02/15/2017</b>	Amount of Each Receipt This Period <b>\$ 500.00</b>
<b>Contributor Type</b> Business	<b>Occupation</b> Name and Address of Employer		
<b>Business Type</b> Limited Liability Company			
	Aggregate Year-To-date		<b>\$ 500.00</b>
35. Full Name, Mailing Address and Zip Code <b>CS2 Investments, LLC</b> <b>1701 Rockville Pike, Suite B-20, Rockville, MD 20852</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>02/15/2017</b>	Amount of Each Receipt This Period <b>\$ 500.00</b>
<b>Contributor Type</b> Business	<b>Occupation</b> Name and Address of Employer		
<b>Business Type</b> Limited Liability Company			
	Aggregate Year-To-date		<b>\$ 500.00</b>
36. Full Name, Mailing Address and Zip Code <b>Saul Urban, LLC</b> <b>7700 Old Georgetown Road, Bethesda, MD 20814</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>02/15/2017</b>	Amount of Each Receipt This Period <b>\$ 500.00</b>
<b>Contributor Type</b> Business	<b>Occupation</b> Name and Address of Employer		
<b>Business Type</b> Limited Liability Company			
	Aggregate Year-To-date		<b>\$ 500.00</b>

## ITEMIZED MONETARY CONTRIBUTIONS FROM OTHER THAN THE ELECTED OFFICIAL

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 Constituent-Service Program

**Evans Constituent Service Fund**

37. Full Name, Mailing Address and Zip Code <b>District of Columbia Association of HMOs</b> <b>1455 Pennsylvania Avenue, NW, Suite 400,</b> <b>Washington, DC 20004</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>02/15/2017</b>	Amount of Each Receipt This Period <b>\$ 500.00</b>
<b>Contributor Type</b> Business  <b>Business Type</b> Corporation	<b>Occupation</b> Name and Address of Employer		
Aggregate Year-To-date			<b>\$ 500.00</b>
38. Full Name, Mailing Address and Zip Code <b>Wallace F. Holladay Jr.</b> <b>3200 Idaho Avenue, NW, Washington, DC 20016</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>02/15/2017</b>	Amount of Each Receipt This Period <b>\$ 100.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> Name and Address of Employer		
Aggregate Year-To-date			<b>\$ 100.00</b>
39. Full Name, Mailing Address and Zip Code <b>Max Berry</b> <b>3213 O Street, NW , Washington, DC 20007</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>03/02/2017</b>	Amount of Each Receipt This Period <b>\$ 500.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> <b>Attorney</b> Name and Address of Employer <b>Self</b> <b>Same, Washington, DC</b>		
Aggregate Year-To-date			<b>\$ 500.00</b>
40. Full Name, Mailing Address and Zip Code <b>Hadley,</b> <b>3227 45th Street, NW, Washington, DC 20016</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>03/02/2017</b>	Amount of Each Receipt This Period <b>\$ 200.00</b>
<b>Contributor Type</b> Business  <b>Business Type</b> Corporation	<b>Occupation</b> Name and Address of Employer		
Aggregate Year-To-date			<b>\$ 200.00</b>
41. Full Name, Mailing Address and Zip Code <b>Scribner</b> <b>3227 45th Street, NW, Washington, DC 20016</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>03/02/2017</b>	Amount of Each Receipt This Period <b>\$ 200.00</b>
<b>Contributor Type</b> Business  <b>Business Type</b> Corporation	<b>Occupation</b> Name and Address of Employer		

## ITEMIZED MONETARY CONTRIBUTIONS FROM OTHER THAN THE ELECTED OFFICIAL

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Full Name of Constituent-Service Program

Evans Constituent Service Fund

	Aggregate Year-To-date		<b>\$ 200.00</b>
42. Full Name, Mailing Address and Zip Code <b>Madaket</b> <b>2444 Wisconsin Avenue, NW, Washington, DC</b> <b>20007</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>03/02/2017</b>	Amount of Each Receipt This Period <b>\$ 200.00</b>
<b>Contributor Type</b> Business  <b>Business Type</b> Corporation	<b>Occupation</b> Name and Address of Employer		
	Aggregate Year-To-date		<b>\$ 200.00</b>
43. Full Name, Mailing Address and Zip Code <b>Jetties, Inc</b> <b>1609 Foxhall Road, NW, Washington, DC 20007</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>03/02/2017</b>	Amount of Each Receipt This Period <b>\$ 200.00</b>
<b>Contributor Type</b> Business  <b>Business Type</b> Corporation	<b>Occupation</b> Name and Address of Employer		
	Aggregate Year-To-date		<b>\$ 200.00</b>
44. Full Name, Mailing Address and Zip Code <b>John E Akridge</b> <b>28181 Harleigh Lane, Oxford, DC 21654</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>03/02/2017</b>	Amount of Each Receipt This Period <b>\$ 500.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> <b>Executive</b> Name and Address of Employer <b>The John Akridge Companies</b> <b>601 13th Street, NW. Suite 300N, Washington, DC</b> <b>20005</b>		
	Aggregate Year-To-date		<b>\$ 500.00</b>
45. Full Name, Mailing Address and Zip Code <b>Sarah Akridge</b> <b>28181 Harleigh Lane, Oxford, MD 21654</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>03/02/2017</b>	Amount of Each Receipt This Period <b>\$ 500.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> Name and Address of Employer		
	Aggregate Year-To-date		<b>\$ 500.00</b>

## ITEMIZED MONETARY CONTRIBUTIONS FROM OTHER THAN THE ELECTED OFFICIAL

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Full Name of Constituent-Service Program

**Evans Constituent Service Fund**

46. Full Name, Mailing Address and Zip Code <b>F. Davis Camalier</b> <b>1629 K Street, NW, Suite 1200, Washington, DC 20006</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>03/02/2017</b>	Amount of Each Receipt This Period <b>\$ 500.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> <b>Managing Director</b> Name and Address of Employer <b>Washington Investment Partners</b> <b>Washington, DC</b>		
Aggregate Year-To-date		<b>\$ 500.00</b>	
47. Full Name, Mailing Address and Zip Code <b>Herbert Miller</b> <b>9677 Myrtle Grove Lane, Easton, MD 21601</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>03/02/2017</b>	Amount of Each Receipt This Period <b>\$ 200.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> <b>Real Estates</b> Name and Address of Employer <b>Self</b> <b>Washington, DC</b>		
Aggregate Year-To-date		<b>\$ 200.00</b>	
48. Full Name, Mailing Address and Zip Code <b>Evan M Novenstein</b> <b>8720 Harness Trail, Potomac, MD 20854</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>03/02/2017</b>	Amount of Each Receipt This Period <b>\$ 500.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> Name and Address of Employer		
Aggregate Year-To-date		<b>\$ 500.00</b>	
49. Full Name, Mailing Address and Zip Code <b>Jason Goldblatt</b> <b>7012 Arandale Road, Bethesda, MD 20817</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>03/02/2017</b>	Amount of Each Receipt This Period <b>\$ 500.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> <b>President and CEO</b> Name and Address of Employer <b>Willco</b> <b>Washington, DC</b>		
Aggregate Year-To-date		<b>\$ 500.00</b>	
50. Full Name, Mailing Address and Zip Code <b>Melissa Kimmel</b> <b>7012 Arandale Road, Bethesda, MD 20817</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>03/02/2017</b>	Amount of Each Receipt This Period <b>\$ 500.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> Name and Address of Employer		

## ITEMIZED MONETARY CONTRIBUTIONS FROM OTHER THAN THE ELECTED OFFICIAL

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Full Name of Constituent-Service Program

Evans Constituent Service Fund

	Aggregate Year-To-date		<b>\$ 500.00</b>
51. Full Name, Mailing Address and Zip Code <b>Judith R. Cohen</b> <b>10204 Bencross Drive, Potomac, MD 20854</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>03/02/2017</b>	Amount of Each Receipt This Period <b>\$ 500.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> Name and Address of Employer		
	Aggregate Year-To-date		<b>\$ 500.00</b>
52. Full Name, Mailing Address and Zip Code <b>Richard Cohen</b> <b>7811 Montrose Road - Suite 500, Potomac, MD 20854</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>03/02/2017</b>	Amount of Each Receipt This Period <b>\$ 500.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> Name and Address of Employer		
	Aggregate Year-To-date		<b>\$ 500.00</b>
53. Full Name, Mailing Address and Zip Code <b>Judith M Novenstein</b> <b>8720 Harness Trail, Potomac, MD 20854</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>03/02/2017</b>	Amount of Each Receipt This Period <b>\$ 500.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> Name and Address of Employer		
	Aggregate Year-To-date		<b>\$ 500.00</b>
54. Full Name, Mailing Address and Zip Code <b>Fairgrounds</b> <b>3227 45th Street, NW, Washington, DC 20016</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>03/02/2017</b>	Amount of Each Receipt This Period <b>\$ 200.00</b>
<b>Contributor Type</b> Business  <b>Business Type</b> Corporation	<b>Occupation</b> Name and Address of Employer		
	Aggregate Year-To-date		<b>\$ 200.00</b>

## ITEMIZED MONETARY CONTRIBUTIONS FROM OTHER THAN THE ELECTED OFFICIAL

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Full Name of Constituent-Service Program

Evans Constituent Service Fund

55. Full Name, Mailing Address and Zip Code <b>William Alsup III</b> 3019 44th Street, NW , Washington, DC 20016	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>03/15/2017</b>	Amount of Each Receipt This Period <b>\$ 500.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> Name and Address of Employer		
Aggregate Year-To-date			<b>\$ 500.00</b>
56. Full Name, Mailing Address and Zip Code <b>Pascal, Weiss &amp; Hirao</b> 1008 Pennsylvania Avenue, SE, Washington, DC 20003	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>03/28/2017</b>	Amount of Each Receipt This Period <b>\$ 250.00</b>
<b>Contributor Type</b> Business  <b>Business Type</b> Corporation	<b>Occupation</b> Name and Address of Employer		
Aggregate Year-To-date			<b>\$ 250.00</b>
57. Full Name, Mailing Address and Zip Code <b>Corey Arnez Griffin</b> 1515 Lawrence Street, NE, Washington, DC 20017	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>03/28/2017</b>	Amount of Each Receipt This Period <b>\$ 500.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> Name and Address of Employer		
Aggregate Year-To-date			<b>\$ 500.00</b>
58. Full Name, Mailing Address and Zip Code <b>Southern Building Associates</b> 805 15th Street -Suite 625, Washington, DC 20005	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>03/28/2017</b>	Amount of Each Receipt This Period <b>\$ 500.00</b>
<b>Contributor Type</b> Business  <b>Business Type</b> Corporation	<b>Occupation</b> Name and Address of Employer		
Aggregate Year-To-date			<b>\$ 500.00</b>
59. Full Name, Mailing Address and Zip Code <b>Stewart Investment Company</b> 5454 Wisconsin Avenue, Suite 700, Chevy Chase, MD 20815	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>03/28/2017</b>	Amount of Each Receipt This Period <b>\$ 500.00</b>
<b>Contributor Type</b> Business  <b>Business Type</b> Corporation	<b>Occupation</b> Name and Address of Employer		



## ITEMIZED MONETARY CONTRIBUTIONS FROM OTHER THAN THE ELECTED OFFICIAL

**Full Name of Constituent-Service Program**  
**Evans Constituent Service Fund**

Aggregate Year-To-date

**\$ 500.00**

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

**\$ 25,600.00**

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

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 Constituent-Service Program

Evans Constituent Service Fund

1. Full Name, Mailing Address and Zip Code	Receipt Type	Date (month, day, year)	Amount of Each Offset This Period
Dow Jones 200 Burnett Road, Chicopee, MA 01020	Refund	02/02/2017	\$ 152.53
	Aggregate Year-To-date		\$ 152.53

TOTAL This Period (Aggregate of all Receipt pages)

\$ 152.53

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## Full Name of Constituent-Service Program

## Evans Constituent Service Fund

1. Full Name, Mailing Address and Zip Code <b>Constant Contact</b> <b>1601 Trapelo Road, Suite 329 ,</b> <b>Waltham, MA 02451</b>	Purpose of Expenditure <b>Computer and Web Expenses</b>	Date (month, day, year) <b>01/06/2017</b>	Amount of Each Expenditure This Period <b>\$ 65.00</b>
2. Full Name, Mailing Address and Zip Code <b>Old Ebbit Grill</b> <b>675 15th Street, NW, Washington, DC</b> <b>20005</b>	Purpose of Expenditure <b>Catering/Refreshments</b>	Date (month, day, year) <b>01/11/2017</b>	Amount of Each Expenditure This Period <b>\$ 19.82</b>
3. Full Name, Mailing Address and Zip Code <b>Wells Fargo</b> <b>1250 Pennsylvania Ave. NW,</b> <b>Washington, DC 20004</b>	Purpose of Expenditure <b>Bank Fees</b>	Date (month, day, year) <b>01/31/2017</b>	Amount of Each Expenditure This Period <b>\$ 2.00</b>
4. Full Name, Mailing Address and Zip Code <b>Boss Shepherd's</b> <b>1299 Pennsylvania Avenue, NW ,</b> <b>Washington, DC 20004</b>	Purpose of Expenditure <b>Catering/Refreshments</b>	Date (month, day, year) <b>02/03/2017</b>	Amount of Each Expenditure This Period <b>\$ 50.80</b>
5. Full Name, Mailing Address and Zip Code <b>Constant Contact</b> <b>1601 Trapelo Road, Suite 329 ,</b> <b>Waltham, MA 02451</b>	Purpose of Expenditure <b>Computer and Web Expenses</b>	Date (month, day, year) <b>02/06/2017</b>	Amount of Each Expenditure This Period <b>\$ 65.00</b>
6. Full Name, Mailing Address and Zip Code <b>Metropolitan Washington Council AFL-CIO</b> <b>815 16th Street, NW, 3rd Floor North,</b> <b>Washington, DC 20006</b>	Purpose of Expenditure <b>Advertising</b>	Date (month, day, year) <b>02/15/2017</b>	Amount of Each Expenditure This Period <b>\$ 500.00</b>
7. Full Name, Mailing Address and Zip Code <b>Staples</b> <b>1250 H Street, NW , Washington, DC</b> <b>20005</b>	Purpose of Expenditure <b>Supplies</b>	Date (month, day, year) <b>02/21/2017</b>	Amount of Each Expenditure This Period <b>\$ 33.45</b>
8. Full Name, Mailing Address and Zip Code <b>Wells Fargo</b> <b>1250 Pennsylvania Ave. NW,</b> <b>Washington, DC 20004</b>	Purpose of Expenditure <b>Bank Fees</b>	Date (month, day, year) <b>02/28/2017</b>	Amount of Each Expenditure This Period <b>\$ 2.00</b>
9. Full Name, Mailing Address and Zip Code <b>Boss Shepherd's</b> <b>1299 Pennsylvania Avenue, NW ,</b> <b>Washington, DC 20004</b>	Purpose of Expenditure <b>Catering/Refreshments</b>	Date (month, day, year) <b>03/01/2017</b>	Amount of Each Expenditure This Period <b>\$ 43.20</b>
10. Full Name, Mailing Address and Zip Code <b>Constant Contact</b> <b>1601 Trapelo Road, Suite 329 ,</b> <b>Waltham, MA 02451</b>	Purpose of Expenditure <b>Computer and Web Expenses</b>	Date (month, day, year) <b>03/06/2017</b>	Amount of Each Expenditure This Period <b>\$ 70.00</b>
11. Full Name, Mailing Address and Zip Code <b>4 Imprint</b> <b>101 Commerce Street, Oshkosh, WI</b> <b>54901</b>	Purpose of Expenditure <b>Supplies</b>	Date (month, day, year) <b>03/16/2017</b>	Amount of Each Expenditure This Period <b>\$ 304.16</b>
12. Full Name, Mailing Address and Zip Code <b>Old Ebbit Grill</b> <b>1299 Pennsylvania Avenue, NW,</b> <b>Washington, DC 20004</b>	Purpose of Expenditure <b>Catering/Refreshments</b>	Date (month, day, year) <b>03/28/2017</b>	Amount of Each Expenditure This Period <b>\$ 20.32</b>

13. Full Name, Mailing Address and Zip Code <b>Wells Fargo</b> <b>1250 Pennsylvania Ave. NW,</b> <b>Washington, DC 20004</b>	Purpose of Expenditure <b>Bank Fees</b>	Date (month, day, year) <b>03/31/2017</b>	Amount of Each Expenditure This Period  <b>\$ 2.00</b>
TOTAL This Period (aggregate the subtotal of all expenditure pages)			<b>\$ 1,177.75</b>

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## Full Name of Constituent-Service Program

## Evans Constituent Service Fund

1. Full Name, Mailing Address and Zip Code <b>Marc Parc</b> 733 15th Street, NW, Washington, DC 20006	Purpose of Expenditure  <b>Parking</b>	Date (month, day, year)  <b>01/04/2017</b>	Amount of Each Expenditure This Period  <b>\$ 16.00</b>
2. Full Name, Mailing Address and Zip Code <b>Digi Outdoor Media</b> 35332 Southeast Center Street, Snoqualmie, WA 98065	Purpose of Expenditure  <b>Refund</b>	Date (month, day, year)  <b>01/11/2017</b>	Amount of Each Expenditure This Period  <b>\$ 500.00</b>
3. Full Name, Mailing Address and Zip Code <b>Digi Urban Northwest, LLC</b> 35332 Southeast Center Street, Snoqualmie, WA 98065	Purpose of Expenditure  <b>Refund</b>	Date (month, day, year)  <b>01/11/2017</b>	Amount of Each Expenditure This Period  <b>\$ 500.00</b>
4. Full Name, Mailing Address and Zip Code <b>Finom, LLC</b> 35332 Southeast Center Street, Snoqualmie, WA 98065	Purpose of Expenditure  <b>Refund</b>	Date (month, day, year)  <b>01/11/2017</b>	Amount of Each Expenditure This Period  <b>\$ 500.00</b>
5. Full Name, Mailing Address and Zip Code <b>Digi Outdoor Media</b> 35332 Southeast Center Street, Snoqualmie, WA 98065	Purpose of Expenditure  <b>Refund</b>	Date (month, day, year)  <b>01/11/2017</b>	Amount of Each Expenditure This Period  <b>\$ 500.00</b>
6. Full Name, Mailing Address and Zip Code <b>Wall Street Journal</b> 1025 Connecticut Avenue, NW, , Washington, DC 20036	Purpose of Expenditure  <b>Subscription</b>	Date (month, day, year)  <b>01/17/2017</b>	Amount of Each Expenditure This Period  <b>\$ 444.15</b>
7. Full Name, Mailing Address and Zip Code <b>Thatcher' Funeral Home</b> 1520 North 5th Street, Kansas City, KS 66101	Purpose of Expenditure  <b>Flowers for Funeral</b>	Date (month, day, year)  <b>01/24/2017</b>	Amount of Each Expenditure This Period  <b>\$ 179.37</b>
8. Full Name, Mailing Address and Zip Code <b>Action Courier</b> PO Box 23380, Alexandria , VA 22304	Purpose of Expenditure  <b>Courier Services</b>	Date (month, day, year)  <b>02/02/2017</b>	Amount of Each Expenditure This Period  <b>\$ 25.31</b>
9. Full Name, Mailing Address and Zip Code <b>Ready Refresh</b> #215 6661 Dixie Highway, Suite 4, Louisville, KY 40256	Purpose of Expenditure  <b>Office Water</b>	Date (month, day, year)  <b>02/02/2017</b>	Amount of Each Expenditure This Period  <b>\$ 114.29</b>
10. Full Name, Mailing Address and Zip Code <b>Washington Nationals</b> 1500 South Capitol Street SE, Washington, DC 20003	Purpose of Expenditure  <b>Tickets</b>	Date (month, day, year)  <b>02/10/2017</b>	Amount of Each Expenditure This Period  <b>\$ 7,850.00</b>
11. Full Name, Mailing Address and Zip Code <b>P Street Pictures</b> 2621 P Street NW, Washington, DC 20007	Purpose of Expenditure  <b>Pictures</b>	Date (month, day, year)  <b>02/11/2017</b>	Amount of Each Expenditure This Period  <b>\$ 926.37</b>
12. Full Name, Mailing Address and Zip Code <b>Bianchi Funeral Services</b> 814 Upshur Street, NW, Washington, DC 20011	Purpose of Expenditure  <b>Funeral Assistance</b>	Date (month, day, year)  <b>02/13/2017</b>	Amount of Each Expenditure This Period  <b>\$ 200.00</b>

13. Full Name, Mailing Address and Zip Code <b>Washington Business Journal</b> <b>1555 Wilson Blvd. Suite 400,</b> <b>Arlington, VA 22209</b>	Purpose of Expenditure  <b>Subscription</b>	Date (month, day, year)  <b>02/23/2017</b>	Amount of Each Expenditure This Period  <b>\$ 298.74</b>
14. Full Name, Mailing Address and Zip Code <b>Wharton Club of DC</b> <b>7533 Bradley Boulevard, Bethesda,</b> <b>MD 20817</b>	Purpose of Expenditure  <b>Membership</b>	Date (month, day, year)  <b>02/27/2017</b>	Amount of Each Expenditure This Period  <b>\$ 95.00</b>
15. Full Name, Mailing Address and Zip Code <b>Ready Refresh</b> <b>6661 Dixie Highway, Suite 4,</b> <b>Louisville, KY 40258</b>	Purpose of Expenditure  <b>Office Water</b>	Date (month, day, year)  <b>03/02/2017</b>	Amount of Each Expenditure This Period  <b>\$ 138.29</b>
16. Full Name, Mailing Address and Zip Code <b>Caruso Florist</b> <b>1717 M Street, NW, Washington, DC</b> <b>20036</b>	Purpose of Expenditure  <b>Flowers</b>	Date (month, day, year)  <b>03/02/2017</b>	Amount of Each Expenditure This Period  <b>\$ 214.87</b>
17. Full Name, Mailing Address and Zip Code <b>Washington Capitals</b> <b>627 Glebe Road, Suite 850, Arlington,</b> <b>VA 22203</b>	Purpose of Expenditure  <b>Tickets</b>	Date (month, day, year)  <b>03/17/2017</b>	Amount of Each Expenditure This Period  <b>\$ 7,231.00</b>
18. Full Name, Mailing Address and Zip Code <b>Ready Refresh</b> <b>6661 Dixie Highway, Suite 4,</b> <b>Louisville, KY 40258</b>	Purpose of Expenditure  <b>Office water</b>	Date (month, day, year)  <b>03/23/2017</b>	Amount of Each Expenditure This Period  <b>\$ 90.29</b>
19. Full Name, Mailing Address and Zip Code <b>Fairgrounds</b> <b>3227 45th Street, NW, Washington, DC</b> <b>20016</b>	Purpose of Expenditure  <b>Refund of donation</b>	Date (month, day, year)  <b>04/01/2017</b>	Amount of Each Expenditure This Period  <b>\$ 100.00</b>
<b>TOTAL This Period (aggregate the subtotal of all expenditure pages)</b>			<b>\$ 19,923.68</b>